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POVERTY AND EARLY CHILDHOOD PARENTING: Toward a Framework for Intervention

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The relationship between poverty and child rearing has been a persistent source of social concern in the United States. Drawing on available literature, this paper seeks to establish a conceptual approach to the interaction of these two complex variables. Appropriate interventions and strategies for their implementation are considered.

The apparent links among poverty, inadequate parenting, and compromised child development have long been a source of concern for American social reformers (Grubb & Lazerson, 1982). Historically, the dominant intervention thrust has been to supplement or compensate for parental care in an effort to assure low-income children an equal opportunity for educational and occupational success. But there have always been organized efforts to strengthen such care as well; for example, the "moral guidance" provided by the nineteenth century friendly visitors, the settlement house workers' advice and assistance on child-rearing matters, and the family casework of the first child and family service agencies (Lubove, 1968; McGowan, 1988). In the past 25 years especially, interventions designed to provide child-rearing guidance, advice, and psychological support to low-income families with young children have proliferated (Weiss & Halpern, 1988).

Why has the relationship between poverty and child rearing been such a compelling and persistent source of social concern? There is unquestionably something to that concern, but the relationship between these two complex variables remains far from clear (Sameroff, Seifer, Barocas, Zax, & Greenspan, 1987). This paper will draw on available literature in an effort to establish a useful conceptual approach to studying the relationship between poverty and early childhood parenting, and to discuss implications for service-oriented intervention strategies. It will be argued that poverty creates a number of characteristic obstacles to attentive and nurturant child rearing; at the same time, it will be argued that the effects of poverty on the parent-child relationship are mediated by the interaction of situational factors, personal developmental history, and cultural affiliation. The appropriate emphases of helping strategies depend on the nature of the defining stresses and vulnerabilities in a family.

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**CONSTRAINTS TO A REVIEW
OF POVERTY AND PARENTING**

It is generally difficult to establish causality, and even to decide on a focus, in studying relationships between individuals and the social systems in which they are embedded. In the case of poverty and early childhood parenting, empirical problems are compounded by theoretical differences about how to approach the subject. It has been argued, for example, that it is inappropriate to evaluate parenting in low-income, especially low-income minority, populations by standards that reflect only mainstream cultural norms, opportunities, and situational demands (*Ogbu, 1987*). Patterns of care and nurturance can only be evaluated in relation to the characteristics of the sociocultural context in which they occur.

From the perspective of mainstream developmental psychology there is substantial agreement about the attributes of parental care that promote healthy development in young children (*Clarke-Stewart, 1973, 1977; Escalona, 1981; Musick & Stott, in press; Rapoport & Rapoport, 1980*). Children need to be protected from physical and psychological harm, and provided adequate nourishment. Beyond these basics, in infancy children need frequent holding, touching, smiling, and talking; in a word, nurturing. They need a parent who is a mediator of environmental stimulation, a parent who is sensitive to and accepting of their moods, responsive to their cues, consistent in behavior, and available in the most fundamental sense. For toddlers and preschoolers, additional attributes such as expanding and elaborating on play activities; a cognitively rich physical and social environment; firm, consistent, and yet flexible control strategies; and an absence of restrictiveness have been noted to be important.

Critics argue that mainstream notions of nurturant parenting derive from the study of a particular (i.e., white, middle-class) social world, requiring particular child competencies (*Ogbu, 1985, 1987*). Children from low-income, especially low-income

minority, families face different demands, threats, and opportunities in the immediate physical and social contexts of their daily lives; these require different parental care and nurturance strategies (*Laosa, 1979; LeVine, 1974; Ogbu, 1985*). Parents interpret and respond to their young children's actions not only in a manner consistent with their individual psychological structures, but in a manner consistent with their belief systems and the sense of what skills their children will need to survive and compete (*Laosa, 1979*). The evaluative problem, then, is that patterns of care and nurturance designed to prepare low-income children for the immediate contexts of their lives may not always be consonant with those that mainstream psychology defines as optimal. This conflict will be addressed at greater length later.

A different sort of complicating factor in studying the relationship between poverty and early childhood parenting arises from the very act of studying this relationship. It has been argued that by focusing so excessively on child rearing in efforts to understand the reasons for poor outcomes in low-income children, researchers are implicitly placing responsibility for such poor outcomes on parents themselves (*Sigel, 1983*). The decision to focus on the relationship between poverty and parenting creates a dynamic in which parents are found responsible for any child and family problems observed. In general, according to this argument, we have overemphasized the role that the micro-environment of the family plays in determining child development, and underemphasized the role of the macro-environment in which the family is embedded (*de Lone, 1979*).

