
Family Life Education: Issues and Challenges in Professional Practice

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Although not initially called family life education (FLE), the profession and field of study has a rich history dating back to the early 1900s. More than 100 years after the field is said to have begun, Cassidy (2009) argued that, “family life education is a growing and developing field” that continues to face a variety of challenges (p. 11). In this chapter we document the evolution of FLE and offer insights into some of the challenges it faces in a diverse and modern world. Our purpose here is not to provide an exhaustive accounting of the history and professionalization of the field or to review specific contexts for FLE as these areas have been skillfully addressed elsewhere (e.g., Arcus, Schvaneveldt, & Moss, 1993; Duncan & Goddard, 2005; Powell & Cassidy, 2007). Instead, we consider the field of FLE both within histori-

cal and contemporary contexts in order to bring to light issues and challenges currently facing the field. We begin by briefly reviewing the history of FLE with regard to long-standing struggles surrounding how to define the scope, content, and intention of the field. We then briefly focus on the evolving professionalization of FLE, reflecting on how and by whom FLE is practiced, and identifying possible opportunities for enriching professional practice. We then offer insights into the issues and challenges facing two major aspects of professional practice related to ethical and appropriate FLE delivery: (a) the role of family life educators’ philosophies of education in influencing programmatic efforts and (b) approaches to the development of curriculum. We conclude by summarizing areas of challenge identified throughout the chapter and where continuing efforts for developing the field should focus.

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Issues in Defining Family Life Education

FLE was initiated around the turn of the twentieth century, following the conviction that problems faced by families could be informed and addressed with scientific research (Bredehoft, 2009; Doherty, 2000; Gentry, 2007). The related area of parenting education, which has now developed as a subspecialty of FLE, began even earlier, around 1815 (Doherty, Jacob, & Cutting, 2009). What follows is an historical examination of FLE with regard to the evolving definition of FLE.

Since its inception, FLE has been characterized with a myriad of attempts to define the field, often fraught with ambiguity and lack of focus (e.g., Arcus & Thomas, 1993; Darling, 1987; Duncan & Goddard, 2005; Hennon & Arcus, 1993; Kerckhoff, 1964; Myers-Walls, 2000). The process of defining the field began almost 50 years ago, with Kerckhoff (1964) who recognized many competing definitions. In so doing, he offered a “working definition” of FLE that included the notion of experiences that deliberately and consciously are used to help develop personalities, life choices, and perceptions of people as present and future family members. These capacities equip people for constructively solving problems unique to their family roles. “Deliberately and consciously” point to FLE being intended and not just the incidental consequences of other experiences that influence people’s lives and how they fulfill family role obligations (e.g., various media including television) (Pehlke, Hennon, Radina, & Kuvalanka, 2009). Kerckhoff also noted that other definitions of FLE emphasized developing human relationships, enhancing mental health, creating stronger families, and reforming society.

Kerckhoff concluded it was too early in the development of the field to expect agreement on a definition, but that some trends were emerging that seemed to give the field coherence. One trend was movement toward a more personal and relational approach to FLE and away from a focus on family as an institution. This trend emphasized preparing people for participation in a variety of relationship roles at various stages of the family life cycle. A second trend was an increasing emphasis on teaching younger children about family relationships.

Darling (1987, p. 816), writing almost 25 years after Kerckhoff, indicated that FLE, while overlapping with therapy and other interventions, was “the foremost preventative measure for the avoidance of family problems.” Darling noted that educators and others have espoused several different purposes in assisting families: prevention, education, enrichment, intervention, remediation, and therapy. All of these share common

concern with preserving and improving family life. Preventative services are attempts to keep some condition (e.g., marital discord, abusive parenting, disengaged fathers after divorce) from happening by the use of some previous action (e.g., marital enrichment, parenting skills training) (Braver, Griffin, & Cookston, 2005; Briar-Lawson, Lawson, Hennon, & Jones, 2001; Child Welfare Information Gateway, 2009; Coie et al., 1993; Grych, 2005; Kilpatrick & Holland, 2009). Darling argued that prevention, education, and enrichment programming should happen before some occurrence or incident so as to provide protection, resilience, readiness, or capacity for managing situations as they arise. That is, these types of approaches are intended to prepare a family to manage a possible upcoming issue, transition, event, and so on. Known as primary prevention, this approach is often considered the main focus of FLE (Cassidy, 2009; Darling, 1987).

