

A Model For Short-Term Process/Cost Analysis Within The Context Of A Long-Term Evaluation Of Family Support Programs

Joseph P. Hornick

*Canadian Research Institute for Law and the Family, Calgary
and*

Norma Kerr

*Ontario Ministry of Health
and*

Steven Raiken

Peat Marwick, Toronto

RÉSUMÉ

Le but de cette communication est de présenter un modèle de la première composante des résultats d'une évaluation complexe dont le but était de fournir un procédé à court-terme et des informations sur le coût de la gestion d'une agence canadienne de soutien aux enfants en ce qui concerne les programmes pour la prévention du soutien à la famille. Neuf programmes de soutien familial institués pour empêcher l'admission d'enfants nécessitant de l'aide, furent le point central de la présente étude. Les données recueillies auprès de 549 clients et 35 employés des programmes furent rassemblées au moyen d'une étude des dépenses horaires, en utilisant des feuilles de présence remplies par les employés. Ceci permit de recueillir des informations détaillées sur les genres de contact avec les clients ainsi que des informations détaillées sur les activités des non-clients. Les résultats concernant le temps passé avec les clients indiquent une grande variation des programmes, même si les programmes traitaient de clients semblables avec une même façon d'opérer. L'étude des dépenses prouve une grande variation du coût pour chaque cas ainsi que le coût horaire du service par client. Plusieurs suggestions ont été faites dans l'intention d'augmenter l'efficacité des programmes sans pour autant diminuer la qualité du service.

ABSTRACT

The purpose of this paper is to present a model of the first component of a complex outcome evaluation which was designed to provide short-term process and cost information to management of a Canadian child welfare agency regarding family support prevention programs. Nine family support programs, developed to prevent admission of children to care, were the focus of this study. Data on the programs' 549 clients and 35 workers were collected by means of a time budget study which used daily time sheets filled out by workers. Detailed information on the types of contacts with clients were recorded, as well as detailed information on non-client activities. Findings regarding time spent with clients indicated a great deal of variation among programs, even

An earlier draft of this paper was presented at a Joint Meeting of the Canadian Evaluation Society, Evaluation Network and Evaluation Research Society, October 1985.

though the programs treated similar clients with similar approaches. Cost analysis also indicated a wide variation in the cost per case, as well as cost per hour of direct client service. Several recommendations were made with the intent of increasing the efficiency of programs without affecting the quality of service.

The Problem

In the current era of financial constraint, the maintenance of child welfare services, especially those services that are not considered core, has become a particularly difficult challenge for both program administrators and research evaluators. According to a study by the Organization for Economic Cooperation and Development, all social welfare programs have come under scrutiny and there has been a trend away from spending on prevention oriented programs such as day care and family support programs and a tendency towards increasing allotment of funds to more tangible items such as pension programs (Globe and Mail, 1984). In part, the increasing size of the elderly population as compared with the proportion of children in society is responsible for this situation. However, as Garbarino (1984) points out, the economic conditions that inevitably will lead to cutbacks in child welfare spending will also result in increased unemployment and economic deprivation among families which, paradoxically, will increase the demand for family and child welfare services.

Clearly, supporters of the child welfare system must respond to this situation of constraint. The "advocacy" approach calls for unquestioning maintenance of services for children. Proponents of this approach are finding it increasingly difficult to obtain support and funding for services without the provision of substantial accountability mechanisms. In the past, large scale, complex program evaluation has been the common mechanism for demonstrating program efficiency and effectiveness. However, complex evaluation often takes several years to complete and unfortunately, in times of budget cuts, agency service planning cannot wait for the completion of long-term longitudinal research evaluation projects.

Most complex evaluation studies of ongoing service delivery programs are designed to include the following subcomponents: (1) process analysis, which focuses on the objectives and activities of the programs; (2) needs assessment, which focuses on the needs of the clients involved in the program; (3) outcome analysis, which focuses on program effectiveness; and, (4) cost analysis (Rossi et al., 1979; Posavac & Carey, 1980).

The purpose of this paper is to show that it is possible to provide service planners in child welfare agencies with short term information which could help to make programs more efficient without jeopardizing the quality of service offered to the client over the longer term. In the current example, short term feedback was accomplished by dividing long term complex outcome evaluation into three major phases. Each of these phases included a written report and was completed in approximately six months. This article focuses on the first stage, a process/cost analysis of nine family support programs. The second stage focused on identifying the specific needs of the clients involved with the programs, and the final stage documented program effectiveness.

