Conference Offers Professional Updates, Networking and Just Plain Fun

"If life gives you lemons, make lemonade." This aphorism illustrates the importance of how we cope with stressors, hassles, and chronic strains in our lives. The 2001 annual NCFR conference, "Families, Stress, and Coping: Bridging Theory and Practice" focuses on these issues. The conference will take place November 8th to 11th in Rochester, New York.

KEYNOTE PRESENTATIONS
Charles Figley, Director of the Traumatology Institute at Florida State University, will speak on "The Role of Major Life Trauma in Everyday Life." He will apply the post-traumatic stress model, previously applied to events such as war and disaster, to reactions to more general major life stressors such as divorce or death of a child's parents.

Robert Staples from the Sociology Department at the University of California at San Francisco will present "Black Families and Stress: Close Synonyms of the Third Kind." He will explore structural, community, and interpersonal aspects of the stress process in this minority group.

Three investigators from the National Institute of Mental Health (NIMH) will make the third keynote presentation, "New Advances in Stress and Coping Research and Practice." The presenters are: Steven R. H. Beach, Department of Psychology at the University of Georgia, who will speak on "Marital Therapy as an Intervention for Depression"; Benjamin Karney, Department of Psychology, University of Florida, who will present "Marriage in Context: Interaction Between Chronic and Acute Stress"; and Debra Umberson, Department of Sociology, The University of Texas, Austin, whose topic is "Marital Stress Over the Life Course: Merging Quantitative and Qualitative Methods."

Frank Fincham, Department of Psychology; State University of New York at Buffalo, will be the discussant for this session.

A fourth presentation features Mark Chavez of the National Institute of Mental Health who will tell NCFR members "How to Apply for an NIMH Career Development (K) Award for Basic and Clinical Research." He will also be available on Friday, November 9th for individual discussion and appointments about the possibilities and process of applying for NIMH pre- and post-doctoral, young investigator, and career development awards. You may make an appointment with him before the conference by e-mailing him at mchavez@mail.nih.gov

RESEARCH UPDATES FOR PRACTITIONERS
Research Updates for Practitioners (RUPs) also examine aspects of the conference theme by looking at how family members respond.

Conference continued on page 2
to stressors. RUPs are designed to provide practitioners with up-to-date information that they can use in the everyday practice. This year’s RUPs include:
• “Emotion Work in Families — Time Together” presented by sociologist Marjorie Devault, Syracuse University.
• “Love Marriage, Divorce, and Stress,” presented by psychologist Janice Kielcolt-Glaser, Ohio State University.

SPECIAL SESSIONS AND AWARD PRESENTATIONS
One special session will explore an event of increasing concern, school violence. Brian Vossekui, retired Special Agent of the U.S. Secret Service and current consultant to the Secret Service’s National Threat Assessment Center as co-director of the Secret Service Safe Schools Initiative; and Robert A. Fein, Harvard Medical School and the University of Massachusetts Medical School, will explore “The Prevention of Targeted Violence in Schools.”

This year’s winner of the Ernest W. Burgess Award, E. Mavis Hetherington of the University of Virginia, will present her longitudinal research on divorce and remarriage in “Intimate Pathways: Changing Patterns in Close Relationships Across Time.”

The Marie Peters Award winner, Hamilton I. McCubbin, Kamehameha Schools, Honolulu, HI, will present his research on stress in “Family Stress, Ethnicity and Resiliency: Dangers and Opportunities in the Advancement of Theory, Research, and Practice.”

PROFESSIONAL DEVELOPMENT SEMINARS
Every year we present professional development seminars for students and young professionals. This year we're also offering several evening professional development seminars for established professionals. These include “Tips on an Application for Full Professor Rank” and “Mid-Career and Retirement Planning.”

A third evening session, “One Stop Shopping: Professional Development in NCFR,” will provide information on 10 different topics. Attendees can choose to attend two 35-minute presentations during this session. Included are:
• Publish or Perish? Can I Learn to Write Articles for NCFR Journals?
• Getting My Feet Wet: Tips for Learning Where to Submit to Journals and How to Review Manuscripts
• This Conference Program Looks Impossible! Getting the Most From Your NCFR Conference Experience
• How Can I Share My Knowledge? Tips for Submitting a Proposal to the NCFR Conference
• Becoming More Involved in NCFR: Tips on How to Do It
• I’m Just an Undergraduate — What Can I Get Out of the Conference and Can I Be Involved in NCFR?
• Spreading the Word About NCFR at the Local Level — Becoming Involved in Affiliated Councils
• There are so Many Graduate Programs — How Do I Choose the One That is Best for Me?
• Tae Teaching Portfolio: A Means for New Family Science Educators to Improve and Document Their Excellence in Teaching, and
• NCFR Section Communications and the Age of the Internet: Looking at Section Websites and E-mail Lists.

PRE-CONFERENCE WORKSHOPS
In addition to the always interesting two-day pre-conference “Theory Construction and Research Methodology Workshop,” there will be other pre-meeting conferences (Nov. 6-7). Among them are:

• Work/Life Summit 2001, a one-day conference planned by an advisory committee of Rochester-area business persons, the Cornell University Employment and Family Careers Institute, the NCFR Work and Family Focus Group, and NCFR staff.
• Family Interventions with Chronic Conditions Across the Life Span, a half-day session sponsored by the Sections on Family and Health and
NCFR's Member-Get-A-Member Campaign

By now all NCFR members should have received information about our Member-Get-A-Member campaign. This campaign started August 1st and will run through October 31st, 2001. Enhance your colleagues’ careers and strengthen the profession. It's easy to participate: For each new member you recruit to NCFR, your name will be entered into a drawing for a 4 day Caribbean trip for two, including roundtrip airfare and hotel. In addition, if you recruit new members, you will receive a free quarter (3 months) of membership.

Since personal recruitment is one of the most effective strategies for recruiting and retaining new members, the campaign focuses on current members recruiting new members.

It’s a win-win situation: NCFR wins by gaining new members; the colleagues you recruit win access to NCFR membership benefits and enhance their professionalism; and you win a free quarter of membership and a chance for a Caribbean trip.

Enrich the pool of ideas and information available to all of us. Recruit a member into NCFR today.

If you have any questions or need additional copies of the recruitment campaign Membership Application form, contact Sasha Smith at NCFR headquarters: Toll free 888-781-9331.

Lynda Bessey
lbessey@ncfr.org

NCFR Publication Receives Merit Award from Association for Women in Communications


Awards honor “excellence in communication.” The San Antonio chapter of AWC judged this year’s entries. Entries included communications pieces submitted by a whole range of entrants, including large PR firms, non-profits, for-profits, and freelancers. Prizes were awarded in a variety of PR, writing and design categories. NCFR’s publication won a merit award in the “Special-Purpose Category.”

Publication — non-profit category.

Contact Nikki at 888-781-9331 x14 or nikki@ncfr.org to order this publication, priced at only $14.95 for NCFR members, with a special discounted price of $9.95 for students and bulk orders of 10 or more copies.

To read more about the publication, click on Public Policy on the NCFR website at www.ncfr.org.

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Family Therapy and the Wynne Center of the University of Rochester Medical School.

• Red Cross Disaster Mental Health Course, the Association of Councils and the Family Therapy Section has arranged a two day course for practitioners interested in obtaining certification in disaster relief work. It will be led by Jack Herrmann from the Department of Psychiatry, University of Rochester Medical Center. Practitioners must make prior arrangements to be eligible for the course and certification.

• How to be a Successful Family Life Educator: Marketing Yourself and Your Programs, led by Linda Petruolo, CFLE.

• The Association of Councils Leadership Training Workshop, which will focus on “Impacting Human Service Block Grants at the State Level: NCFR Affiliates Can Make a Difference.”

• Making a Difference for Children, Families, and Communities: Partnerships Among Specialists, Educators, and Administrators, a one-day workshop sponsored by the Extension Family Life Specialists for all county, region, and state extension faculty and staff involved in family programming across the lifespan.

NETWORKING, LEISURE AND TRAVEL EXPERIENCES

As in past years, networking opportunities include the President’s Welcoming Reception; Newcomers’ Reception; University Receptions; the Dance sponsored by the Students and New Professionals; and the Employment Matching Service.

NCFR is also re-introducing optional tours to special local sights. Choose from the Women's Rights Tour, which includes Women’s Rights National Historical Park and Visitor’s Center; the Mormon Country Tour includes stops in Palmyra at the Sacred Grove where Joseph Smith received his vision, and the Peter Whitmer Farm, where the Mormon Church was organized; and a tour to Niagara Falls. All tours include motor coach transportation, admittance to events, and lunch. Check the NCFR Website: http://www.ncfr.com/pdfs/Special_Events.pdf for complete details.

For weekly updates on the conference, check the NCFR Website: http://www.ncfr.com/conference_info/index.asp.

Gay Kitson, 2001 Conference Program Chair
E-mail: james.Kitson@gte.net

Cindy Winter, Conference Coordinator
winterc@ncfr.org
Building Membership for the Future

The annual NCFR meeting in Rochester is only a few short months away! The host city, Rochester, New York, is a dynamic community on the move. You will be pleased by the natural beauty of this region of the country, and impressed by the hospitality that we will receive there. Most importantly, you will be gratified by what is shaping up to be the most outstanding NCFR Annual Meeting ever.

Gay Kitson is this year’s Annual Program Chairperson. She and her committee have designed an absolutely wonderful conference built around the theme Families, Stress, and Coping: Bridging Theory and Practice. Plenary sessions will include leading professionals like Charles Figley, Ph.D. and Robert Staples, Ph.D., who for years have been luminaries in the family research and theory communities. Joining them will be outstanding new scholars in the area of family stress and coping who have been supported by the National Institute on Mental Health: Steven Beach, Ph.D., Benjamin Karney, Ph.D., and Debra Umberson, Ph.D.

Complementing the plenary sessions will be special sessions on adolescent development, quantitative and qualitative research methodology, and diverse family structures — all linked to the conference theme on stress and coping in families. This will be a “must attend” conference for family life educators, who will have Research Updates for Practitioners in such areas as stress hormones, sexuality, and family time together in contemporary society.

The 2001 Annual NCFR Conference clearly will be one you will not want to miss! Nor will your students or other new professionals in the various professions and disciplines that NCFR serves.

I want to remind all of our members about the focus on membership in NCFR that we have had and will continue to have into the future. NCFR relies on new perspectives and new members to carry forward the excellent programs and outreach that we have to offer. Let there be no mistake that the future of NCFR, or of any professional association for that matter, depends wholly upon its ability to remain vital for its current members and attractive to potential new members who will be the future lifeblood of the association. Our membership total continues to hover around 4,000 members, gaining some one year, losing some the next, and then gaining some back in a fairly steady manner. Our goal is to increase our membership by 1,000 or more in the next two years! This is not a modest goal, but it is certainly attainable.

NCFR staff and the Board of Directors have identified two key mechanisms to assist in reaching this goal. The first, of course, is with you — our current membership. No one knows better than you the valuable contributions that NCFR makes to your professional life and to our society by means of its excellent journals and other publications; annual conferences that update and educate; and public policy initiatives that update and educate policy makers about the impact of their work on families and family members. We make a difference, and we are committed to the organizational values on scholarship, education, best professional practices, diversity, and inclusiveness that NCFR embodies. We will rely upon you, therefore, to identify and recruit new members into our organization. This includes our pool of students, new professionals, and more established professionals with whom you have regular contact. Please share with them what NCFR and its programs meant to you — and see if you can’t light a fire of enthusiasm for NCFR being their professional home for many years to come.

The second key mechanism to building our membership is member retention. It is no secret that the largest attrition rate among members of any professional organization is in new members who drop their memberships after one or two years. Executive Director Michael Benjamin and his staff are closely studying this situation as it pertains to NCFR, and they are taking steps to reduce member attrition.

Special sessions are planned at every annual NCFR conference to address the interests and concerns of new members, and we are engaging in outreach activities to keep their interests central to our programming activities. We are confident that if we can attract these new members to our excellent annual conferences, such as the one we are about to experience in Rochester this November, they will retain their memberships and come back to future conferences.

Building and retaining our membership is a responsibility of each and every one of us. We owe it to ourselves to build a broad, diverse, and strong membership base. So I urge each and every one of you to bring a student, a friend, or a professional colleague with you to the Rochester conference! They will see for themselves that NCFR is a vital organization that has much to offer. And I guarantee that they will be back for more at future annual meetings. See you in Rochester!

Stephen R. Jorgensen, Ph.D.
NCFR President
jorgensens@missouri.edu
Goal: 5000

During the second year of his NCFR presidency, Steve Jorgensen has made new member recruitment and current member retention a high priority for the NCFR Board of Directors and staff. In the December 2000 issue of the Report, Steve gave a synopsis of his action plan for expanding NCFR's membership base into the future. And in his last column as President, Steve comes full circle by urging all of us — NCFR members and staff — to break new ground by increasing our membership to 5,000! A heady goal, but like Steve says “certainly attainable.”

Consistent with Steve’s new member recruitment and current member retention priority, we are undertaking two major strategies to accomplish the goal of reaching 5,000 NCFR members by June of 2003. The first strategy is to create as much organizational visibility within and outside of our NCFR network including NCFR events such as state affiliated council conferences and other national family relations oriented organizational meetings. The second strategy is to create a small grant program to underwrite the development of student NCFR chapters on college and university campuses (undergraduate and graduate levels) with a special focus on the American Indian Higher Education Consortium (AIHEC) as well.

So what’s our membership and visibility status? As Steve indicated we’re hovering at about 4,000 members and by the end of the year we will have “raised the NCFR flag” at 14 different events. With respect to state affiliated councils, I’ve had the opportunity to speak and exhibit at the annual conferences of the Utah Council on Family Relations, the Texas Council on Family Relations, and the California Council on Family Relations. In addition, Lynda Bessey, NCFR’s Marketing Coordinator, will be speaking and exhibiting at the Pennsylvania/Delaware Council on Family Relations sponsored meeting in October. (By the way, we welcome all invitations to speak at state affiliated council annual meetings.)

Regarding national meetings, NCFR staffers have exhibited at the following conferences: Society for Research in Child Development, National Conference on Stepfamilies, American Sociological Association, Smart Marriages Conference, Points of Light Foundation National Conference, and the American Association of Christian Counselors. Later next month, we will be exhibiting at the American Association for Marriage and Family Therapy Annual Conference in Nashville and the National Extension Association of Family and Consumer Sciences Annual Meeting in Portland, Oregon.

In addition to the NCFR meetings, I’ve had the opportunity to speak “On Partnering with NCFR: Linking Family Research, Policy, Education and Practice” at the U.S. Conference of City Human Services Officials Annual Conference in Washington, DC; “Accessing Families of Color: Cultural Competence Strategies in the 21st Century” at the Points of Light Foundation National Conference in Minneapolis; and “Building Partnerships with NCFR” before the National Coalition for Black Development in Home Economics at the American Association of Family and Consumer Sciences Annual Conference in Providence, Rhode Island. It was at this last conference that information on the second strategy involving a student grant program was introduced.

By way of background, while speaking at various conferences over the past year, particularly NCFR affiliated council meetings, I began to observe that there were many students in attendance but rarely was there an “official” NCFR student council on family relations except in Texas. Moreover, we have only eight student councils in the U.S. and in considering the charge of increasing NCFR's membership to 5,000, it seems to me that targeting students would be an effective strategy. Further, since NCFR has a relatively small number of people of color within the membership, by utilizing the strategy of making small grants ($500) available to family relations oriented departments for the purpose of starting NCFR student affiliated councils at the National Coalition for Black Development in Home Economics, this would ultimately impact on our ability to increase the overall membership. Thus, we hope to focus our attention on HCBUs, HACUs and AIHEC as well as mainstream colleges and universities.

The grant program is a one time only request program with simple guidelines: (1) submitting a letter from the dean or department chair requesting the $500 grant that will be utilized to start up an NCFR student affiliate council; adhering to the 12 point “Student Affiliate Requirements” guidelines; and submitting a final report prior to the close of the academic year as to progress and expenditures made. I look forward to working with you on both strategies over the next year.

Michael L. Benjamin, M.P.H.
NCFR Executive Director
E-mail: mbenjamin@ncfr.org

NCFR WANTS TO KNOW

If you have moved
or plan on moving, please call
1-888-781-9331
or e-mail:
ncfr3989@ncfr.org
with your new address.

The U.S. Postal Service does not forward publications like the Report or journals, and we want to make sure you receive them. Thank you!

NCFR Report | September 2001
Members of NCFR directly and indirectly influence and help families through collaborative efforts with like-minded organizations. Among these organizations are the Center for Substance Abuse Treatment (CSAT) and the National Bar Association (NBA), administrative organizations aimed at serving the mental health and legal well-being of families.

Center for Substance Abuse and Treatment. Created in 1992 by a congressional mandate, CSAT is under the umbrella of the Substance Abuse and Mental Health Services Administration (SAMHSA) of the U.S. Department of Health and Human Services (DHHS). CSAT makes available effective treatment and recovery services for individuals and families coping with alcohol and drug problems. It supports a variety of activities to improve families’ mental health wellness by guaranteeing access to clinically sound, cost-effective addiction treatment programs. Consistent with specific aspects of NCFR’s mission, CSAT establishes professional standards to promote family well-being through its use of research-based initiatives and programs and the general consensus of substance abuse experts. Recognizing the heterogeneity of individuals and families, CSAT supports the nation’s effort to provide multiple treatment methods. They evaluate treatment effectiveness and use evaluation results to enhance treatment and recovery approaches. For more information, visit the CSAT website at www.samhsa.gov/centers/csat/csat.html.

Last fall, CSAT held a focus group to explore the creation of a division or entity aimed at addressing the substance abuse concerns of women, children, and families. Participants represented over 15 organizations, including the Children’s Defense Fund, Child Welfare League of America, American Cancer Society, the Chowtaw Nation, Mutual Assistance Association Center, Hispanic Center of Excellence, Women in Need and NCFR. The goals of the focus group were to define the purpose of a division focused on women, children and families and to determine a decisional framework for the implementation and administration of a comprehensive program promoting mental wellness. In addition to comprehensive program evaluation, participants wanted diversity to be a priority. They wanted diversity training and best practices integrated into the decisional framework.