Arcus and Thomas (1993) asserted that while FLE was becoming fairly well established with a variety of activities, the field of study and professional practice was still problematic. One of the problems identified was lack of consensus. After reviewing various definitions, they concluded that there were some common threads, such as a focus on interpersonal relationships. However, there were many differences, such as the appropriate level of analysis/intervention (i.e., individual or family), the extent to which FLE is functional or having an applied focus vs. an academic subject, whether the focus should be on problem solving vs. the development of potentials, and the tension between a primary concern with knowledge development vs. the inclusion of attitudes and skills.

While indicating the importance of a shared definition for FLE, Arcus and Thomas (1993) argued that three factors emerged concerning the purpose of FLE: (a) the earlier rationale of helping families deal with the social problems of the times, (b) the unchallenged assumption that if only families could learn how to do the right things, then many family problems would be prevented, and (c) the belief that family members

would have the opportunity to develop their potentials. Based on these purposes, a host of objectives, operational principles, and goals for the field have been specified. Serving as guideposts for decision-making, FLE operational principles have been identified as follows (Arcus & Thomas):

- Is relevant to individuals and families throughout the life span
- Should be based on the needs of individuals and families
- Is a multidisciplinary area of study and is multi-professional in its practice
- Is offered in many different settings
- Takes an educational rather than a therapeutic approach
- Should present and respect differing family values

Meanwhile, Arcus elaborated on the need for a conceptualization of FLE that included a life span approach (Arcus, 1987; Hennon & Arcus, 1993). This perspective has continued to be considered an essential aspect of the field (Bredehoft & Walcheski, 2009; Powell & Cassidy, 2007). A life span approach is grounded in two assumptions: (a) people of all ages could benefit from learning about the many different aspects of family life, and (b) learning opportunities are available during each developmental phase. Thus, over time, the content of FLE and the audiences targeted has evolved and is an important topic addressed later in this chapter.

The National Council on Family Relations (NCFR) serves as the professional home for FLE as this is the organization that first sought to professionalize the field. This began in 1984 with the introduction of guidelines for FLE curricula and professional standards for certification (Darling, Fleming, & Cassidy, 2009). Given the central role played in professionalizing the field, NCFR (n.d.) offers the following definition of FLE:

Family life education focuses on healthy family functioning within a family systems perspective and provides a primarily preventive approach. The skills and knowledge needed for healthy functioning are widely known: strong communication skills, knowledge of typical human development, good decision-making skills, positive self-esteem, and healthy interpersonal relationships. The goal

of family life education is to teach and foster this knowledge and these skills to enable individuals and families to function optimally. Family life education professionals consider societal issues including economics, education, work-family issues, parenting, sexuality, gender and more within the context of the family. They believe that societal problems such as substance abuse, domestic violence, unemployment, debt, and child abuse can be more effectively addressed from a perspective that considers the individual and family as part of larger systems. Knowledge about healthy family functioning can be applied to prevent or minimize many of these problems. Family life education provides this information through an educational approach, often in a classroom-type setting or through educational materials.

This definition is comprehensive and detailed, offering a solid foundation upon which further elaboration can be built. Specifically, NCFR has identified ten content areas of expertise required for certification as a family life educator. A degree of expertise is expected in each of these areas for certification, regardless of which path to certification a professional takes (see Table 33.1). These paths will be discussed in the next section.

Recently, these ten substance areas have been further articulated to reflect specific areas of expertise across the life span. For example, for Substance Area #10: FLE Methodology, the training for family life educators should include content and relevant experiences in program development, delivery, and evaluation aimed at audiences from children to older adults, and all ages in between.

Challenge #1: Continuing Issues of Defining the Field

The field of FLE has a long history of difficulty in defining itself. This difficulty continues today and will likely continue in the future. As the field moves forward, it will require further professional and intellectual debate. Current efforts by NCFR to enlist the perspectives of educators in this process (e.g., Darling et al., 2009) is a positive step toward the development of a definition of FLE that best reflects the focus and content of FLE practice.