The Programs

In response to the mandate of prevention, a Children's Aid Society in Ontario placed a high priority on reducing the number of children coming into care. The prevention strategy included changing policies and developing nine family support service programs. These family support programs were developed to prevent admissions of children to care by providing support for the child and/or family in the community setting. The question of whether these programs fulfilled their objective, namely to efficiently and effectively prevent removal of children from their families, was the subject of an ongoing complex evaluation study.

Five of the programs focused primarily on adolescents, however, services were also offered to a limited number of ten to twelve year olds. In these programs the primary method of service was group work although home visits and individual counselling were provided when needed. Group activities included recreation, life skills training, and discussion groups. All programs involved the parents to some extent and the amount of involvement depended upon the orientation of the program and the individual case situation.

The other four family support programs focused more on the family, primarily the mother. The primary method of service involved sending child care workers into the homes of clients to work on an individual basis, focusing frequently on child management training.

Study Design

The purpose of the first stage of the evaluation study was to obtain a profile of client services, worker activities, and related costs for each of the nine programs. The study design used was a one-shot time budget case study.

Sample and Procedure

Data for the study were collected from the full-time program workers (N=35), part-time program workers (N=3), and student placement workers (N=11) by means of daily time sheets. These daily time sheets were used to record what the workers did during their working day, including direct contact with specific clients, the setting, type of activity, the amount of time per activity, expenses, and driving time. A comprehensive instruction code book was distributed with the time sheets and workers were instructed by the researchers to complete the time sheets at the end of each working day during the two-week period.

Analysis of Data

After the data were collected and cleaned, two different coding procedures were used. First, direct contact with specific clients was coded for each case or family aggregate (N=305) and client (N=549) by program. Types of cases or contact groups were then identified and the average time of services was calculated for each type, by program. The typology of cases was empirically derived on the basis of who the worker saw during the two-week period. The types developed were as follows: (1) Type I—contact made with mother only; (2) Type II—contact involved a father (including common-law) alone

or in combination with a mother and/or child(ren); (3) Type III—contact involved a mother and one child; (4) Type IV—contact involved mother and two or more children; (5) Type V—contact involved child only (including adolescent).

The second procedure used for coding the data focused on the workers as the unit of analysis as opposed to the clients. Client contact time was aggregated and non-direct client activity was coded according to 15 specific activities and averaged for all full-time workers in each program. Finally, the time budget data were compared with cost data from financial records to estimate program case costs and hourly costs.

Limitations

The reliable use of a one-shot time budget method within the context of a complex longitudinal evaluation requires that certain inherent limitations be considered. The major limitations of the current study and actions taken to minimize the effects of these limitations are briefly outlined below.

Lack of Outcome Information

The purpose of long-term evaluation is to establish the effectiveness of programs relative to their cost. The time budget study, however, measures only the time expended on specific activities—not outcomes. Thus, all conclusions concerning the activities and costs of programs must be based on the assumption that all programs are equally effective and the findings from a time budget study should never be used as the only source of information in making decisions about major changes to the program structure. In the current study, recommendations were made to make the programs more efficient by increasing the time spent with clients without changing the treatment program.

Seasonal Variations

Time budget studies are inherently sensitive to seasonal variations in the demand for services. These variations can, of course, affect the amount of time spent with clients and escalate or diminish the apparent costs of a program. To diminish the effects of this limitation, the data collection time frame can be increased or, better yet, multiple data collection periods can be employed. In the current study, data collection took place over a two-week time period. Unfortunately, neither multiple data collection periods nor a longer data collection period were possible. However, the month during which data were collected, namely November, was considered to be an average month for demand of services.