National Bar Association. The National Bar Association (NBA) seeks to advance the science of law and to protect the civil and political rights of all United States citizens. Although the NBA was formally organized in August 1, 1925, twelve African American predecessor organizations dedicated to justice and Civil Rights for African Americans and all Americans had paved the way. Currently, the NBA is the nation’s oldest and largest national association of predominately African American lawyers and judges with 87 affiliate chapters throughout the United States, Canada, United Kingdom, Africa and the Caribbean. For more information, visit the NBA website at www.nationalbar.org/index.html.

Representatives of NCFR met last fall with NBA executive director John Crump, J.D. to discuss how to build a collaborative relationship with the legal community. One important point of discussion was how to better inform researchers about the legal system. Crump suggested attending legal conferences and building one-on-one relationships with judges, whose decisions directly and indirectly impact families. He also suggested that family professionals use a systematic approach to mediating and advocating for children and families within the legal arena. Like social work professionals, NCFR members could create graduate programs focused on family studies and law. These might resemble dual degree programs in social work and law or public health and law offered by Columbia University, Springfield College, Southern Illinois University and George Washington University. Crump also identified key legal areas of interest to both social science professionals and the legal community. These include juvenile justice, corporate responsibility, and policy issues.

Call for Papers: Fourth Paolucci Symposium
April 3-6, 2002

The Fourth Paolucci Symposium will be held April 3-6, 2002 at Michigan State University. It will be held in conjunction with the International Conference of the Society for Human Ecology. The theme is: "Personal, Social & Corporate Responsibility in a Common World."

The Symposium honors Dr. Beatrice Paolucci, Professor of Human Ecology at Michigan State University from 1951-1983, who devoted her personal and professional life to the well-being of families around the world. Bea was an NCFR officer and received the Osborne Teaching Award in 1981.

Papers, panel sessions, round-table discussions, and posters that focus on issues and problems confronting individuals, families, communities, and corporate bodies in our shared environment are invited. Research reports, position papers, reports of teaching strategies or courses (e.g. on-line courses), action programs, theoretical models, and proposals for collaborative work are welcome. Proposals that center on families and individuals are encouraged.

Deadline for submission is September 10, 2001. For forms and further information contact Elaine Williams, 7 Human Ecology, Michigan State University, East Lansing, MI 48824-1030, USA. E-mail: willi127@msu.edu Fax: 517-432-2699

Future information to be available at http://www.he.msu.edu/

A commemorative book, “Beatrice Paolucci — Shaping Destiny through Everyday Life,” will be introduced at the 2002 conference. The book presents Bea’s life story and provides an overview of the many contributions Bea made to family study, home economics (now family and consumer sciences), and human ecology.
Politics have turned out to be extremely interesting since the advent of our new president. Of course the party switch by Senator Jeffords had amazing repercussions, but his rejection of administration policies seems to reflect that of a substantial part of the general public. Citizens are becoming activists in letting their representatives and senators know how they see the world and in some cases, unusual alliances are developing. An interesting case in point is in regard to federal financing of stem cell research.

PATIENT'S BILL OF RIGHTS
Aided by the work of the National Partnership on Women and Families and members of a coalition of more than 300 health care and consumer organizations, the Senate passed a Patient's Rights bill. The debate on health care now moves to the companion bill in the House, the Ganske-Norwood-Dingell bill. This bill is the “only real Patients' Bill of Rights with strong enforcement and real protections,” according to the coalition. Immediately after passage of the Senate bill, the Washington Post quoted the chief medical officer of Sigma HealthCare which insures 14 million people, as saying “a federal law (for patient rights) seems anachronistic—like an idea whose time has come and gone” since, according to him, the HMOs had already changed their rules to provide the main features of the Senate bill. If the rules were changed it was because citizens became activists. The real health care problem in our country is the 43 million people, many of them children, without any coverage at all which will probably not appear in either the House or Senate debate during this administration.

WHO LOBBIES CONGRESS?
A July 5th Washington Post column by Judy Sarasohn reported findings of a survey to identify lobbying groups Republicans and Democrats view as most influential and who back them “financially and otherwise.” In their top 10, both parties included the AARP, NRA, American Israel Public Affairs Committee, National Federation of Independent Business, Trial Lawyers, and the U.S. Chamber of Commerce. The most interesting differences showed up in the top 25. Republicans included the National Right to Life Committee and the National...
OVER 350 CFLE APPLICATIONS BROUGHT IN THROUGH EXPERIENCE RECOGNITION PROCESS

June 30, 2001 was the deadline for submitting applications for the Certified Family Life Educator (CFLE) designation under the Experience Recognition or “grand-parenting” process. The Experience Recognition process was a huge success, bringing in over 350 new applications. While we weren’t able to approve all applicants, most were very well qualified.

HUMRRO SURVEY RESULTS TO BE DISCUSSED AT NOVEMBER CONFERENCE

The CFLE Market Analysis survey was sent out to over 1100 family professionals and organizations in late May. The intent of the survey is to find out how familiar employers are with the CFLE designation and if the designation plays any role in their decisions to hire. We hope to determine if there is enough support to warrant the expense of developing an exam to replace the current CFLE portfolio review process. In addition, we hope to gauge the level of interest and support for the development of separate certifications for parent and marriage educators.

In the meantime, we will continue to review applications through the Regular application process and through the Abbreviated application process available to graduates of NCFR approved academic programs. Information on both processes are available on the NCFR website at www.ncfr.org - CFLE Certification. The deadline for the next Regular review is September 4, 2001. There is no submission deadline for applications following the Abbreviated process; they can be submitted at any time.

We are continuing to work on a number of exciting issues including increased awareness and utilization of the CFLE designation with the United States military, approval of an NCFR-endorsed training program for parent educators in the state of Florida, and more. The number of CFLEs continues to grow with close to 1200 certified!

CFLE PRE-CONFERENCE — HOW TO BE A SUCCESSFUL FAMILY LIFE EDUCATOR: MARKETING YOURSELF AND YOUR PROGRAMS

The CFLE department is sponsoring a pre-conference at the November NCFR conference. How to Be a Successful Family Life Educator: Marketing Yourself and Your Programs will be held on Wednesday, November 7 from 6:00 – 9:15 p.m. CFLE Linda Petruolo will lead this interactive workshop designed to provide you with all the vital information you need to market yourself and the field of family life education. Packed with real-life examples, marketing techniques and practical advice, this workshop will help you break through the “invisibility barrier” and gain the professional recognition you rightfully deserve!

You will have the opportunity to:
- Develop Your Own Personal Marketing Strategy
- Enhance Your Professional Image
- Learn Valuable Hints and Effective Techniques You Can Put to Use Immediately.

Check the NCFR website or the NCFR Conference Program for registration information.

Dawn Cassidy, M.Ed., CFLE
CFLE Certification Director
E-mail: cassidyd@ncfr.org

COLLABORATIONS

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justice, especially the criminalization of youth; child maltreatment, foster care; child custody; and grandparent visitation rights.

Collaborations with liked-minded organizations such as CSAT and the NBA are critical resources for families coping with substance abuse and legal issues. Together, NCFR, CSAT and the NBA can indirectly and directly help families cope with the stressors of contemporary society.

Tammy L. Henderson, Ph.D.
Virginia Polytechnic Institute and State University
thender@vt.edu

HOW TO BE A SUCCESSFUL FAMILY LIFE EDUCATOR:

Marketing Yourself and Your Programs
November 7, 2001

PART I: DEFINING FAMILY LIFE EDUCATION: 6:00 – 6:35 p.m.
A Business Like No Other!
Do you get clueless looks from people when you mention Family Life Education? Do you find yourself saying, “Well, it’s sort-of like...?” Explore the importance of marketing your Family Life Education programs, and the special role that prevention plays in the community.

PART II: MARKETING FOR FAMILY LIFE EDUCATORS: 6:35 – 6:50 p.m.
Let’s Get Started!
What’s your area(s) of expertise? Define your target population using an easy, but effective checklist. Learn the secrets that keep people coming back for more!

PART III: MARKETING FOR FAMILY LIFE EDUCATORS: 6:50 – 7:45 p.m.
Successful Tools & Strategies
Start thinking “out-of-the-box” and create a professional image! Explore strategic marketing venues that will increase your visibility and market-ability in the community.

PART IV: MARKETING FOR FAMILY LIFE EDUCATORS: 7:45 – 9:15 p.m.
Do it Now!
Market yourself and your programs. Don’t leave this marketing workshop with just a bunch of notes in a notebook (that you may never even look at again!) Instead, bring your already existing marketing materials in for a face-lift, or create new ones, or DO both! Materials supplied, as well as encouragement, and direction. Leave this marketing workshop with a concrete marketing plan to follow-up on!
Certified Family Life Educators

Following is a list of Certified Family Life Educators designated since March 15, 2001. [* - Provisional]

Alabama
Clara Gerhardt [*
Elaine Moody [*
Arizona
Audrey Huntzinger [*
California
Pamela Choice
Delaware
Daniel Hawks III
Florida
Christina Carlson [*
Maišchén Ross
Stephanie Toole
Georgia
Tracy Meyers
Hawaii
Mary Martini
Indiana
Emily Blumenfeld
Jessica Dunn
Iowa
Kimberly Geeder
Kansas
Elizabeth Kelmner [*
Louisiana
Duane Dowd
Sara Gates
Michigan
Martha Adams [*
Linda Behrendt
Ree Beaty
Sharon Canfield [*
Geri Fox
J. Green [*
Julie Johnston [*
James Kolbe [*
Susanne Kryzynski [*
Barbara Laughbaum [*
Diane Mathis-Taylor [*
Kelly Mc Carthy
Robin Morgan [*
Kerris Munson [*
Vicki Rafferty-Polk [*
Mississippi
Aydintha Barry [*
Ruby Jackson [*
Nebraska
Cara Eibergenner [*
Li-Wen Lin
Van Xia
New Hampshire
Sling Hutchinson
New Jersey
Cathearine Barber [*
New Mexico
Surrey Vaillancourt [*
New York
Jane Nichen
North Carolina
Niki Lockell [*
Robert Nida
Ohio
Cynthia Shuster
Verna Weber
Oregon
Lisa Robinson
Pennsylvania
John Macbray
Maryellen Miller
South Carolina
Wayne Blake
Tennessee
Keith Gevert
Lisa Peters [*
James Saunders
Nancy Willis [*
Texas
Thomas Johnson [*
Pam Renn [*
Fran Urbanovsky
Michelle Youngblood
Utah
Marcia Cobb [*
Antoinette Simonsen [*
Virginia
Sherry Finzer
Jennifer Gaulin [*
David Hubbart
Stephanie Lawton [*
Eric Mc Kinney [*
Vermont
Judy Kanya
Washington
Barbara Pullman [*
Ada Pang [*
West Virginia
Phil Adkins
Wisconsin
J. David Lampion
New Mexico
James Saunders
Georgia
Kim Kolbe
Barbara Kolbe
Jim Kolbe
Kourtney Vaillancourt [*
Nancy Willis
Arizona
Elizabeth Kellner [*
Missouri
Lisa Robinson
Nevada
Kathleen Eberle
Rhonda Haynes
New York
Jane Nichen
CARE, CITIZEN VOICES COUNT
Margaret Feldman, Ph.D.
NCFR Policy Representative
E-mail: mefeldman@aol.com

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Association of Manufacturers while the Democrats included the National Abortion and Reproductive Rights League and the United Auto Workers Union.

SOCIAL SECURITY REFORM
Actuaries say that social security funds will run out of money in a few years, therefore Congress must do something. Any changes to social security must be assessed as to their effect on women, who are the lowest paid and most vulnerable. Women's organizations will be actively working to make sure women's interests are made explicit. What would be the effect of "privatization" on women as low-income workers, widows, and divorcees?

NATIONAL YOUTH DEVELOPMENT INFORMATION CENTER
Those interested in what policies are being suggested for children and youth should go to the web: www.nydic.org/policy.html. The Youth Development Agenda includes collaborative policy statements on: Positive Youth Development, After School and Summer Programs, Juvenile Justice and Delinquency Prevention, and Youth Community Service and Service Learning. NCFR is signing on to a statement prepared by the Child Care Coalition to encourage Congress to increase the Child Care and Development Block Grant by $1 billion, making the total $3 billion. The additional money would enable states to increase developmental services for young children in order to fulfill the goal of "leave no child behind."

NEW SOURCES
New work is going forward on human subjects research: Office of Human Research Protection (OHRP) www.ohrp.osophs.hhs.gov
ADD YOUR VOICE TO THOSE WHO
NCFR REPORT: Family Focus on...
Call for Topic Papers

Issue          Topic                       Deadline
Dec. 2001    Death and Dying: Family Perspectives  Oct. 1
Mar. 2002    Military Families                Jan. 8
June 2002    Family Focus Over the Life Course  April 9
Sept. 2002   Welfare Reform II               July 9

We continue to welcome your suggestions and offers to write or be willing to be interviewed by our journalist, Dr. Nancy Giguere.

If you have data, research or practice articles for any of these topics, or know of outstanding persons who can be interviewed or taped please call or e-mail Michael Benjamin immediately at 888-781-9331, ext. 21 or mbenjamin@ncfr.org.

Let us hear from you about other topics that you would like to see published in the Report.
Donations

The following persons have contributed donations since June 2001. Their generosity aids NCFR in continuing its programs and awards.

**General Fund**
- Letha Chadiha—St. Louis, MO
- Leslie Koepke—Menomonie, WI
- Michael R. Liepman—Kalamazoo, MI
- Connie Steele—Knoxville, TN

**Jessie Bernard Award**
- E. James Lieberman—Washington, D.C.

For more information on contributing to NCFR, contact:
Michael L. Benjamin,
NCFR Executive Director
3989 Central Ave. NE, Suite 550
Minneapolis, MN 55421
Toll free: 888-781-9331 ext. 21
or mbenjamin@ncfr.org

Appointment

Marcie Parker, Ph.D., CFLE, has been appointed to the Board of Directors of The American Hospice Foundation in Washington, D.C. The Foundation’s mission is to increase public awareness and professional knowledge about hospice, especially in the workplace, in the schools and in managed care organizations. The website is www.americanhospice.org. Parker is the Senior Qualitative Researcher with Optum in Golden Valley, Minnesota.

In Memoriam

Constance Simenson-Dekrey, CFLE, of Bemidji, Minnesota, passed away May 3, 2001 after a battle with cancer. She had been an NCFR member since 1987.

**Accessing NCFR**

**Members Area**

To access the NCFR website “Members Area” will require you to have a Username and Password.

The first time you enter NCFR’s “Member Area” you will be required to setup a login using your Member ID number and zip code. This login process will generate your Username.

Thereafter, the Username will be the e-mail address that you have submitted to NCFR.

The Password will be whatever you desire.

That’s it!

If you have problems logging in, please contact John Pepper at pepperw@ncfr.org!

**Accessing NCFR Online Journals**

To access NCFR online journals, members will need to enter a Username and Password.

For the Username: enter your Membership ID number. This number is listed on your member ID card as well as the journal and Report mailing labels.

For the Password: enter your last name in capital letters as it is listed on your member ID card and the mailing labels.
Lenore M. McWey and Megan Murphy have been named winners of the 2001 NCFR Student Award, which is given to individuals with high potential for contributions to the field of family studies. Lenore and Megan will each receive a plaque and a check for $500. A selection committee chaired by Tammy Henderson, Student/New Professional Representative to the NCFR Board, selected the winners. The committee reviewed the qualifications of a pool of nominees submitted by their respective professors. Among the credentials reviewed was a statement that each nominee submitted defining an important problem that he/she saw in the family studies field and an outline of possible steps toward solution. The nominees also submitted a brief summary of a personal program, research project, or publication representing the quality of their work and area of interest. This award will be presented on Friday, November 9, 3:30 pm, during a special ceremony at the annual conference that will honor the winners of the 2001 NCFR Awards.

Lenore M. McWey is a Doctoral Candidate in the Interdivisional Program in Marriage and Family Therapy at Florida State University. She received her Bachelor's degree from Florida State University, and her Master's degree from the University of North Florida. Her work and research experience primarily focus on issues surrounding the experiences of children in foster care. Upon graduation, she is aspiring to obtain a position in academia, allowing her to continue her research interests, as well as enjoying the pleasures of her project. Lenore is a wife and mother of two children ages 1 and 4 years old.

She submitted the following statement of her project: Deeply concerned with the welfare of children in the foster care system, Lenore McWey is conducting a study that examines the impact of supervised visitation for children in foster care with their biological parents. The project aims to examine if children in foster care, who have more frequent supervised visitation, have stronger attachments to biological parents than foster care children who receive less frequent visitation. Other factors such as number of foster home placements, length of time in care, psychiatric medication, school performance, and truancy exhibited by those children who have more frequent contact with their parents compared to those children who have less contact are also being examined in relation to level of attachment. The exploration of these questions is being done through structural equation modeling where a hypothesized model explaining the quality of attachment of children in foster care with their biological parents is being tested with the data.

Megan Murphy is a Ph.D. candidate in the Department of Child and Family Development (Marriage and Family Therapy) at The University of Georgia. She received her undergraduate degree from State University of New York at Geneseo in psychology and sociology, and her M.S. from Colorado State University in the Department of Human Development and Family Studies with a specialization in Marriage and Family Therapy. She recently completed a clinical internship where she worked as an in-home family therapist. Megan will be joining the Department of Human Development and Family Studies at Iowa State University in January 2002.

Megan's Abstract of Research Interests: For her dissertation, Megan Murphy is exploring the issue of power in the clinical supervisory relationship. Through the use of grounded theory and interviews of supervisors and supervisees in clinical Master's training programs, she will develop a theory of power in the supervisory relationship. She plans to explore the effect of the supervisory relationship on client outcomes. In her Master's thesis, Megan explored gender differences and similarities in the inter-generational transfer of the family farm. Understanding the context of relationships and diversity are themes found throughout her research. Other research interests include the effectiveness of feminist family therapy and therapeutic process and outcome research. Her recent experience as an in-home family therapist has culminated an interest in exploring the interaction of systems, including social service agencies, courts, psychiatrists, and mental health providers in the treatment of mothers at-risk of having their children removed from the home.

Reuben Hill Award Winner

The winner of the Reuben Hill Award for articles published in 2000 is "Women's Economic Independence and the Probability of Divorce" by Liana C. Sayer and Suzanne M. Bianchi, both of the Department of Sociology, University of Maryland.

The Reuben Hill Award Committee, chaired by Ted Greenstein of North Carolina State University, reviewed articles from nearly fifty professional journals. The award is given annually to an outstanding article that combines theory and research in the tradition of the award's namesake.