Table 33.1 Certified family life educator substance areas

| Substance area | Description |
|--|--|
| Area #1: Families and individuals in societal contexts | Knowledge of how families and individuals function in relation to social contexts (e.g., schools, churches, workplaces, government programs) |
| Area #2: Internal dynamics of families | Knowledge of family functioning and how family members interact with each other |
| Area #3: Human growth and development | Knowledge of life span human development experienced by individuals in families |
| Area #4: Human sexuality | Knowledge of the diverse aspects of sexual development and experiences across the life span |
| Area #5: Interpersonal relationships | Knowledge of functioning and development of interpersonal relationships |
| Area #6: Family resource management | Knowledge of decision-making process by individuals and families with regard to resource allocation |
| Area #7: Parenting education and guidance | Knowledge of parenting and how to guide parents in their parenting |
| Area #8: Family law and public policy | Knowledge of legal issues, policies, and laws and their influence on family life |
| Area #9: Professional ethics and practice | Knowledge and critical examination of professional practice with regard to ethical questions and issues |
| Area #10: Family life education methodology | Knowledge of how to plan, implement, and evaluate family life education |

Adapted from National Council on Family Relations (2010)

Working Conceptualization of Family Life Education

Bredenhof (2009) noted that FLE has undergone many revisions and refinements over its history and there is no generally agreed upon designation of the profession, content, or procedures. Perhaps a good sensitizing idea is provided by Myers-Walls (2000, p. 359) in her assertion that “boiling down the field of FLE to its essence, family life educators educate families and educate about

families.” Thus, for the purposes of this chapter, we use a broad conceptualization of FLE. We understand that FLE is ideally preventative in nature, but also includes aspects of secondary and tertiary intervention. Throughout this chapter the term intervention is used to describe any type of formal action designed to somehow positively influence family life, fostering the attainment of ends desired by the recipients of the intervention (e.g., Guerney & Guerney, 1981). FLE is an intervention that differs from therapy, social policy, or social services in terms of approach and goals. The terms family life educator (FLEs), professional, educator, and practitioner are also used interchangeably.

We further understand that FLE can include a large audience and presentations, as well as one-on-one education and skills modeling. The incorporation of support groups, psycho-educational and socio-educational modalities, home visiting, and collaboration with therapy and other clinical interventions are viable approaches. Mass media approaches are common, including newspapers, magazines, and websites. A diversity of topics are encompassed, those promoted by NCFR, but perhaps others, and a diversity of family types (e.g., ethnicity, religion, SES, marital status, sexual orientation, structure, immigration status, county of origin or residence) are to be inclusive in culturally relevant and specific manners.

Family Life Education as a Profession

Darling et al. (2009) conducted a survey of family life educators “to determine the core competencies needed for entry-level family life educators, which were refined and incorporated into the creation of the new CFLE examination” (p. 331). Certified Family Life Educators (CFLEs) and noncertified practitioners were asked about the relevance of the ten content areas used in the NCFR certification exam compared to what the respondents actually do. Results showed that the ten areas were supported by these family professionals. There were some differences in how the two groups perceived the importance of the content areas.

Compared to the noncertified group, CFLEs more often reported that entry-level family life

educators needed expertise in Internal Dynamics of Families, Human Growth and Development, Human Sexuality, Interpersonal Relationships, Family Resource Management, and FLE Methodology, rather than the other family life content areas endorsed by NCFR. The survey also asked about specific topics, and some differences were found in items such as: recognize the psychosocial aspects of human sexuality in interpersonal dynamics of sexual intimacy; promote healthy parenting from a systems perspective; and recognize the reciprocal influences of family development on individuals and individual development on families.

The NCFR *Content and Practice Guidelines* (<http://www.ncfr.org/cert/become/>) emerged from this research. This is a tool that can be used as university programs develop curricula, market programs on campuses and in their local areas, and help graduates in marketing and profiling their credentials. An emerging recognition of the importance of prevention as preferred to intervention, as well as the ten CFLE content areas, makes the work of FLEs increasingly more critical (Darling et al., 2009).

NCFR has been offering FLEs a variety of professional development opportunities and resources, such as the NCFR newsletter (i.e., *Network*), as well as workshops and presentations at the NCFR annual conference. Given that entry-level FLEs often have lower incomes, attending the annual conference and benefiting from the professional development opportunities is often difficult. Strategies for diminishing this educational obstacle would be the creation of more regional and local opportunities for professional development, mentoring, and networking.