Findings: Direct-Client Service

Findings regarding the amount of time spent and the way client contact time was used in the five adolescent-focused programs indicated both substantial similarities and some unexpected differences among the programs. Table 1, for example, contains the average (mean) contact times for the cases and clients of the five Alternate Care Programs. It was somewhat surprising to find such a high degree of variation in the average amount of time spent with each case. For example, average case contact time varied from 3.38 hours for Program A2 to a high of 15.54 hours for Program A4

Table 1

The Average Amount of Time Spent in Direct Client Contact for all Cases and Clients for the Five Adolescent Programs for the Two-Week Time Period

Program	Average Time with Case (hours)	N of Cases	Average Time with Client (hours)	N of Clients
A1	7.14	51	6.26	69
A2	3.38	47	3.37	79
A3	11.44	27	9.55	44
A4	15.54	25	10.94	43
A5	8.12	37	6.73	50
Overall Average	9.12	37	7.37	57

Additional analysis of data on case contact types indicated, as expected, that all five of the adolescent programs focused primarily on the child or adolescent. In addition, all of the programs, to different degrees, attempted to involve the parents in program activities. Program A4 for example, seemed to be the most "family oriented" program given the fact that it involved contact with mothers in over 75% of its cases and fathers in 12% of its cases. Program A1 was also relatively successful in involving fathers since 15.6% of its cases included the father; mothers, however, were not as involved as in Program A4. Other significant findings regarding contact indicated that when fathers were involved in program activities, the setting for the father-involved activities tended to be the client's home as opposed to the program setting. This finding suggests that it was difficult to involve the father in program activities unless the program worker actually went to the client's home.

Data also indicated that service activities for four of the adolescent programs (all but Program A2) were a combination of group life skills training, group recreation and group discussion, supplemented by individual activities such as individual and family counselling, assessment, and outreach when they are identified as needed for a particular case. Furthermore, most of these programs had a moderate amount of informal contact with child clients. The parent client activities for these same four programs were also very similar consisting of recreation groups which were usually utilized more by mothers than fathers. These parent group activities were likewise supplemented by individual activities such as individual and family counselling.

Program A2 seemed to be very different than the other adolescent programs. Core service to clients in this program usually consisted of individual counselling and some group activities. However, as indicated by contact time data, the clients in this program received significantly less contact time than clients of other programs.

Table 2 indicates that the average case contact time of the family programs was 3.34 hours for the two-week period which was much less than the 9.12 hour average for the adolescent programs. In contrast to the adolescent programs, almost all the family program service was delivered face-to-face in the home setting.

Table 2

The Average Amount of Time Spent in Direct Client Contact for all Cases and Clients for the Four Family Care Programs for the Two-Week Time Period

Program	Average Time with Case (hours)	N of Cases	Average Time with Client (hours)	N of Clients
F1	3.14	36	2.98	83
F2	2.94	42	2.77	88
F3	3.69	12	3.70	28
F4	2.65	28	2.48	65
Overall Average	3.34	30	2.48	66

Time budget information from the four family programs indicated that their primary focus was the mother. The child and the father were involved with the programs to a far lesser extent. The proportion of father-involved cases ranged from a low of 11.9% to a high of 25%. All family programs offered a core of services to the parent consisting of individual child management training and assessment supplemented by individual and family counselling. In terms of more unique characteristics, Program F2 offered a substantial amount of outreach by telephone during the study and Programs F3 and F4 augmented their individual services to parents and children with group activities.

Findings: Workers' Non-Direct Client Time

Non-direct client time is defined as time not spent in face-to-face or telephone contact with the client. Underlying the rationale for differentiating between

direct client contact and non-direct client contact is the assumption that clients will improve more when they are seen more often. This assumption is consistent with several reviews of family support program evaluation literature (Sinanoglu, 1981; Jones et al., 1981).

Table 3 indicates that the average amount of time spent by workers in direct contact with clients in the adolescent programs ranged from a low of 33.9% of total time for Program A1 to a high of 46.5% for Program A2. The analysis further indicated that the average non-direct client time ranged from a low of 40.7% of total worker time for Program A4 to a high of 58.5% for Program A1. The overall average of non-direct client time for all these programs was 48.3% of workers' time.

Table 3

Time Budget Profile—Adolescent Programs

Program and Worker Category	Time Allocation:*							
	Direct Client Time		Non-Direct Client Time		Other Activities*		Total	
	Hours	%	Hours	%	Hours	%	Hours	%
A1								
Full-time Workers (N=2)	27.09	33.9	46.82	58.5	6.09	7.6	80	100
Part-time Workers (N=2)	15.22	34.9	28.35	65.1	--	--	43.57	100
Student Placement Workers (N=3)	14.39	46.0	16.87	54.0	--	--	31.26	100
A2								
Full-time Workers (N=4)	37.2	46.5	35.8	44.8	7.0	8.7	80	100
A3								
Full-time Workers (N=5)	31.49	39.0	36.77	45.5	12.5	15.5	80.76	100
Student Placement Workers (N=2)	18.72	35.6	28.63	54.5	5.2	9.9	52.55	100
A4								
Full-time Workers (N=4)	35.68	41.5	34.96	40.7	15.25	17.8	85.89	100
A5								
Full-time Workers (N=4)	27.85	34.8	41.55	51.9	10.6	13.3	80	100
Student Placement Workers(N=4)	14.58	38.4	23.34	61.6	--	--	37.92	100
* Average number of hours spent per client during the two-week study period.								
** "Other Activities" includes accountable and unaccountable time off.								