Sayer and Bianchi's paper asked, "Does a wife's economic independence destabilize marriage and heighten the risk of divorce?" They reviewed over a dozen previous studies of this problem, concluding that the evidence was, at best, mixed. Then, analyzing data from over three thousand marriages drawn from the first and second waves of the National Survey of Families and Households, they used logistic regression to estimate the effects of a range of factors on the likelihood of marital disruption. They found that "the decision to exit or remain in an existing marriage is a very complex process, one that probably hinges much more on noneconomic factors than on whether a wife works for pay." They speculate that similarities in market and household labor roles between spouses might lead to greater understanding between spouses and reduce the level of marital conflict and likelihood of marital disruption.

Liana Sayer is a doctoral student at the University of Maryland where her research focuses on gender inequality, and family
Qualitative Roundtables

This year's Qualitative Roundtables at the National Conference promise to be more exciting than ever. There will be an international component, having presentations from Canada to Mexico. For those of you unfamiliar with the range of possibilities that qualitative research has to offer, various methods will be discussed. For qualitative researchers this will be a great opportunity to meet with like minded others and get some new ideas. The ranges of presenters are from full professors to doctoral students. Intriguing titles range from: "Challenging interviewing couples about sharing a bed" to "Coaxing square pegs into round holes: Multi-media presentation of qualitative data." So, please mark your schedules for 7PM on Friday the 9th of November and engage in lively evening.

Denise Berg
E-mail: Dberg3484@aol.com

REUBEN HILL AWARD continued from page 11

formation and dissolution. Her dissertation, Time Use, Gender, and Inequality: Trends and Differences in Men's and Women's Market, Nonmarket, and Leisure Time was scheduled for defense in August 2001. She plans to continue her work on the relationship between spouses' economic resources and marital outcomes during a post-doctoral fellowship with Dr. Paula England, Population Studies Center, University of Pennsylvania, beginning Fall 2001. She is the recipient of the University of Maryland's College of Behavioral and Social Sciences George M. Phillips Award for Outstanding Graduate Student Dissertation in the Public Interest. She was recently selected, with co-authors Philip Cohen, UC-Irvine, and Lynne Casper, NICHD, to prepare a Population Reference Bureau/Russell Sage Census 2000 Brief on "Gender, Work, and the American Family." Her work on housework (co-authored with Suzanne M. Bianchi, Melissa A. Millke and John R. Robinson) has appeared in Social Forces. Suzanne M. Bianchi is a family demographer whose research focuses on gender inequality, maternal employment, and child well-being. She is the Professor of Sociology and Faculty Affiliate of the Center on Population, Gender, and Social Inequality at the University of Maryland. She is the Past President of the Population Association of America and a past chair of both the Family and the Population Sections of the American Sociological Association. She has co-authored two books (with Daphne Spain) on American women, published by the Russell Sage Foundation: American Women in Transition (1986) and Balancing Act: Motherhood, Marriage, and Employment Among American Women (1996). She has also recently completed a book, based primarily on CPS data, that traces family demographic changes in the latter two decades of the 20th century, Continuity and Change in the American Family (co-authored with Lynne Casper and forthcoming, December 2001 in the Understanding Families Series, Sage Publications).

Theodore N. Greenstein
Associate Professor of Sociology
North Carolina State University
Raleigh, NC 27695-8107
Phone: 919-515-9006 Fax: 815-333-0631

An excellent new resource!

Public Policy Through a Family Lens:
Sustaining Families in the 21st Century

Developed and authored by NCFR members, this document delivers the message that all public policies—whether at the national, state or local level—affect families, strengthening or diminishing their ability to sustain themselves and prepare the next generation.

Policy considerations and recommendations on:
Sustaining American Families in the Twenty-first Century by Arlene Skolnick, Ph.D.
What Children Need to Get a Good Start by Martha Farrell Erickson, Ph.D.
What Parents Need to Raise Healthy and Productive Children by Ralph LaRossa, Ph.D.
What Adolescents Need to Become Competent and Productive Adults by Norma Burgess, Ph.D. & Ambika Krishnakumar, Ph.D.
What Living Longer Means to Families by Vern L. Bengtson, Ph.D. & Pauline G. Boss, Ph.D.

Use the Checklist for Assessing the Impact of Policies and Programs on Families to evaluate programs and services; review rules, legislation or laws; or help prepare questions or testimony for hearings, meetings, and forums.

This document is a must-have for anyone interested in public policy and family well-being. Ideal course material for students of family policy.

$14.95 (or NCFR members)
Only $9.95 for students and bulk orders of 10 or more copies

Contact the NCFR office for ordering information.

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Fax: 763-781-9248
E-mail: nkir@ncfr.org
Web: www.ncfr.org

NCFR Report | September 2001
Who Needs to Know about NCFR?

Is this a hard question? The easy answer is “Everyone who cares about families.” Yet NCFR remains a well-kept secret, even among the students that many of us teach! Results of a student survey in 1999 revealed that only a small percentage of undergraduates in our family-related majors had ever heard of NCFR. The good news is that they were very interested in finding out more about the organization and becoming involved. The graduate students were more knowledgeable about what NCFR was, but less than 20 percent had ever attended a national conference: cost being the most obvious barrier. University-based student affiliates can help to solve this problem. My goal is to have one in every university with a family-studies major. You can help with this by writing/ e-mailing Lynda Bessey, lbessey@ncfr.org for information on how to get started with a student organization in your university and the grant program announced by Michael Benjamin.

And do our states and communities need to know about NCFR? According to our Executive Director Michael Benjamin, most of the significant influence on legislation regarding families happens at the state level. It is there that family specialists can most easily contact their legislators and be contacted to testify or present information. It is there that a large amount of federal money allocated to family concerns is determined. Extension specialists know the value of community interventions, and they are strong supporters of state and local councils. Opportunities to hear of new research being done in the universities of their state also provides practitioners with new programming ideas and enhances their effectiveness.

Now, a new opportunity for funding support for state and local organizations has become available. Our Executive Director will explain details of this new funding source during the preconference in Rochester. But one of the significant criteria for funding consideration is evidence that the organization is engaged in activities that assist families in the community: more reason to raise the visibility quotient of NCFR.

We also have an opportunity at the Rochester conference to receive training in disaster crisis intervention for families. This training by the American Red Cross could be expanded by offering it in various states and communities. What a service that would be to families, and the visibility of NCFR would be vastly increased! Make sure someone from your affiliate is signed up to take the Rochester training. Enrollment is limited so do it early.

Finally, NCFR provides a forum and a resource “home” for persons who want to interact with those from other related disciplines. This is true at both the national and state level. One of my most enjoyable experiences as a family professional came from being part of the Executive Board of the Alabama Council on Family Relations. The Board consisted of three university professors, a fulltime counselor, a denominational family ministry director, and a bachelor’s level CFLE. The opportunity to get to know and work with persons across this span of professions was stimulating and productive. Regrettably, we never had a very big statewide response to our planned meetings, but it did not keep us from doing some creative projects that impacted many persons and families in our state.

One of my most enduring beliefs is that good ideas are mutually beneficial. When more people know about NCFR, it benefits us and well as them. So keep up the good work!

Lane H. Powell, Ph.D., CFLE President, Association of Councils Powells18@home.com

Texas Council on Family Relations

The theme of the 2002 Texas Council on Family Relations Annual Conference is Today’s Youth: More Informed, More Resilient. The TCFR Conference will be held at the LaQuinta Conference Center in Arlington, Texas on April 4-6, 2002. We are inviting NCFR members from across the U.S. and Canada to submit an abstract to our conference by December 15, 2001. If you are presenting at the 2001 NCFR Conference in Rochester, please consider submitting your abstract to TCFR. We will find a place for you as a presenter or as a poster session!

The Arlington, Texas area is great fun and quite cool in April. We will be near Six Flags of Texas and the Texas Rangers’ stadium. We welcome you and the opportunity to have you share your knowledge with the members of TCFR and the professionals who attend from the area.

Want to be on our email newsletter mailing list? Send your email address to Linda Ladd at l-ladd@tamu.edu.

Linda Ladd, President TCFR 2002

North Texas Student Council on Family Relations

The North Texas Student Council on Family Relations is holding its 8th Annual State Conference on Saturday, October 27, 2001 at the University of North Texas in Denton, Texas. All students, faculty, and community members are invited to attend! The pre-registration deadline is October 10, 2001. Pre-registration is $19 for student non-members and professional members or $24 for professional non-members, including parking and lunch! Additional information is available on our website at http://ntscfr.terra share.com. Questions regarding the conference can be e-mailed to ntscfr@hot mail.com. We look forward to seeing you at 8:00 a.m. on October 27th!
Ethnic Minorities Section

N CFR 2001 Conference Program topics on stress and coping are one and the same with ethnic family lives, and the variety of EMS presentations are expected to be of interest to all. “Black Families and Stress: Close Synonyms of the Third Kind” is the title of the plenary session by Robert Staples, Ph.D. The Marie Peters Address will be by Hamilton McCubbin, CFLE, the EMS 2000 Marie Peters Award recipient. In addition, we are sponsoring a special lecture with the Research and Theory Section by Sumru Erkut, Ph.D., on Puerto Rican adolescents and how they and their families cope with stress. Dr. Erkut is Associate Director and Senior Research Scientist at the Center for Research on Women, Wellesley College. Born and raised in Turkey, Erkut maintains an active interest in adolescent development among recent immigrant groups in the U.S.

2002 EM Section calendars will be on sale at the conference. The 2002 calendar is in poster form and features the first Marie Peters Award recipient, Harriette Pipes McAdoo as well as the most recent recipient, Hamilton McCubbin, CFLE. Special thanks to Walter Kawamoto, CFLE, for continuing the work on this fundraiser.

Volume II of the Resource Manual for Teaching about Ethnic Families as well as other topics on diversity will also be sold by the Ethnic Minorities Section at the annual conference. Syllabi and other resources are still being accepted for inclusion. Muchas gracias (many thanks) to Adriana J. Umana-Taylor CFLE, for her diligence in maintaining this fundraiser.

Mentoring Program. The EM Section mentoring program will formally begin in September. Section members are encouraged to sign up as mentors and mentees if they have not already done so. Please contact M. Dewana Thompson (DThomp766@aol.com).

EM Students and New Professionals are encouraged to attend the S/NP events at the conference. S/NP representative on the Conference Program Committee, Heather Ana Hathaway Miranda invites you to participate in the optional gift exchange that is being initiated this year. Gifts, such as a T-shirt from your university or organization, will be exchanged among new friends and colleagues at the S/NP networking events.

I look forward to seeing you in Rochester in November.

Estella A. Martinez, Ph.D.
Chair, Ethnic Minorities Section
E-mail: estella@umn.edu
Phone: (505) 277-8932

Feminism and Family Studies Section

In this issue of the NCFR newsletter, I’m pleased to tell you about some of the sessions that our section will offer at the upcoming conference.

As was the case last year, we are either sponsoring or co-sponsoring sessions in almost every time block of the conference. Look for our icon in the program!

We will feature three paper sessions.

The first — Reading, Writing, and Relationships: Young Women in the Classroom and Beyond — will feature several different perspectives on the development and experiences of young women. You will hear voices from the past, and diverse voices from the present. You will hear about romance, anger, and high technology. I know I'm making this sound like an adventure novel, but really it is a great session of research papers!

The second paper session is Balancing on the Edge of the Dual Lens: Reflections on the Intersection of Professional and Personal Roles. This session will be very compelling, as it will feature prominent people in our field talking about personal life-changing and stressful experiences. Come and hear Beth Miller, Edith Lewis, Anisa Zvonkovic, Harriette McAdoo, and Katherine Allen, CFLE, reflect as researchers and as people about the insights their journeys offer for understanding stress and growth.

The third session will focus on Life Transitions and Coping Among Professionals: New Research from the Cornell Employment and Family Careers Institute. This session will give you an opportunity to hear from Phyllis Moen and her research team about the important and innovative work they have been doing on the life course experiences of working men and women. Particularly interesting in this work are the insights it has generated regarding the strategies couples use to manage relationships between work and family throughout the life course.

We also will feature a poster symposium this year on Adolescent Bodies: Constructing Gender in Families and Society. Connie Shehan will serve as a discussant. Throughout the conference there also are a variety of poster sessions and roundtables. Finally, don't forget to come to our business meeting to learn more about the work of the section!

Shelley M. MacDermid, CFLE
Chair, Feminism and Family Studies Section
E-mail: shelley@cfs.purdue.edu
Research and Theory Section
Rochester, Great Program, Great Food & Company

Rochester, N.Y., the site of this fall's national conference, is as familiar to me as my own right hand. I lived not far away for four years while I studied for my Ph.D. at Syracuse University. I wanted to stay in the central New York region but alas my dream job was in Minnesota, and here I've been.

Central New York, Rochester, and Syracuse are alive in me. Not only has the planning committee put together a great program, but I know you will enjoy the region. First, there's the food. I don't know what it is about this area, but I guarantee that you will never eat better. Name something that you want, and it is here, prepared to perfection.

When you take time away from the conference, you will find limitless things to do, such as theater, concerts, and attractions of various sorts. The Finger Lakes are spectacular. Legends say that God dragged his hand along the earth and created them. From the plane, they do look like a giant's hand. The National Women's Hall of Fame is close by as is the Underground Railroad. Corning Glass and Kodak have a large presence and endowed the city with museums and cultural attractions.

But the conference—that's what we are going to Rochester for. The Research and Theory Section received more abstracts this year than last. What a load of work it was to review those abstracts, and thanks to about 45 astute reviewers and much help through the School of Social Work at the University of Minnesota, we put together a great program.

Once again, I sought balance in the program to reflect the interests of section members and to attract other NCFR members as well. We have symposia and papers on a variety of topics, such as divorce, stepparenting and family adjustments later in life, retaining young people in rural areas, and adolescence in good times and bad.

We have a terrific workshop on quantitative analysis of longitudinal nominal and ordinal level data and several papers that demonstrate how creative thinking and quantitative analysis are natural partners.

We also have two leading qualitative researchers—Bob Bogdan, Ph.D., from Syracuse University whose work with Sari Knopp Bilkens has guided me and countless others throughout our careers and Christopher Carrington, Ph.D., from San Francisco State whose work is shedding new light on family relationships among persons with lesbian and gay identities. Both of these special speakers will have small group sessions as well as major special sessions. Everyone is welcome to these sessions. They are opportunities to discuss your research and teaching and to get ideas from knowledgeable researchers/methodologists.

Register early. Get your hotel registrations made. It will be a great conference in a great part of the country.

Jane F. Gilgun, Ph.D., LICSW
Professor, School of Social Work
University of Minnesota
1404 Gortner Avenue
St. Paul, MN 55108
Phone: 612-624-3643
Fax: 612-624-3744

Family and Health Section

Save these dates:
Nov. 7-10, 2001

The Family and Health Section is proud to sponsor a strong set of presentations at the 2001 Annual NCFR Conference that focus on the relationship between family stress and family health from multiple perspectives. A broad range of family health issues will be addressed—from perinatal to elder care issues. Presentations will focus on normative and non-normative stressors that influence family health.

Pre-Conference Invitation (Nov. 7, 2001 11:30 a.m.-5:00 p.m.)
Plan to begin at the Pre-Conference on "Family Interventions with Chronic Conditions Across the Life Span" sponsored by the Family Health and Family Therapy Sections of NCFR, the Wynne Center for Family Research, and the National Working Group on Family-based Interventions in Chronic Disease. This workshop is designed for family practitioners and researchers who work with families who have a child or adult member with a chronic illness or disability. During the luncheon, participants will have the opportunity to participate in a selected roundtable discussion with an expert in the field. Proposed roundtable topics include:
1) Challenges conducting family interventions (i.e., recruitment and retention of families); 2) Developing culturally relevant interventions; 3) Developing protocols for family interventions; 4) Effective family therapy approaches with families who have a member with a chronic condition; 5) Multiple family group interventions; 6) Publishing family and health research; and 7) Qualitative research on family interventions. Afternoon sessions by nationally known experts will focus on state of the art family-based interventions. The conference format is designed to foster networking among participants through roundtables and discussions following presentations.

Family and Health Section Meeting (Thurs., Nov. 8, 7:45-9:00 p.m.)
Join other colleagues who are interested in the interaction between health, health care, and the family. We welcome your input. If you have an item that you would like included on the agenda, please contact Ann Garwick, E-mail: garwick001@umn.edu.

Issues in Aging Families Focus Group (Friday, Nov. 9, 8:30-9:45 a.m.)
You are invited to attend the first meeting of this newly formed focus group. The goals of this focus group are to:
Plan of Action for NCFR’s Education and Enrichment Section

The Education and Enrichment section is focusing on five major goals. If you are interested in providing input or helping to meet these goals, please contact the appropriate people listed at the end of this article.

1. Develop annual conference programs that reflect the interdisciplinary interests and concerns of Section members.
   - Encourage proposals in a variety of formats.
   - Work with the NCPR Program Planning Committee to create a program that meets the needs of all members of NCFR.
   - Support sessions that include the application of research for practitioners and educators.
2. Communicate with Section members.
   - Develop recommendations for the most cost-effective formats for communicating — including electronic and/or web-page communications. If you have ideas on this topic, please share them with a member of the executive committee (listed below).
   - Work with Focus Groups to enhance communication and follow-through.
3. Investigate the Section’s role and goals for pre-conference workshops. A Task Force (listed below) will make recommendations for pre-conferences at the 2001 meeting.
4. Continue to support three student travel awards for outstanding conference proposals, as funds allow.
5. Complete and present for approval at the 2001 business meeting a budget (for Fiscal Year 2002) in keeping with the Section financial policies.

