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Community Collaboration in New York City:

Charting the Course for a Neighborhood-Based Safety Net

An assessment of the
NYC Administration for Children's Services'
Neighborhood Networks project

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EXECUTIVE SUMMARY

New York City’s recent history is rich with stories of neighborhoods pulling together for a common purpose. In Hunts Point in the South Bronx in 1976, local people stood side by side to prevent bulldozers from demolishing the partially abandoned tenements that lined their blocks. They believed in their neighborhood and the city at a time when even their own government had doubts—and in taking their beliefs to the streets they hatched the community housing movement that gave new life to much of the South Bronx, Central Brooklyn and uptown Manhattan.

In the 1980s and 1990s, neighborhood associations faced down drug dealers and held police precinct commanders accountable for security failures. In Bushwick, Williamsburg, Washington Heights and the Northwest Bronx, young people and neighborhood activists helped overcome the nihilistic violence and hard drug markets that had locked down whole parts of these communities for years on end.

One legacy of the last 30 years of community action is the large number of grassroots as well as professionalized nonprofit organizations based in city neighborhoods, dedicated to assisting working class families and the poor, young and old, tenants and homeowners. Yet community organizations, even those in the same neighborhood, often find that collaboration with other groups can be extraordinarily difficult. Conflicts over turf, funding and organizational culture, as well as the politics of personality and differences of ideals and philosophy have all been factors in failed attempts to mesh the skills and resources of multiple organizations for the benefit of local residents.

Today, leaders of nonprofit groups and officials from the New York City Administration for Children’s Services (ACS) are confronting the challenge of community collaboration. ACS officials are trying to harness and streamline the power of the city’s family support programs—paid for by the government and managed under contract by nonprofit groups—by emphasizing the integration of services in neighborhoods and across organizations. Their experience has proven that, despite all the obstacles, organizations and institutions can indeed work together—sometimes.

The ACS project, called Neighborhood Networks, attempts to build an infrastructure for collaboration among organizations that work with children and families. Its goals include improving both the quality and accessibility of social services for families while reducing the number of children entering foster care. Currently, there are 25 such networks, each in its own service planning area (SPA), which in most cases is a combination of two or more of the city’s community board districts.

The Neighborhood Networks are one element of a larger reform of both policy and practice that emphasizes prevention over more conclusive, last-ditch interventions—such as the removal of a child to foster care.

These networks may become an increasingly important element in public social policy because of the growing need for effective, wrap-around services to stabilize and strengthen families. The number of New York City children entering foster care each year has dropped by nearly half since 1998, and the total number of children in foster care declined from 41,000 in 1998 to 22,000 in 2004.¹ With the city now making a more intensive effort than in years past to train investigators to properly identify whether or not children are safe in their homes, an increasing number of families are being sent by ACS to community-based family support programs. Commissioner John Mattingly of ACS has indicated he expects the networks to play key roles in child protective services as well as family support.

This report examines lessons learned by participants in the network project, and reviews some of the choices that participants and policy makers may make in the coming months and years.

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Officials are trying to harness and streamline the power of the city's family support programs.

Our purpose is to share some of the lessons and insights of those closest to the project—on the ground, in communities—and thus to advance innovative efforts to achieve a few very specific goals, including:

- Preventing unnecessary placements of children in foster care;
- Preventing unnecessary reports of suspected abuse or neglect to the State Central Register hotline;
- Promoting wider access to—and better understanding of—community-based family support programs that can help parents and families deal with serious problems;
- Creating durable collaborative networks within communities, and across nonprofit and government agencies, in order to improve the standard of living of working-class and low-income New Yorkers.

In our research we found that in the few neighborhoods where ACS-sponsored networks have developed very clear, shared objectives, enlisted motivated participants, and cultivated the involvement of both front-line and top-level staff, there have been substantial benefits to parents and children. In others, the benefits have been much more limited.

Findings detailed in this report include:

- In many networks, there is a great need for the clear definition of objectives, vision and purpose. Among our interview subjects, only ACS staff stated a clear vision of the true purpose of the collaborative project.
- Participants would like greater involvement of high-level staff, including ACS and nonprofit agency executive directors, in guiding the networks.
- Participants would like more active involvement of ACS field offices in the networks.
- Schools are mostly absent from the networks' efforts, despite their integral role in child development and protection. This is the most often-stated frustration of the network participants we interviewed.
- Several networks are highly successful in improving relationships and sharing knowledge and resources, according to participants.
- Resources for the networking and planning efforts are scarce. Most preventive family support services have not received an increase in funding for several years and cannot afford to divert significant resources away from casework.
- Many networks would like more technical assistance and direct guidance from ACS in areas including strategic planning, vision development, ongoing community needs assessment and data analysis, as well as grant writing.
- Networks would like to leverage the power of local elected officials, but need support in this effort.

LESSONS AND GOALS

Neighborhood Networks have the potential to play a major role in strengthening the community-based safety net for families. They can provide a neighborhood-based infrastructure for integrating and coordinating social services among government agencies and nonprofit organizations.

As this report makes clear, recent history is filled with attempts in New York and elsewhere to link and coordinate programs for families and children. Some have succeeded, others not. In many cases, valuable lessons have been learned.

The current commissioner of the city's Administration for Children's Services, John Mattingly, plans to soon begin pressing the networks to take on new, very specific responsibilities related to child protection and family support. These assignments from ACS headquarters could give shape to the work of several networks, and could thoroughly refocus the work of others, possibly narrowing their short-term mission (see page 12).

Through our survey of network participants, our reporting on ACS strategic planning, and our review of neighborhood safety net projects in other cities, we draw the following lessons that are immediately relevant to the effort in New York City:

- **Success demands clarity:** The goals and objectives of each neighborhood network must be clearly defined, and must guide the strategic planning and development of projects and programs.
- **Integration requires participation:** Authorities with leverage—at ACS, City Hall, the Department of Education, the Human Resources Administration and elsewhere—must demand the participation of leadership and staff from public schools and city field offices in network activities and planning. The routine participation of government institutions increases the likelihood that nonprofit partners will find true value in the collaboration.
- **The entire network enterprise depends on committed leadership:** If nonprofit executive directors and field office directors don't actively support the effort to coordinate and integrate services, then neither administrative changes nor monthly meetings will have the desired impact.
- **There should be incentives for participation and active leadership.** Currently, the preventive family support agencies at the center of the network projects are overstretched. Instead, ACS and other city agencies should carry a larger share of the workload related to service integration, as do public agencies in other states and cities. Or else, they should more effectively share resources with their nonprofit collaborators and credit them for their work in city contract performance and outcome measurements.
- **Effective neighborhood-based family support requires sufficient programs of high quality.** Over time, the entire human services sector and city government need to build better measures of quality for family support and other community-based social services. And the city must reinvest in sufficient services for neighborhoods with many needs.

Integrating and coordinating services can speed up referrals, improve access and help families receive the supports they need to remain stable and keep their children healthy and thriving. A stronger neighborhood-based safety net that effectively meshes public and nonprofit agencies can reduce extreme poverty—and help keep children safe.

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INTRODUCTION

New York City's government has made multiple attempts over the last four decades to improve the coordination of city-funded social programs so that people would receive the services they truly need, when they need them.

City Hall or mayor-appointed commissions have been the lead actors in most of these failed exercises. Many involved the wholesale restructuring of city agencies. The most notorious was the 1966 consolidation of nearly all of the city's social welfare programs within one super-agency, the Human Resources Administration (HRA), under Mayor John Lindsay. Its creators mistakenly believed that by housing human services programs under one umbrella and one commissioner they could overcome all the problems that had prevented cross-agency collaboration in the past. These planners failed to account for the massive systemic barriers that stood in the way of responsive, individualized services for people in need: entrenched bureaucratic traditions, categorical funding streams, inflexible union rules and layer upon layer of administrative structures.²

Mayoral administrations that followed whittled away at this Lindsay-era consolidation. Then, in the mid-1990s, amid crises and scandals in child protection, homeless services and child care, Mayor Rudy Giuliani broke apart what was left of the human services super-agency into smaller specialized government bureaucracies—including the Administration for Children's Services (ACS), which was made responsible for foster care, the prevention and investigation of child abuse and neglect, and the management of day care services, among other things.

While the breakup of HRA did not decentralize management and power directly into the neighborhoods, it did open up new opportunities for community-based collaboration. In December 1996, after prodding from State Assemblyman Roger Green, ACS officials announced a plan to reorganize foster care and preventive services into community-based networks. One of their objectives was to end the placement of children in foster homes far away from their birth parents, a practice that had inhibited parent-child visits and slowed family reunification. Another was to stop forcing parents to travel from one end of the city to the other simply to receive basic support services, like counseling, parenting skills classes and case management.³

Beginning in 1999, each child welfare contract issued in the Bronx—and in 2000 throughout the rest of the city—included new requirements that, taken together, defined the new ACS neighborhood-based services initiative.⁴ ACS required that nonprofit organizations providing foster care or family support services must each specialize in a specific neighborhood or set of neighborhoods. These agencies had to recruit new foster homes within their newly assigned districts and establish formal relationships with other local organizations, including drug treatment and mental health providers, health clinics, housing programs and others.

This is the shape of ACS-funded services today. And there is a logic to the arrangement. Most of New York City's social service programs have long been delivered at the neighborhood level, sometimes by government agencies but usually by nonprofit organizations under contract with the city or state. These include some foster care services; family support casework and counseling centers; health and mental health clinics; homeless shelters; youth development and recreation programs; drug and alcohol abuse treatment centers; settlement houses; legal assistance centers; tenant organizing projects; senior centers and more.

The Neighborhood Networks project builds on this existing structure of neighborhood-based nonprofits. It is an effort to facilitate the community-based decentralization and integration of preventive social services by tapping many of the resources already rooted at the local level.

The networks have created new relationships between and among staff at ACS and the nonprofit agencies that have ACS contracts to provide family support, as well as other human services organizations. In our interviews with participants we found that these relationships

Most of New York City's social service programs have long been delivered at the neighborhood level, usually by nonprofit organizations.

have sped up case referrals, improved participants' familiarity with local programs and even strengthened the level of trust across agencies.

The networks began their work several years ago, each of them conducting a community assessment exercise, called Matching Needs and Services, which was essentially a collaborative review of cases seen as representative of those handled by family support providers in the neighborhood. While ACS guided that project, the city then allowed the networks to develop their own agendas.

