across departmental boundaries will necessarily be delayed for decades. An expanded IISSAC (Intergovernmental Information Systems Advisory Council) could be the lead organization for meeting these needs.

We can look next door for a model of how such support for local government might be funded. Wisconsin has developed a Land Information Board that distributes money to counties for upgrading their land information systems, maps, and data about tax parcels. Over $6 million is raised each year from fees charged to register deeds. Two-thirds of these funds are automatically returned to counties whose plans to upgrade their land records have been approved by the state board. The remainder is available for special project grants to the counties. The board has both the power and the resources to coordinate the development of county land information systems.

Each of these recommendations requires funds and these are hard to come by in our current economic climate. The Wisconsin model of tying the source of funds to the group that ultimately benefits is intriguing, and perhaps more can be made of this model. It is clear that many more public dollars will be spent on GIS in the next few years. Funding these three recommendations would ensure that those public dollars are spent wisely. If we let things develop in their natural course, we will later have to spend much more money making things fit together as they should.

Social workers, psychologists, and other helping professionals have been trained primarily to work with voluntary clients who seek their services willingly and without pressure from others. Many of the clients they encounter, however, are involuntary. Some show up because of a court order, for example. But often pressure from family members can be as potent as legal pressure. In some cases it may be even more potent. Sometimes legal mandates amount to a slap on the wrist—you must attend an informational session about drunk driving, for instance—while family members can and do threaten separation if a person does not seek help. Men, for example, who enter treatment programs for domestic violence can often be described as “spouse mandated” when they are not legally mandated. There are, then, a number of ways in which a person can be an involuntary client.

Studies have tended to show that court-ordered clients do about as well as persons who are not under court order when it comes to treatment outcome, though the durability of changes has been questioned. Some scholars suggest that whether or not a person is court-ordered into counseling is less significant in effecting outcomes than the interaction between client and practitioner at the beginning of their contact. They say that if involuntary clients come to at least partial agreement with practitioners about the help they will receive, this improves the outcome. In addition, involuntary clients appear to have better outcomes if a range of choices is available to them.

The research to date has focused on the outcomes for clients who are ordered into treatment by the court, and has not considered the full range of involuntary clients, or what is now referred to as the “range of voluntarism.” This study examined the range of voluntarism in a section of Hennepin County Family Services program known as the Home Team Services. It examined the impact of different degrees of willingness to be helped on outcomes in a program that is designed to foster client willingness through empowerment.

How the Home Team Works

Home Team units are part of the national family preservation movement designed to help families learn new skills so that their children will not need to be placed outside their home. Services to the family are often provided on a time-limited, intensive basis. In Hennepin County, families meet with Home Team workers for an average of two hours per week for three to six months. The families involved often have histories of chemical abuse, physical abuse, or child neglect. They often need help with parenting and communication skills and they are
Improving family communication is one of the skills taught by Home Team Services in Hennepin County.

linked with additional resources such as improved housing and recreation programs.

Referrals are made to the Home Team unit when requests come into Hennepin County Family Services which indicate that though family problems exist, they have not become so serious that the children may need immediate out-of-home placement. Families who receive Home Team Services are legally voluntary, but this does not mean that they always desire the services offered. Many parents of troublesome teens, in fact, call with a request for out-of-home placement. These families may receive the message that out-of-home placements will be available only when they have "jumped through the hoop" and demonstrated that less intrusive methods, such as Home Team Services, will not work. Families with limited financial resources may also choose Home Team Services as a better alternative then receiving no services at all. The often pressured circumstances under which families who seek placement receive services has rarely been acknowledged.

The Study Sample

A random sample of one sixth of all the families served by the Home Team unit between January 1st and July 1st of 1988 was selected (80 out of 480 cases). The sample size was actually seventy-six families because records could not be located for four of them. The family experience with Home Team Services was studied in three ways: seventy-six case files were analyzed, thirty social workers completed questionnaires about the families they worked with and the services they offered them, and twenty-seven families completed telephone interviews.

The families in the study can be divided into those who accepted an offer of service from the Home Team unit and those who didn’t. Forty-nine accepted the service offer and more is known about them than the others. The children in these families, were generally young teenagers; the average age for daughters was eleven, for sons it was thirteen. The average age for mothers was thirty-six and for fathers, thirty-nine.