OFFICERS
Chair: Patricia Tanner Nelson, CFLE
(302) 831-1329, ptnelson@udel.edu
Chair-elect: H. Wallace Goddard, CFLE
(501) 671-2294, wgoddard@uaex.edu
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News Letter Editor:
Karen Myers-Bowman, CFLE
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BarneshH@uni.edu

FOCUS GROUPS
CFLE: Wm. Michael Fleming, CFLE,
michael.fleming@uni.edu,
Sharon Ballard, CFLE,
ballards@mail.ecu.edu
Families and Grief: Colleen Murray
cimurray@unr.nevada.edu
Marketing: Aaron Larson, CFLE,
director-daads.com
Marriage & Family Enrichment:
Phyllis Michael, CFLE
Parent Education: Kevin Allemagne,
KevinAllemagne@aol.com
Peace Group: Jackie Haessly, CFLE
Sexuality: Greg Janson,
CFLE Gregory@ohio.edu

COMMITTEES
Nominations: Sally Martin, CFLE, Betty
Barber, Alan Taylor and Howard
Barnes, CFLE
Family Life Lifetime Achievement
Award: Wally Goddard, CFLE, Glen
Palm, CFLE, Lane Morris & Karen
Myers-Bowman, CFLE
Osborne Award Committee: Paul
Rosenblatt, Jim Van Horn

TASK FORCES
Pre-conference Recommendations: Ann
Stanberry, CFLE, Terry Olson, Jackie
Kirby, Ted Futris, Lane Morris,
Theresa Russo, CFLE, Ariel
Rodriguez, Kevin Allemagne, CFLE
Newsletter, Electronic Communications
and Web Page Recommendations:
The Executive Committee

Dr. Patricia Tanner Nelson,
Department of Food and Resource
Economics, 101 Edward R. Wilson House,
University of Delaware,
Newark, DE 19717-1303.
Phone: (302) 831-1329.
Fax: (302) 831-0843.

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FAMILY & HEALTH
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1) recognize the growing importance and increasing interaction between the fields of family science and gerontology/geriatrics; 2) provide a setting where gerontology/geriatric specialists can network and exchange interests and ideas related to aging families; 3) encourage graduate students to investigate this area of study and also provide those students already interested in gerontology an opportunity to meet and interact with professionals in the field; and 4) to coordinate an annual symposium on the topic of family gerontology for researchers and professionals interested in aging family issues.

For more information, contact Christine Boyce, E-mail: cboyce@college物件.

Chronic Illness and Disability Focus Group (Friday, Nov. 9, 7:30-8:30 a.m.)

This focus group addresses research and practice issues related to families who have children with developmental disabilities or special health care needs. For more information, contact Glenna Boyce, E-mail: glenna@cd02.usu.edu.

Hope to see you in Rochester!

Ann Garwick
Chair, Family Health Section

NOW AVAILABLE!

NCFR Discussion Listserv
Enrollment is open to all NCFR members.

NCFR Member Listserv
EducationEnrichment@cfapress.org
Ethnic Minorities website:
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ReligionFamilyLife@cfapress.org
ResearchTheory@cfapress.org
Student@cfapress.org
(Students/New Professionals)

To enroll, send your name, e-mail address, and the listserv(s) you wish to join to: John Pepper at 763-781-9331, ext. 16, E-mail: pepper@ncfr.org.

To sign up for the Ethnic Minorities Section listserv, go directly to its website.


Call for Applications For Journal Editor

The Journal of Teaching in Marriage and Family: Innovations in Family Science Education is electronically published by Haworth Press, Inc. four times a year. From 1988 through 2000, the journal was titled Family Science Review. A new focus accompanies the name of the journal. The journal will seek to publish conceptual, theoretical, and empirical articles focusing on the scholarship of teaching and learning (SoTL) in the field of family science. The context for teaching and learning need not be the traditional classroom. In addition to family science curriculum, instruction, and evaluation, topics addressing the professional development of family science educators and students, such as professional identity, mentoring, or ethical behavior, can also be addressed. Thematic issues devoted to more specialized topics, along with columns related to unique applications and book reviews, will be featured regularly. Articles appearing in the journal will have undergone blind review by three peer reviewers. Book reviews and column pieces are often invited, and typically editor reviewed.

The following tasks are among those commonly undertaken by the editor of the journal:

Communicating in person or by telephone, e-mail, or fax with authors and prospective authors.

Receiving manuscripts submitted either electronically or by traditional mail.

Documenting receipt and processing of submitted manuscripts.

Securing three reviewers for each manuscript that requires blind peer review. Reviewers for revised and resubmitted manuscripts may also need to be secured.

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Persons interested in applying for the editor (three-year term) of this exciting new journal are encouraged to prepare and submit a letter of application, vita, and reference list to the president of the sponsoring organization, Family Science Association, at the following: Bahira Sherif, Department of Individual & Family Studies, 116 Alison West, University of Delaware, Newark, DE 19716, Tel: (302) 831-8187, E-mail: sherif@udel.edu. The preferred start date for this position is January 1, 2002, though July 1, 2002, would be workable as well.

Additionally, persons interested in serving as guest editor for a special topical issues of the journal are encouraged to promptly contact the interim editor, ready to share specific ideas for such an issue, at the following: Deborah Gentry, College of Applied Science & Technology, Illinois State University, Normal, Illinois 61790-5000, Tel: 309-438-8748, E-mail: dgentry@ilstu.edu.

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Employment Opportunities

Faculty Position

INDIANA UNIVERSITY–PURDUE UNIVERSITY INDIANAPOLIS (IUPUI). The Department of Sociology invites applications for a tenure-track assistant professor position beginning August 1, 2002. Applicants must, by the time of the appointment, hold a Ph.D. in sociology or an appropriate interdisciplinary area with demonstrated knowledge in advanced sociology. We are seeking candidates with strong interests in conducting applied sociological research on urban issues. Additional areas of specialization are open; however, preference will be given to specialists in areas consistent with existing departmental emphases in medical sociology, family, and criminology. The successful candidate will join a 17-member faculty of active researchers and committed teachers. Candidates must have a record of or show clear potential for research excellence and effective teaching at the undergraduate and masters levels. We seek a colleague with significant potential for or demonstrated success in securing external research funding. IUPUI enrolls 27,000 students on an urban campus encompassing the IU Medical Center and schools of law, business, social work, and public and environmental affairs, in addition to the liberal arts and sciences and offers many opportunities for interdisciplinary work. Candidates should send a curriculum vitae, statement of research and teaching interests (including teaching philosophy), and no more than three samples of writing (including one sample dissertation chapter for Ph.D. candidates). Please also arrange to have three letters of reference sent. Address all materials to Eric R. Wright, Chair of the Search Committee, IUPUI, Department of Sociology, 425 University Blvd., Indianapolis, IN 46202-5140. Applications arriving by January 11, 2002, will receive the fullest consideration. IUPUI is an Equal Opportunity Employer and especially welcomes applications from women and minorities.

Assistant/Associate Professor

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Twelve month, tenure-track position available for an individual with experience in planning, conducting and evaluating educational Extension programs in human development, family relationships, and personal development and relationships; providing leadership to statewide Extension program.

Position requires the ability to teach undergraduate courses in human development and family studies aimed at developing individual and collaborative skills essential for aspiring human services professionals and must have a high degree of comfort with a variety of teaching technologies. Experience with human service agencies is preferred including program development and evaluation and working with clients. A background in individual development, particularly adult development and aging, is desirable. Penn State Altoona offers a competitive salary and an attractive benefits package.

Penn State Altoona is located in a suburban setting forty-five miles from the University Park Campus. The approximately 3800 undergraduate students can complete one of ten baccalaureate majors or nine associate degrees at Altoona. The college also offers the first two years of 190 Penn State baccalaureate degrees. Degree offerings at Penn State Altoona will continue to expand.

The position requires an earned doctorate in Human Development, Family Studies, Developmental Psychology, Social Work, or a closely related field and is a tenure-track appointment at the level of assistant professor or at a rank commensurate with qualifications beginning in Fall 2002. Applicants should present a record of evidence and potential effectiveness in teaching, research, and service. Candidates with a commitment to undergraduate education, interest in undergraduate research, and/or experience in program development will be given strong consideration. Penn State Altoona offers a competitive salary and an attractive benefits package.

Applications should send a letter of application establishing their qualifications; a current vita; a description of teaching philosophy and evidence of teaching effectiveness; a statement of research interests; transcripts (official transcripts required at the time of an interview); and a minimum of three letters of reference. Review of applications will begin the week of November 1, 2001, and continue until the position is filled. All inquiries and applications should be sent to:

Chair Search Committee for HDFS
Penn State Altoona
P.O. Box A-1136
1000 Beaver Park
Altoona, PA 16601-3760

For additional information about Penn State Altoona, please visit our web page at http://www.aa.psu.edu.

Penn State is committed to affirmative action, equal opportunity and the diversity of its workforce.
Dean
College of Health and Human Performance
University of Maryland, College Park, MD

The University of Maryland invites applications and nominations for the position of Dean of the College of Health and Human Performance. The College is composed of the Departments of Family Studies, Kinesiology, Public and Community Health, and the Center on Aging. The College houses a Wellness Research Laboratory for faculty and staff and the Family Service Center that provides marriage and family therapy services for area families.

The Dean has responsibility for approximately 70 faculty, 200 graduate students, and 800 undergraduate students in the three departments. Family Studies offers a bachelor's degree, two master's degree programs, including an accredited Marriage and Family Therapy program, and a doctoral program. Kinesiology, consistently ranked in the top 20 programs nationally, offers bachelor's, master's and doctoral degrees. Public and Community Health offers bachelor's and doctoral degrees, a CEPH accredited Master's in Public Health, as well as a Gerontology Certificate through the Center on Aging. The College has an annual budget of approximately $6 million and has experienced substantial growth in research productivity over the past several years, with $5 million per year in current research support. The College is housed in modern facilities and possesses state-of-the-art experimental laboratories and service clinics.

The Dean is expected to be forward-looking, provide dynamic academic leadership, and build upon the superior research and educational activities within the College and University. The primary responsibilities of the position include: supporting interdisciplinary research; maintaining and enhancing opportunities for development with alumni and government and industrial partners; and supplying administrative oversight and direction. Candidates must demonstrate a distinguished record of scholarly achievement, a strong commitment to excellence in teaching, research, and service, demonstrated administrative ability, a strong record of promoting diversity, and excellent interpersonal and communication skills. Candidates must meet the criteria for full professor in one of the College departments. The Dean reports directly to the Senior Vice President for Academic Affairs and Provost, the chief academic officer for the University.

College Park, the flagship campus of the University System of Maryland, is a dynamic institution with over 2,000 faculty, 25,000 undergraduate students, and 8,500 graduate students, with a proud tradition of academic excellence. The University is located in College Park, Maryland, approximately 8 miles from the U.S. capital and in close proximity to the National Academy of Sciences, Library of Medicine, National Agricultural Library, and the National Institutes of Health. Several federal agencies are building laboratories and facilities near the campus that are expected to stimulate university-community research partnerships.

The preferred starting date for this position is July 1, 2002. Review of applications will continue until the position is filled. For best consideration, applications should be received by October 1, 2001. Applications and nominations, including a cover letter, curriculum vitae, and the names of at least three references should be sent to: Search Committee, Dean, College of Health and Human Performance, 1119 Main Administration, University of Maryland, College Park, MD 20742.

For more information about the College of Health and Human Performance, please visit their web site at: [www.inform.umd.edu/HLHP].

The University of Maryland is an equal opportunity employer, and women and minorities are encouraged to apply.
Emerging Strategies in the Prevention of Domestic Violence

by David A. Wolfe, Ph.D., A.B.P.P., Professor, Department of Psychology and Psychiatry, University of Western Ontario; and Peter G. Jaffe, Ph.D., C. Psych., Adjunct Professor, Department of Psychology and Psychiatry, University of Western Ontario and Executive Director, London Family Court Clinic, London, Ontario

While crisis intervention is a necessary response to domestic violence and can be highly effective at particular points in time, it alone cannot address the complex dynamics of domestic violence. There is also a strong need for proactive strategies of prevention. Recent changes in public policy, legislation, and service delivery illustrate a growing commitment to finding ways to reduce the harmful effects of domestic violence.

However, few comprehensive strategies that address the prevention of domestic violence have been developed, and even fewer have been evaluated. This article describes theoretical frameworks, including two public health models that can inform the future development of domestic violence prevention strategies.

MODEL ONE: IDENTIFYING THE UNDERLYING CAUSES

Public health campaigns to eliminate health risks and encourage healthy behaviors among particular segments of a population are one model for prevention strategies. Approaches within this model identify and address the underlying causes of this health problem and often use positive messages about what constitutes healthier behaviors. Similarly, domestic violence prevention strategies must include some understanding of the underlying causes of domestic violence as well as a vision of what constitutes a healthy, nonviolent family.

It is very difficult to identify the underlying causes of domestic violence; experts in the field do not agree as to what these causes are. As a result, there are several different, and at times overlapping, theories of causation. But all these theories share some commonalities, which can serve as a foundation for prevention strategies.

Biological theory. According to this theory, violent behavior is biological or organic and can be explained by genetics, biochemistry, and changes in brain development due to trauma. For example, it is believed that some abusive men have histories of head injuries, which have affected their ability to solve problems and control impulsivity. Researchers in this camp have linked the trauma of early exposure to chronic violence to changes in a child's brain functioning that lead to violent behavior as an adult.
**EMERGING STRATEGIES continued from page F1**

*Individual psychopathology theory.* From this perspective, domestic violence is rooted in individual psychopathology or dysfunctional personality structures, which are learned and shaped by early childhood experiences. Research in this area includes studies of male batterers, showing that witnessing domestic violence or being the victim of abuse undermines one's ability to trust and to regulate emotions and results in hostile, dependent, insecure individuals with little ability to develop healthy relationships. Similar research shows that male batterers are more likely than nonbatterers to score poorly on mental health tests (for example, anxiety, depression, mania, psychosis) and criminality indicators (for example, anti-social personality and stranger violence).

*Couple and family interactions theory.* This theory suggests that domestic violence is rooted in the faulty interactions of a couple and family system, and that an individual's violent behavior cannot be addressed without understanding the context, characteristics, and dynamics of the familial relationships.

*Social learning and development theory.* This perspective suggests that domestic violence is learned behavior that is modeled, rewarded, and supported by families and/or the broader culture. Analyses based on this theory focus on the ways children learn that aggression is appropriate to resolve conflicts, especially within the context of intimate relationships. Researchers have found that batterers are much more likely to have had violent fathers than are nonbatterers. Developmental research shows that early intervention with children from violent households may restore normal developmental processes, such as empathy and self-control, and minimize the risk of further harm caused by exposure to abusive adult models.

*Societal structure theory.* According to this view, domestic violence is caused by an underlying power imbalance that can be understood only by examining society as a whole. The analysis focuses on patriarchy or male domination over women and children through physical, economic, and political control. Domestic violence reflects women's inequality in the culture and the reinforcement of this reality by various institutions.

**COMMONALITIES**

There are some beliefs common to all these theories. They include:

- domestic violence has been ignored as a major social problem until recently and remains poorly understood;
- domestic violence is a complex problem impacted by multiple variables;
- childhood trauma, either through exposure to violence or some other trauma, influences the likelihood of domestic violence; and
- as long as domestic violence is condoned by public attitudes and institutions, there is little change of preventing it.

**MODEL TWO: TYPES OF PREVENTION STRATEGIES**

Another public health model that can inform the development of domestic violence prevention strategies divides prevention efforts into three categories: primary, secondary, and tertiary. Primary prevention involves efforts to reduce the incidence of a problem in a population before it occurs. Secondary prevention targets individuals to decrease the prevalence of a problem by minimizing or reducing its severity and the continuation of its early signs. Tertiary prevention involves attempts to minimize the course of a problem once it is already clearly evident and causing harm.

Primary prevention strategies can introduce to particular population groups new values, thinking processes, and relationship skills that are incompatible with violence and promote healthy, nonviolent relationships. For example, resources can be used to focus on respect, trust, and supportive growth in relationships. These efforts can be targeted to populations that may be at risk for violence in their intimate relationships but who have not yet shown symptoms of concern, or they can be directed universally at broad population groups, such as school-age children or members of a particular community.

Secondary prevention efforts address identified individuals who have exhibited particular behaviors associated with domestic violence. An example of secondary prevention is a clear protocol for the way teachers can assist students who have discussed witnessing domestic violence in their homes but who do not show serious signs of harm.

Tertiary prevention efforts are the most common and emphasize the identification of domestic violence and its perpetrators and victims, control of the behavior and its harms, punishment and/or treatment for the perpetrators, and support for the victims. Tertiary efforts can be very expensive and often show only limited success in stopping domestic violence, addressing long-term harm, and preventing future acts of violence.

**INNOVATIVE PRIMARY AND SECONDARY PREVENTION EFFORTS**

Existing primary prevention efforts are often directed toward particular population groups, and secondary efforts toward identified individuals within those groups. Programs for children typically target specific age groups and utilize, in their design, what is known about child development at that particular age.

Unfortunately, there is no information currently available regarding the total number of primary and secondary prevention programs that address domestic violence. Comprehensive, evaluative information with regard to domestic violence prevention programs is also very limited.

*Infants and preschool-age children (0 to 5 years).* Primary and secondary prevention strategies for this group focus on ensuring that children receive a healthy start, including freedom from emotional, physical, and sexual abuse, and from the trauma of witnessing domestic violence. Development of such strategies begins by defining the princip
Schools are ideal places in which to socialize; social learning can play a role in the development of behaviors and attitudes that support domestic violence. Teachers are in an ideal position to motivate students to consider new ways of thinking and behaving.

One of the key values inherent in all primary prevention programs developed in collaboration with schools is the belief that every student needs to be aware of domestic violence and related forms of abuse. Even if students never become victims or perpetrators of domestic violence, they may have opportunities in the future, as community members, to help others in preventing or stopping it. Because these programs consider domestic violence a community and societal problem, many of them also involve parents and other members of the broader community.

Preliminary evaluations of these programs are promising and indicate that key elements of successful school-based programs include: identifying relationship violence as a form of societal violence; acknowledging that domestic violence is abuse of power and control; creating a high enough level of trust so that children can disclose exposure to domestic violence and teachers can make appropriate referrals; teaching safety skills about what to do when domestic violence occurs; and encouraging the development of social skills such as anger management and conflict resolution.

*Adolescents (13 to 18 years).* Adolescence is a time of important cognitive and social development. Teens learn to think more rationally and become capable of thinking hypothetically. They also develop a greater understanding of the possible risks and consequences of their behaviors and learn to balance their own interests with those of their peers and family members. Conformity to parental opinions gradually decreases throughout adolescence, while peers become increasingly influential until late adolescence. Romantic relationships become more important by mid-adolescence. Thus, early- and mid-adolescence offer unique windows of opportunity for primary prevention efforts that make teens aware of the ways in which violence in relationships can occur, and that teach healthy ways to form intimate relationships. When offered opportunities to explore the richness of relationships, youths become eager to learn about choices and responsibilities. Clear messages about personal responsibility and boundaries, delivered in a blame-free manner, are generally acceptable to this age group, whereas lectures and warnings are less helpful.