Family Life Education Professionals

FLEs are employed in a variety of settings, both in the USA and elsewhere (Darling et al., 2009). A survey of 522 CFLEs and 369 noncertified family practitioners, of which 51 % identified themselves as family life educators, showed that they are employed in nonprofit organizations (52 %), government (33 %), and for-profit organizations (15 %). The nature of their work is not

necessarily labeled FLE and tends to occur in organizations that focus primarily on education (66 %), intervention (14 %), and prevention (11 %). FLEs are slightly more likely to hold a bachelors degree (21 %) compared to the noncertified group (17 %). One reason for this is that individuals who have attended a bachelor's degree program that offers an approved CFLE curriculum are able to utilize an abbreviated certification process as opposed to sitting for the certification exam. The most common field where FLEs hold their highest degrees is human development and family studies/science (36 % for CFLEs, 43 % the noncertified).

The primary area of career practice is college/university education (19 %) with the next largest being parent education (12 %). The respondents to the survey were also employed in areas focusing on counseling/therapy (9 %), marriage/relationship education (7 %), and cooperative extension/community education (5 %). Most were employed in postsecondary education (CFLEs 34 %; noncertified 39 %). Community-based service settings were where 21 % were employed and 13 % were employed in preschool through secondary education settings. Other practice settings included private (10 % CFLEs; 6 % noncertified; 8 % overall), faith-based (9 % CFLEs; 4 % noncertified), and 5 % in government/military.

It appears that the "typical" family life educator, regardless of certification, has a master's degree in human development/family science, is employed by a nonprofit organization having an educational focus, and whose primary area of practice is college/university education. Among the CFLE respondents, 79 % had full CFLE status, and 21 % were provisional CFLEs, with 72 % being family life educators for 10 years or less (range 0–46 years; mean=9 years).

Challenge #2: Recruiting and Retaining Family Life Educators from Diverse Backgrounds

A major challenge for the field of FLE is recruiting and retaining educators from diverse backgrounds. The work of Darling et al. (2009)

indicates that the majority of family life educators are white (86 %) and female (59 %). The researchers noted that these demographics indicate a need for greater efforts in recruiting and retaining FLEs who are more diverse in racial/ethnic background, and the necessity of having FLEs who can address, in an effective manner, the diversity found in the USA. That is, concerted efforts are needed within the field to recruit educators whose backgrounds are reflective of the populations with whom FLE programming may be directed. At the same time, the training of all family life educators should include developing cultural competency.

Challenge #3: Developing Educators' Cultural Competency

Over the last few decades there has been increased recognition that effective FLE must incorporate cultural values, norms, and life ways of diverse populations into content and delivery systems. Recognition of the need in FLE to acquire cultural competence is addressed by several authors (e.g., Allen & Blaisure, 2009; Duncan & Goddard, 2005; Gentry, 2007; Hennon, Peterson, Hildenbrand, & Wilson, 2008; Hughes & Perry-Jenkins, 1996; Myers-Walls, 2000; Radina, Wilson, & Hennon, 2008). At the same time, *The Guidelines for Ethical Thinking and Practice for Parent and Family Life Educators* (NCFR, 2009) testify that family life educators are to respect cultural diversity, encourage diversity in the staffing within their organizations, and participate in ongoing training to improve skills and increase knowledge to foster cultural competence. These efforts to enhance cultural competence include the acquisition of “enduring understanding” that goes beyond specific empirical knowledge.

Enduring understandings are transferable ideas to help in being a life-long learner of family diversity and being a culturally-competent professional. Such understandings include: (a) interpreting family behavior from the point of view of its culture; (b) knowing where a family lives (e.g., culture, political system, available resources, geography, religious hegemonism, being a member of a ethn-

ocultural minority) because these influence how they live; (c) understanding that cultures are complex, not static, and vary in homogeneity or pluralism; (d) being aware that culture is dynamic and what is true at one time may not be true in another time, or what is true of that culture in one context may not hold for that culture in another context (e.g., after migration, urban compared to rural area); (e) knowing that not all families sharing a given culture or ethnicity will be alike nor will they necessarily share the same acculturation strategies or adapt to a new culture in a like manner; (f) understanding that some aspects of family life appear to be rather universal, while others are rather specific to certain groups; (g) being aware that more knowledge leads to better, more culturally appropriate programming; and (h) knowing that increased understanding can both lead to greater cultural-sensitivity and acceptance by reducing naive or provincial attitudes or beliefs, but can also lead only to enhanced awareness that can reinforce stereotypes, prejudice, and intolerance (Radina et al., 2008, pp. 386–387).

Thus, according to Radina and colleagues, enlightenment can be a goal, even if absolute cultural competency is not. FLE professionals' attempts to acquire some level of cultural competency are important in order for them to be effective with groups differing from their own native culture.