Obviously, parenting is not the only path through which poverty can act to influence child development. Poverty denies young children adequate housing, medical care, nutrition, and, increasingly, safe environments in which to play. The schools that low-income children attend have fewer resources to devote to children's de-

velopment, and all too often are pervaded by low expectations for their students' achievement. An increasing proportion of low-income children are growing up in neighborhoods of concentrated poverty, neighborhoods devoid of the institutions, role models, and organized activities that serve as a foundation for socially valued adult outcomes (Wilson, 1987). Nonetheless, in early childhood, parents constitute children's primary environment. The specific patterns of interaction that develop between parent and young child are the basic material from which the child constructs a sense of self (i.e., of agency, physical integrity, relatedness) and a particular way of adapting to events in life (Massie, Bronstein, Afterman, & Campbell, 1988; Stern, 1985). Further, parents play an important role in mediating between children and the larger social environment, protecting children from threats to their well-being, seeking out such community resources as early childhood education programs, interpreting and giving meaning to that environment (Musick, 1987).

POVERTY AS AN ORGANIZING INFLUENCE ON CHILD REARING

A large number of factors influence parents' ability to meet their young children's developmental and socialization needs. As Belsky (1984) has noted, parenting is multiply determined, with child characteristics, parents' personal characteristics, situational factors, community characteristics, and broader sociocultural factors all playing a role. Each individual determinant of parenting—for example, a child's birth order and skill in eliciting attention, a parent's personal history of being reared and cared for, the degree of material hardship a family experiences—finds its own distinct expression in the parent-child relationship. But each is also linked to the others, modifying their effects (Pawl, 1987). In that light, the influence of poverty is only one of numerous influences, one that not only mediates but is mediated by the others.

Why, then, does poverty seem to underlie so much of the caregiving "casualty" that children experience in American society (Pelton, 1978; Sameroff & Chandler, 1975; Sameroff, Seifer, Barocas, Zax, & Greenspan, 1987)?

In the first place, the presence of poverty increases the likelihood that other personal and situational determinants of parenting will act as risk factors rather than protective factors in children's and parents' lives (Rutter, 1987). The chronic stress, material hardship, and all too frequent dehumanization that define the experience of poverty in the United States exert a negative potentiating influence on other determinants. Poverty produces its own risk factors, such as dilapidated, overcrowded housing. It also uncovers and magnifies the effects of pre-existing personal vulnerabilities, for example a poor nurturance history (Solnit, 1983). The ways in which poverty potentiates risk can be seen in numerous domains. For example, low-income women are twice as likely to have a low-birthweight baby, with the attendant challenges and stresses for parenting (Goldberg, Brachfeld, & Divo, 1980; Starfield, 1986). They are less likely to be married; when they are married, they experience more marital conflict than do their more economically-advantaged peers, undermining a key source of social support. Other sources of social support are themselves likely to be struggling with poverty-related stresses, undermining their ability to provide practical and emotional support for parenting (Belle, 1983). Low-income parents are three times more likely than other parents to begin child rearing during adolescence, and thus to face unique challenges (Kamerman & Kahn, 1988). Low-income women have among the highest rates of depression of any group in American society (Belle, 1982). Mothers who are depressed are less responsive and nurturant, less aware of their children's moods, and more restrictive with their children (Belle, 1982; Siegler, 1982).

The effects of any one or even a few risk

factors can be mediated by the presence of protective factors elsewhere. But poverty increases the likelihood that numerous risk factors will be present simultaneously—in the child, the parents, the family's informal support system, and the neighborhood; as a corollary, poverty reduces the likelihood that protective factors will be present somewhere in those systems. For example, low-income women are not only more likely than more economically-advantaged peers to experience high risk pregnancies, they are less likely to have access to high quality prenatal care. Low-income parents are not only more likely than more economically-advantaged peers to have experienced poor or erratic nurturance as children, they are less likely to have access to services to help them deal with the harmful consequences of such histories for mental health and parenting. They are not only more likely to lack a marital and extramarital support system that is free from drain, they are less able to purchase support in the marketplace.