**Innovative Programs**

**Hawaii’s Healthy Start Program,** initiated in 1984, offers a comprehensive assessment of the strengths and needs of families at the time of birth, outreach to build trust relationships and acceptance of services, teaching of problem-solving skills, expanded support systems, and promotion of healthy children development and positive parent-child relationships. For a complete description, see www.casenet.org/library/abuse/hawaiihsp.htm.

**My Family and Me: Violence Free** is an elementary school curriculum developed by the Minnesota Coalition for Battered Women (MCBW) and implemented in local schools to educate children about domestic violence. Children learn to label different kinds of family violence and effects on victims; develop personal safety plans to use in abusive emergency situations; express feelings, opinions, and behaviors on a basis of respect, equality, and sharing of power; practice assertiveness and problem-solving skills; and affirm their self-worth and self-direction. For more information, call MCBW at (651) 646-6177.

**The Youth Relationships Project** is a community-based program developed to help 14- to 17-year olds at high risk for committing dating (or later domestic) violence to understand how the abuse of power can lead to relationship violence and to utilize this understanding to improve their own relationships. The manual is available from Sage Publications. See www.sagepub.com.
Violence begets violence. Maltreated children are at high risk for future aggressive and violent behavior – and, presumably, so are their children in turn. These tendencies typically are passed on when children are very young and they are still forming their internalized pictures of the world and its people. (At many agencies 60 percent of children in foster care are three years of age or less.)

### RELATIONAL PROBLEMS

Clearly there is a need for early and effective intervention. But what? Individual psychotherapy cannot be done with infants and toddlers. It seems probable that very young children do not internalize the therapeutic session. They, therefore, may be influenced by it only for the length of the session in which they participate. Moreover, most children’s problems are relational. They involve insecure attachments and often are related to social context. Ideally, one would want to address an insecure attachment by working directly on the relationship between the child and the primary caregiver in his or her life.

Similarly, of all the topics that could be the focus of psychotherapy with the adults, a select few are especially relevant to the presenting problem of child maltreatment. Some maltreating parents don’t accurately perceive their children’s cues. Others do perceive what their children want but can’t or won’t respond appropriately. Parental traits associated with child maltreatment include insecure attachments and often are related to social context. Ideally, one would want to address an insecure attachment by working directly on the relationship between the child and the primary caregiver in his or her life.

### THE TREATMENT OF CHOICE

Family therapy may be the treatment of choice. It focuses on relationship dysfunction and strengths while also investigating how relationships elicit and maintain desirable and undesirable behavior. The infant mental health model, moreover, considers the child’s presence a vital therapeutic agent in uncovering and removing obstacles to the parent-child relationship. Seeing and treating parents and children together goes straight to the heart of the presenting problem and is far more economical than treating all parties individually. Relational treatment is especially important to infants. Timely contacts are necessary if a baby is to keep his birth mother in mind. Without frequent contact, the baby will instead internalize the foster parent. This sets up the possibility that if reunification does occur, the baby may be removed from a secure attachment and placed in the care of an adult with whom he or she has not established a trusting relationship.

### POLICY IMPLICATIONS

Child-welfare professionals want to act in ways that maximize the probability of desirable things happening. Therefore, until it becomes clear that the needs of the children will not be met through working with their family, interventions should be made which invite the active participation of the whole birth family. These interventions should be tailored to fit the unique identity, resources, and needs of each family, and they should be collaborative, strength-based, and respectful.

### VISITATION AS A THERAPEUTIC OPPORTUNITY

The Families in Transition program uses supervised visitation as an opportunity to build and support the relationships between parents and their children while providing hands-on parenting education. In this program parents are offered extra sessions of family visitation each week. These are held at a site away from the supervising state agency so that the parents can relax somewhat. Doctoral students with masters degrees in marital and family therapy and specialized knowledge of early-child development engage the children and parents in a program that facilitates parent-child relatedness while teaching developmentally appropriate parenting skills.

The family therapy includes self-reflection and an integrative use of the wide spectrum of psychotherapeutic interventions employed in the contemporary infant mental health movement.

Supervised continued on page F5
The educational piece involves understanding of child development, recognizing and responding to child cues, and awareness of child temperament. These family therapy sessions are mixed with individual adult and child, couple, and extended family therapy sessions as needed.

This program has been popular with birth families. It allows more time together, the therapy sessions do not take away from the parents’ time alone with their children, the sessions are strength-based, and the requirements to go to parenting classes and obtain counseling have been condensed into one meaningful session. The program also includes developmental screening. The therapists make monthly visits to the foster parents, schools, or the child-care providers, engaging them as allies. The program is popular with the government because, besides addressing long-standing agency personnel concerns, it requires no new funds. Money has traditionally been budgeted for psychotherapy services for those foster children who are thought to need them.

**ANTICIPATED RESULTS**

In the course of this program, participants are being compared to those treated more traditionally in other settings. At issue is the extent to which parents and children come to transact in ways that are sensitive, timely, and appropriate — with each other and with others. We expect that participating parents will visit their children more frequently, meet court requirements in a more timely fashion, follow through more reliably on referrals, and develop attitudes — such as self-esteem and faith in people and self as a causal agent — that mitigate against child neglect. We also expect that toddlers and young children will fare better in their foster homes, day care, and preschools.

*For more information, contact bobleef@nmsu.edu.*

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*EMERGING STRATEGIES* continued from page F3

Primary prevention programs delivered in high schools often involve activities aimed at increasing awareness and dispelling myths about relationship violence. Such activities might include school auditorium presentations involving videotapes, plays, professional theater groups, or speeches from domestic violence or teen dating violence survivors; classroom discussions facilitated by teachers or domestic violence services professionals, programs and curricula that encourage students to examine attitudes and behaviors that promote violence; and peer support groups.

Preliminary data from evaluations of six school-based dating violence prevention programs report increases in knowledge about dating violence, positive changes in attitudes about dating violence, and self-reported decreases in the perpetration of dating violence.

There are also community-based programs with primary prevention goals. Many of these programs also provide secondary prevention services to teens who have displayed early signs of violence.

**Adults.** Public-awareness campaigns such as public service announcements and advertisements are common approaches to primary prevention of domestic violence by adults. These campaigns typically provide information about the warning signs of domestic violence as well as community resources for victims and perpetrators.

The evaluation of one such campaign, which included public opinion data collected through telephone surveys in 1994 and 1996, showed decreases over the two years in the number of people who said they
- did not know what to do about domestic violence;
- did not believe it was necessary to report domestic violence;
- felt that it was no one else’s business when a husband beats his wife; and
- believed that the media exaggerated the problem of domestic violence.

The data also revealed differences by ethnic group and gender. For example, men were more likely than women to believe that women provoke men into physically abusing them, and more likely to feel that the media exaggerated the prevalence and harm of domestic violence. These variations imply a need for public education campaigns tailored to particular segments of the population.

**CONCLUSION**

We are at the starting gate of domestic violence prevention efforts in North America. Progress will depend on the level of public and governmental commitment to making prevention a long-term priority. Although evaluative data are limited, early results point to promising strategies and theories.

But such programs remain a hard sell. Though there is much to be learned from public health prevention models, differing opinions about the causes of domestic violence make these models difficult to adopt. The commitment of resources to crisis intervention limits the availability of resources for prevention. And, because domestic violence prevention requires fundamental changes in attitudes and behavior, it confronts societal and individual resistance to change.

Prevention of domestic violence on a broad level will require a clear commitment of all levels of government, with the goal of establishing a consistent, coordinated, and integrated approach for each community. A national policy of zero tolerance for domestic violence is necessary. Given the pervasiveness and harms of domestic violence, such a policy and the prevention efforts to support it cannot be postponed any longer.

Teaching Students and Professionals About Family Violence: A Web-Based Interactive Interdisciplinary Educational Module

by Cari Michaels, MPH, Director, Child Abuse Prevention Studies, School of Social Work, University of Minnesota

Global Violence Prevention is an interactive web site created by the Minnesota Center Against Violence and Abuse (MINCAVA). The site features a case study called "Angela's Family," a series of multiple choice questions about the case, and links to online research materials. The purpose of the site is to train students and practitioners in service-provision fields to respond more effectively to victims and perpetrators of violence. Global Violence Prevention is specific to current Minnesota legislation, although it is serving as a model for training in other states. Users are referred to articles and Minnesota statutes pertaining to mandated reporting requirements and appropriate responses by physicians and law enforcement officers. The site is appropriate for professionals in the fields of education, social services, healthcare, and law enforcement. It is also helpful for anyone seeking information related to domestic violence.

Preparing Practitioners

As our society faces increasingly complex issues of interpersonal violence, professionals in our school systems, doctor's offices, and law enforcement agencies have a greater need to know how to swiftly and effectively diagnose, intervene, and treat victims and perpetrators. This requires a well-educated and well-connected workforce. Through its work with Minnesota higher education systems, the Minnesota Center Against Violence and Abuse has learned that students do not always feel prepared for these tasks when they graduate, nor do practitioners feel connected to other professionals in the workplace. Global Violence Prevention is designed to respond to these needs by educating users about current policies and practices related to domestic violence, and requiring them to take the perspectives of many types of professionals. The site helps users understand how their decisions impact not only the individual or family with whom they are working, but also their professional colleagues in other disciplines.

Global Violence Prevention presents a new method for learning about violence. Since violence is defined, inflicted, and prevented within a social context, teaching techniques must be varied and creative. The Web offers an alternative to classroom learning and an up-to-date environment capable of providing immediate, specific feedback. Users are prompted to review relevant online research as they make decisions regarding the case. Global Violence Prevention offers not just a new curriculum within a library of teaching materials, but a method for improving teaching techniques. The case study is designed for use in all types of violence-related courses and offers an alternative to a standard lecture format. It broadens the teaching perspective beyond what any single faculty member can provide by creating case studies informed by instructors from varied fields.

Global Violence Prevention is located at www.globalsep.umn.edu. Users are given directions on the introductory page and guided through a story about Angela and her family. They are asked to take the perspectives of many types of professionals working to meet this family's needs. The site can be used individually, assigned to students in courses, incorporated into presentations, or used as an online bibliography for current resources.

Evaluation of the Site

Site users are asked to complete an online evaluation form after they finish the module. Instructors also require completion of evaluations as part of the class assignment. Based on 150 surveys received by June 2001, 95 percent of users stated they "learned a lot from this case study," 97 percent state that "this is a helpful learning tool," and 92 percent state that they plan to use the site in the future. Other comments about the pertinence of online articles and helpfulness of feedback provided to the user were also very positive. Ninety-five percent of users said they would recommend the site to others. Three-fourths of the users completed the case study as part of a class assignment and one-fourth completed it because they were interested in the topic. Evaluation of the site will continue during the 2001-2002 academic year.

Lessons Learned

The Global Violence Prevention module has resulted in several opportunities for interdisciplinary education and professional understanding throughout its development and implementation. Content for the site was created through a series of interviews and focus groups with social workers, physicians, law enforcement officers, psychologists, attorneys, administrators, policymakers, and higher education faculty. These meetings created a format for discussion about the best possible responses to all individuals in families experiencing violence, which enhanced understanding among participants and led to closer working connections.

Teaching continued on page F8
African American Fathers’ Strategies for Protecting Young Children in Violent Neighborhoods

by Bethany L. Letiecq Ph.D., Research Associate; and Sally A. Koblinsky, Ph.D., Professor and Chair, Department of Family Studies, University of Maryland, College Park

Community violence has reached epidemic proportions in many of our nation’s low-income neighborhoods. Such violence may jeopardize children’s socioemotional adjustment and ability to learn in school. Young children, in particular, may be affected by violence exposure, with its potential to undermine their security, autonomy, competence, and self-esteem. Some children may come to mistrust parents and teachers — who they perceive as powerless to protect them — and develop aggressive, impulsive coping behaviors. Other children may react to neighborhood violence with heightened fear, anxiety, regression, and depression.

Researchers have begun to identify the strategies that parents use to protect their children from violence and the stressors of living in poor, inner-city neighborhoods. These studies reveal a number of ways that parents supervise and nurture their children, despite negative neighborhood conditions. Most of the research, however, involves only mothers or female caregivers. Little is known about how fathers — especially African American fathers — prepare their children to cope with community violence.

To address this gap, we adopted a cultural ecological model to investigate how African American fathers draw on their culture and family experiences to teach, socialize, and shelter young children from harm. As part of a larger study examining child resilience in children from community violence, we conducted focus groups with 18 African American fathers to learn how they protected their children from violence and nurture their children, despite negative neighborhood conditions. Most of the research, however, involves only mothers or female caregivers. Little is known about how fathers — especially African American fathers — prepare their children to cope with community violence.

In analyzing focus group data, we discovered seven major strategies that African American fathers used to protect preschoolers from exposure to violence. The first was withdrawal from neighborhood involvement. Many fathers reported that getting involved in the “goings-on” of their neighborhood would bring danger to both adult and child family members. As a result, fathers avoided interacting with neighbors and kept their “mouths shut about crime and problems.” One father noted, “I don’t get involved. [If I] go out there and say something, I could wind up shot.”

A second strategy employed by fathers was child supervision. Fathers stressed the importance of watching young children everywhere — in the home, on the front steps, in the backyard, and on the public playground. One father asserted, “I mean if you let them go outside, then you should be sittin’ out there. Right there with them.”

Several men maintained that to protect their children, today’s fathers had to be “respected” and would not appear “weak” to community members. Several fathers described “packing a weapon” to better protect themselves and their families “in case something went down.”

Teaching home safety was a third major strategy. Fathers described attempting to teach children as young as three to avoid opening the front door for anyone, to stay away from windows (especially at night), to lay on the floor if they heard gunfire, and to dial 911 in emergencies. One father lamented that his biggest fear was his child “getting hit by a stray bullet...it’s crazy man, we don’t even let the kids play in the house.”

SURVIVAL TACTICS AND CONFRONTATION

A fourth protective strategy was teaching neighborhood survival tactics. Fathers began schooling their young children about how to avoid drug dealers, which streets and parks were dangerous, and which houses or shops children should go to when trouble occurred. Fathers also began teaching children about the real-life consequences of street violence, including injury, death, and prison.

Fathers reported watching television shows with their preschoolers, such as Cops, in order to prepare children for witnessing and responding safely to violent events.

Confrontation and fighting back was a fifth strategy used by fathers. Some fathers stressed their need to confront neighborhood troublemakers and dealers so that they would be “respected” and would not appear “weak” to community members. Several fathers described “packing a weapon” to better protect themselves and their families “in case something went down.”

Fathers continued on page F8
Office Call
Visit the virtual office of U.S. Surgeon General, David Satcher (www.surgeongeneral.gov), to download two excellent resources on violence and its prevention:
• Youth Violence: A Report of the Surgeon General includes chapters on “The Magnitude of Youth Violence,” “The Developmental Dynamics of Youth Violence,” and “Risk factors.” A well-documented chapter on “Prevention and Intervention” sets forth scientific standards for determining program effectiveness and describes programs that are “model” or “promising” as well as several — DARE is probably the best-known — that do not work.
• The Surgeon General’s Call to Action to Prevent Suicide is the product of an effort that has brought the best science together with the best experience on the subject of suicide prevention. Researchers, clinicians, survivors and advocates met in Reno in 1998 to lay the foundation for a national suicide prevention strategy. The result is the National Strategy for Suicide Prevention (NSSP), also available on the Website.
NCFR members may also want to consult:
• Mental Health: A Report of the Surgeon General, which asserts that mental illness is a critical public health problem that must be addressed by the Nation.
• The Surgeon General’s Call to Action to Promote Sexual Health and Responsible Sexual Behavior, which calls for strategies that focus upon increasing awareness, implementing and strengthening interventions, and expanding the research base relating to sexual health matters. The publication also includes a section on sexual violence.

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NONVIOLENCE AND COMMUNITY ACTIVISM
In contrast, many fathers used a sixth strategy, teaching alternatives to violence, to help children learn peaceful ways of resolving conflict. Fathers discussed how they instructed their preschoolers to walk away from a fight and to seek out parents and teachers for help with problems. For example, one father, concerned about his daughter’s aggression in preschool, stated, “Her first instinct is pow — to pop somebody. I talked to her about that. I’m trying to work on her attitude.”

Lastly, a number of fathers reported engaging in community activism as a neighborhood-level strategy to improve children’s safety. These fathers joined Neighborhood Watch groups, block patrols, Head Start parent councils, and community clean-up campaigns in efforts to reduce crime and violence. As one active father proclaimed, “If I make a difference from eight in the morning to five in the evening, and we as a community do what we are supposed to do, maybe we can make that difference.”

INSIGHTS FOR PRACTITIONERS AND POLICYMAKERS
This study offers valuable insights for practitioners and policymakers seeking to buffer families from the risks associated with inner-city life. The African American fathers in this study cared deeply about their children’s safety. Their voices conveyed an anger and frustration that was sometimes directed inward by isolating their families from neighborhood contact, or outward through confrontation and community activism. Some fathers needed to portray themselves as strong and in control — as the family protector — and this attitude prevented them from seeking out other parents and professionals to address violence-related stress.

Our study suggests that many fathers would benefit from joining supportive groups that focus on paternal strengths and address the concrete challenges of living in violent neighborhoods, as well as issues of parenting, conflict resolution, and effective coping. Because such groups would be concerned with community safety, they might be more appealing to fathers than groups that focus more narrowly on parent education. Involving fathers in neighborhood improvement activities (crime watch, park cleanups), together with children’s sports and educational activities, may enhance fathers’ male support networks and increase their parenting efficacy. Finally, policymakers must not only provide parenting opportunities, but also strengthen the economic infrastructure of inner-city neighborhoods. Both are vital to building healthy, safe communities.

For more information, contact bl383@netscape.net or sk38@umail.umn.edu.

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ations between these professionals.

Users of the site have the opportunity to learn in a format other than the standard lecture. They also receive immediate, private feedback regarding the responses they are choosing. Students completing assignments related to the site state that this method of learning helps them understand both the legal requirements and professional perspectives of people in fields other than their own. The online format, unlike print documents, permits immediate changes to the site as laws and policies change.