In a small number of communities, the networks have followed through by designing and implementing targeted strategies for reducing the number of children entering foster care or being reported for abuse and neglect. In these neighborhoods, the networks have branched out well beyond ACS-funded agencies to collaborate with other sectors.

Analysts at ACS have gathered and presented data to local leaders that reveal valuable nuggets of information, such as:

- which schools, homeless shelters and other institutions are the sources of the highest numbers of reports to the child abuse and neglect hotline;
- the accuracy of these reports;
- the reasons cited for the suspected neglect or abuse;
- and the census tracts from which the highest number of children enter foster care.

(continued on page 7)

SOURCES OF ABUSE AND NEGLECT REPORTS 2003

	New York City	Bedford-Stuyvesant
School Personnel indication rate	14,623 25%	422 22%
Health care personnel indication rate	4,062 34%	101 44%
Law Enforcement indication rate	5,928 37%	196 51%
Social Services indication rate	10,684 33%	378 41%
Family members or friends indication rate	5,822 20%	240 19%
Others indication rate	9,917 18%	411 15%
Total Reports indication rate	51,036 34%	1,748 29%

Source: Administration for Children's Services

Citywide, nearly one of every three reports of child abuse or neglect is made by a teacher, guidance counselor or other school staff. About one in twelve is made by medical personnel. As these data show, the accuracy of these reports varies dramatically based on the source. (The "indication rate" is the rate at which reports have led child protective investigators to further evidence of abuse or neglect.) For example, reports from schools and family members are far less likely to be verified as abuse or neglect by investigators than are reports from law enforcement, social services or health care professionals.

There is variation across neighborhoods, as well. As the data from Bedford-Stuyvesant illustrate, medical personnel and law enforcement are especially accurate in their reports in that community, while schools are much less so. Such data can help guide prevention strategies for the Neighborhood Networks.

WHY INTEGRATE SERVICES?

In New York's low-income neighborhoods, any one family may be involved with programs or services provided by three, four or more nonprofit organizations and government agencies at any given time. And each organization, in turn, routinely encounters families that could benefit greatly from the expertise of a local agency working in another field. But these organizations aren't necessarily in contact with one another—or even aware of the other services available nearby.

School teachers, for example, often see early warning signs of a family in crisis. Yet their capacity to do anything about the problem, short of making a report of suspected child abuse or neglect to the state hotline, varies drastically from school to school. Too often, schools have no relationship with social service organizations in their community that could readily reach out and lend a valuable hand.

By the same token, the demands of one government agency or city-funded nonprofit can conflict with the orders of another. For example, a child welfare case manager may press a mother to avoid all contact with a violent former spouse (and parent of her children), even as a judge mandates that she work together with this same man to facilitate visits with the children. Or the city welfare agency may demand she attend a jobs program full-time even as she is required by another city agency to locate a new apartment in order to reunify with her children in foster care.

Much of this could be overcome if agencies and institutions were consistently aware of one another's services, programs and restrictions—and of the demands each places on individual families.

By integrating and coordinating services, agencies can provide the specific supports people need—when they need them—not weeks or months down the road. They can be more responsive to each family's unique needs, and avoid duplication. They can practice a family-centered approach to social services, getting out of their agency-centered silos and working with family members to determine an individualized, flexible plan for providing support.

Research in a variety of fields reflects this common sense. A few examples:

- Women of similar characteristics who do not receive prenatal or postnatal care have worse health outcomes than those who do, according to a federal study. The same is true of their children. The solutions? Better access to health care, nutrition counseling and mental health services, coordinated with more effective outreach that better identifies at-risk pregnant women.¹
- In a 2000 study, researchers found that nearly one-quarter of current and former welfare recipients in Chicago suffered from depression, and about two-thirds of those with depression were receiving no mental health care. The solution? Greater integration of welfare program administration, mental health services, job skills programs and other services, in order to detect and treat depression sooner.²
- The United States could reduce extreme poverty by 70 percent and poverty by 20 percent if public assistance and other benefits—including SSI, Food Stamps and the Earned Income Tax Credit—were provided to all families who are eligible, according to Urban Institute scholars. Possible solutions? Improve access to the existing income safety net through better outreach, more family-friendly public welfare policies and alternative strategies that mesh the work of public and private sector organizations.³

The common theme is that broader access to appropriate, individualized supports and services can improve the quality of people's lives. By setting up a more welcoming, integrated entry point to human services, government and nonprofit organizations can do a better job providing the supports that people truly need.

Government officials have the power to push for and fund greater public access to quality services at the community level, and, in turn, strengthen families and create healthier neighborhoods.

¹ Rima Shore, "Kids Count Indicator Brief: Preventing Low Birthweight," The Annie E. Casey Foundation, July 2003.

² Dan Lewis, Bong Joo Lee, and Lisa Altenbernd, "Mental Health and Welfare Reform: What facilitates employment among those with depression?" Illinois Family Study Policy Brief No. 7, Northwestern University Institute for Policy Research, October 2002.

³ Sheila R. Zedlewski, Linda Giannarelli, Joyce Morton, and Laura Wheaton, "Extreme Poverty Rising, Existing Government Programs Could Do More," New Federalism National Survey of America's Families, Urban Institute, April 2002.

In Harlem, organizers have used the data to focus their work. They are canvassing public housing projects that have a high rate of children entering foster care and encouraging parents to take advantage of family support services and other programs. Social work interns have been placed in schools and homeless shelters to help coordinate referrals to services so that families will receive help before they reach a crisis and are reported to the hotline. And school counselors, teachers and administrators are learning about local social service groups that can intervene with a family—before mandated reporters feel compelled to pick up the phone and call for an investigation of suspected abuse or neglect.

In Bedford-Stuyvesant, the network helped win \$2.5 million in funding for the five-year development and implementation of a “continuum of care” for pregnant and new mothers and their children. The initiative is based on data that revealed an unusually high rate of infants from this community being placed in foster care.

Still, government investment in the Neighborhood Network project has been modest. The ACS office of neighborhood-based initiatives has 18 staff members, mainly providing logistical support and helping to coordinate network meetings and other events. Five of the networks have foundation-funded liaisons who work full-time with the co-chairs. These liaisons have worked for more than a year with a handful of networks in communities that generate a high number of children entering foster care, including Central Harlem, Jamaica, Bushwick and Brownsville-East New York. They are based at organizations in the neighborhoods, and the best of them are truly organizing communities of providers to be active, intelligent participants in the collaborative enterprise.

Still, much of the investment comes from the nonprofit agencies themselves, as required by their ACS contracts. On the foster care side of the system, the impact of the community-based strategy has been substantial. Today, three of every four children placed in foster care each year are placed in the borough in which they previously lived. About one in four is placed in a foster home in the same community district, up from fewer than one in ten just five years ago.⁵

Measuring the impact of the networks and integrated, community-based preventive services, however, has been more complicated. Some indicators of change are outlined in the accompanying sections of this report. But in the absence of specific outcome objectives among the various networks, we felt the best way to assess their progress was through journalistic observations and direct feedback from participants.

Community-Based Safety Nets in Other Cities

Integrated, neighborhood-based safety net systems that offer a wide array of support services close to people’s homes already exist in several American cities. During the last decade, the concept has moved ever closer toward critical mass.

There are two basic models:

- The one-stop community center where several agencies—both governmental and nonprofit—are jointly located and staff work with and among one another; and
- The network of organizations that share resources and cases but are not necessarily housed under one roof.

In Louisville, Kentucky, city and county authorities have set up several “Neighborhood Place” community centers in low-income neighborhoods. These centers house workers from several government and nonprofit agencies and counselors from city schools. The workers share offices, get to know one another and share advice and expertise on their cases.

Integrated, neighborhood-based safety net systems that offer a wide array of support services close to people's homes already exist in several cities.

Neighborhood Place Ujima in West Louisville, for example, has a staff of 54 men and women that includes:

- a team of state family support workers that provides access to public assistance and food stamps;
- a unit of state child protective investigators and case managers;
- a county human services team that provides short-term financial support and family intervention services;
- social workers from the county public school system;
- mental health counselors from a nonprofit organization;
- a county health department team that specializes in maternity care and child development;
- a substance abuse counselor from a nonprofit organization; and
- two community organizers.

One advantage of this design is the ease of collaboration on individual cases. Another is the rapid availability of the right kinds of services. Parents who come to the center seeking food stamps or financial assistance frequently receive other help as well. If a caseworker discovers a drug problem or is concerned about domestic violence, she can walk down the hall and consult with an expert. The substance abuse counselor can get to know the client, arrange for immediate treatment at an affiliated mental health and drug treatment provider, and stay as involved as he needs to be. The same is true for most of the other services available at Ujima.⁶

Locating front-line government child protection investigators in Ujima has increased the confidence of investigators in preventive family support services. After a report of abuse or neglect is called in, child protective services investigates the charge. If the family in question appears to have drug-related problems, for example, or is living in severe poverty, the unit can get rapid help from other agencies represented at Ujima.

Community planning and local control are also fundamental to the Neighborhood Place model. Each center has a community council of 21 members, responsible for guiding the programs. These councils include neighborhood residents as well as representatives from government agencies and nonprofit organizations. At Ujima, there is a separate steering committee, made up mostly of administrators and front-line workers from the agencies and organizations that staff the center.

The participants have sought to stay true to a short list of goals and objectives. The most concrete include improving school attendance, reducing rates of child abuse and neglect, and improving health outcomes. All of these are tracked using quantitative data. The more amorphous, overarching goals include working closely with communities and providing coordinated services.⁷

Meanwhile, in Missouri's largest city, the St. Louis Neighborhood Network has established a handful of community centers in two low-income zip code areas on the eastern edge of the city. As in Louisville, these neighborhood centers house front-line workers from a variety of agencies. But they are also the hubs of a well-organized network that brings local residents and front-line and management-level staff from government and nonprofit agencies to regular meetings in order to coordinate preventive services for families. The network functions as a forum for brokering resources and building relationships.