Most critically, the chronic and pervasive quality of poverty increases the chances that the impact of early risk factors will be "carried forward" over time, and ultimately internalized; further, risk factors will be more likely to accumulate over time in children's and families' lives, creating an increasingly inexorable pull toward poor outcomes (*Birch & Gussow, 1970; Meisels, in press; Schorr, 1988*). For example, the effects of low birthweight on child, parents, and family system tend to reverberate over a longer period in low-income families than in more economically-advantaged ones. The unhealthy physical environments in which low-income families live—for example environments high in ambient lead—exacerbate the biological health risks associated with low birthweight, turning acute problems such as respiratory vulnerability into chronic problems. A fussy, disorganized low-birthweight infant is more likely to overtax the limited physical and emotional resources of an already overstressed mother;

parent-infant relationships that get off to such a poor start often become increasingly difficult to redirect (*Beckwith, 1988*).

SOCIAL TRENDS

Exacerbating the inherent dynamics of risk accumulation for low-income families in American society are the particular correlates of poverty in the late 1980s, correlates that make it increasingly difficult for families to find a path out of poverty however and whenever they are drawn in. These include single parenthood, inadequate wage rates for unskilled jobs, inadequate income supports for parents who cannot or who choose not to work, and a growing geographic concentration of low-income families in socially isolated inner-city neighborhoods.

In 1960 only about 20% of low-income families were female-headed; currently, more than half are (*Halpern, 1986*). Single mothers with young children are particularly likely to experience their life situation as stressful and out of control, and their options as unpalatable (*Kamerman & Kahn, 1988*). If they choose to work, can find a job, and can find adequate, affordable child care, they may not earn enough to escape poverty. A single mother with just one child, working full-time all year at a minimum wage job cannot earn enough to escape poverty (*Reischauer, 1986*). If a single mother chooses or is forced to rely on welfare, poverty is almost guaranteed. Even when their total value is combined, the package of means-tested family supports lifts fewer than 10% of participating families out of poverty (*Reischauer, 1986*). Moreover, the dehumanization and loss of control that so often accompany welfare dependency in American society bear a personal cost in physical and mental health that undermines the opportunity created to devote oneself to the care and nurturance of one's children (*Belle, 1982*).

A social trend of growing importance is the increase in the concentration and absolute number of low-income families with

young children in inner cities. Poverty is becoming increasingly a big-city, central city phenomenon (Wilson, Aponte, Kirschenman, & Wacquant, 1988). This trend is related to two other long-term trends that are suddenly receiving a good deal of public attention—the loss of jobs and the accompanying emigration of all but the poorest families from the inner cities. These in turn are making it increasingly difficult to sustain traditional institutional sources of authority, support, identity and mobility—churches, neighborhood associations, schools, businesses—in inner city neighborhoods (Comer, 1989). Informal support systems are also “thinning out” and become less protective and nurturing (Musick, 1987). Less effective support systems, critical lack of resources, and the dearth of paths out of poverty are producing and intensifying patterns of survival-oriented coping, decision-making, and relating; these are accompanied by a downward adjustment of expectations and hopes. As Comer (1989) noted,

... although minimal income is not an absolute deterrent, desirable family functioning is nonetheless more difficult to sustain without a reasonable threshold of economic opportunity. (p. 110)

PARENTAL CHARACTERISTICS

It would seem to require extraordinary effort not to communicate feelings of futility and hopelessness to one's children under the extreme conditions facing growing numbers of low-income families. But, indeed, some parents do manage to help their children defy the odds. Who are these parents? One can argue that they are the parents with fewer, healthier, and more easy-going young children, better marital and extramarital supports, and more supportive neighborhood environments (Garbarino & Sherman, 1980; Werner & Smith, 1982). But first and foremost they appear to be parents with greater personal resources. Clark (1983), in a study of the influence of early family environment on school success among low-income, urban black children,

found that while almost all parents in the sample had been exposed over long periods to discrimination, disparagement from dominant institutions, and constant worries about getting by, parents varied significantly in how they experienced, interpreted, and managed such difficulties. The high-achieving students' parents were realistic about the world, but faced it in a purposeful, serious way. These parents

... possessed a belief in their own ability to see to it that somehow their children's needs would be provided for. . . . [also] deep self-pride and personal integrity, a sense of the salience of the needs of their children. (Clark, 1983, p. 116)

Looking into the personal histories of those parents who managed to create a predictable, nurturant home environment under difficult life circumstances, Clark found strong extended families characterized by plentiful practical assistance, a pervasive, consistent current of emotional support among extended family members, and family pride in not becoming “victims” of their life situation. Other studies have documented how some young adults with difficult, even painful, life histories are able to keep the child caring dimension of their functioning autonomous and protected from stress and strain in other areas (Polansky, Chalmers, Bittenwieser, & Williams, 1981). Such adults often have experienced and internalized the care and nurturance of a special figure at least at some point during their own formative years. They may have acquired a set of strongly held beliefs or values that make life seem coherent and manageable, even in adversity (Werner & Smith, 1982).