Finally, the public nature of the Internet also provides the opportunity for professionals to make changes to the global violence prevention site that are appropriate for different states, audiences, and professions. It is anticipated that this site will continue to serve as a template for these purposes.

For more information, contact cmichaels@che.umn.edu.

The Minnesota Center Against Violence and Abuse is located within the University of Minnesota School of Social Work and offers support for violence-related education, research, and access to information. The research materials used in Global Violence Prevention are drawn from an extensive library of online violence-related materials housed within or linked from the MINCAV Electronic Clearinghouse (www.mincave.umn.edu).
A familiar African proverb asserts that it “takes a village to raise a child.” The efforts of children’s larger “village” — including the schools, the church, health services, law enforcement, business, and the media — may be especially important to combat the growing problem of community violence. Now targeted as a major public health problem, community violence has become epidemic in many of our nation’s urban areas. African American children are at special risk for exposure to community violence because they are more likely to be raised in poor, single-parent families within the inner-city than children from other backgrounds. In 1996 we obtained a grant from the U.S. Department of Education to examine the role of families, schools, and communities in protecting African American children from exposure to violence. The project was a partnership between the University of Maryland and Head Start programs in Washington, D.C., and urban Maryland. After examining the impact of community violence on preschoolers’ development and identifying factors that predicted more positive coping among 312 African American families, we developed an intervention program for Head Start teachers and staff. The “Peaceful Village” program sought to train child and family educators to improve children’s safety and to help them deal with children’s violence-related stress.

**GATHERING THE DATA**

Before the intervention, we held focus groups with teachers from six Head Start programs to identify individual, family, and community problems and assets. Teachers reported that violence was a major source of job stress and lamented the lack of mental-health resources to help them with the problem. Many described violent themes in children’s dramatic play, as preschoolers acted out shootings, assaults, police arrests, and funerals. Some children displayed anxiety or problems such as stuttering and bedwetting, as a direct result of witnessing violence.

Our assessment of community assets revealed the Head Start teachers’ strong commitment to making a difference for these preschoolers. Teachers also praised the protective strategies employed by many parents, extended family members, and neighborhood leaders; the improved community policing; and new job-training programs for unemployed youth.

**TRADITIONAL THEMES**

With these data, we developed a six-session, 20-hour violence intervention program for Head Start staff working in low-income, predominantly African American communities. Adopting a framework informed by research on resiliency and cultural competency, we organized the program around traditional Kwanzaa principles that reflect African American family values.

The first session, “umoja,” Swahili for unity, examined the “village” that must be involved in combating community violence. Teachers shared impressions of how their Head Start center or neighborhood had been affected by violence and evaluated the success of community agencies in protecting families. Teachers also examined the consequences of community violence on preschoolers’ behavior, exploring how children’s reactions may be influenced by the nature and frequency of violence exposure, the children’s own characteristics, and family and social support. Then a discussion of the African American world view, using proverbs and family sayings, enabled participants to identify cultural strengths that have traditionally helped Black families cope with adversity.

The second session, with the theme of “ujima,” or collective work and responsibility, began with teachers sharing homework that required them to research their Head Start community. Teachers investigated how violence had come to plague their community by surveying neighborhood grandparents, ministers, barbers, storekeepers, and other long-term residents about key neighborhood events of the 1960s, 70s, 80s, and 90s. These events were recorded by decade on a group timeline, followed by a discussion of periods and predictors of higher and lower violence. After writing a letter to a Head Start child describing an idealized vision of neighborhood change, each teacher described two realistic strategies for improving their center’s response to violence. For example, one teacher suggested asking a community policeman to escort children to the library, while another proposed contacting a social worker to help staff deal with children’s loss of relatives to gun violence.

**FAITH AND PURPOSE**

Session three focused on “imani,” or faith, recognizing African Americans’ positivity and their belief that “we can...”
Internet Resources

Children, Youth and Families Education and Research Network (CYFERNet), which has incorporated many of the functions and resources maintained by the former National Network for Family Resiliency, includes a page on violence prevention on its Website. You’ll find publications, fact sheets, and links to other resources. www.nnfr.org/violence

Children’s Defense Fund offers resources on violence prevention, gun violence, and school safety. This rich site has links to research reports, fact sheets, and the Websites of other organizations concerned with children and violence. www.childrensdefense.org/ss_violence

Division of Violence Prevention in the CDC’s National Center for Injury Prevention and Control has four priority areas for violence prevention: youth violence, family and intimate violence, suicide, and firearm injuries. This Website offers fact sheets, publications, grant information, and maps created with Geographic Information Systems that incorporate data on suicide and homicide. www.cdc.gov/ncipc/dvp/dvp.htm

Family, Career, and Community Leaders of America (FCCLA) is a nonprofit national vocational student organization for young men and women in family and consumer sciences education in public and private school through grade 19. Its STOP program (Students Taking On Prevention) teaches students how to recognize warning signs of violence and what to do in a variety of situations. www.fcclainc.org

Frontline: The Killer at Thurston High. This Website complements the PBS documentary of the same name. Included are a discussion of profiling, a portrait of the shooter, and various links. www.pbs.org/wgbh/pages/frontline/shows/kinkel

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make a way out of no way.” After discussing the impact of community violence on individual teachers and classrooms, teachers identified concrete needs and brainstormed strengths to tackle the problems. All participants prepared detailed “crisis response protocols” for dealing with violent events (for example, gunfire) that occurred when children were inside and outside the classroom — policies which did not exist before our intervention. Teachers then shifted focus to examining how they could help parents and caregivers deal with their own and children’s violence-related stress. Trainers taught teachers protective strategies, from how to start crime-watch and victim-support groups at the neighborhood level, to how to use newsletters and home visits to teach parents about home safety, supervision, gun safety, and how to help a child who has witnessed violence.

The fourth session, “nia” or purpose, centered on how the teachers could design a more peaceful classroom. Participants explored ways to modify the physical environment, the curriculum, work and play patterns, classroom rules, and staff behavior to promote more positive interaction. Teachers learned new classroom activities that promote cooperation, emotional expression, and conflict resolution, such as the “peace stick,” “peace puppets,” “hanging up my anger suit,” and the “helping hands mural.” Role-plays enhanced teachers’ skills in handling aggressive play, examining such issues as imaginary gunplay. Finally, teachers learned how to use dialogue and picture books to respond more effectively to young children’s violence-related fears, grief, and loss.

CREATIVITY AND SELF-DETERMINATION

Session five on “kuumba,” or creativity, focused on using resourceful strategies to help parents and teachers reduce children’s exposure to media violence. After examining how violent media affects preschoolers’ behavior, teachers rated violent content in clips from cartoons, dramas, news, talk shows, music videos, and computer games. Discussion addressed why parents allow children to watch this violence (for example, TV as childcare), as well as ways to reduce exposure to violent programming. Strategies included sharing information about rating scales and violent content of popular programs, making family rules about television watching, eliminating TV from children’s bedrooms, talking with children about screen violence, discussing stereotyped media images, and substituting nonviolent programs and toys for their violent counterparts.

The final session’s theme, “kuchagulia,” or self-determination, recognized teachers’ commitment to making a difference for children. Trainers helped the teachers plan a violence prevention event for the families of children in their classes. The special programs, averaging two hours, included speeches and spirited parent-speaker debates with police officers, community council members, ministers, educators, domestic violence and mental health counselors, and a radio deejay. Programs addressed specific neighborhood violence problems and included children’s performance of songs with anti-violence messages.

A pre-post evaluation of the “Peaceful Village” intervention revealed that Head Start teachers increased their knowledge of violence and its effects on children, their comfort in addressing children’s aggression and violence-related fears, and their implementation of strategies to promote child and center safety. One teacher, for example, gained approval for a center “crisis response protocol” from the Head Start parent advisory committee, the elementary school principal, and the county school board. Another teacher arranged for a community police officer to read stories to Head Start children, reducing children’s fears and negative stereotypes of the police. Virtually all teachers sent home flyers on neighborhood and home safety. We are monitoring long-term effects of the intervention and plan to post the violence intervention curriculum on the Internet in 2002.

For more information, contact sk38@email.umd.edu or srww@email.umd.edu.
Preventing Youth Violence through a Community-Based, Family-Centered Approach

by Carol MacKinnon-Lewis, Ph.D., Center Director; and James M. Frabutt, Ph.D., Director, Division for the Prevention of Youth Violence and Aggression, Center for the Study of Social Issues, The University of North Carolina at Greensboro

As part of the commitment of the University of North Carolina at Greensboro to be an “engaged” institution as defined by the Kellogg Commission, the Center for the Study of Social Issues (CSSI) was created in 1996. CSSI is charged with the mission of enhancing the vitality of the community, as well as research and instructional activities of the University that engage faculty and community partners through interdisciplinary collaborative work. CSSI’s Division for the Prevention of Youth Violence and Aggression is currently conducting a violence prevention initiative. It brings together university researchers and community leaders in a cooperative venture to study youth violence and then take comprehensive measures to intervene at individual, family, school, and community levels.

RECOGNIZING THE PROBLEM

In October 2000, the community of High Point, North Carolina, was devastated by the murder of 15-year-old Bryan Cobb. Bryan, who was slated to participate in our youth violence prevention efforts, was brutally shot and killed in his own neighborhood. He, like far too many other others, left behind grieving parents, relatives, friends, and communities.

Community leaders, policy makers, funding agencies and the public have begun to recognize that youth violence is a complex public health problem. Even small towns are not immune to its devastating effects. In High Point, for example, juvenile arrests for serious violent crimes doubled over the decade from 1987 to 1997, although the area’s population remained stable (about 75,000). These numbers may seem small compared to youth arrests in Detroit, Los Angeles or Houston, but for a close-knit city of less than 100,000 people, this level of youth violence constitutes a palpable threat to community well-being.

A COLLABORATIVE FOR THE PREVENTION OF YOUTH VIOLENCE

The High Point Violent Crime Task Group formed over three years ago as a direct outgrowth of two needs assessments that identified crime and violence as major community concerns. But the group had devoted most of its attention to adult crime reduction. There was still an outstanding need to address youth violence. Based on the relationships and growing trust cultivated through CSSI’s already existing community-based efforts in High Point (i.e., a series of redevelopment and revitalization efforts funded through EPA and HUD), a focused collaborative has emerged from the original Violent Crime Task Group.

This group, the High Point Collaborative for the Prevention of Youth Violence, has adopted a preventative approach with young persons at risk of committing violent acts. The multi-disciplinary collaborative is diverse and community-based, with participation of parents, law enforcement, mental-health professionals, school personnel, representatives from juvenile justice, local clergy, faculty, and graduate students.

Instead of numerous professionals each addressing this particular issue in a unilateral and field-specific manner, CSSI has convened diverse stakeholders who have worked toward creating a common vision for how best to proceed.

GUIDING PRINCIPLES

Collaborative members have played a significant role in conceptualizing and implementing a youth violence initiative based on three principles:

- **Development in context.** At any given stage of development, young people with unique mixes of strengths and limitations seek to master developmental tasks, and they do so in different communities and across different social contexts.

- **Creation of a community-based collaborative.** Violence-prevention programming has seen a shift away from punitive, and often fragmented, approaches, to comprehensive, coordinated, community-wide solutions. It has been argued that health-promotion programs should be genuinely community-based (featuring local leadership and decision-making), as opposed to simply community-placed or community-focused. In our case, the community made the choice as to which problems to address, which program models to adopt, which individuals to serve, how to deliver those services, and how to measure effectiveness.

- **A family-centered approach.** Families are at the core, rather than the periphery, of the planning, coordination, implementation of services. Families are not required to conform to established, and often fragmented, programmatic niches. Rather, families are central to defining their own strengths, supports, and need for services.

TOWARD A SOLUTION

CSSI and the Collaborative for the Prevention of Youth Violence have...
CORRECTIONS TO THE JUNE ISSUE

Maureen Lynch, author of “Refugee Family Experiences: Real Life Stress That Would Never Pass IRB Standards” is currently a staff member of Refugees International.

Susan M. Wolfgram, author of “Recapturing Resilience: Solution-Focused, Competency-Based Family Therapy for Children with ADD and their Families” has a new e-mail address. Contact her at maxsmom711@aol.com.

INTERNET RESOURCES...CONT.

OSHA has a page on its Website dedicated to workplace violence. Included are resources on recognition, control, prevention, and other aspects of this problem. www.osha-slc.gov/SLTC/workplaceviolence/index.html

SECRET SERVICE SAFE SCHOOL INITIATIVE.

Working in partnership with the U.S. Department of Education, researchers from the National Threat Assessment Center (NTAC) are examining school shootings, starting from the incident and working backward to development of the original idea. Through this incident-focused, behavior-based analysis, NTAC researchers hope to increase understanding of the patterns of communication, planning and preparation that precede these attacks. www.treas.gov/ussss/index.htm?ntac.htm&1

U.S. DEPARTMENT OF EDUCATION offers Early Warning, Timely Response: A Guide to Safe Schools. This publication presents research-based practices designed to assist school communities identify these warning signs early and develop prevention, intervention and crisis response plans. www.ed.gov/offices/OSERS/OSEP/earlywm.html

VIOLENCE AGAINST WOMEN ONLINE RESOURCES provides law, criminal justice, advocacy, and social service professionals with up-to-date information on interventions to stop violence against women. www.vaw.umn.edu/index.asp

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initiated an “action-research” project that will use information from High Point middle-school and high-school youth to develop a locally relevant prevention strategy. This strategy includes three components:

Research. We have begun to examine the locally relevant risk and protective factors (across family, school, peer, and neighborhood domains) for youth violence. We have asked individual youths and their primary caretaker to complete a self-report questionnaire that assesses family demographics, family functioning, parent-child relationships, parental monitoring, antisocial peer pressure, as well as spousal and family conflict. The questionnaire is informed by a thorough literature review and its content has been analyzed by community members. We are also gathering quantitative data on academic achievement and behavior problems obtained from school records.

In addition, we are using a qualitative data-gathering technique to examine the developmental trajectories of these youth. To complement the survey results, trained community volunteers are conducting semi-structured ethnographic interviews with the adjudicated youth and their primary caretaker. These interviews will provide the raw material that allows us to understand the critical elements of the developmental landscape for youth growing up in High Point.

Intervention. After evaluating the data on risk and protective factors, we have implemented a System of Care intervention for each youth. In the System of Care model, a service coordinator works closely with the youth and his or her family in order to build a system of supports that “wrap around” the young person. Available services include assessment, outpatient treatment, home-based services, family support and education groups, school-based services, and crisis services. Also included are community-based services such as recreation programs, service clubs, etc. In addition, the model makes use of informal supports provided by family, friends, or professionals who are willing to work with the youth in non-traditional ways.

Evaluation. During the first phase of this component, we will use a “process outcomes” assessment tool to determine whether the System of Care is implemented in accordance with the theory and principles developed for system-of-care initiatives in the mental-health system. We want to find out:

• whether services are delivered in a family-centered, culturally responsive and strength-based manner;
• if family members have “bought in” and are participating;
• whether the array of services and supports is meeting the needs of youth and their families;
• if there is a sense of community inclusion and ownership; and
• whether there are barriers that interfere with service and support development.

The evaluation of the System of Care also contains an outcome component. This will assess whether the approach leads to a concerted, long-term prevention effort in High Point. We’ll do this by measuring the degree to which the youth served by System of Care experience show improvement in functional outcomes such as improved academic performance and reduced delinquency, substance use, aggression, and violent behavior.

The High Point Youth Violence Initiative shows how universities can promote effective, grounded solutions by working jointly with communities in assessing needs, developing creative and effective responses, and bringing about system-level change. To succeed, researchers must build the necessary trust that will allow them to initiate and sustain productive, genuinely collaborative relationships within the community.

For information, contact jmfbraban@uncg.edu.
Creating Nurturing Classrooms

by Joanne M. Kassese, MSEd, NCC, CFLE, Youngstown State University, Licensed Professional Counselor, Private Practice

In working with victims of abuse and neglect for 20 years, I have learned a great deal about preventing abuse as well as helping victims both disclose and heal. Because children spend a large part of each day in school settings, these places are critically important to this process. Although most teachers and child care providers are nurturing people, conversations with these professionals have indicated a desire to know more about creating more nurturing environments in which children can learn and grow.

A simple definition of nurturing identifies it as the opposite of abuse. A nurturing environment allows individuals to discover their own needs and to feel safe enough to develop the ability to meet those needs. Sometimes we learn to meet our own needs; often needs are met in community.

SECURITY
A basic need for any person is a sense of security. Security comes from feeling safe and stable, knowing that the environment is free from danger and relatively predictable. Having clear rules begins this process.

All classrooms have rules, some spoken, some not. It is important to identify basic rules that focus on keeping everyone safe and healthy, using kind and caring words, using our hands for helping and sharing gentle touches. In speaking with preschoolers about nurturing, I defined it as “taking care of...” When the rule of the classroom is “we take care of ourselves and others,” children feel secure knowing they are safe.

Of course, rules alone will not stop one child from hurting another. Names and words can become weapons as easily as fists and toys. However, when the group norm is gentle words and gentle touches, sharing and caring for each other, children begin to monitor themselves. When adults use this language to reinforce behavior, identifying what they see and hear as “nurturing” or asking them, “Is that a nurturing touch (word)?” children will use the same language to define their actions.

EXPRESSING NEGATIVE FEELINGS
Another part of providing a secure, nurturing environment is creating appropriate outlets for the expression of negative as well as positive feelings. Conflicts do happen and it is important to acknowledge this for children. Security does not necessarily mean the absence of anything negative or hurtful. But it does allow for identification and resolution of problems and concerns in a safe, non-abusive manner.

The acceptance and valuing of all feelings allows for the expression of feelings while maintaining each person’s safety. Children and adults can be given permission to feel any feeling they want, even if others do not agree or understand. Feelings, as a part of who we are, need to be respected. Stories, games, and songs can all be a part of the process of learning about feelings. While children learn to use “feelings” words and to identify situations that usually cause others to feel one way or another, they can also learn various ways to express and handle these emotions. Limits, which keep everyone safe, can be identified regarding the expression of these feelings. For example, a teacher may tell a child, “It is OK to be angry. It is OK to tell me you are really mad. It is not OK to hit me. Maybe you can stamp your feet to show your anger.” Providing children with options for aggression allows them to accept even their negative feeling while supporting the concept of nurturing.