Case records indicated that family members averaged between two and three problems prior to receiving services. These included chemical abuse or chemical dependency for over half of the families. In addition, 38 percent had experienced prior physical abuse and 28 percent had instances recorded of prior child neglect. Court services, mental illness, delinquency, and sexual abuse had been reported for more than 20 percent of the cases.

The presenting problems included a child out of control in more than 60 percent of the families. Nearly half were having problems with parenting skills and with child-parent relationships. Almost a third reported truancy at school and absences at home, as well. Significantly however, chemical abuse was cited in less than 20 percent of the cases as a presenting problem.

The Range of Voluntarism

Two-thirds of the families (fifty-two) were at least legally voluntary as they were self-referred. Twenty-one percent (sixteen families) were there because of legal mandates—half from child protection and half from the juvenile court. An additional 11 percent (eight families) had been referred by other sources, such as schools and private counselors.

Because other research has suggested that client willingness to receive services may not be predicted by referral status, the social workers who worked with these families were asked to rate the family’s willingness at first contact to receive service. They rated about 40 percent of the families (eighteen) as very willing, almost 80 percent (thirty-eight) as willing, and about 20 percent (nine) as unwilling to receive services.

The same pattern of willingness was repeated when families were interviewed by telephone. Half reported themselves as willing to accept services at the time of referral. More than 60 percent reported that they felt they had a choice to accept or reject the services offered, but 20 percent thought they had made a forced choice because of limited options. Indeed, nearly half of the families considered other options before accepting services. The perceptions that families had about their choices appeared to be related to their referral status. Eighty percent of the self-referred families reported that they had a choice to accept service, while only 55 percent of those referred by others felt they had a choice. Similarly, 93 percent of the self-referred families rated themselves as voluntary, while only 62 percent of those referred by others considered themselves voluntary. Another contrast between these two groups was that 36 percent of the self-referred families considered other options before accepting placement with the Home Team, while 62 percent of those referred by others consider other options first. However, nearly all the families saw themselves in great need of help. It is interesting to note that while only half were originally willing to accept home-based services, nearly 80 percent felt willing after the service offer was made.

Delivery of Services

Home Team Services initially meets with a family to discover what their problems are and to recommend an offer of service to help them. The family can then either ac-
cept or reject the offer. Forty-nine of the seventy-six sample families accepted the service offer. Families who were self-referred were significantly more likely to accept the offer than those referred by other sources (Table 1).

More than 40 percent of the families received training in parenting skills or were referred for counseling. Families received an average of eighteen hours of service with about fourteen home visit hours. Slightly more than half of the families' sons and daughters were involved in the home visits.

A review of case records showed that contracts were developed with 80 percent of the families. Nearly three-quarters of the cases included a goal that reflected the individual family's goals and records showed family involvement in goal setting in about a third of the cases. Written contracts were made in just over 20 percent of the cases. The social workers who worked with these families reported similar levels of contract development and inclusion of family goals, but much higher levels of family participation (more than twice as high) than the records indicated. Eighty-six percent of the families interviewed reported that their concerns were heard and their views expressed in a contract.

**Service Outcomes**

Case files indicated that about one and a half problems improved for most families. Almost half had an improvement in parent-child relationship. Thirty-nine percent improved in parenting skills and about a third improved in problems with a child out-of-control. Other problems, such as truancy, absences from home, chemical abuse, and delinquency had less successful outcomes. These problems improved for less than 20 percent of the cases.

Placement outside of the home was avoided for 75 percent of the children in the study as only twelve children were placed during the service period. There were no significant differences in out-of-home placement rates for most of the variables we considered, including type of referral, willingness to receive services as rated by the social workers, and whether the families were new to the program or had come back into the program. However, over half of the teenagers that needed chemical dependency evaluations were placed outside their home and daughters who were placed tended to be older than those not placed.

About half of the families completed the service period, while 16 percent either rejected further service or had their service stopped because the social worker felt it would no longer be useful. Social workers rated three quarters of the families as benefiting from Home Team Services at least somewhat. They reported substantial or complete achievement of case plans for about three-quarters of the families while one-quarter had limited or no benefits.