At the other extreme are young adults in whom personal characteristics seem to exacerbate the effects of situational stresses associated with poverty. For this group of parents, obstacles posed by stressful living conditions and inadequate services are compounded by lack of “self” resources, and struggles for their own personal development (Egeland, Jacobvitz, & Sroufe, in press; Musick, 1987; Newberger, Hamp-

ton, Marz, & White, 1986; Wieder, Jasnow, Greenspan, & Strauss, 1987). The expression of such double vulnerability varies. It may result in increased social isolation. For example, in neighborhoods in which physical danger already tends to isolate families in their own apartments, young parents who feel depressed or overwhelmed are less likely to seek out and develop a support system for their child rearing (Belle, 1983). It may result in lack of investment in the parenting role, due to lack of physical and psychic energy, basic lack of capacity, or the urgency of the parent's own needs. Conversely, it may result in an inappropriate reliance on children for the love and gratification that was not forthcoming from one's parents. Increasingly, it may include serious drug abuse.

The proportion of low-income parents in this psychologically and situationally vulnerable group is simply not known. Worsening social conditions in the inner cities certainly create a context that fosters such double vulnerability. The direct roots of this vulnerability are often found in personal histories marked by important losses and disruptions, and, at the extreme, by abuse or neglect. For example, 70% of the women referred to one clinical infant intervention program because of difficulties with mothering had experienced major disruption of significant relationships before age 12 (Wieder, Jasnow, Greenspan, & Strauss, 1987). Egeland, Jacobvitz, and Papatola (1987) reported that 70% of the women in their low-income longitudinal sample who had experienced abuse as children were maltreating their own children. In a study of child neglect in a low-income urban population, Polansky, Chalmers, Buttenwieser, and Williams (1981) found that childhood "abuse was reported by over three-fifths of the neglect mothers but by less than a fifth of the non-neglect" (pp. 152-154); likewise, 41% of the neglectful versus 7% of the non-neglectful mothers had experienced long-term removal from their natural parents. Neglectful parents' history of loss,

disruption and abuse "conspired" to keep them from developing supportive, intimate relations with persons who could have helped prevent abnormal parenting.

Brooks-Gunn and Furstenberg's (1987) longitudinal study of the consequences of adolescent childbearing in a sample of 300 low-income Baltimore families documented the compounding effects of personal and situational stresses—and, at the same time, the buffering effect of even a few protective factors—under generally difficult life circumstances. The study found "tremendous diversity" in both long-term adaptation to early childbearing and long-term outcomes for parents. On the other hand, regardless of parental outcomes, the adolescent mothers' preoccupation with their own developmental struggles during their children's formative years bore tremendous costs for those children.

In a follow-up in which sample members were in the mid- to late-30s, the investigators found significant variability among sample parents in school completion, subsequent reproductive careers, and long-term economic self-sufficiency. For example the sample divided evenly among those on welfare, the working poor, and those with moderate and even relatively high incomes (over \$25,000). About one-fifth never had another child; two-fifths had one additional child; 31% had two additional children; and 8% had three more children. The variability that Brooks-Gunn and Furstenberg found in adult outcomes appeared to be in part related to characteristics of adolescents' biological families at the time they initiated childbearing, in part to the number of additional live births after the target child, and in part to marital history. Long-term outcomes were poorest for those in the sample whose own parents had a low level of education or a history of welfare dependency, and for those who had two or more additional children within five years of the target child. The investigators speculated that, alone or together, such factors decreased the likelihood that the adolescent

would return to school to complete her education.