ROUTINES
Routines are a third part of developing a nurturing environment. All of us like some level of routine in our lives. Whether it is brushing our teeth or drinking our coffee, routines provide us with a sense of order and control in at least a part of our lives. Creating and maintaining a classroom routine allows children to develop a rhythm for their day.

Although the day’s routine does not need to be, and really cannot be, rigid, a regular flow from active time to quiet time and back again will provide balance and assist children in identifying their own needs for various levels of activity in their day. The predictability of a routine also makes it easier to accommodate changes within the routine, such as a special event or a substitute teacher.

DIFFERENCES AND COMMONALITIES
Providing a nurturing classroom also respects differences within the group. All individuals can be recognized for their unique qualities, whatever they may be. At the same time, it is important to discover our commonalities and to celebrate them. Activities and stories can support this discovery. Teachers can also point out commonalities throughout the day (for example, Suzie and Johnny are both wearing blue shirts today; Linda and Sam both like chocolate ice cream; Terri and Chris don’t like thunderstorms.)

Rules, expressing feelings, modeling nurturing behavior and words, routines and respect for everyone are a few of the tools that make a classroom nurturing. These suggestions may seem like everyday common-sense routines, but they may not yet be formally identified as ways of making children feel safe and secure. Many thanks to those who nurture our children!

This information is based on “Developing Nurturing Skills,” a program created by Family Development Resources, Inc. To learn more, contact jmkassese@gateway.net.
The Jigsaw Classroom: Cooperative Learning Creates a Peaceful Environment

by Elliot Aronson, Ph.D., Professor Emeritus, Department of Psychology, University of California, Santa Cruz

The jigsaw classroom was first used in 1971 in Austin, Texas. My graduate students and I had invented the jigsaw strategy that year, as a matter of absolute necessity to help defuse an explosive situation. The city’s schools had recently been desegregated, and because Austin had always been racially segregated, white youngsters, African American youngsters, and Hispanic youngsters found themselves in the same classrooms for the first time.

Within a few weeks, long-standing suspicion, fear, and distrust between groups produced an atmosphere of turmoil and hostility. Fist-fights erupted in corridors and schoolyards across the city. The school superintendent called me in to see if we could do anything to help students get along with one another. After observing what was going on in classrooms for a few days, my students and I concluded that inter-group hostility was being fueled by the competitive environment of the classroom.

Let me explain. In every classroom we observed, the students worked individually and competed against each other for grades. Here is a description of a typical fifth grade classroom that we observed:

The teacher stands in front of the class, asks a question, and waits for the children to signal that they know the answer. Most often, six to 10 youngsters raise their hands, lifting themselves off their chairs and stretching their arms as high as they can in an effort to attract the teacher’s attention. Several other students sit quietly with their eyes averted, hoping the teacher does not call on them.

When the teacher calls on one of the eager students, there are looks of disappointment on the faces of the other students who had tried to get the teacher’s attention. If the selected student comes up with the right answer, the teacher smiles, nods approvingly, and goes on to the next question. In the meantime, the students who didn’t know the answer breathe a sigh of relief. They have escaped being humiliated this time.

FOSTERING COOPERATION

We realized that we needed to shift the emphasis from a relentlessly competitive atmosphere to a more cooperative one. It was in this context that we invented the jigsaw strategy. Our first intervention was with fifth graders. First we helped several teachers devise a cooperative jigsaw structure for the students to learn about the life of Eleanor Roosevelt. We divided the students into small groups, diversified in terms of race, ethnicity, and gender, making each student responsible for a specific part of Roosevelt’s biography. Needless to say, at least one or two of the students in each group were already viewed as “losers” by their classmates.

Carlos was one such student. He was very shy and insecure in his new surroundings. English was his second language. He spoke it quite well, but with a slight accent. Try to imagine his experience: After attending an inadequately funded, substandard neighborhood school consisting entirely of Hispanic students like himself, he was suddenly bussed across town to the middle-class area of the city and catapulted into a class with Anglo students who spoke English fluently, seemed to know much more than he did and who were not reluctant to let him know it.

When we restructured the classroom so that students were now working together in small groups, this was initially terrifying to Carlos. Now he could no longer slink down in his chair and hide in the back of the room. The jigsaw structure made it necessary for him to speak up when it was his turn to recite. Although he had gained a little confidence by rehearsing together with others who were also studying Eleanor Roosevelt’s work with the United Nations, he was still reluctant to speak when it was his turn to teach the students in his jigsaw group. He blushed, stammered, and had difficulty covering the material he had learned. Skilled in the ways of the competitive classroom, the other students were quick to ridicule him.

One of my research assistants heard some members of Carlos’s group make comments such as, “You’re stupid. You don’t know what you’re doing. You can’t even speak English.” Instead of admonishing them to “be nice” or “try to cooperate,” she made one simple but powerful statement. It went something like this: “Talking like that to Carlos might be fun for you to do, but it’s not going to help you learn anything about what Eleanor Roosevelt accomplished at the United Nations — and the exam will be given in about 15 minutes.” In other words, she reminded the students that the situation had changed. The same behavior that might have been useful to them in the past, when they were competing against each other, was now going to cost them something very important: a chance to do well on the exam.

DIFFERENT TACTICS

Needless to say, old, dysfunctional habits do not die easily. But they do die. Within a few days of working with jigsaw, Carlos’s group-mates gradually realized that they needed to change their tactics. It was no longer in their own best interest to rattle Carlos; they needed him to perform well in order to do well themselves. In effect, they had to put themselves in Carlos’s shoes in order to find a way to ask questions that didn’t undermine his performance.

After a week or two, most of Carlos’s group-mates developed into skillful interviewers, asking him relevant questions and helping him articulate clear answers. And as Carlos succeeded, his group-mates began to see him in a more positive light. Moreover, Carlos saw himself in a new light, as a student who could contribute to the learning process.
Bullying Intervention Strategies That Work

In 1982, three Norwegian boys, ages 10 through 14, committed suicide, apparently as a result of severe bullying by their classmates. The event triggered shock and outrage, led to a national campaign against bullying behavior, and finally, resulted in the development of a systematic school-based bullying intervention program. That program, developed by psychologist Dan Olweus, was tested with more than 2,500 students in Bergen, Norway. Within two years, incidents of school bullying had dropped by more than 50 percent. Since then, a number of countries, including England, Germany, and the United States, have implemented Olweus’s program with similar results.

HOW IT WORKS

Olweus based the program on principles derived from research into behavior modification techniques for aggressive or violent children. The program restructures the learning environment to create a social climate characterized by supportive adult involvement, positive adult role models, firm limits, and consistent, noncorporal sanctions for bullying behavior.

In order to effectively accomplish its goals of reducing existing bullying problems and preventing the development of future problems, the program leads teachers, administrators, and staff through a series of tasks that make them aware of the extent of the bullying problem and help them solve it. Those tasks include the following:

At the school level:
• a bullying survey to determine the extent of the problem.
• a conference day to educate teachers, administrators, school staff, parents, students, and community members about bullying behaviors, response strategies, and available resources.
• increased supervision in the cafeteria, hallways, bathrooms, and on the playground, where most bullying behavior occurs.
• a coordinating group — typically consisting of an administrator, a teacher from each grade level, a guidance counselor, psychologist, and/or school nurse; and parent and student representatives — to manage the program and evaluate its success.
• ongoing meetings between parents and school staff.
• discussions of bullying issues at regularly scheduled PTO meetings.

At the classroom level:
• a curriculum that promotes kindness, communication, cooperation, and friendship and includes lessons and activities stressing empathy, anger management, and conflict resolution skills.
• class rules against bullying. Rules should be brief and clear. Olweus suggests the following examples:
  1. We will not bully other students.
  2. We will try to help students who are bullied.
  3. We will include students who might be left out.
• immediate consequences for aggressive behavior and immediate rewards for inclusive behavior. Possible sanctions include having the bully 1. apologize;
  2. discuss the incident with the teacher, principal, and/or parents; pay for damaged belongings;
  3. spend time in the office or another classroom;
  4. forfeit recess or other privileges.
• weekly meetings to communicate to students clear and consistently enforced expectations and to engage them as resources in preventing bullying behavior.
• ongoing communication with parents.

At the individual level:
• serious talks with bullies and victims.
• serious talks with the parents of bullies and victims.
• role playing of non-aggressive behavior with bullies.
• role playing of assertive behavior with victims.

The key components of the bullying intervention program, according to Olweus, are increased adult supervision in all areas of the school, increased consequences for bullying behavior, and a clear message that bullying will not be tolerated.

Anti-Bullying Resources

The following resources provide additional information about the bullying prevention program developed by Dan Olweus:

• Bullying at School: What We Know and What We Can Do, by Dan Olweus. This book provides information about the results of Olweus’ bullying surveys, as well as a detailed description of his school-based bullying prevention program. To obtain a copy, contact Blackwell Publishers, c/o AIDC, P.O. Box 20, Williston, VT 05495.

• For information on how to order a teacher handbook, student questionnaire, or other materials from the Bullying Prevention Program, write: BVP-Dan Olweus, Vognstolbakken 16, N-5096 Bergen, Norway.

Family Focus On... Violence Prevention
What do Children's Books Say about Conflict and Conflict Resolution?

by Joyce W. Fields, Ph. D., Assistant Professor, Human Relations, Columbia College, Columbia, SC

Socialization is the process by which children's behavior is shaped so that they "fit" with society. Various agents are vital in this process: parents, teachers, peers, literature, media, and social institutions. The current climate of social violence experienced by our children must be explained, interpreted, analyzed, contextualized through these agents. An examination of these agents, then, is relevant for discovering the genesis of children's thoughts regarding conflict and conflict-resolution in our society.

Lev Vygotsky, a Russian psychologist, discovered that children are taught by example and through social interaction. One of the best sources for an analysis of this learning or modeling is literature because it is a reflection of life, helping the child organize and make sense of their world. If our reality includes conflict, our literature reflects conflict, and if our reality requires conflict-resolution skills, our literature reflects strategies for resolution, as well.

I recently used content-analysis methodology to assess children's literature for level of conflict and for the suggestion of strategies for conflict resolution. I used a list of 125 preschool books compiled by collapsing the American Library Association's suggested reading list for preschoolers with the Association of Library Services to Children's suggested fiction books for preschoolers. The number of books from this list available was 105. Five readers were trained to analyze and code the contents of these books. Each reader assessed all the books and coded responses on response sheets. These response sheets were then compiled, and a common rating for each book was developed based on consensus of responses. The data collected were analyzed using a chi square test.

LEVELS OF CONFLICT

The first question under investigation concerned the level of conflict reflected in preschool literature. Readers rated each book on one of four levels. Books with no conflict or those that were descriptive in nature were rated as level one. Of the 105 books read, 36 of them fell into this category. Margaret Wise Brown's Goodnight Moon is an example of a descriptive book.

Level-two books were those in which one party or group experienced a need to solve a problem. Thirty-three books were determined to be at this level with Don Freeman's Corduroy being one of them.

Level-three books depicted situations in which one character or group had to solve a problem but experienced some opposition to the resolution of the problem. Twenty-four books were determined to be on level three, with Wally Piper's The Little Engine That Could ranking in this group.

Level-four books depicted situations in which two or more parties or groups were involved in conflict with direct opposition between characters or situations. Only 12 of the 105 books were ranked at this level, with Beatrix Potter's The Tale of Peter Rabbit being, perhaps, the best example.

While 36 books were descriptive, 69 of those read depicted some level of conflict. A statistically significant difference exists between the level of conflict in these books at p<.01.

CONFLICT RESOLUTION STRATEGIES

The second dimension under investigation concerned the strategies suggested in these books for resolution of conflict. The following were the strategies under investigation: talking a solution, withdrawing, verbal fighting, physical fighting, bringing in a third party to help with resolution, no options, or miscellaneous other strategies. Totals in this category are larger than the sample (n=69) because in several cases, multiple strategies were suggested or used.

Two strategies emerged in the "other" category, persistence, accidental resolution. Of the 12 books depicting this strategy, in 11 the character resolved the problem or conflict by being persistent. Only one book offered no option for resolution. That book was Where Does Joe Go?, a mystery that provided no answer to the question of where the hot dog vendor on the boardwalk goes during the winter months.

Fifteen books suggested talking as a method of resolution, and fifteen suggested withdrawing from the conflict. Only two depicted verbal fighting and three depicted physical fighting. Talking and withdrawing from conflict were both offered in combination with bringing in another party. A statistically significant difference exists between the strategies used for resolution of the conflict at p<.001.

THIRD PARTIES

The third dimension under investigation concerned which parties were invited to help resolve conflicts. Of the 35 books depicting the use of a third party for intervention, 11 suggested peers as the resource. Nine depicted significant other adults (teachers, grandparents), seven depicted authority figures (police, sheriff), and five used inanimate objects such as toys. No statistically significant difference between which resource was used as a resource existed for conflict resolution.
JIGSAW CLASSROOM continued from page F14

competent member of the class who could work with others from different ethnic groups. His self-esteem grew, and as it grew, his performance improved even more. In addition, Carlos began to see his group-mates as friendly and supportive. The ethnic stereotypes that the Anglo kids held about Carlos and that Carlos held about the Anglo kids were in the process of changing dramatically. School became a more humane, exciting place, and absenteeism declined.

Within a few weeks, the success of the jigsaw was obvious. Teachers told us how pleased they were at the change in atmosphere. Visitors expressed amazement at the transformation. Needless to say, this was exciting to my graduate students and me. But as scientists, we needed more objective evidence — and we got it. Because we had randomly introduced the jigsaw intervention into some classrooms and not others, we were able to compare the progress of the jigsaw students with that of students in traditional classrooms. After only eight weeks there were clear differences, even though students spent only a small portion of their time in jigsaw groups.

When tested objectively, jigsaw students expressed less prejudice and negative stereotyping, were more self-confident, and reported liking school better than children in traditional classrooms. Moreover, children in jigsaw classes were absent less often than were other students, and they showed greater academic improvement; poorer students in the jigsaw classroom scored significantly higher on objective exams than comparable students in traditional classes, while the good students continued to do as well as the good students in traditional classes.


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DEFINING CHARACTERISTICS
Olweus also recommends that for a bullying intervention program to be successful, schools must do the following:
• Place primary responsibility for solving the problem with the adults at school rather than with parents or students.
• Project a clear moral stand against bullying.
• Include both systems-oriented and individual-oriented components.
• Set long-term and short-term goals.
• Target the entire school population, not just a few problem students.
• Make the program a permanent component of the school environment, not a temporary remedial program.
• Implement strategies that have a positive effect on students and on the school climate that go beyond the problem of bullying.

Bullying behavior, according to Dr. Olweus, is evident even in preschool and the problem peaks in middle school. It's important, therefore, that bullying intervention strategies be implemented as early as possible. Even if only a small number of students are directly involved, Olweus points out, every student who witnesses bullying is affected in some way. Even students who initially sympathize with or defend victims may eventually come to view bullying as acceptable if responsible adults fail to say otherwise. Over time, ignoring — or being ignorant of — bullying behavior will result in a social climate that fosters bullying, fighting, truancy, and other social and learning problems in all students.

“The school,” said Olweus, “has a responsibility to stop bullying behavior and create a safe learning environment for all students.”


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The large majority of books for young children introduce problem-solving. Slightly more than half of those dealing with a conflict or problem involved opposition to the resolution of the problem. Most books for young children are socializing them as problem solvers. This has been the case for some time — the books on the list were published throughout the last century.

ENVISIONING RESOLUTION
As children read about little engines or teddy bears with difficulties, they are seeing the world as a place where problems and conflicts exist. By reading to children, adults socialize them to accept the reality of such conflict and are able to guide them through the process of recognizing abstract concepts such as opposition and resolution. This allows young children to envision nonviolent outcomes.

We know our social reality is one in which children are faced with obstacles, frustrations and violence at early ages. It is critical for the readers, whether teachers, parents or siblings to teach young children necessary life skills at every possible opportunity. Reading is one of the best and most accessible modalities for the socialization of many concepts, among them conflict and appropriate conflict resolution skills.

For more information, contact jfields@colacoll.edu.
Reducing the Impact of TV Violence

by Rachel Ozretich, M.S., CFLE, Extension Parent Education Coordinator; Larry Rosenhoetter, Ph.D., Associate Professor Research; and Sharon Rosenhoetter, Ph.D., Associate Professor, Department of Human Development and Family Sciences, Oregon State University

An extensive body of research has convinced many major health and education organizations that children’s viewing of television violence is a significant causal factor contributing to child and youth aggression in the U.S., both concurrently and longitudinally. The American Academy of Pediatrics has called for media literacy education as a possible method of ameliorating this serious public health problem. In an effort to implement and study the effects of such a strategy, our project, Reducing Early Violence: Education Works (REViEW), has completed the first year of a school-based violence prevention study with major funding from the Northwest Health Foundation.

REViEW developed and delivered a classroom curriculum and parent newsletters for first through fourth-grade students focused on achieving three main outcomes:

- Reduced time spent by children watching television.
- Reduced violent content and increased prosocial content of children’s viewing.
- Increased children’s critical thinking skills and knowledge to increase children’s resistance to the effects of violence seen on television.

We tried to use simple, clear words that primary school age children would understand. The children were encouraged to be TV detectives and look for clues as they were shown the brief scenes or clips from TV programs we used to illustrate concepts. We also used songs, chants, skits, artwork, charts, games, sign language, puppets, and guest speakers to enhance children’s learning. A total of 32 lessons, each 20 to 30 minutes in length, were developed and taught by project personnel, twice a week for 20 lessons, and then once a week. Our approach involved beginning with a few basic ideas and building on those, revisiting the most important concepts many times. These are the concepts we stressed:

All TV teaches. The idea that children learn from everything they see on television and in movies seemed to be a new one for teachers and parents as well as children. We demonstrated that young children learn from TV by watching and copying.

Real versus not real. This concept was the basic idea that some TV programs show or reflect real life and other programs are not real. It can be very difficult for children to tell the difference. Some special effects methods were explored.

Who is your hero? The children explored their ideas of what makes a hero and then discussed whether some TV characters are heroes.

Four types of TV clips. Because many TV programs are a combination of different types of clips, we taught children to think about specific clips as well as programs. Friendly TV included clips where characters are friendly to others or helped others, rather than hurting others. Hurting TV included clips where characters hurt others, either by hurting their bodies or hurting their feelings. Showing TV was defined as showing real life, such as soccer games, concerts, nature shows, and news. Selling TV included all clips intended to convince viewers to buy something.