The St. Louis office of the state child welfare agency, the Division of Family Services, plays a leading role in the network. Many of its staff take part in the coordination of services and

community planning efforts to address child abuse and neglect. And, with so many workers based in the neighborhood hubs, front-line child protection specialists have gotten to know local parents in their day-to-day lives—rather than just in the crisis situations in which most child protective workers first encounter families. The workers also have a far better acquaintance with other nearby agencies and institutions than they had when they worked downtown, before the network existed.⁸

The Research: Lessons and Hurdles

Variations on these approaches to integrated services are in place in Kansas City, Cedar Rapids, Jacksonville and many other American cities, as well as in Canada and Great Britain. In the American examples, most cover relatively small geographic areas, similar to the community districts that define the catchments of New York’s Neighborhood Networks.

The common sense value of rooting government in communities seems obvious, but academic researchers have yet to measure their effectiveness in achieving better outcomes for families. There have been no controlled, quantitative studies of outcomes, although a number of researchers have looked at the hurdles that complicate coordination, and others have assessed lessons learned by front-line workers and managers.

Many of the lessons from these studies are highly relevant to New York’s Neighborhood Networks, as can be seen in the next section of this report. Most important are the lessons about changing day-to-day practice at the community level. For example, if the measure of success in the Neighborhood Networks is to be a significant reduction in foster care placements and in the rates of child abuse and neglect, then these networks have to be a vehicle for changing the ways in which front-line agency staffers and their supervisors do their work.

What follows are seven key lessons derived from this literature:

- **Interagency communication, coordination and planning must become a core element of the day-to-day work of government child protection workers and staff at nonprofit agencies, as well as in public schools, homeless shelters, public housing developments and other community institutions.**

Front-line workers establish the on-the-ground reality of any public social policy, because they are the point where the public meets the program. Policy as it is stated in a commissioner’s office or at City Hall often looks very different when it is put into action at the sign-in desk of a welfare office or community center. It is therefore the knowledge, culture and experience of front-line workers that matter most in shaping how policies are ultimately implemented.

If new initiatives—such as new modes of collaboration and network building—are imposed from above, they simply won’t take precedence among front-line workers, writes Jodi Sandfort of the McKnight Foundation in a recent assessment of Michigan’s welfare-to-work initiatives. The solution, she writes, is to alter the culture of the workday itself and fully incorporate any new initiative into the day-to-day life of the agency.⁹

- **Define values and goals first, then change practice.**

Change is inherently threatening to people who have long-established ways of doing their job. Underneath any systematic change in practice, writes Rutledge Hutson of the Center for Law and Social Policy, there has to be a clear recognition among staff and managers of the values that underpin the change. These workers need to understand and buy into the ultimate goals of the collaboration, such as creating a family support system that fully respects each family, recognizes their strengths, determines their needs and helps solve

The most important lessons learned from other cities’ experiences are those about changing day-to-day practice at the community level.

their problems in an individualized and effective way. Ideally, Hutson adds, this vision ought to emerge from the front-line workers and their supervisors—but that requires a great deal of work and support from the leadership of the collaborative.¹⁰

- **Goals and strategies should be well-defined and relatively narrow in scope.**

With a large number of stakeholders, organizations and institutions involved at the community level, it is easy for group planning efforts to get out of hand. This is a common affliction in community collaboratives that try to take a comprehensive approach. "On the positive side, collaboratives did 'cast their nets wide' and promoted activities to address a broad array of neighborhood issues—including safety, education, housing, social services, jobs, leadership, sanitation, neighbor relations, organizational development, and collective action," writes Robert Chaskin in an evaluation of a multi-city Ford Foundation initiative. "On the negative side, collaboratives for the most part were unable to organize these activities in ways that created clear synergies or helped to make further strategic decisions, and were unable to sustain support for much of what they started."¹¹

"Instrumental collaborative action, when it took place, has worked best among organizations when structured around specific tasks and through defined processes that clarified roles, expectations, and the division of labor among participants," Chaskin adds.

- **Leaders have to step up and take responsibility for change.**

"Of all the factors examined to date, strong leadership and a clear mission appear to be the most important in successful models" of service integration and coordination, report Thomas Corbett of the Institute for Research on Poverty and Jennifer Noyes of the Hudson Institute. In looking at a variety of collaboratives in different cities, they say that effective leadership appears to be more important than the specific administrative or management structures that innovators put into place.¹²

- **Don't assume that fiscal and legal barriers to integrated services are overwhelming.**

One of the most compelling lessons from the literature is that the fiscal and legal barriers to service integration and coordination may not be as substantial as many people think. Hutson argues that federal funding streams are more flexible than most local and state governments assume, and that eligibility requirements and program rules should not pose barriers to integrating services.¹³ (However, with the likely reauthorization of TANF in the 109th Congress, some of that program's well-known flexibility may become more limited.)

- **Confidentiality requirements need not be a barrier to change.**

Similarly, confidentiality on individual cases is usually raised as a major concern, but in most cases public agencies and their contractors are legally entitled to share case information among themselves, Hutson writes. Even so, the best way to overcome concerns about confidentiality is to obtain consent from families to share their information. And the issue should be addressed head-on by everyone involved, to increase comfort levels all around.

A more significant hurdle, Hutson adds, is figuring out how to allocate costs among agencies participating in the integrated services project, and in the many other logistical and management issues.

- **Incentives are needed to balance the costs of participating in the collaborative effort.**

Self-interest is a powerful force, not only for individuals but for organizations and institutions. What's in it for them, beyond moving closer to the core value of more effectively helping families? Chaskin writes that there should be funding for staff time devoted to the

planning and operations of the network effort, and there should be a clear way for credit to be shared openly and fairly across organizations. He adds that the collaborative should tie together clearly complementary services, so that gaps are filled and families are helped in ways that everyone involved can understand.¹⁴ And Hutson explains that government's and grantmakers' demands for outcome indicators have to accommodate—or even create incentives for—the work of integration and collaboration.¹⁵

Major Obstacles to the Community-Based Safety Net in NYC

I. Neighborhoods lack sufficient services.

A number of preventive service providers told us about the shortages in mental health services, after-school and tutoring programs, services for non-English speakers and—perhaps most daunting—affordable housing.

Even after community groups build networks and better relationships among themselves, these shortages make the work of prevention consistently difficult. "We know who to call," explained one preventive service caseworker. "Except the agencies that we're calling are either full, or they don't have services available, or they're in a different catchment area." Greater contact between various agencies, she said, seems to have done little to change that. In Brownsville and East New York, members of the local Neighborhood Network pooled resources to start an after-school program for youth because there weren't enough such programs in their neighborhood. But such joint efforts require far greater involvement in planning, fundraising and implementation than many network participants are able to commit.

Many longtime leaders of community-based organizations agree that shared knowledge can help improve efficiency. But efficiency is not enough.

John Sanchez runs the East Side House Settlement in Mott Haven, in the South Bronx. The organization offers educational support for young people and adults, recreation programs and Head Start, as well as a small family support casework program. He explained his reservations about service integration this way: "If you expect agencies to get wrap-around services in a community without giving them money for those services, you put the providers in an untenable situation.... On any day, there are 1,300 kids coming to the East Side House. I'm tapped. My programs are full. You can come to me, but... unless you come with money, I can't help you."

II. There are few alternatives to ACS-funded family supports.

The Administration for Children's Services spends more than \$117 million annually on contracts with community-based nonprofit organizations providing family support services designed to prevent children from entering foster care. In January 2005, for the first time in several years, City Hall proposed a substantial increase in this funding, about \$11 million, including nearly \$5 million for services to families reunified with children who have been placed in foster care.

This increase follows a four-year period in which the number of families receiving preventive family support services has increased by 22 percent.

More than half of the families taking part in these programs are referred by ACS Child Protective Services or the courts. They receive services such as parenting education; casework related to substance abuse treatment, mental health issues or poverty; and assistance finding the income support and housing that can help keep a family stable and together.

Many other families find their way to the programs on their own, referred by a school counselor, a clinic, a friend or another social services provider. But even if a family seeks these support services on their own, the nonprofit must establish a case record about the family and share the information with ACS. Otherwise, the city won't pay the nonprofit for its services.

Shortages in mental health services, after-school and tutoring programs, affordable housing and services for non-English speakers make the work of prevention consistently difficult.

For parents who fear the possible implications of becoming “known” to the city’s child welfare agency, this is a powerful disincentive that can drive people away from seeking help, even when they need it.

During the last several years, the state government funded more than 3,000 slots statewide in an alternative, short-term preventive family support program that allowed organizations to help families without disclosing case information to the government—unless they saw signs of abuse or neglect. In 2004, however, the Pataki administration eliminated the program in a budget-trimming move.

Many family support organizations and other community groups still provide casework and services to families who say they don’t want to be known to ACS. But generally speaking, these services are very narrow—related to health issues, for example—or are funded by philanthropy or agency endowments. Mostly they are squeezed into already tight caseloads. That means help can be very hard to find.

This poses severe limits on the notion of a neighborhood-based safety net built on current funding sources, according to some providers and parent advocates. Public distrust of the child welfare system is directly related to the fear people hold of becoming known to an agency with police-like powers, whether or not that fear is justified.

The vision some community practitioners have of a more collaborative community-based safety net may, therefore, depend on identifying funding streams that can stand independently of a family support system that requires individual case reports to be filed with ACS.

Public distrust of the child welfare system is directly related to the fear people hold of becoming known to an agency with police-like powers, whether or not that fear is justified.

Where the Neighborhood Networks Stand Today

The Neighborhood Networks began as experiments. Today, a few have moved well past the pilot phase and begun shaping services and implementing strategies to help keep children out of foster care.¹⁶ Now, ACS Commissioner John Mattingly has a more ambitious view of their role in all communities that generate significant numbers of children entering foster care.

Mattingly plans to soon begin pressing the networks to take on new, very specific responsibilities related to child protection and family support. These assignments from ACS headquarters could give shape to the work of several networks, and could thoroughly refocus the work of others, possibly narrowing their short-term mission.

Mattingly cites two tasks he would like to make central to the day-to-day work of network member organizations. First, the networks will be asked to help staff family team conferences coordinated by their local ACS child protective services field offices. These individualized case conferences, he says, will precede the removal of any child from a family, prior to a placement in foster care, except in the most extreme cases.

Conference participants will include the child’s parents, an ACS child evaluation specialist with a Master’s degree in social work, the child protective investigator, and at least one representative from the Neighborhood Network—possibly a caseworker from a family support agency, or another trained community leader. If specific issues are apparent in the case, such as domestic violence or substance abuse, a professional with that expertise may also be included.