The same factors appeared to work intergenerationally to predict child outcomes. But even when the parents in the sample struggled successfully to overcome the impediments to personal development that early childbearing had brought, such struggle seemed to levy costs on their children. Lack of maternal attention was compounded by "the high rate of marital dissolution, the relatively large number of women who never married, and the frequency of short-term cohabitation relationships," which translated into "fleeting and unpredictable presence of adult men for the children" (p. 181). For these and related reasons, regardless of parents' personal achievements, the majority of target children in the Baltimore sample had very troubled school careers, with high rates of retention in grade (50% at least once), suspension (40% at least once), and truancy; and high rates of specific behavioral problems. One explanation was continuity in children's developmental trajectories from early childhood, which was almost inevitably a difficult period for mothers and children, through adolescence. As Brooks-Gunn and Furstenberg noted, "once a trajectory was set, in terms of preschool academic or behavior problems, it was likely to continue" (p. 184).

ADAPTATION TO POVERTY

While poverty produces and exacerbates many types of vulnerabilities in families, it is also a reality to which children and families adapt. Moreover, adaptations to poverty occur within the framework of the attitudes, beliefs, and behavior characteristic of the sociocultural group to which a young parent belongs. Families' nurturing and socialization strategies are deeply embedded in their cultural and ethnic identities, and deeply rooted in the historical experience of the sociocultural group to which they belong. Intergenerational continuity in such strategies provides a measure of control and stability in the face of uncertainty and lack

of control over a hostile external environment. At the same time, adaptively-rooted child-rearing and coping strategies can be an additional source of vulnerability in children and families.

Such vulnerability may be due to a disjunction between the child-rearing strategies of the group and the norms of the larger society. For example, the historical pattern among black families of promoting strong bonds between children and nonparental kin is often overlooked by the child welfare system as a protective factor in black children's lives (*Stack, 1984*). Yet it continues to serve to protect children physically and psychologically from such poverty-induced uncertainties as forced mobility in housing arrangements. Children with strong secondary attachments may experience temporary separations from parents as less distressing than they would have otherwise. Vulnerabilities may be created also by disjunction between the child-rearing strategies of the group and the psychological or social demands of settings outside the purview of the group. It has been reported, for example, that Mexican-American socialization patterns produce a "more passively and internally-oriented style of coping with problems and challenges in life" (*Lauderdale, cited in Garbarino & Ebata, 1983, p. 775*). Such coping styles, evolved over centuries of poverty and oppression, may not be well-suited to the extraordinarily competitive environment of modern technological society, nor to the greater social isolation of families in such a society.

Disjunction between societal norms and demands and historically-rooted sociocultural adaptations is perhaps greatest in families going through the early stages of acculturation to American society—notably Southeast Asian, Mexican, Central American and Caribbean, and especially Haitian immigrants. In the first place, such families experience a host of situational stresses that undermine child rearing, including economic and legal uncertainty, language difficulties, ineligibility for many social ser-

vices, loss of traditional sources of informal support, and, in some cases, discrimination and exploitation. But the effects of these stresses are often compounded by the conflict generated when patterns of child rearing that were adaptive in communities of origin are considered maladaptive and even deviant in their new communities (*Laosa, 1981*). For example, a study of recent Haitian entrants noted the traditional Haitian belief that the good infant and child is quiet, undemanding, and obedient, and the complementary belief that infants are not capable of cognition (*Widmayer, Peterson, & Lerner, undated*). Such beliefs yield children who are often ill-prepared for the demands of formal schooling in the American context. The parents are then blamed for neglecting their children's development, and may be put in the position of struggling to behave in ways that are discordant with deeply-rooted attitudes and feelings, as well as their lifelong experience.

Early parenting strategies designed to prepare children to cope and compete in inner-city environments characterized by grossly inadequate resources, chronic violence, and pervasive distrust may not be consistent with those strategies promoted in the larger society. In such environments interpersonal and cognitive behavior valued by the larger society may be perceived to be dysfunctional (*Raven, 1987*). Comer (1989) cited as a case in point the inner-city child who comes home and complains about being beaten by other children and is told that if he or she does not fight back there will be another beating at home. This child is learning behavior that may be functional for survival; but such behavior is likely to get the child into difficulty upon arrival at school. It has been observed that inner-city minority mothers place a high value on unquestioning obedience and discourage curiosity, because the dangerous circumstances in which such families live leave little room for mistakes in judgment on the part of children (*Escalona, 1981; Silverstein & Kratochwill, 1975*). A number of observers have posited

a pattern of early childhood parenting among inner-city minority mothers characterized by early withdrawal of emotional support, coupled with an emphasis on aggression in early play, early independence and self-reliance (in toileting and other self-care activities), distrust of nonfamily, and a competitive relationship between mother and child (*Escalona, 1981; Ogbu, 1985; Poussaint, 1987*).