Problem-solving. The children expressed bewilderment about how the TV characters could solve problems without using violence. We responded that most people in real life solve their problems using their good thinking skills rather than violence, and taught the children five easy steps for problem solving: stop, talk, listen, think, and choose.

Making choices. From the beginning, we emphasized that — within the limits set by their parents — children have the responsibility to make good choices about what TV programs they will watch and what they will learn from those programs. This is why they need to learn to be good TV detectives and think about what they might learn from what they see on TV.

Talking back to the TV. This was a strategy for children to resist negative lessons from TV.

TV diet. The children were encouraged to think about how much healthier it was for them to spend their free time playing actively and reading rather than watching TV or playing video games. Many of the children volunteered to show us the proportion of their free time spent watching TV, using a pie chart. We talked about the other activities they did with their free time and how these were much more healthful for them than watching TV.

Nutritious and junk TV. We reviewed with the children the concepts of nutritious and junk food. Then we applied these concepts to our focus on TV and children’s health. The children classified a number of programs as nutritious or junk TV according to how much hurting TV they contained. We urged children to have more nutritious TV and less junk TV in their TV diets.

Why so much violence. The children asked us why there was so much violence on TV if it wasn’t healthy for children to watch it. We pointed out that TV producers use a lot of violence because it is one of the most effective ways to grab our attention. Producers want to grab our attention to get us to watch the program and its advertisements because that is how they make money. In the process, violence is often glamorized and its real life effects sanitized.

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REDUCING THE IMPACT
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What police officers really do. A police officer visited each classroom to discuss with the children the differences between what police officers really do and what children see police officers doing on TV. The officers pointed out how rarely they had ever had to draw their guns, or chase people to arrest them. They said they had to use their good thinking skills and social skills far more often then they ever had to use their fighting skills.

Children realized that through TV they had false knowledge about police work.

Preliminary analyses of children's TV viewing measures have been encouraging. Anecdotal evidence from a telephone survey of their parents has also reflected the projects impact.

Future honing and adaptation of the lessons in more classrooms will contribute to developing a curriculum usable by primary classroom teachers and 4-H or other school age youth leaders.

For more information, contact ozretich@orst.edu.

The International Experience in Building Suicide Prevention Strategies

In May 2001, Surgeon General David Satcher joined a coalition of public and private groups to unveil a national blueprint of goals and objectives to prevent suicide, the eighth leading cause of death in the United States. The goals and objectives are part of an ongoing effort to develop a National Strategy for Suicide Prevention.

In establishing this strategy, the United States drew on the experience of a few nations that have already created a national strategy for suicide prevention that is both comprehensive and multifaceted. The U.S. strategy also incorporates the recommendations of the World Health Organization's 1996 publication Prevention of Suicide: Guidelines for the Formulation and Implementation of National Strategies.

The following excerpt is taken from the introduction to the Surgeon General's National Strategy for Suicide Prevention: Goals and Objectives for Action.

The United States has joined the small number of nations that have created a national strategy for the prevention of suicide that is both comprehensive and multifaceted and in which there is a planned integration among different prevention components.

The first national suicide prevention strategy was initiated in Finland in 1986; the Finnish initiative has provided tremendous amounts of information that have been helpful in the creation of the national suicide prevention strategies of other countries, including the U.S. The U.S. strategy also benefits from the national suicide prevention efforts of Norway, Sweden, New Zealand, Australia, the United Kingdom, The Netherlands, Estonia, and France.

COMMON ELEMENTS

National strategies for suicide prevention share a number of common elements. These include a focus on educational settings as a site of intervention; attempts to change the portrayal of suicidal behavior and mental illness in the media; efforts to increase the detection and treatment of depression and other mental illnesses, including alcohol and substance use disorders; an emphasis on reducing the stigma associated with being a consumer of mental health or substance abuse services; strategies designed to improve access to services; promotion of effective clinical practices; and efforts to reduce access to lethal means of suicide.

Every country with a national suicide prevention strategy, however, includes all of these elements in its strategy, although all current strategies do include plans for increasing research on suicide and suicide prevention.

Even when nations address the same issue in their strategies, they frequently do so in different ways. For instance, interventions after a suicide has occurred (called postvention) aimed at reducing the impact of suicide on surviving friends and relatives have been proposed by all countries. However, approaches to postvention vary across countries. For example, Norway has proposed outreach services to relatives and friends of those who died by suicide in the community, while other countries that have focused on youth suicide prevention, such as New Zealand, suggest specific postvention efforts to minimize suicide contagion in school settings.

NEED FOR COMMUNITY INVOLVEMENT

One important difference among nations with respect to their national strategies is the extent to which the community is involved in the creation and implementation of the initiative. The UN/WHO guidelines recommend that no single agency, organization, or governmental body have sole responsibility for suicide prevention. In this regard, a particular strength of the Finnish strategy has been strong community involvement in the
SUICIDE continued from page F19

process of developing and implementing its strategy. Other countries with different resources have needed to rely heavily on government agencies to implement their strategies. The development of the National Strategy in the U.S. has been led by the Federal government, but in collaboration with numerous non-governmental organizations and with advice from hundreds of interested, individual citizens.

National suicide prevention strategies vary in terms of their target audiences. The National Strategy is aimed at the entire population of the U.S. and in this respect is similar to the strategies of Norway, Sweden, and Finland. In contrast, New Zealand and Australia focus exclusively on youth suicide. Finland has also targeted young men for special attention, given their increasing rate of suicide in that country.

THE NEED FOR COHERENCE
The UN/WHO guidelines recommend that suicide prevention programs be coherent in their approach. Nations take different approaches to ensuring such coherence. For example, the Finnish initiative commenced with a national research study on suicide, using the psychological autopsy method. Data derived from this research were used to help in the development and implementation of suicide prevention programs. In contrast, the New Zealand strategy was guided by a literature review born out of a workshop that included representation from both governmental and non-governmental organizations, including advocacy groups. The development of the U.S. strategy has been based on the public health model, which has proven so effective for approaching other health problems.

IMPORTANCE OF EVALUATION
The extent to which evaluation is a central component of a nation's suicide prevention strategy varies considerably. The Finnish government commissioned both an internal and external evaluation to assess the outcome of the strategy. Norway has plans for an external evaluation of its strategy, and Australia requires evaluation for all funded demonstration projects. New Zealand agencies are self-monitoring; in addition, a small steering group convenes annually and reports to the Ministers of Health and Youth Affairs on the progress of the strategy. As recommended, the UN/WHO guidelines, the U.S. strategy includes specific objectives with the potential for measurement. Provision is also made for the evaluation of specific preventive interventions.


PROTECTIVE FACTORS FOR SUICIDE
- Effective clinical care for mental, physical, and substance use disorders
- Easy access to a variety of clinical interventions and support for help-seeking
- Restricted access to highly lethal means of suicide
- Strong connections to family and community support
- Support through ongoing medical and mental health care relationships
- Skills in problem solving, conflict resolution, and nonviolent handling of disputes
- Cultural and religious beliefs that discourage suicide and support self-preservation

RISK FACTORS FOR SUICIDE
Biopsychosocial Risk Factors
- Mental disorders, particularly mood disorders, schizophrenia, anxiety disorders, and certain personality disorders
- Alcohol and other substance use disorders
- Hopelessness

Environmental Risk Factors
- Job or financial loss
- Relational or social loss
- Easy access to lethal means
- Local clusters of suicide that have a contagious influence

Socialcultural Risk Factors
- Lack of social support and sense of isolation
- Stigma associated with help-seeking behavior
- Barriers to accessing health care, especially mental-health and substance-abuse treatment
- Certain cultural and religious beliefs (for instance, the belief that suicide is a noble resolution of a personal dilemma)
- Exposure to, including through the media, and influence of others who have died by suicide

EFFICIENT SUICIDE PREVENTION PROGRAMS
- Clearly identify the population that will benefit from each intervention and from the program as a whole;
- Specify the outcomes to be achieved;
- Are comprised of interventions known to effect a particular outcome;
- Coordinate and organize the community to focus on the issue, and
- Are based on a clear plan with goals, objectives and implementation steps.

Violence and the Use of Geographic Information Systems: Hotspot Identification and the Reallocation of Services

by Bruce K. Bayley, M.S., Doctoral Candidate, Department of Family and Human Development, Utah State University; and Brent C. Miller, Ph.D., Interim Vice President for Research, Utah State University

Violence, in any form, requires both proactive and reactive courses of action. At its root, an act of violence always contains four main components: 1) a perpetrator, 2) a victim, 3) a time, and 4) a location.

Traditionally, social scientists have focused on the first three components, while using the forth, location, purely as a means of counting incidents (for example, the number of domestic assaults in a certain town). Now we can add an exciting and visual dimension to these analyses, through the use of a technology that is relatively unknown to most of those working in the family sciences — geographic information systems.

Geographic information systems (GIS) integrate computerized cartography with tabular space-time data to produce an “intelligent” or thematic map. Information is often “layered” on top of other data to create “outputs,” or maps, similar to those generated by computer-assisted cartography (CAC) and computer-aided drafting (CAD). A GIS, however, also incorporates analytical capability lacking in both CAC and CAD systems. This allows researchers not only to replace the tried-and-true pin maps of yesteryear, but also to produce active real-time visual displays of information.

Using a single GIS output, even a lay person can, in a glance, visualize and interpret a vast amount of data about people, areas, and events that might otherwise be lost in a maze of charts, tables, and graphs.

While there are a number of ways a GIS can be used to study violence in our society, we will focus only on the basic functions of one of the more popular techniques: hotspot mapping and analysis.

A single GIS map allows the viewer to interpret a vast amount of data that might otherwise be lost in a maze of charts, tables, and graphs.

In a very broad sense, a hotspot is generally defined as a place — such as a county or neighborhood — where a certain kind of crime — such as assault or rape — occurs so frequently that it is predictable over a one-year period.

We could also add a third layer that would show, for example, the location of public schools in the city. Now we have a map that indicates which hotspots are close to schools. This could be used to determine which schools should take measures to protect students, both in and out of school.

Similarly, a GIS could be created that shows locations with the most police calls for domestic violence as well as the locations of existing shelters for battered women. This would help organizations that are conducting needs assessments to determine where they should place their next facility.

Hotspots in Time and Space

We must also remember that hotspots occur in both time and space. Space is an easily definable construct, identifiable through such reference systems as x - y coordinates (longitude and latitude). Time, on the other hand, can be more elusive. When measuring incidents of violence, time can be represented as moments (when did the event occur and where?), duration (how long did a hotspot exist?), structured time (standardized time, such as 6 a.m. to noon, or seasonal changes), and distance in time (how many minutes or hours in travel time is a hot spot located from a certain area?).

An example of the relationship between time and space can been seen in the area of school-related violence. Let’s say a researcher is interested in...
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identifying violent areas that children have to walk through to get to a particular school. After discovering that most children who walk to the school live anywhere from one minute to fifteen minutes away, the researcher would be able to analyze the hotspot areas based upon space (the location of the school) and distance in time (how many hotspots are located within 15-minutes walking time).

Used correctly, a GIS can provide visual representations of where a problem is occurring. It can also be used to coordinate or reallocate the services that address those problems. Police patrols in hotspot areas can be increased, for example, and community watch organizations will be able to use their resources more effectively. Temporal fluctuations, such as seasonal periods or special events, can also be identified in an effort to understand not only where services might best be utilized, but also when.

FORECASTING FUTURE PROBLEMS

From a proactive standpoint, hotspot mapping and analyses can be used to forecast where problems are most likely to occur. Say, for example, a researcher is investigating multiple levels of violence and believes that certain social and environmental processes are contributing factors. To test this theory, the researcher might produce a hotspot map using crime data from a target area. Additional information, such as population change, socioeconomic status, the age of housing, number of school-age children, rate of unemployment, locations of bars and nightclubs, and area temperature can be added to the analysis of multiple hotspot areas in an effort to identify significant indicators of violence. Once identified, a predictive model can then be constructed to help city officials recognize the possible locations of future problems.

The future of GIS in the social sciences is limited only by one’s imagination. The technique of hotspot mapping and analysis is just one of many geographic tools available to researchers who investigate violence and its prevention.

Another technique on the horizon is geographic profiling, an investigative methodology that connects a series of criminal events in an effort to predict where an offender might live. This is useful in a series of violent acts where the same person is suspected. Also in development are advanced forecasting techniques based on a type of gaming simulation known as the neural model. These techniques are used to forecast expected areas of violence.

According to the old adage, “a picture is worth a thousand words.” The use of GIS and other graphic tools demonstrates that this is especially true in the study of violence and its prevention.

For more information, contact b.bayley@usu.edu.

Chill Skills: An Anger Management Approach to Violence

by Deborah J. Thomason, Ed.D., CFLE, Associate Professor and Extension Family and Youth Development Specialist; and Brenda J. Thames Ed.D., CFCS, Extension Program Specialist, Cooperative Extension Service, Clemson University

Chill Skills: An Anger Management Approach to Violence is an experientially based curriculum model developed for county extension faculty. The model was developed in response to the current social climate and to complement a previous extension program effort Conflict Resolution. It approaches anger management for youth and adults at developmentally appropriate levels.

The focus of the program is to provide youth and adults with the coping and communication skills that enable them to effectively
- deal with their anger and to minimize the negative effects of conflict;
- understand that anger is a normal human feeling;
- recognize the difference between angry feelings and angry behavior;
- identify what triggers their anger;
- become familiar with their physical anger warning signs;
- consider the consequences of angry behavior;
- develop constructive and effective ways of expressing and handling their anger; and
- respond effectively and appropriately to the anger of others.

Anger is an internal reaction, which an individual learns to name, to an external event. Anger involves complex feelings. It is made up of different reactions that cause us to be irritated, annoyed, furious, frustrated, enraged, and even hurt. It can prevent happiness and productivity in our personal and professional lives.

Our response to anger involves our body, our behaviors, and our thought process. The events that cause us to feel angry have no emotional value in themselves—it is how we appraise these events that causes a shift in our physical well-being. Anger can be powerful, and that very power can lead to our greatest productivity if it is well-managed. When we approach anger in a positive and realistic way, we will experience greater control and happiness.

HANDLING ANGER

When people handle their anger in a healthy way, they
- treat anger as a normal part of life;
- use anger as a signal that there are problems to be addressed;
- take actions when necessary, but only after careful thought;
- express their anger in moderation, without losing control;
- use anger to solve problems, not just to express their feelings;
- state their anger clearly, in ways that others can understand; and
- solve the problem and let go of the anger.

These are the forms of negative thinking that can contribute to anger and change in mood:
- Exaggeration occurs when you magnify the importance of problems or minimize the good things in your life.
- Mind-reading means jumping to conclusions and interpreting things in a negative manner.
- Black and white thinking is an all-or-nothing attitude.
- Dwelling occurs when you pick out a negative situation and obsess on it.
- Discounting happens when you overlook the positive and never give yourself or others credit for a job well-done.
- Blaming adds resentment to relationships and fuels internal anger.

Your body gives you signals to tell you how it feels when you become angry. Tension is the first stage in the anger process. Tension is the residue that is left when you cannot do something about your problems. After awhile, tension will let you know that you are wearing down, and physical or emotional illness is often the result. Escalated anger brings on physical effects that include increased blood glucose, heart rate, and blood pressure; shallow and difficult breathing; back and head pain; and sweating.

Anger has mental and emotional effects, too. The mental effects include difficulty in concentrating, poor performance, sleeplessness, and lack of focus. These can lead to emotional problems such as depression, fatigue, irritability, nervousness, and worry.

Some behavioral effects of anger are eating disorders, drug use, alcoholism, smoking, restlessness, impulsiveness, compulsiveness, withdrawal, and isolation. Organizational

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CHILL SKILLS continued from page F23

effects may be job burnout, dissatisfaction, poor relationships, job turnover, and accidents.

POSSITIVE AND NEGATIVE EFFECTS
Anger can also be used in a productive, positive way. “Good anger” can:
• energize,
• release tension in a constructive way,
• provide information,
• help you communicate when you are upset, and
• resolve hidden conflict.

But if it’s used inappropriately, anger produces negative results. “Bad anger” can:
• control your thoughts,
• disrupt your life,
• cause pain to self and others,
• ruin relationships,
• cause health problems,
• leave a negative impression with others, and
• cause other emotional problems.

If you know what provokes you and why you get angry, you can be better prepared to deal with situations. Create techniques in advance for managing your “hot buttons.” Learn how to avoid certain situations that trigger anger. Practice anger management skills that will build up your tolerance for angry situations.

WHY WE GET ANGRY
Some common ways to categorize situations that make people angry:
• Injustice can make you feel that you have been treated unfairly.
• Hurt or abuse — physical or verbal — angers us.
• Frustration occurs when we cannot get something done our way or when someone disappoints us.
• Annoyances are life’s little irritations. When they begin to stack up, we are left feeling out of control.

Increasing awareness of what triggers anger in people can help them develop skills to manage their behavior and control their anger.

For more information, contact dthmsri@clemson.edu or bthames@clemson.edu.

New Action Guide Offers Ways to Prevent Underage Use of Alcohol

Although consumption of alcoholic beverages is illegal for those under 21 years of age, over 10 million drinkers in the U.S. are underage. Young people who drink are more likely to be victims of violent crime, have serious problems in school, be involved in drinking-related traffic accidents, and develop alcohol dependence.

To help community leaders address the challenge of underage drinking, the Substance Abuse and Mental Health Services Administration’s (SAMHSA) Center for Substance Abuse Prevention (CSAP) has developed the Underage Drinking Prevention Action Guide and Planner.

The Guide is a monthly planner that can be used as personal calendar or to schedule and track alcohol abuse prevention activities. For each month a theme is suggested and a call to action provides ideas for activities appropriate for that month’s theme. Themes include alcohol and family life, alcohol and popular culture, and alcohol and the college experience. Activities are suggested for communities, businesses, social events, media, parents, and youth. Also included for each month are facts about alcohol abuse that can be incorporated into speeches, letters, brochures, or public service announcements.

The Guide includes information on liquor laws, factors that affect underage drinking, raising public awareness about underage drinking issues, and creating effective community networks. Sample letters, press releases, speeches, and other materials that can be easily adapted to meet local needs are also provided.

The Guide is free. To order it, call (800) 729-6686. Or download it from www.samhsa.gov. Click on CSAP.