In contrast, Table 4 indicates that the overall average proportion of worker's time spent on direct client services for the family programs was 36.8%. The proportion of time ranged from a low of 21.6% for Program F2 to a high of 49.9% for Program F3. The analysis also indicates that the total non-direct client time ranged from a low of 37.4% of total worker time for Program F3 to a high of 55.3% for Program F1. Overall, the proportion of direct client contact time for the adolescent programs was 39.1% of total worker time compared to 36.8% for the family programs. Although there have not been many studies conducted on this particular topic, the little information that is available would suggest that these figures are rather low. For example, a time budget study of family service workers from another child protection agency by Hornick and Clarke (1986) over a six-month period indicated that social workers spent approximately 51.2% of their time in direct contact with clients and lay therapists spent 76.8% of their time in direct contact with clients.

Table 4
Time Budget Profile—Family Care Programs

Program and Worker Category	Time Allocation:*							
	Direct Client Time		Non-Direct Client Time		Other Activities*		Total	
	Hours	%	Hours	%	Hours	%	Hours	%
F1 Full-time Workers (N = 5)	28.08	32.6	47.55	55.3	10.4	12.1	86.03	100
F2 Full-time Workers (N=7)	17.25	21.6	39.0	48.8	23.75	29.7	80	100
Student Placement Workers (N=3)	6.1	20.4	21.1	70.6	2.7	9.0	29.9	100
F3 Full-time Workers (N = 1)	39.9	49.9	29.9	37.4	10.2	12.7	80	100
F4 Full-time Workers (N = 2)	34.55	43.0	43.37	53.9	1.5	1.9	79.42	100
Student Placement Workers (N = 1)	16.5	42.8	22.09	57.2	—	—	38.59	100
* Average number of hours spent per client during the two-week study period. ** "Other Activities" includes accountable and unaccountable time off.								

Analysis of specific non-direct client activities revealed how most of the non-direct client time was spent. A large proportion of adolescent program workers' time was spent in driving, record keeping, preparing for clients, information gathering and training. Driving and record keeping also accounted for a great deal of the family program workers' non-direct client time. However, the family program workers seemed to have many more non-client specific involvements than the adolescent program workers, and they spent less time on each specific activity. For example, family program workers were often involved in individual supervision, team meetings, and case reviews. In contrast, however, adolescent program workers seldom reported being involved in as many non-direct client organizational activities.

Findings: Costs of the Programs

Information from the time budget study and the agency's financial records were utilized to examine the costs of the programs. Costs were examined both in terms of estimated unit cost per case over the estimated duration of cases for each program, as well as cost estimates per hour of direct case contact which was based on the average direct client contact time. The actual cost of the programs was based on financial records for 1982. The total costs of each program were calculated for the two-week period during which the time budget study was conducted.

The total cost of the five adolescent programs for the two weeks of the study was \$30,883. On the basis of this cost, annual expenditures for these programs would have been \$802,958. The total cost of the four family programs for the two-week period of the study was \$17,366 and the estimated annual expenditure would have been \$451,516.

Table 5 presents a breakdown of the unit and hourly costs of the adolescent programs. The overall costs of the adolescent programs in Table 5 were based on the sum of staff salaries, benefits, and other operating expenses for the two-week period during the time budget study. Other operating expenses included the actual cost for such things as building rental, telephone and client needs. The other costs of the programs ranged from a high of 28.8% of the total expenditures for Program A3 to a low of 10.9% of the total expenditures for Program A1. Program A2's other costs were also relatively high at 21.8% of the total expenditures.

The unit cost per case of the adolescent programs ranged from a low of \$1,552 per case for Program A1 to a high of \$4,009 for Program A3 (mean of all programs = \$2,637). The estimated cost per hour of direct client contact ranged from a low of \$12 per hour for Program A4 to a high of \$48 per hour for Program A2.