Eventually, Mattingly says, he would like these meetings to include a parent advocate, someone who has experienced the child welfare system for themselves and is now employed by the family support agencies.

“There will be circumstances where we will determine that, because we got a good group of people in the room including relatives and other neighborhood supporters, and we have neighborhood community providers in the room as well, we will be able to prevent placement,” explains Mattingly.

The goal, he explains, is to make the best possible decision about how to protect the child and, if possible, support a struggling family. "Once you get that started, everyone will be much clearer that this is a real live decision going on," he adds. "You are actually sitting down to decide whether or not to break up this family, and how to protect the children."

According to ACS, the strategy will likely be piloted in two or three networks before it is extended across the city.

The second task that ACS hopes to make central to the Neighborhood Networks is the development of a web of community members who can support caregivers and parents, linking formal and informal support services with wider volunteer networks and other community-based services. This will expand on the network member organizations' efforts to recruit foster families in their communities.

What's Next?

The survey feedback and network profiles that follow in this report reveal many of the issues that face community-based providers and city officials involved with the networks. There are many different views of how best to improve services, and whether or not the networks should be the vehicle for advancing ACS policy objectives. There are also questions about the impact of ACS control and the lack of resources in many neighborhoods.

But subtler issues have become clear as well, including the difficulty some networks have had in establishing clear and substantial objectives for their existence. In the context of a rapidly changing child welfare system—one that is focusing increasingly on preventive strategies and less on foster care placements—it seems obvious that these networks can become a fundamental element of a comprehensive community-based safety net for families.

Whether or not they will have the guidance, initiative and resources to ultimately play this role is still not clear.

"What we want to do is take the fear of the Administration for Children's Services and stand it on its head. We want to say that the community people are really ACS. The postman is ACS. Big Mama who's always sitting out there is ACS. We're talking about the role of the neighborhood in providing guidance and assistance. We're calling for the neighborhood to go back to its traditional roots in African-American history of the community rearing a child."

—Mario Drummonds, *Executive Director*,
Northern Manhattan Perinatal Partnership and
a participant in the Central Harlem Neighborhood Network

Mattingly plans to begin pressing the networks to take on new, very specific responsibilities which could give shape to the work of several networks and thoroughly refocus others.

ENDNOTES

- ¹ For a full discussion of the decline in the foster care rolls, its causes and impact, see: Andrew White, Kim Nauer et al. "Pivot Point: Managing the Transformation of Child Welfare in NYC," *Child Welfare Watch* Volume 10, December 2004.
- ² Jack Krauskopf, "Recommendations on Human Services Policy for the Next New York City Mayor and Council," The Aspen Institute, November 2001.
- ³ Andrew White, John Courtney and the *Child Welfare Watch* team. "Restoring the Community Connection," *Child Welfare Watch* Volume 2, December 1997.
- ⁴ For a detailed overview of the development of the ACS initiative, see Citizens Committee for Children, "Neighborhood-Based Child Welfare Services II," 2002.
- ⁵ Andrew White, Kim Nauer et al.
- ⁶ Andrew White, "Collaboration Demands Respect: Making Decisions in Common. Community Partnerships for Children, Louisville Kentucky." The Edna McConnell Clark Foundation, 2000.
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- ⁹ Jodi Sandfort, "Why is Human Services Integration so Difficult to Achieve?" *Focus*, Vol. 23, No. 2, Summer 2004.
- ¹⁰ Rutledge Q. Hutson, "A Vision for Eliminating Poverty and Family Violence: Transforming Child Welfare and TANF in El Paso County, Colorado," CLASP Policy Brief, January 2003. p.4
- ¹¹ Robert Chaskin, "Lessons Learned from the Implementation of the Neighborhood and Family initiative: A Summary of Findings," Chapin Hall Center for Children, University of Chicago, 2001.
- ¹² Thomas Corbett and Jennifer L. Noyes, "Service and Systems Integration: A Collaborative Project," *Focus*, Vol 23, No. 2, Summer 2004.
- ¹³ Rutledge Q. Hutson, "Providing Comprehensive, Integrated Social Services to Vulnerable Children and Families: Are There Legal Barriers at the Federal Level to Moving Forward?" Center for Law and Social Policy, February 2004; and Hutson, January 2003.
- ¹⁴ Chaskin.
- ¹⁵ Hutson, February 2004.
- ¹⁶ For more details, see Brenda G. McGowan and Elaine M. Walsh, "Study of the Implementation of the Administration for Children's Services' Neighborhood Networks in Six Service Planning Areas," an unpublished report submitted to New Yorkers for Children and ACS, March 2004. The McGowan and Walsh report provides a more detailed discussion of the process and structure of six networks.

SURVEY OF NEIGHBORHOOD NETWORK PARTICIPANTS

Every month, groups of staff and managers from agencies that contract with the Administration for Children's Services (ACS) meet in their communities to discuss how they can improve the nature and quality of services for children and families. These groups have also drawn in professionals from other neighborhood institutions, including schools, religious congregations, homeless shelters, health and mental health clinics, domestic violence organizations, youth groups, and even community boards, police precincts and libraries.

Some boast standing-room-only crowds while others struggle to get enough bodies in the room to make the monthly meetings worthwhile. At their best, the networks are shining examples of what can happen when you put all of the right stakeholders in the room and give them an opportunity to engage in creative problem solving. In some cases, these networks are vehicles for analysis and strategic planning and catalysts of community innovation.

However, ideas that look good on paper don't always translate into real life success stories. The Center for New York City Affairs wanted to go to the source and find out what network participants themselves had to say about their experiences. What follows is a summary of what we learned from extensive interviews with network participants.

Methodology

For this section of the report, the Center for New York City Affairs interviewed 24 active participants in local Neighborhood Networks, including front-line staff, supervisors and directors from agencies that contract with ACS, as well as ACS personnel from the Neighborhood Based Services initiative and the Division of Child Protective Services. These structured interviews were conducted on the telephone and in person between April and October 2004. Respondents represent communities in all five boroughs. We focused primarily on communities identified by ACS as "high need," although a few representatives from "low-need" districts were also interviewed. To preserve anonymity, the names, titles and affiliations of the interviewees are not disclosed.

Questions

We identified six areas of inquiry:

- **Network Goals**
How do participants view the purpose of these networks? What do they say about what the networks are supposed to be accomplishing? How do decisions get made about network activities?
- **Network Structure**
What is the organizational model for these networks? How many people typically come to the monthly meetings? Who attends? What kind of planning groups have they formed?
- **Network Successes**
What are some examples of network success stories as told from the perspective of the participants? Why did the respondents feel that their networks' activities had been successful? What sorts of concrete activities have the networks undertaken, beyond sharing information?
- **Network Obstacles**
What kinds of obstacles do network participants typically encounter? What steps (if any) have different networks taken to address these challenges?

At their best, the networks are shining examples of what can happen when you put the right stakeholders in the room and give them an opportunity to engage in creative problem solving.

- **ACS's Role in the Networks**

Where do people think ACS fits into the network strategy? Is ACS actively involved in the monthly network meetings—and who from ACS attends? Moving forward, what kind of role should ACS play in the networks?

- **Improving the Effectiveness of the Networks**

Did participants have ideas about how the networks could be strengthened? What resources would benefit their networks and why? What strategies would they like to see implemented?

Why Are We Here? Perceptions about the purpose of the networks

City policymakers had a very clear purpose in mind when they set out to establish networks in communities where hundreds of children were entering foster care each year. "Each network is designed to improve the well being of children and families in the child welfare system and reduce the use of foster care services in their community," reads the ACS program guide. "Neighborhood Networks provide a forum to form local partnerships to share resources, ideas and referrals. Neighborhood Network participants also engage in joint planning, training and advocacy."

But of those we interviewed, only ACS staff themselves acknowledged reducing the use of foster care as a fundamental goal of the networks. It is clear that the city agency's institutional objectives—achieving quantifiable reductions in foster care placements and reports of abuse and neglect, for example—are not yet central to the planning and goal setting activities of most of the Neighborhood Networks.

The following goals were the most prominent among the participants we interviewed:

- **To share knowledge and resources**

The networks are supposed to bring CBOs and contracted agencies together in serving families. That is the basis. Churches, schools, police, tenants associations—everyone getting to know the services available in that community. If you get all these people involved you've got a good thing going. —Senior staffmember, nonprofit family support organization

In my community, I'm surrounded by resources. Everything is in a stone's throw. These agencies are in walking distance of each other and yet they weren't collaborating. Some of them were working on the same cases but they had no formal partnership. The neighborhood-based strategy went a long way towards helping with this. —Child Protective Services Manager, ACS

Although I knew other providers in the community, I couldn't have told you all about the intricacies of their programming. —Network co-chair and senior staffmember, nonprofit family support organization

- **To match needs with services**

When we started, we didn't know what the needs of the community were. Our office is not based in the community. We wanted to get as many people in the room as possible who knew what the needs were. —Network co-chair and senior staffmember, nonprofit family support and foster care organization

- **To prevent placements in foster care**

While many of the people we interviewed spoke at length about the benefits of collaboration and improved relationships with other providers, very few connected the goals of their network to achieving concrete results around preventing incidents of abuse and neg-

lect and reducing foster care placements. The respondents who did make this connection were typically affiliated with ACS:

We were number one in child removals. Twenty-six percent of the reports in our district came from the schools. Now we've decreased the number of reports and we've dropped to number two. —Social work intern, ACS

Prevention, prevention, prevention.... Reducing abuse and neglect complaints. That's what drives my work with the network. —Senior foster care official, ACS

Network Structure

- **Few executive directors or ACS field office staff attend network meetings**

All of the respondents confirmed that their networks meet every month, usually in the same location and at the same time. The most active network participants are program supervisors and front-line staff from ACS-funded nonprofit agencies. There were few examples of agency executive directors attending the meetings.

There's no incentive for executive directors to participate. It's not income-producing for their agency. They have to justify huge deficits and are fighting to keep slim resources in place. At the same time, it's a problem for us at the [network] that we don't have the involvement of the executive directors. Our hands are tied in terms of what we can commit.