Social workers rated family abilities both before and after the service period on seven variables: parent-child relationships, family problem solving, child's behavior at home, parenting skill, parent-child communication, family functioning, and child's behavior at school. The mean ratings, on a scale of one to five, improved on all seven variables after the service period. Greatest improvements were in family problem solving and parent-child relationship. The rating with the least change was child's behavior at school.

Meanwhile, 75 percent of the families interviewed by phone rated their situation as better overall. Almost all these families reported that the services met at least some of their needs and two-thirds reported that they came to see services in a new way.

**The impact of Voluntarism**

Whether a family was self-referred, court-ordered, or referred from another source to the Home Team did not significantly affect the outcome of services for that family for most variables. Self-referred families were significantly more likely to accept a service offer and tended to desire Home Team Services more frequently. Ratings by social workers showed no significant differences between self-referred families and families referred by others when it came to benefiting from the service, rate of out-of-home placement, completion of the service period, or achievement of case plans. However, differences were apparent based on the family's willingness to receive services at first contact. Families that had been rated as more willing by social workers were significantly more likely to accept service, complete service, and be perceived as benefiting from the service and as achieving their case plans than families rated lower in willingness (Tables 2 and 3). Referral status and the social workers' ratings of family willingness at first contact were related but not identical. A quarter of
the families that were self-referred were not rated as willing by social workers, while over half of the families referred by other sources were rated as willing.

Discussion of the Findings

This study indicates that Home Team Services were successful in avoiding unnecessary out-of-home placement as well as in achieving successful outcomes on many family problems. Problems which could be addressed in the home such as parent-child communication, parenting skills, and difficulties with out-of-control children had the most successful outcomes. Problems with truancy, absences from home, and child behavior at school were less frequently improved.

This exploratory study suggest that when a family is self-referred it is more likely to desire family preservation services like those offered by the Home Team and it is more likely to accept such services. Referred status, however, does not make a significant difference in the outcome for the family once it has accepted service. Rather it is family willingness to receive services that makes the difference in how much a family benefits and in how well it achieves the goals set out in its case plan.

In fact, family reports suggest that the interaction with the social worker who explains services and helps to create a contract may be the critical factor as a family moves from varied levels of skepticism to a generally favorable view about the service. Social workers should not assume that self-referred clients are actually willing to receive service nor that clients referred by others, even by a court, are unwilling. These findings support previous research which suggests that referral status is not as important as how families experience their first contact with a family preservation service. They also support an emphasis on the engagement process with families who have been pressured to accept services.

Such a process focuses on separating what is negotiable from what is not, clarifying and emphasizing choices, and negotiating an agreement which includes client defined goals.

Ronald Rooney is an associate professor in the University of Minnesota’s School of Social Work. He recently published a book that grew out of the study presented here (Strategies for Work

Successful outcomes for families in treatment seem to rely more on how families experience their first contact with Home Team Services than on whether or not they are initially willing or unwilling clients.
Table 2. Family Willingness and Outcomes of Service Period

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Number of Families</th>
<th>Willingness (Mean)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service acceptance*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do not accept</td>
<td>11</td>
<td>3.27</td>
</tr>
<tr>
<td>Accept</td>
<td>33</td>
<td>1.90</td>
</tr>
<tr>
<td>Service completion*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do not complete</td>
<td>20</td>
<td>2.85</td>
</tr>
<tr>
<td>Complete</td>
<td>23</td>
<td>1.78</td>
</tr>
</tbody>
</table>

*Based on a rating of 1 to 5 where 1 = very willing and 5 = not willing or rejected service. *All of these numbers are statistically significant. The probability that they could have occurred by chance is one in a hundred.

Table 3. Correlations between Family Willingness* and Family Well-Being after Treatment

<table>
<thead>
<tr>
<th>Family Well-Being</th>
<th>Correlation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived benefit</td>
<td>0.69*</td>
</tr>
<tr>
<td>Family ability scale</td>
<td>0.53*</td>
</tr>
<tr>
<td>Achieve case plan</td>
<td>0.56*</td>
</tr>
</tbody>
</table>

*Family willingness was based on a rating of 1 to 5 where 1 = very willing and 5 = not willing or rejected service. *The number is statistically significant. The probability that it could have occurred by chance is one in a hundred.