The overall costs of the four family programs presented in Table 6 were based on staff salaries plus benefits. It was not possible to identify additional expenses. The unit cost per case of the family program ranged from a low of \$1,231 per case for Program F1 to a high of \$3,118 per case of Program F2 (mean of all programs = \$1,946). The estimated cost per hour of direct client contact ranged from a low of \$27 per hour for Program F3 to a high of \$68 for Program F2.

Table 5
Unit Cost and Hourly Estimates for the Adolescent Programs

Program	Time Period	Total Program Cost	N of Cases	(2) Unit Cost /Case	(2) Est. Case Cost/hr	N of Clients	(3) Unit Cost /Client	(9) Est. Client Cost/hr
A1	- Actual two weeks	\$ 5,664.69	51	\$ 111.07	\$15.56	69	\$ 82.10	\$13.11
	- Case estimate based on 6.5 months (5)	\$79,164.04	51	\$1,552.24	—	69	\$1,147.30	—
A2	- Actual two weeks	\$ 7,690.23	47	\$ 163.62	\$48.41	79	\$ 97.34	\$28.86
	- Case estimate based on 7.9 months (5)	\$130,618.56	47	\$2,779.12	—	79	\$1,653.40	—
A3	- Actual two weeks	\$ 7,511.97	27	\$ 278.22	\$24.32	44	\$ 170.72	\$17.87
	- Case estimate based on 6.7 months (5)	\$108,247.78	27	\$4,009.18	—	44	\$2,460.18	—
A4	- Actual two weeks	\$ 4,838.73	25	\$ 193.55	\$12.43	43	\$ 112.52	\$10.29
	- Case estimate based on 7.5 months (5)	\$ 78,024.52	25	\$3,120.98	—	43	\$1,814.52	—
A5	- Actual two weeks	\$ 5,178.00	37	\$ 139.95	\$17.23	50	\$ 103.56	\$15.39
	- Case estimate based on 5.9 months (5)	\$ 63,751.89	37	\$1,723.02	—	50	\$1,275.04	—
Notes: (1) Based on dividing Total Program Cost by N of Cases (2) Based on dividing Unit Cost per Case by mean of direct contact per Case from Table 1 (3) Based on dividing Total Program Cost by N of Clients (4) Based on dividing Unit Cost per Client by mean of direct contact per client from Table 1 (5) Average duration of case is based on information obtained through the Retrospective Family Support Study (Hornick et al., 1982)								

Table 6
Unit Cost and Hourly Estimates for the Adolescent Programs

Program	Time Period	Total Program Cost	N of Cases	(2) Unit Cost /Case	(2) Est. Case Cost/hr	N of Clients	(3) Unit Cost /Client	(9) Est. Client Cost/hr
F1	- Actual two weeks	\$ 5,155.65	36	\$ 143.21	\$45.61	83	\$ 62.12	\$20.84
	- Case estimate based on 4 months (5)	\$ 44,338.59	36	\$1,231.63	—	83	\$ 534.20	—
F2	- Actual two weeks	\$ 8,344.74	42	\$ 198.68	\$67.58	88	\$ 98.83	\$34.23
	- Case estimate based on 7.3 months (5)	\$130,970.69	42	\$3,118.35	—	88	\$1,488.30	—
F3	- Actual two weeks	\$ 1,212.49	12	\$ 101.04	\$27.38	28	\$ 43.30	\$11.70
	- Case estimate based on 10 months (5)	\$ 26,068.54	12	\$2,172.38	—	28	\$ 931.02	—
F4	- Actual two weeks	\$ 2,653.85	28	\$ 94.78	\$35.76	65	\$ 40.82	\$16.45
	- Case estimate based on 6.2 months (5)	\$ 35,375.82	28	\$1,263.42	—	65	\$ 544.24	—
Notes: (1) Based on dividing Total Program Cost by N of Cases (2) Based on dividing Unit Cost per Case by mean of direct contact per Case from Table 2 (3) Based on dividing Total Program cost by N of Clients (4) Based on dividing Unit Cost per Client by mean of direct contact per client from Table 2 (5) Average duration of case is based on information obtained through the Retrospective Family Support Study (Hornick et al., 1982)								