—Network co-chair and senior staffmember, nonprofit family support organization

Staff of ACS's Neighborhood Services unit are more likely to attend network meetings than ACS executive-level personnel or the child protective investigators, supervisors and managers based at ACS field offices:

ACS field office staff don't come to our meetings. They have probably come a total of ten times since the network started meeting. Their involvement is very important. They can tell us the number of kids coming into placement. They can give us needed data.

—Staffmember, nonprofit family support organization

All of the respondents spoke about how, to varying degrees, they had been able to engage community-based organizations and other community stakeholders (e.g. police, housing agencies, elected officials, healthcare providers) in their network meetings and activities. We found examples of networks being comprised of as few as 13 members to as many as 60.

- **Subcommittees focus on specific tasks.**

All of the networks have formed subcommittees that focus on different topics such as education, domestic violence, mental health and substance abuse. For example, the network in Southeast Queens has established seven subcommittees, one of which is concentrating on implementing an "adopt-a-school" pilot program. Network agencies are collectively providing services such as tutoring, mentoring and anti-gang violence workshops to a middle school in the district.

One respondent emphasized how the subcommittee structure fostered a sense of "ownership" over network activities. In the subcommittees, members have opportunities to engage in collaborative planning.

- **Co-chairs shoulder the bulk of the responsibilities.**

Every network is typically managed by two co-chairs. Usually, one co-chair is an ACS staff

member and the other represents a contracted agency. In some cases, the co-chairs were elected to their posts while others volunteered. The hands-on work of the co-chairs varies. Five districts have an ACS "Network Liaison" to manage logistical tasks. For others, however, the nitty gritty tasks typically fall to the co-chairs—which can be problematic.

I gave up being co-chair because there is so much coordinating work that has to happen and we all have programs to run and jobs to do. The actual work of coordinating meetings and preparing minutes, that falls on the shoulders of the co-chairs. —Senior staffmember, nonprofit family support and foster care organization

People also commented on the importance of the co-chairs and how they set the tone for the rest of the group. If the co-chairs aren't committed, then neither is the membership:

The strength of the [network] depends upon the co-chair. It would help if they came to the meetings. If you're not showing up or you're coming late, what kind of message are you sending? —Network co-chair and senior foster care official, ACS

Setting the Network's Agenda

We were curious to find out how networks had collaboratively established goals and executed their plans. What was the process? Did groups reach consensus with ease or were they bogged down by power struggles and competing agendas? On what basis were decisions made?

- **Case data served as a basis for group planning.**

When the networks were first established, ACS worked with each district to complete a Matching Needs and Services assessment. Participants collected case records and reports from their respective agencies (including the ACS field office), and collaboratively reviewed the documents to identify the gaps between needs and services. Afterwards, the networks organized working groups and subcommittees to focus on areas where needs appeared high and services were lacking.

For example, one network in Queens discovered that gambling and domestic violence were interconnected problems, particularly in the South Asian community:

We were finding that the men would gamble. Their wives would get upset. And this would lead to domestic violence. These problems go hand in hand. It's a big secret because it's not discussed openly and there aren't a lot of services available to address it. —Senior staffmember, nonprofit family support organization

A network in Manhattan found that domestic violence was on the rise, particularly among Latino families, so participants organized concrete interventions:

We collaborated with ACS and the local precinct to run a domestic violence event. We also did a series of workshops and talks at the local libraries to engage Latino families in conversations about domestic violence. —Staffmember, nonprofit family support organization

- **Some initial goals were unrealistic.**

After diligently completing their needs assessment, one district in the Bronx realized the shortage of affordable housing was the single biggest problem they had to confront:

Housing is a huge issue because foster care agencies want to be able to recruit families who can take in two, three, four, or even five siblings. But that kind of housing stock doesn't

exist in this community. Also when parents lose their kids to foster care, it's not uncommon for them to lose their housing as well. But in order to reunify, that housing needs to be in place. So it's a problem on both sides. —Senior staffmember, nonprofit family support and foster care organization

So the network met with the ACS housing support unit, private developers and the New York City Housing Authority. At one point, participating agencies considered pooling resources to purchase a building. As the interviewee explained:

We had grandiose ideas. But then we realized that we didn't have the resources to buy a building.

Ultimately, not much happened. The network agencies learned about Section 8 housing and how to refer their clients for housing subsidies. But as one interviewee pointed out, "If there's no housing, there's no housing." This network learned a hard lesson about how to best focus their time, energy and resources. There are just too many problems that are 'bigger' than any single network can tackle.

- **Networks want to respond to changing needs.**

We heard a few examples of networks re-plotting their strategy in response to new data and shifting demographics:

The Department of Health recently issued a report and it stated that our [district] has the highest infant mortality rate in New York City. So we need to take a look at that. We've started by forming a healthcare subcommittee and we're also doing outreach to health care providers in the community. —Director, nonprofit family support program

One of our interviewees pointed out that the needs in her community have changed since the network completed its initial case review:

We conducted our needs assessment based on 1998 and 1999 records. These are no longer current. Now immigration is a big issue. A lot of people have moved to our district who are illegal immigrants. Domestic violence has also become a big issue. —Senior staffmember, nonprofit family and youth services organization

Perceptions of Network Success

With one exception, all of the respondents indicated to us that they felt their networks were very successful. But people had different ways of justifying this assessment. And, as with goal-setting, only ACS employees linked any of the networks' successes to reductions in foster care placements or fewer reports of abuse and neglect.

The following points were the most frequently mentioned measures of success:

- **Programs and activities have been accomplished**—including foster care family recruitment fairs, housing fairs and other community education projects, as well efforts to focus support services and community engagement in local schools.
- **Relationships have been built and knowledge shared with other providers and community stakeholders.**

The network makes my position as parent coordinator much easier. I get insight on which agency I can direct the parents to instead of giving them the run around. It's more effective.
—Public school parent coordinator

It's good to know who your neighbors are, and who your competitors are too! What do you have that I don't have? For instance, if your agency offers a parenting group and I don't, I can refer my client. We can share. People don't have to keep things to themselves.
—Senior staffmember, nonprofit family and youth services organization

- **ACS staffmembers see concrete outcomes regarding abuse and neglect reports and foster care placements.**

Our community was number three in terms of placements. Now we're number eleven. I can't definitely tell you what went right but there was an increase in referrals and preventive services. The network has been working excellently. —Social worker, ACS Neighborhood Services Unit

ACS'S Role—Obstacle, Catalyst or Both?

The following themes emerged when we asked people to discuss ACS's role in the networks:

- **Participants have questions about ACS's agenda.**

Some respondents said they have concerns about ACS's underlying goals and long-term commitment to the networks:

When they first talked about having a neighborhood network, I wasn't sure what it would mean. I wasn't too anxious to get involved. I thought that perhaps ACS was criticizing what we had already done. We had been providing preventive services in the community for years. We had already been collaborating and making linkages. —Director, nonprofit family support program

Many people thought that the Networks would be a flash in the pan, so why should they invite their staff to attend? —Staffmember, nonprofit family support organization

- **ACS staff, particularly field office personnel, are integral to the network's success—but they don't always show up.**

Most of the clients who are interfacing with the agencies in the network will also deal with the ACS field office. So it's important to have them involved. —Child Protective Services Manager, ACS

It's critical to have the field office on board. So many calls get generated from them. They are the entry door. If they knew about preventive services that are available through the Network, then they could make a better referral.—Senior staffmember, nonprofit family support and foster care organization

- **Operational support provided by network liaisons and the Neighborhood Services Unit is highly valued, but not every network benefits.**

The representative from Neighborhood Based Services is very active in our network. She's so supportive. She gives us information, gets letterhead printed and conducts outreach for us. God love her! —Staffmember, nonprofit family support organization

It would help if we had a planner. Someone who was designated to plan and coordinate network activities and manage logistics. ACS had some money for this but they allocated it

to some of the newer networks. —Senior staffmember, nonprofit family support and foster care organization

- **ACS needs to serve as 'bad cop' when necessary.**

ACS needs to enforce the mandatory participation requirement. They need to put bite in it. If you want it to succeed, everybody has to contribute. This is a mandatory program. It has to come with rewards and sanctions. —Senior staffmember, nonprofit family support and foster care organization

- **ACS should be active behind the scenes, but not on center stage.**

ACS needs to take less and less of a role in the networks. They should monitor, coordinate and lend resources. But the networks shouldn't be seen as an ACS production. If it's really a neighborhood initiative then ACS needs to be a partner and not a key player. —Senior staffmember, nonprofit family support organization

Network Challenges

Some of the most significant obstacles people discussed included:

- **Schools are absent.**

By far the most significant and frustrating challenge cited by many of our interviewees is the difficulty they have had getting anyone from the Department of Education to show up consistently for network meetings, much less participate in network planning efforts. Some respondents said this is especially disturbing because so many reports of abuse and neglect originate in the schools:

Getting the schools to participate has been a sticking point since day one. In our [network] they have parent coordinators coming but many of them don't even know their own roles...[such as] how they're different from a guidance counselor or a school psychologist. —Staffmember, nonprofit family support organization

The schools service a huge number of children...there are so many needs and they are the least informed about the resources. They live on a little island of their own. Information doesn't travel well. Guidance counselors are afraid and reluctant to refer to outside agencies. There is an insular quality to the schools.—Senior staffmember, nonprofit family support organization

- **Neighborhood residents still hold negative perceptions of ACS.**

Our interviewees spoke about ACS's problematic reputation in their communities and the difficulty this poses for involving neighborhood residents in the networks:

ACS's relationship with the community needs a lot of work. You can't erase thirty-five years of a bad reputation with PR. —Senior staffmember, nonprofit family support organization

Teachers don't want to be perceived as being associated with ACS. They would lose parental support. Parents totally stop trusting you. ACS becomes the enemy.