Challenge #4: Increasing the Professional Profile of FLE

In addition to the diversity of educators themselves, Darling et al. (2009) noted that only 20 % of CFLEs were in community-based services, and less were in other placements such as schools and private practice. A consequence is that CFLEs have a low professional profile and there is insufficient marketing of FLEs. Darling et al. (2009, p. 340) pointed out that, “the growing number of NCFR-approved programs and recent work by NCFR to have the U.S. Department of Labor include the term ‘family life educator’ in the Department of Labor’s Career One Stop website (www.dol.careerOneStop.gov), suggests an increasing number of family life educators entering into the professional world and a growing recognition of their certification.” Improving the professional profile of FLE will continue to be a challenge for the field.

Ethical and Appropriate Delivery of Family Life Education

The delivery of FLE with regard to content, planning, and evaluation has been widely discussed elsewhere (e.g., Arcus et al., 1993; Duncan & Goddard, 2005; Powell & Cassidy, 2007). What we have chosen to focus on here is the ethical and appropriate delivery of FLE, and planning of FLE consistent with the FLE's philosophy of education. We focus on "ethical and appropriate" program delivery because FLE should be presented in thoughtful and deliberate ways in order to reflect an authentic educator who is in touch with him/herself and the target population who is benefiting from the programming. We discuss various approaches to program delivery in an effort to highlight areas of challenge for both the field and individual educators.

Philosophy of (Family Life) Education

Interventions of all types are moral enterprises. That is, they have their foundation in the dominant power position of the interventionist (e.g., educator/facilitator) who has the potential to influence others. Such interventionists often engage in intentional or goal-directed behaviors, for themselves and others. Moral education is sometimes involved, with recipients of the intervention being encouraged to be contemplative about their conduct and what is "right" (Tennyson & Strom, 1986). We argue that FLE, because it harnesses these hallmarks of intervention, is a moral enterprise. Thus, FLEs should base their actions on carefully considered reflexivity—the critical self-awareness of the experiences of self and others (Allen & Fransworth, 1993). For FLEs, deciding how those targeted for education should or should not behave is a moral decision, influenced by personal and professional values. Without critical self-reflection, an educator could be unaware of what values he/she holds (e.g., patriarchal vs. feminist, middle-class hegemony vs. radical change), and what philosophy or paradigm guides his/her personal and professional

lives. As a result, the instruction he/she provides could be based on unexamined biases about what is considered "correct" knowledge to teach, how and when to teach it, and to and by whom it should be taught. It is important for FLEs to critically examine what beliefs, values, and attitudes they bring to their practice (Dail, 1984), as they may be imposing their own values on the learners, without considering that many moral or value positions might be valid. It is for this reason that "Professional Ethics and Practice" is one of the ten content areas for FLE certification by NCFR (e.g., Adams, Dollahite, Gilbert, & Keim, 2009; Minnesota Council on Family Relations, 2009).

Being self-reflexive means having an understanding of one's own motives as an educator and one's philosophy of education. This philosophy reflects an understanding of what FLE is and does, the FLE's role and level of involvement with learners, the nature of knowledge and how it is to be acquired, conception of learners including attention to learning styles, and the best instructional models to match the learning needed or desired by people. In considering such a philosophy of FLE, educators might consider questions aimed at helping with values clarification such as: Do you want to maintain the status quo in terms of what is considered appropriate family behavior? Do you want to help people better themselves? Do you want people to help themselves? Does society need to be reshaped, perhaps drastically? How can you practice FLE in a way that best serves your desired purposes?

Self-reflexivity additionally means critically assessing one's subject matter and pedagogical knowledge and improving as necessary. Being self-reflexive leads to understanding learners or program participants. These perspectives naturally entail who is responsible for both problems and solutions, how much agency learners have in determining their own educational needs, wants, desires, and demands, as well as their role in deciding how and where to acquire information. It also includes consideration of learning styles and motivation for learning.

In this portion of the chapter, we review issues related to formulating a FLE philosophy: values clarification, educator-learner relationships,

helping models/paradigms, and types of service delivery. Below, we provide an overview of possible issues and approaches that FLEs may consider in their professional practice.

Values Clarification

An important aspect of a FLE philosophy is values clarification. Specifically, this involves becoming aware of what, why, and how educators think about questions such as: What is meant by “family?” Who constitutes family? Who is held responsible for problematic family outcomes? Is it the individual members, parents, the total family, the kinship group, social service agencies, communities, or society? Who gets blamed or criticized when undesirable family outcomes result from how families function?