Ogbu (1985) has argued that these observed patterns of behavior are organized adaptations, evolved over time to prepare children for success in inner-city environments. But it is equally plausible to argue that the powerlessness, personal experiences of injustice, and lack of nurturance from family and broader social world that characterize many low-income parents' own lives can spill over in many less deliberate ways into child rearing. Parents whose own primary needs have not been met may have a very difficult time recognizing or gratifying their children's needs. For example, when a low-income mother insists on immediate obedience or fails to respond to a young child's bid for attention, it may be adaptive; but it can also be interpreted as a response to the debilitating effects of chronic stress. Studies have observed that women experiencing such stress are often conscious of the limited effectiveness of their interactions with their children but lack physical and psychological energy to behave more effectively (*Jeffers, 1967; Zerkowicz, 1982*).

Whether deliberate or not, adaptive patterns of parental care may not only conflict with those promoted in the larger society, but bear their own distinct costs to children. Restrictive parental behavior or premature assumption of responsibilities for self-care and protection can undermine a young child's developing sense of his or her value as a person, or the child's ability to recognize the importance of reciprocity in relationships. For some children, there may be a point at which such maternal behavior as encouragement of early indepen-

dence and self-reliance, or lack of parental energy to respond to dependency needs, will be experienced as disapproval or even rejection. Further, patterns of parental behavior take on a symbolic life of their own at some point, and may be transmitted intergenerationally independent of specific situational demands and opportunities (*de Lone, 1979*).

CONCLUSIONS

Dokecki (*1975*) has argued that having one characteristic in common—lack of financial resources—does not necessarily imply the common possession of other characteristics, for example, particular psychological traits. Families can and do cope adaptively with the stresses associated with poverty; they can and do rear their children protectively and nurturantly under the most difficult conditions. But in the current social context, the stressful and often demoralizing effects of our haphazard patchwork of institutional family supports are increasingly compounded by a deterioration in the social fabric holding low-income communities together, a fabric that traditionally provided at least a measure of support and nurturance for low-income families. As a consequence, the experience of poverty almost invariably brings with it a host of psychological injuries. Personal, situational, and systemic forces can combine to undermine low-income parents' immediate intentions and long-term aspirations, both for themselves and for their children. For a few parents, unique strengths or deficits in their own past nurturance define the parenting situation, and indeed their life situation. But, for better or for worse, most parents who live in poverty don't beat the odds; they reflect the odds.

While poverty is in some ways too global a variable for explaining specific processes in families' lives, it is nonetheless a powerful variable. Hamburg (*1985*) has summarized well the role of poverty:

While many causes underlie the developmental problems of the young, the most profound and pervasive

exacerbating factor is poverty. Poverty does not harm all children, but it does put them at greater developmental risk, through the direct physical consequences of deprivation, the indirect consequences of severe stress on the parent-child relationship, and the overhanging pall of having a depreciated status in the social environment. (p. 4)

Implications for Intervention

Granting that worsening poverty among young families is producing or exacerbating stresses that make parenting difficult, especially for parents with few personal resources to draw upon, how should we as a society respond? At one level, the answer seems straightforward. We must address the contextual factors that impinge on parenting and child development—dangerous neighborhoods: dilapidated, overcrowded housing; unstable, poor quality day care; geographic and social isolation. But directly addressing these factors would require a significant reorientation of social arrangements and public priorities. Such a reorientation does not appear to be forthcoming. While public awareness of the fragile situation of families with young children is growing, the social and political will to address this unfortunate situation is barely discernible (*Hart, 1989*). That leaves what *de Lone (1979)* has called "secondary strategies." These are predominantly the personal helping services designed to promote individual well-being, adaptation, and development.

The exclusive reliance on personal helping services to address social concerns heightens the importance of clearly articulating what can and cannot be expected of particular service emphases and strategies. With respect to the nexus of poverty, parenting, and child development, the clarification of expectations is especially critical. Parenting interventions should not be viewed as a vehicle for social reform, as a means, for example, to alter significantly the life chances of low-income children. It is both unacceptable and unrealistic to place the burden of social problem-solving on those experiencing the brunt of social problems.

On the other hand, there is evidence that helping services that provide additional social resources for parents can alter their subjective experience of a difficult life situation, facilitate their efforts at personal development, and, under some conditions, set the parent-child relationship on a slightly more positive course (*Weiss & Halpern, 1988*).