—Network co-chair and senior staffmember, nonprofit family support and foster care organization

- **Job priorities take precedence over the network.**

Participants said they do not have enough time to both accomplish their jobs and carry out their network responsibilities. Because participants' casework or other tasks at

their community-based nonprofit agency—or at ACS—are often measured against specific performance indicators, their work for the network tends to take a lower priority:

I'd like to devote more time [to the network] but it's really hard to do this. The hard part is working on things from meeting to meeting. I like to feel as though I'm accomplishing something. At ACS we have all of these milestones to measure our progress. But this is hard to measure. —Senior field office official, ACS Division of Child Protection

You know it's very valuable getting people aware of services but I could send out a mass mailing and do the same thing. The priority is to serve your clients, not go to meetings. It's not what I should be doing with my time. —Senior staffmember, nonprofit family support and foster care organization

- **Executive directors too often don't "buy in."**

Several people told us that they would like more participation from agency executive directors, and where it's not happening, networks are not accomplishing as much as they could:

In our [network], we don't have executive directors participating and if they don't buy in, we can't do the work. —Director, nonprofit family support program

I would like to have directors involved in the SPA. If program directors are coming then you know that the executive director is really buying in. —Senior field office official, ACS Division of Child Protection

- **Other community stakeholders can be hard to reach.**

In addition to the schools, both the clergy and community residents were cited as important constituencies that most networks have been unable to enlist.

- **Networks have a tendency to lose focus.**

Some participants felt that their networks were in danger of spreading themselves too thin in their efforts to make a difference:

As we've grown we don't want to get so deeply involved in too many things and dilute our effectiveness. Some networks ride a one horse pony. They do one thing only. That's not a bad thing. But we're doing a lot. We have a sense of urgency because we're a high-needs community. —Child Protective Services Manager, ACS

Improving the Networks' Effectiveness

Respondents shared many ideas about how best to strengthen their networks and the overall program. Following are the most common suggestions, addressed not only to ACS but to fellow network participants:

- **Participants should set clear and measurable goals, and establish the desired outcomes.**

In order for more people to buy into the networks, participants need to have a clear understanding of the value placed on their time. Establishing clear goals would go a long way towards accomplishing this:

You need to have a focus. We're not coming together to shoot the breeze. People have to feel like you're going to satisfy a need they have. What do you have for me that I can take back to my agency after two hours? —Network co-chair and senior foster care official, ACS

Some respondents also felt that there was not a clear enough understanding of the link between their work and specific, desired outcomes. If ACS officials want contract agencies and other community stakeholders to connect the networks' operations with quantifiable results around reductions in placements and reports, then ACS needs to start broadcasting this message clearly and consistently. ACS should consider conducting an internal outreach campaign that helps participants to make this connection.

- **More opportunities to share best practices are needed.**

Respondents wanted more formal opportunities to share ideas and information across networks. We heard a few examples of networks replicating or learning lessons from one another's strategies, but many respondents felt this could happen with greater consistency.

- **ACS ought to provide technical assistance and feedback.**

Respondents felt that their networks would benefit from greater guidance from ACS and other experts in the areas of grant writing, assessment and strategic planning:

We need technical assistance. We're a bunch of amateurs who want to be more professional. Each of us knows our own area. We've never tried to bring people together like this. We need an advisor to take us from where we are to where we need to go. It's easy to operate in a vacuum. We need someone to tell us—are we on the right track?—so that we can remain effective. We need direction and guidance. Someone who can look at what we've done and give us feedback. —Director, nonprofit family support program

Some networks also would like more support in using ACS data and generating other sources of information—such as research reports or data on community members themselves. Otherwise these networks run the risk of focusing inefficiently on problems and issues that have evolved or shifted in subtle, but nevertheless significant, ways. One respondent said each network should do a case-record-driven, collaborative community needs assessment at least once each year.

- **Networks should find ways to engage more community members.**

Some respondents said they are struggling to encourage more community residents to play active roles in network activities. We heard from participants about the difficulty of getting community members—particularly the very clients served by family support and other agencies—on board. According to one respondent:

The [network] is for the community. If the community isn't coming out then we the providers are making decisions about services based on what we see and hear. Our perceptions might be partial or incomplete. —Senior staffmember, nonprofit family and youth services organization

- **Networks must leverage the power of elected officials.**

Some respondents said they need to focus more effort on engaging local elected officials who wield great influence over community resources and know the local players who can make things happen. Networks that don't already have such relationships are interested in receiving support for how best to strategically engage elected officials. Some have already made progress on this front:

I called the state assemblyman for the district who also happens to sit on an educational subcommittee in Albany. I let him know the schools weren't coming and that we needed them to be there.... [Now] I have the superintendent's cell phone number. If I need anything, I can call him. The bottom line is that you can't do this kind of community work

without the support of elected officials. If you don't know how to approach them right, it's not going to work. —Child Protective Services Manager, ACS

- **Resources matter.**

Many participants said that ACS ought to provide financial and staff resources to the networks, including network liaisons for those that don't already have them. This would signal nonprofit agencies that ACS is truly invested in the network strategy.

If people know that no money is available then they think, 'Well, maybe ACS isn't really supporting this as much as they say.' We need to be making sure that more people at the director level are coming and that resources are set aside for the network. Then we'll be taken more seriously by the private agencies. —Senior field office official, ACS Division of Child Protection

CENTRAL HARLEM'S NEIGHBORHOOD NETWORK: A CASE STUDY

Background

When Laura Fantauzzi had to go into the hospital to undergo surgery in July 2004, she had no one who could care for her nine-year-old son, Moses, and her four-year-old granddaughter, Milagros. Fantauzzi, a 48-year-old Harlem resident, isn't on speaking terms with her daughter, who gave Fantauzzi custody of Milagros because of a long-term drug problem. Her mother lives in California. And she wasn't comfortable asking her neighbors to look after her children—even for just a few days. "I felt all alone," said Fantauzzi. "I didn't know what to do with the kids." In the end, she turned to New York Foundling, a Manhattan-based organization that provides crisis care, which took in the children for two weeks.

Ultimately, though, the episode yielded far more than a few days of respite care for Fantauzzi and her children. New York Foundling referred the family to Harlem Children's Zone, another local organization, which helped get counseling for Moses, who has been diagnosed with attention deficit hyperactivity disorder. Her social worker at Harlem Children's Zone, a multi-service agency that has 15 local centers, also helped Fantauzzi enroll in a computer class and found slots in weekend educational programs for both children. "I thank God for all that," she said recently. "They're really trying to keep stress off of me."

Fantauzzi is just one of many local parents benefiting from the coordination of organizations through Central Harlem's Neighborhood Network, established in the mid-1990s as an informal coalition of community-based service providers. During the last year, the network has begun an ambitious effort to reduce child abuse and neglect in Harlem by bringing together what has long been a fragmented array of local institutions and government agencies that traditionally have had little interaction with one another. Central Harlem's network has been among the best organized and most focused of those formed since the city's Administration for Children's Services began its citywide push to create and support 25 neighborhood networks in 2000, according to city officials.

Central Harlem has reason to work especially hard at uniting the organizations that serve its children and families: In 2000, the neighborhood had the highest number of children placed in foster care of any of the city's 59 community districts. In 2002, the most recent year for which statistics are available, 15.1 of every 1000 children in Central Harlem's Community District 10 entered foster care, almost four times the citywide average of 4.1. Having ranked among the top five community districts in terms of placement rates throughout the past decade, Central Harlem's network has a single, burning purpose: to lower the number of neighborhood children in foster care.

Central Harlem's high rate of foster care placements has occurred despite the fact that the neighborhood is served by an exceptionally broad array of organizations intended to avert child abuse and neglect and to prevent the removal of children into foster care by providing everything from child care to after school programs, family counseling, drug treatment and mental health services. With ten agencies under contract with ACS to provide such family support to 376 families in Harlem, the network was faced with a paradoxical question: how can a neighborhood with so many service providers still have such high placement rates? Apparently, there were big gaps between the agencies serving Harlem families. But where were they? And how could they be filled?

The Data

Network members took a scientific approach to resolving the neighborhood's problems, analyzing data that detailed precisely where foster care placements in Central Harlem were taking place. The numbers, collated from city databases by ACS consultants, showed stark differences

in placement rates among the neighborhood's 31 census tracts. Perhaps most startling, nearly half of all foster care placements between 2001 and 2003 were concentrated in just six census tracts—the equivalent of 24 city blocks.

On a scorching day last summer, some two dozen network members got together to walk through those vulnerable blocks. Representatives split into teams, fanning out through the area. "We went from 145th Street and 8th Avenue over to Lenox and then down to 135th," remembers Millicent Redick, the network's liaison, who is employed by the Fund for City of New York and Agenda for Children Tomorrow to coordinate meetings, seek funding and gather information for the network. The network also sent a team into the Polo Grounds housing project, another spot with particularly high placement rates. Staff from the different agencies visited child care facilities, schools, churches and other places they might find parents to explain the resources they offer. In the course of the day, the teams also met several community-based organizations they hadn't known about before the walk—some of which joined the network as a result of the visit.

Honing in on specific locations helped the network further pinpoint which institutions were at the root of most placements. "The data showed that many referrals were coming from shelters near the 140's on the West side," says Melba Butler, executive director of Harlem Dowling and co-chair of the network. So Butler and her colleagues looked into what types of problems typically lead to removals from shelter residents and discovered certain policies that made residents particularly vulnerable. "We found that women couldn't leave their children under anyone else's care in the shelters. And often they don't have anyone else to help because people's familial networks tend to be elsewhere—in another borough or another city," she says.

Butler also noticed that shelters tended to be understaffed, so she and others in the network devised a solution that helped both shelters and the residents at risk for having their children removed: providing preventive service staff to work on-site at the shelters. Harlem Dowling Westside Center and Harlem Children's Zone now provide crisis intervention staff to the Convent Avenue Family Shelter. The workers visit the shelter once a week and meet with residents, providing them with guidance, referrals, advocacy and help with basic tasks. Because Harlem Children's Zone requires a certain number of crisis clients under the terms of a contract to provide services to families who have children at risk of foster care placement or being homeless, the arrangement suits both the agency and the shelter nicely. "They needed social workers, and we needed crisis clients," says Wilma Morton, program director at Harlem Children's Zone.

The data also highlighted another major source of foster care placements: the schools. State records showed that school personnel were responsible for calling the State Central Register Hotline in almost one-quarter of all child abuse and neglect reports in Harlem. But while the reports were piling up, 70 percent of them turned out to be unfounded, creating unnecessary work for investigators and terrifying ordeals for the families. Network organizers figured that, in the preponderance of these cases, school staff would be more effective if they called preventive service organizations rather than the state hotline, except in cases where abuse was truly suspected.

Reaching Out

To educate teachers, guidance counselors, administrators and others at local schools about the availability of preventive services, the network had to have a good working relationship with them. But, until recently, service providers had little or no communication with school staff.