It is difficult to compare the costs of both the adolescent and family programs with the costs of family support programs discussed in the literature because so few studies have been conducted in this area. The limited material that is available, however, suggests that most of the programs examined were average in cost and a few could be considered expensive. For example, a study of 11 family support programs dealing with child abusers in the United States estimated that the annual expense per case for a lay service model was about \$1,400, \$1,700 for an individual counselling model, and \$4,000 a year for a service package which included professionally-provided group services (Cohn, 1979:495). Furthermore, a study of a child abuse treatment program by Hornick and Clarke (1986) found that the cost of lay therapy and regular treatment by Children's Aid Society workers was \$3,060 per year at 1980 rates. In this study, however, clients were treated for up to two years and their average contact was 13.41 hours per month with the lay therapists and 2.81 hours per month with their social workers. By comparison, the average unit cost for the adolescent programs was \$2,647 for a case lasting an average of 6.9 months and \$1,946 for the family programs' case lasting an average of 6.8 months.

Comparisons with the cost of in-care cases at the agency studied indicated that the cost of keeping a 13 to 15 year old, non-ward or society ward in care for the average of 6.3 months in various settings was: (1) \$2,208 for foster home care; (2) \$6,220 for treatment homes; and (3) \$10,348 for an outside institution.

Conclusions and Recommendations

Generally, the time budget study and cost analysis were very useful for providing feedback to all of the program staff and managers involved in the study. Feedback sessions were arranged for each program and the results and recommendations of the study were discussed with the researchers. This open and flexible interaction between the research team and the specific program staff helped to diminish the "winners and losers" labeling that can take place after several programs are compared in one study. Emphasis during these sessions was placed on using the study data to demonstrate how each individual program could improve the efficiency and effectiveness of service to their clients.

The findings of the time budget study represent only a portion of an overall evaluation. Nonetheless, they clearly led to several useful recommendations which were intended to improve the efficiency of the programs without negatively affecting the quality of service. The following recommendations were made:

- All programs should strive to increase direct contact time with the client and decrease non-client specific activities. This could be accomplished in various ways including having fewer meetings and standardized record keeping.
- Programs with low case to worker ratios should strive to increase their caseloads to approximately nine cases per worker.
- All programs should attempt to increase involvement of the father since there is little evidence of involvement of fathers. This may necessitate outreach to the client's home.

- Group activities should be encouraged if they are consistent with program philosophy because their use will help to increase cost efficiency.
- The role of family program workers should be reviewed because of the large amount of time spent in numerous non-client specific activities. Adolescent programs should be encouraged to minimize other non-salary costs.

By six months after the time budget study, the programs had implemented the relevant recommendations and achieved the following:

- Direct contact time with clients had been slightly increased by prioritizing and reducing non-client specific activities.
- Attempts were made to increase caseloads where possible.
- Increased awareness of the need to involve the father in service resulted in more home care being provided for intact families.
- Group activities were introduced based on common client needs.
- Review of the structure and functions of all family support programs began.
- Some specific programs used the time budget study results to reaffirm the focus of their program, and to reacquaint the users (i.e., family service workers who referred clients to the programs) with the mandate and focus of their service.

References

- Cohn, A.H. (1979). Essential elements of a successful child abuse and neglect treatment. *Child Abuse and Neglect*, 3, 491-496.
- Garbarino, J. (1984). Child welfare and the economic crisis. *Child Welfare*, 63, (2), 3-15.
- Globe and Mail. (1984). Axe hangs over social welfare programs. (March 5).
- Hornick, J.P., Kerr, N., & Ross, R. (1982). *Alternate care, community child care, family caring and sharing and group work programs study: Interim report*, Toronto. Children's Aid Society of Metropolitan Toronto (September).
- Hornick, J.P., & Clarke, M. (1986). A cost/effectiveness evaluation of lay therapy treatment for child abusing and high risk parents. *Child Abuse and Neglect*, 10, 309-318.
- Jones, M.A., Magura, S., & Shyne, A.W. (1981). Effective practice with families in protective and preventive services: What works? *Child Welfare*, 60 (1), 67-80.
- Posavac, E.J., & Carey, R.G. (1980). *Program and evaluation methods and case studies*. Englewood Cliffs, NJ: Prentice-Hall.
- Rossi, P., Freeman, H., & Wright, S. (1979). *Evaluation: A systematic approach*. Beverly Hills: Sage Publications.
- Sinanoglu, P. (1981). Working with parents. In Maluccio and Sinanoglu (Eds.) *The Challenge of Partnership*. New York: Child Welfare League of America, Inc.