During the past decade, a set of child and family services has emerged (or, more accurately, re-emerged) that offers promise of strengthening social resources for low-income as well as other families. This set of services, variously called family support or family resource and support programs, was the subject of special attention in a recent issue of this Journal (*Weissbourd & Kagan, 1989*). The helping principles and strategies of family support programs are especially well-suited to the needs of hard-pressed but adequately coping low-income families. These programs provide sustained and responsive support, addressed to the range of concrete, social, and psychological needs of low-income families with young children. Family support programs have proven adept at providing helping services that do not undermine low-income parents' sense of competence and worth; at providing a direct and knowledgeable link to a range of community resources; and in serving to mediate between the child-rearing norms of a family's reference group and those of the larger society (*Weiss, 1987*). In the process, family support programs extend the idea of helping and support well beyond the boundaries defined by the current human service system.

A major challenge facing these as well as other community-based helping services in coming years will be the creation of intervention strategies appropriate to the needs of young adults embarking on parenting with poor nurturance histories, compounded by little experience of success in other areas. This growing group of families will need far more sustained and skilled helping services than their better coping peers. Such

services will have to attend simultaneously to pressing family survival needs, parents' own significant nurturance needs, a vulnerable parent-child relationship, and, in many cases, the special needs of young children with individual vulnerabilities. Such a multifocused approach is far from new; indeed, it basically describes clinical child and family casework at its best (*Polansky, Chalmers, Buttenwieser, & Williams, 1981*). But it has been made potentially more potent by enormous progress in the understanding of both normal development and developmental risk in infancy and early childhood, and the accompanying translation of this knowledge into clinical helping principles and approaches (*Bertacchi & Coplon, 1989; Greenspan, 1987*).

In principle, then, the model that increasingly seems necessary for young families is one that provides a flexible mix of concrete, clinical, and supportive services in a nonbureaucratic, family-like context. It has to be a model that can work simultaneously and comfortably at multiple levels: from the immediacy of getting the heat back on in an unheated apartment to the gradual building of trust in a young adult whose life has been marked by a series of losses; from the simplicity of providing a safe place for relaxation to the subtlety of responding to "the re-awakening of unconscious, preverbal issues stemming from a parent's own experience of infancy and toddlerhood" (*Bertacchi & Coplon, 1989, p. 2*). There is evidence that such a multifaceted approach can be effective (*Provence & Naylor, 1983; Seitz, Rosenbaum, & Apfel, 1985*). But it will require a resource commitment far beyond that which has been available for community-based programs up to the present—and a much greater willingness on the part of the most skilled professionals to work in low-income communities. Moreover, multifaceted service models have yet to be implemented on anything like the scale that would be necessary to reach even a modest proportion of those young families who might benefit.

If the earlier sections of this paper suggest an overarching need for a comprehensive, multifaceted approach to helping, the later sections point to the importance of a locally-appropriate, population-specific set of emphases and services. Specific populations of low-income families differ in a number of ways relevant to the design of early parenting interventions. They differ in beliefs and behavior with respect to child rearing; in life-cycle stage and developmental needs; in availability and use of social support and patterns of help-seeking. Communities differ in the availability of formal supports and services, and in the sensitivity of formal helping institutions to cultural and linguistic differences (Halpern & Larner, 1988).

In addition, programs will have to be sensitive to adaptive patterns of child rearing, however functional they may or may not appear to be. It is not always easy to discern the particular dimensions of parenting critical to the prevention of adverse outcomes for children under different community conditions (Rutter, 1987). Those who live in a community 24 hours a day, day-in and day-out, are best equipped to understand what is tolerable, desirable, and possible for them. Families should not just be recipients of services, however individualized, but should contribute to program design and emphasis. Ethical issues aside, when families help to shape parent education and other programs in which they will be participants, it is more likely that they will link the content of these support programs to the challenges they see their children facing.

Finally, successful programs will have to construct a coherent vision of competent child rearing, reflecting both the current reality of families' lives and a sense of what kind of children might grow up to transform that reality. They will also have to construct a vision of where and how they see themselves influencing the host of environmental forces impinging on child, parent, and family. As Slaughter (1983) has

pointed out, while low-income families may not be self-conscious about the ecology surrounding their behavior, programs serving those families must focus on these contextual factors in order not to put further strain on already stressed lives.

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