A 10-year-old girl ended up being the catalyst for bringing together child welfare professionals and educators in Harlem. Carmen (not her real name) is a special education student at Harlem's IS 154 who began to draw the attention of her fifth grade teacher in the fall of 2003. Though her behavior had never been stellar, it became markedly worse as Carmen started

fighting more with her peers, shouting and acting aggressive in class. She also came to school with scratch marks on her face and arms, and her clothing was often dirty and ripped.

Tonato Perez, the parent coordinator at IS 154, received a call from Carmen's teacher about her situation early in the school year. Perez had first heard of the network a few weeks before, when some members came to school, briefly explained their network, and left Perez a business card, which he stashed in his desk. As the general liaison between parents and the school system, Perez is not well versed in social services, but he was called in to talk with Carmen's mother because they both speak Spanish. The two chatted easily about the girl, but when he learned that the mother was caring for 12 children while living at the nearby Harriet Tubman homeless shelter, Perez realized he needed help with her case. Remembering the card in his desk, he called the network.

The network counts several foster care agencies among its members, yet its central emphasis on strengthening preventive services in the community made it a perfect resource for Carmen's family. Perez felt Carmen's mother was so overwhelmed, the family in such an unstable situation, that she was at risk of having her children removed if something went wrong. And the girl's increasingly erratic behavior made him wonder if the crisis might come sooner rather than later. Perez arranged for network members to meet with Carmen's mother, her teacher and himself to discuss the family's needs. Carmen's mother explained that her daughter's scratches were inflicted by her siblings. As if to demonstrate, two of Carmen's younger brothers whom their mother had brought with her fought bitterly throughout the meeting, while their mother received a referral for job training and home care assistance. She was also directed to an agency that provided the family with new clothing.

For Perez, the assistance of social service professionals was a relief. "The school has but so much power," he says. "So right now, with this network, it makes it so much easier. Anything we can't provide, they can—or they'll do some research and find someone who can help." Without the network, Perez believes Carmen and her siblings could easily have ended up in foster care. The simple connection between providers made a tremendous difference for this family.

Carmen appears to be faring better lately, according to Perez, who visits her classroom weekly. "She's respectful and more together now," says Perez. "She's been dressing herself better. She says, 'thank you, please, excuse me.'"

Perez is better, too—or at least better situated to help other families like Carmen's. After getting familiar with the network and member organizations through Carmen's case, he regularly calls network members when he encounters families who need preventive services. Preventive service professionals who have met him through the network also often consult him about clients who have children in IS 154. And Perez now regularly attends network meetings.

Connecting Providers

Monthly gatherings of service providers serve as the backbone of the Neighborhood Network. Staff of some two dozen organizations attend, including ten that have contracts with ACS to provide preventive services to as many as 376 families. There are always new issues to address—including, at a recent meeting, the planning of a weekend youth conference; reporting on the network's holiday party for children; and discussion of recent focus groups with teens. But perhaps the most important function of meetings is to facilitate and support relationships among service providers.

Knowing the names and faces of colleagues serving Harlem families makes calling them for help significantly easier, according to network members. The regular meetings have both cut down on the amount of time caseworkers spend dealing with bureaucratic red tape, and sped up the process of obtaining services for families when they are referred from one agency to another. "If there's a bottleneck, I can just pick up the phone and talk to the executive director at another agency and clear it up," says Mario Drummonds, executive director of the Northern Manhattan Perinatal Partnership, an organization that aims to reduce infant mortality by pro-

viding services for parents such as job training programs and domestic violence counseling.

While Drummonds acknowledges he could have reached out to his colleagues before the network existed, he says regularly attending network meetings has made the process easier, giving him and his staff a familiarity with a greater number of employees at the other preventive service agencies and related organizations in the district. "With the network, the referral process is much quicker and much cleaner," says Drummonds.

Adrian Myers at the Northside Center for Child Development agrees "It's a little bit easier, absolutely," says Myers. "We knew of the services before, but now we have a relationship. A lot of our work is based on relationships. It cuts down on the legwork."

"We look out for each other," is how Morton, of Harlem Children's Zone, explains the cooperative process. Each member has a listing of all network participants, which they can use to refer clients to services when they are unable to provide them themselves. Increased contact among agencies makes it easier for agencies to handle their work loads—whether they have too many or too few clients. If the number of people seeking preventive care at Harlem Children's Zone exceeds the agency's limit of 60 and another agency is low on such cases, for instance, "I might call them up and say, 'Do you need a case? Do you have space in your parenting group? Can your crisis worker do a 6-month follow-up with this family?'" says Morton. Of course, this kind of collaboration benefits families most. "Otherwise we might have to close the case, and that family's going to return to the system," Morton explains.

Network members also routinely set aside priority social service slots for other participating agencies. For instance, Harlem Children's Zone reserves room in its after-school program for 100 children referred by network members. Similarly, the Abyssinian Development Corporation holds 75 Head Start slots for referrals from network members. The Northside Center for Child Development has given priority to network members for its much sought-after clinical counseling services. Mental health slots are particularly valuable to families; without them, families throughout the city can wait months before beginning group or individual therapy.

Collective Action

Network meetings also provide the perfect forum for planning collective solutions to neighborhood problems. At the network's January 2004 meeting, for instance, Melvin Alston, community coordinator for Manhattan in ACS' s Office of External Affairs, stood up to announce troubles that were mounting for some local children. A police officer at the 28th precinct had told Alston about several "snatch and grab" incidents that had recently occurred at bodegas and candy shops near two local schools. Teens were shoplifting small items and running from the stores and Alston, a regular meeting attendee, said he wanted to make sure that "we get to these kids before the police do."

The initial response to Alston's plea was unremarkable; some people nodded knowingly as he spoke. A community affairs officer from the 28th precinct, who was at the meeting to tell members about a local youth program run by the Police Department, asked a few questions about the incidents. And a concerned parent in attendance jotted down notes. But within two weeks a concerted intervention was underway to intervene with the "snatch and grab" kids. Alston arranged a meeting with the head of the three precincts involved—the 28th, 26th and 32nd—and the district managers of Manhattan Community Boards 9 and 10, which cover West Harlem and Central Harlem respectively. The principals and deans of the schools also attended and agreed to provide the network with a list of children who they believed were involved in the incidents and might be headed for trouble, including educational neglect, violence and possible arrest.

What happened next speaks to the dedication of individuals more than the bureaucratic links they've forged: network organizers reached out to the families of every child on the schools' lists. They called parents to let them know what was going on with their children and to offer services. When families didn't have telephones or were otherwise unreachable, net-

work co-chair Regina Lawson-Hughes personally visited their homes. And she and others are now readying member organizations for the likelihood that some of these teens will need services. "I spoke with Harlem Children's Zone and the Children's Aid Society. They have openings and we let them know that we have 11 teens who are going to need some support," said Lawson-Hughes. The "snatch and grab" team, which has come to be called the Network of Concerned Agencies, has also arranged for focus groups to be conducted with the young people involved in the incidents to learn more about their needs.

The Obstacles

This level of outreach is not feasible for these agencies on a large scale, however. There simply are not adequate resources. Yet community outreach has proven essential in helping to overcome a distrust of the city's child welfare agency that runs deep in Harlem and other low-income areas of the city. "People are suspicious of ACS because they see them running around taking kids," says Sharonne Salaam, head of People United for Children, a Central Harlem-based parent support and advocacy group. And that suspicion has rubbed off on preventive agencies that contract with the city.

The association with ACS at best cuts into the appeal of preventive service programs—and at worst keeps clients away altogether. "They see a flyer, and they see that we're ACS-funded, and they don't want to have anything to do with us," says Jackie Grant, Northern Manhattan Perinatal's parent advocate. "Some people are quite hesitant."

Doretha Walker, a crisis worker at Harlem Children's Zone, says she, too, often senses such distrust from her clients. "I have to say to them, 'We're not ACS, we just work with ACS,'" says Walker. "We're trying to keep families together."

The network has worked hard to directly address such wariness in parents. Network representatives staff tables at open school nights. They go door-to-door in buildings with particularly high placement rates. They conduct educational forums with teachers and other school employees. Unfortunately, though the network receives no additional funding for outreach, these efforts consume much time and energy—both of which are in short supply for network members, most of whom are also service providers.

Confining the network's efforts to those that directly relate to its mission is also a major concern for organizers. "We have grown real fast and with growth, we get stretched thin," says Audrie Barclay, network co-chair and social work supervisor at The Children's Village, a foster care agency based in Westchester that has a community office on Adam Clayton Powell Boulevard. "The network is about trying to keep children and families safe and healthy. Getting grants is just a part of that. We have so many members to service, we need to ensure that we're very structured, focusing on a few projects and continuing to get ACS on board for them."

One of the network's next efforts is to make connections with the city health department. "Health practitioners are mandated reporters, so a lot of calls [to the State Central Register of Child Abuse and Maltreatment] come from them, too," says Barclay. To make sure that health providers also call preventive service agencies rather than the state when appropriate, Barclay says the network would like to have a representative from the health department at meetings and collaborate with the state to put together a crisis response team for health care practitioners. The team would collaborate with the State Central Register to provide health services to the families in crisis.

For now, though, the crisis teams remain a good idea awaiting implementation. Before it can happen, Barclay and other network organizers face more practical challenges, including the fact that their ever-expanding network no longer fits in the conference room at Harlem Dowling where monthly meetings are usually held. "We need to have more people at the table—from the Department of Education, the health department and elsewhere," says Barclay. "But as it grows, we need to make certain we have a large space."

MOTT HAVEN'S NEIGHBORHOOD NETWORK: A CASE STUDY

Jeron Jacobs was 14 when he first heard about the brand-new Mott Haven Cultural Awareness Program, or MCAP, a series of free classes for teenagers at risk of being placed in foster care. "They had basketball, pool tournaments, radio broadcasting, graffiti art, photography, break-dancing," says Jeron, now 16. "It was an opportunity to do some good things. It wasn't like you had to go. You enjoyed going."

A slight boy who lives with his grandparents in Mott Haven, Jeron had nothing else to do after school. So twice a week he rode the B19 bus about half an hour to the Point, a community center in Hunt's Point, where he spent his afternoons learning to deejay and be a radio engineer.