This study was supported by an interactive research grant from CURA and the Office of the Vice President for Academic Affairs, University of Minnesota. Interactive research grants have been created to encourage University faculty to carry out research projects that involve significant issues of public policy for the state and that include interaction with community groups, agencies, or organizations in Minnesota. These grants are available to regular faculty members at the University of Minnesota and are awarded annually on a competitive basis.

This study was also supported by a grant from the University’s College of Human Ecology. The author wishes to thank Carol Ogren, Program Manager of Family Services, and Larry Mitchell, Supervisor of Home Team Services of Hennepin County for their cooperation and support, without which this study would have been impossible. Maria Scannapieco, a doctoral candidate in the School of Social Work at the time of this study, served as project director. Her dissertation was based on part of the data from the study. Elizabeth Mandel, a masters degree student in social work, was the research assistant for the project.

In an attempt to keep our readers more up to date about CURA projects, we are featuring a few capsule descriptions of projects currently underway in each issue of the CURA Reporter. The projects listed this time are projects funded by CURA through its interactive research grants. These grants are designed to encourage University of Minnesota faculty to carry out research projects that involve significant issues of public policy for the state and that include interaction with community groups, agencies, or organizations in Minnesota. This year marks the tenth year that the grants have been made. They are available to regular faculty members at the University and are awarded annually on a competitive basis. The results of interactive research grants are always featured in the CURA Reporter.

Voluntary Poverty to Escape Nursing Home Costs. An emerging variation of estate planning is helping older people voluntarily divest their financial assets so that Medicaid ends up paying for their nursing home costs while the family fortune is saved for their heirs. Two University researchers, an assistant professor in Family Social Sciences and a research fellow in the Humphrey Institute, are collaborating in a study focused on better understanding this phenomenon, sometimes called “Medicaid estate planning.” They will assess how widespread the practice is among elderly Minnesotans, who is involved, what mechanisms and processes are used, who makes the decisions, and what various private and public stakeholders think about alternative policy options for financing long term care. The problem is a critical one because the number of elderly who will need long term care is expected to increased by 68 percent between 1990 and 2010. Central to the study is explaining the extent to which long term care should be paid for by the individual or by society as a whole. The researchers will work with a number of community organizations and agencies during the study. These include associations of nursing home providers, the agencies that administer the Medicaid program through the Minnesota Department of Human Services and the Association of Hennepin Counties, professionals in estate planning, lawyers, and legislators.

Computer Analysis of County Economic Conditions. The growing use of computer technology is generating huge amounts of raw data but progress is slow in learning how to extract useful knowledge from the raw data. An associate professor of electrical engineering is exploring a new tool, known as “automatic knowledge extraction,” for use in analyzing economic conditions and trends in Minnesota counties. Using economic indicators provided by the Economic Analysis Office of the Minnesota Department of Trade and Economic Development, he is developing a mathematical technique, Constrained Topological Mapping, that will, first, reveal unknown statistical dependencies among several economic indicators (for example retail industry revenues, median family income, and personal income) and, second, will perform automatic assessments of county economic conditions as a whole on the basis of several dissimilar economic indicators. The technique could greatly expand our ability to effectively analyze and evaluate local economies.

Fertilizers on Twin Cities Lawns. Recent reports have suggested that home-owners are over-fertilizing their lawns. An associate professor in soil sciences is studying the actual use of lawn fertilizers in the Twin Cities area during 1993. How does use of fertilizers compare with nutrient needs of the soils being treated? If more nutrients are applied than the soil can hold for future use, do they run off into surface and ground waters? The University does soil testing for many homeowners each year. Can the way its recommendations for fertilizing are made be improved? The percent of organic matter in a soil, for example, is an important variable for plant growth. Improved recommendations can save homeowners money and protect the environment.

Computer Simulation for the Criminal Justice System. A professor of operations and management science is using computer simulation to try and resolve how the Bureau of Community Corrections in Hennepin County can best cope with the growing overload of casework for probation and parole officers. The number of adult offenders under direct supervision has roughly doubled since 1988 while the number of officers remains fixed. The bureau has been forced to reevaluate its standards regarding which offenders should be directly supervised and for how long. The current practice of directly supervising all types of offenders for their entire term is no longer workable. Through computer simulation, using supercomputing resources provided by the Minnesota Supercomputer Institute because the system is so complex, the professor will be able to predict the results of making a variety of changes in the system. Various bottlenecks and inefficiencies will be identified. The computer model...