But Jeron stopped going to MCAP after a couple of months. The classes were hard to get to and, with the walk to and from the bus, Jeron was returning home after dark, which worried his grandparents. "It just went to waste because I couldn't get there regularly," says Jeron.

Jeron's experience with MCAP cuts to the heart of the difficulties faced by the Mott Haven Neighborhood Network, which established the program as part of its efforts to strengthen family and youth services in this South Bronx neighborhood. The network received a \$125,000 grant from the Annie E. Casey Foundation to provide after-school opportunities for adolescents in the resource-starved community. But when network members who work for local foster care and family support agencies tried to set up MCAP sessions, classic organizational hurdles got in the way.

Despite the promise of rent money, no neighborhood institution was willing to provide space for the classes. Network members held some sessions at their own offices, but most were hosted at the Point, which, because of its distance, was inconvenient for many of the Mott Haven youth for whom the program was intended.

Then government red tape interfered. Staff turnover at the Administration for Children's Services (ACS), which was responsible for distributing the grant money, caused payment delays. The money still hadn't come through after the location was established and kids were recruited and signed up for classes, arriving only after New York Foundling, the agency managing the funds in Mott Haven, threatened to pull out entirely. Finally, just when the project seemed to be working through its difficulties, funding ran out. The grant was not renewed.

Despite such disappointments, the Mott Haven Neighborhood Network has had important successes, thanks to the work of a handful of committed men and women. There are at least two dozen social service organizations in the community, not including the public schools, youth programs, churches and other institutions that interact with local families every day. By bringing representatives from many of these organizations together once a month, the network has cultivated valuable working relationships among front-line staff and managers of local service providers.

The MCAP experience illuminates how complicated it can be to organize a neighborhood collaborative with neither explicit marching orders nor designated, paid staff to guide the project. The member agencies of the Mott Haven Neighborhood Network have successfully increased the rate at which children entering foster care are placed in local foster homes. But they have not yet managed to join together around other objectives posed by ACS. And while the number of foster care placements from the community district decreased by 12 percent between 2002 and 2003, the number of children placed—222 in 2003—remains high. Thus far, the whole network is not yet something that is substantially greater than its organizational parts.

Establishing the Network

Even before ACS began its citywide push to create neighborhood networks, Luisa Jimenez Doyle of New York Foundling organized regular meetings of staff from local agencies. The Foundling, based in Manhattan, has run foster care and family support programs in Mott

Haven for decades, and was one of several city-funded agencies that received new, neighborhood-specific ACS contracts in 1999. The network, formally established that summer, brought together nine local agencies that have ACS contracts. Five provide foster care, two run programs designed to prevent the removal of children from their parents, and two others manage both foster care and prevention programs. These organizations have a combined capacity to serve more than a thousand children and families in the community, and most were already working in the community when the network was established. One, Episcopal Social Services, came to Mott Haven in 1999.

One of the network's most impressive achievements was derived from its original mandate: to increase the share of foster children from the community who are placed locally. The percentage of Mott Haven children who remain in the neighborhood after placement in a foster boarding home rose from 13.8 percent in 2000 to 25.2 percent in 2003. Most of the rest are placed elsewhere in the Bronx.¹ The improvement is due in part to the jointly coordinated recruitment of foster parents, including at community events such as an annual network-sponsored street fair. In 2003, the area's seven foster care agencies each signed up at least 30 potential foster parents at the fair.

Twelve other community-based organizations also participate in the network. These groups offer residents assistance with substance abuse, domestic violence and mental health. Each month, a total of about 25 representatives of various groups attend the network meetings held at Episcopal Social Services. Getting other agencies to attend has been difficult, though representatives of a few non-contract agencies have recently begun to attend meetings. Leaders of some service agencies tending to the community's deep needs say they are too overworked to consistently send representatives to yet another meeting.

Unlike networks in some other neighborhoods, the Mott Haven network has no paid staff and no foundation-funded liaison to help mobilize potential participants or coordinate the planning efforts. Doyle stepped down as chair of the network in 2003. And the current co-chairs are Diana Lopez-Infante, Bronx area administrator of ACS, and Cheryl Accardi, director of preventive and foster care services at Episcopal Social Services.

Building Relationships

The group has strengthened ties among service providers and with ACS. "Because of the network we can put a face to the phone number at the agency," says co-chair Lopez-Infante, a 20-year veteran of ACS. "And providers call me if they have a problem at ACS. We go out to lunch, we share communities, we talk about how to motivate our staff. It's a close-knit group."

Every member has stories of how fellow members have helped cut through red tape and long wait lists to get services. Sharon Salisbury is a supervisor at the Dominican Sisters Family Life Program, which provides home-based prevention services. Recently, after meeting with a client with a cocaine problem, Salisbury picked up her list of network members and called Women In Need, which provides substance abuse counseling. The client was not initially receptive. But once she realized that Salisbury personally knew the substance abuse counselor, she felt safe enough to pursue treatment.

The district is mostly Latino, and many residents are recent immigrants who speak only Spanish. "Episcopal Social Services has a Spanish-speaking psychiatrist," says Doyle. "This is a great resource. They can't offer this person's services all of the time, but if your client is having a crisis, you know that resource is there."

More formidable goals, however, have been much harder to attain, or even to define clearly within the parameters of the network's monthly discussions.

Tremendous obstacles face children and families in Mott Haven, which had the highest poverty rate of any district in New York City, 45.7 percent, in the 2000 census. Unemployment is staggering in Mott Haven. Just two in five adult residents are considered to be participating in the labor force, and one quarter of those are without jobs. Few adults have a high school

diploma. Infant mortality rates are among the highest in the Bronx.

Not surprisingly, Mott Haven has been hit hard by both drug abuse and drug-related crime. And decent, affordable housing is hard to come by for many families (there are three homeless shelters in the community, but few vacant affordable apartments). But the network's initial foray into figuring out housing solutions led to a dead end, participants recall. "If there's no housing, there's no housing," Doyle explains.

Defining Clear, Achievable Goals

The Administration for Children's Services stated goals for the networks are to prevent abuse and neglect and reduce foster care placements. These have been advanced in Mott Haven thanks to improved communication among front line service providers. But beyond this, more substantial efforts have not moved forward.

Public schools are the largest single source of calls reporting abuse and neglect to the State Central Register of Child Abuse and Maltreatment about children at risk, although more than 70 percent of the reports from schools are not substantiated by investigators.

Mott Haven's public schools present the network with its most difficult puzzle. In general, parents complain of limited information from the schools, particularly those parents who speak only Spanish or don't read well. And school staff rarely refer families with problems to organizations in the community that could help them.

By establishing new linkages between the schools and service providers, the network hopes to prevent unnecessary reports of abuse and neglect by schools. "Our goal is for the schools to call us before kids and families get into a crisis," Doyle explains.

The network made one step toward establishing a presence in schools in October, when it created an after-school basketball league. The network is using a \$2,800 grant to fund basketball games as well as conflict resolution training and other workshops. Now, on Friday afternoons, parents and students participate in programs and games at one local school.

But, otherwise, progress has been slow. Representatives from the Department of Education district office have attended meetings and worked on building relationships between social service groups, school counselors and parent coordinators. But the district employees assigned to the project have, one after another, been promoted or moved on to other jobs.

Some connections continue to bud, however, thanks to plain persistence. Some local social service agencies now sponsor social work students to assist guidance counselors in a local middle school, and at least one parent coordinator and the Parent-Teacher Association president of MS 222 now regularly attend the monthly network meetings.

Aside from the schools project, the network has not yet focused a great deal of work on keeping children out of foster care. There appear to be two reasons why this is so:

- i. To focus on such a clearly defined goal is not easy—or even desired—among many practitioners who routinely see the broad impact of disinvestment and poverty in Mott Haven. In fact, some in the neighborhood feel the network is too rigid in its objectives.

John Shaw, the current volunteer manager of the Mott Haven ACT Collaborative and a clinical psychologist, says he has been disappointed by what he calls the network's "central and almost exclusive focus" on child welfare services. "Our thinking was always, if you want to talk about child welfare you can," he says. "But we also have to talk about local police, and housing, and jobs. It's all interrelated." The Mott Haven ACT Collaborative, founded in 1991, is one of five such community coalitions in the city that have each developed their own local governance structure and taken on a plethora of issues. Thus far, the network and the collaborative have not managed to work together.

2. Front-line staff and supervisors from the ACS field office in the South Bronx have neither been involved nor present at network meetings. At a time when the city is relying heavily on preventive family support services—and less on foster care—advocates argue it is essential that child protective investigators get to know and trust the social service providers in their communities.

Success on a specific goal, of course, requires a degree of focus and discipline, as well as broad acceptance of the goal. While grassroots networking among front line workers can be hugely valuable, it is inherently limited.

But even a more focused effort, such as working with the schools to reduce unnecessary reports to the state child abuse and neglect hotline, is a struggle when there is no dedicated, paid staff in place to advance the effort. In Mott Haven, most of the organizational responsibility is in the hands of the network co-chairs, and they have other jobs to do.

When she thinks about the future, Doyle worries about the relationships with schools. She is also concerned about the lack of mental health providers in the network and in the community overall. Getting them to participate has been hard, she says, in large part because the few agencies and hospitals that do provide mental health say they can't spare the staff to attend meetings.

Doyle also feels the network needs to do more to get parents and youth involved. "We've invited them," she says, "but we couldn't consistently get anyone, even if the meeting was held at a later time." ACS has made \$5,000 available to pay for family involvement and the network is discussing how to choose the people to receive the money, and what they would do.

As for MCAP, the kids miss the program. Jeron would take a radio class again, he says. His friend Orlando desperately wants to do break-dancing and another friend, Anthony, misses the basketball games. They talk about writing letters, asking what they could do to get the funds renewed, but they aren't hopeful.

For now, Jeron has a job with Planned Parenthood, performing skits on sexual health around the city for \$7 an hour. He's glad he had the MCAP experience, if only briefly. If it weren't for that, he'd have been hanging around, he says. "If the weather was good I'd go outside, or sit inside being bored to death. It's not as much fun as the program. PlayStation does get boring, and it's bad for your eyes."

¹ The city's effort to increase the rate at which children are placed in foster boarding homes close to their families is intended to improve stability in the lives of children when they enter care. Visits with parents tend to be more frequent, and children can more easily remain in their current school and other programs.

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