There are many ways to think about how to answer such questions. For example, systems theory and ecological thinking might help in placing responsibility. Thinking in reductionist or individualistic, rather than system terms, will often lead to placing blame at different levels. Other ways to think about these issues might include liberal vs. conservative values, seeing families as private vs. public, and ideas about self-sufficiency (i.e., individualism) vs. community (i.e., collectivistic) interests. Whether one considers families from an individual, relationship, group, or institutional framework, the level of analysis provides ways to answer these questions.

One useful conceptual distinction for considering these questions is provided by Mills (1969), who noted that personal/family troubles are private matters. We use Mills’ ideas as an exemplar of one way to think about these questions with regard to values clarification for the FLE professional. According to Mills, personal troubles reside in individuals and families due to their distinctive values, decision-making, and behaviors. Because people and families thus create their own problems, solutions lie within them. For example, if in a given location or time period, few families experience particular troubles (e.g., neglect of children, overwhelming stress, dissatisfying relationships), then one might assume that when a family experiences these troubles,

they are due to the family’s own actions. FLE would seem to be best applied at the family level, because the problem appears to lie within such fundamental relationships.

Similarly, the conceptualization that personal/family troubles are private matters, also applies to the thinking that families alone should deal with their troubles. Policy makers, educators, and others can absolve themselves from responsibility for families and excuse themselves from intervening. The families might be viewed as deficient or deviant, and the intervention comes only when things get out of hand (Coie et al., 1993). The intervention is thus directed toward correcting individual family or personal pathology, deviancy, or shortcomings.

A contrasting point of view is the idea that personal troubles are not caused simply by the values, decision-making, and actions of families but that other forces (e.g., policies, cultural values, social attitudes) may be at work. When many families are facing similar difficulties (e.g., unemployment), these difficulties might be considered social issues. Such difficulties might well be regarded as symptoms of underlying structural problems, large-scale contradictions, and problems in the larger society.

While still holding to a view of families as private spheres, framing their problems as social issues allows for a differing sense of who is responsible and how families may be assisted. In this view, the intervention is not one that blames families, but tries to help them cope in a difficult social structure (perhaps using empowerment paradigms), or an intervention that tries to change the social structure. One consideration is if the structure of a community or society is such that families are finding it hard to function well, then just educating families might not be enough. These resistant social conditions will repeatedly confront families with obstacles to healthy family functioning and good quality of life. As such, advocating for families and working to change society while helping empower or assist families, might be a prudent course of action.

Viewing family challenges and problems as social issues suggests a need for the provision of

Table 33.2 Doherty's (2009) levels of involvement model

| Level | Role of families | Role of professional |
|------------------------------|---|--|
| Minimal emphasis on families | Limited, included only for practical or legal reasons | Program creation without input from families |
| Information and advice | Collaborators in program development | Expert, responsible for program leadership and conveying accurate information and advice |
| Feelings and support | Encouraged to share feelings and experiences within a group setting that is billed as educational | Similar to Level Two but also skilled in group process |
| Brief focused intervention | Contractual arrangement allowing engagement at a level of intensity beyond that found in standard FLE | Similar to earlier levels but includes assessment and planned efforts to assist in changing troublesome problems |
| Family therapy | Collaborator in enacting personal change | Trained therapist skilled in clinical techniques |

Adapted from National Council on Family Relations (2009)

appropriate services and resources that are supportive of families. Rather than seeing problems as family deficits, problems are defined as a mismatch or shortfall between what families require for healthy functioning, and what resources are available to deal with their circumstances. In this view, communities and professionals take on the responsibility of helping to assure that supportive services and resources (e.g., knowledge, skills) are available to all families.

Educator–Learner Relationship(s)

In further crafting and articulating one's philosophy of FLE, the educator must decide on the appropriate level or extent of involvement with learners. Here we discuss two frameworks: Doherty's (2009) Levels of Involvement and the Family Protection and Enhancement Continuum (Briar-Lawson et al., 2001; Hennon & Jones, 2000). Educators may need to consider the relationship of educators and learners in their philosophies of FLE.

Levels of Involvement Model

Doherty's (2009) continuum of Levels of Family Involvement for FLEs is a useful device for helping to understand the difference between family therapy and FLE, as well as helping to comprehend the different roles of FLEs (see Table 33.2). As FLE professionals review this continuum, it is likely there is a level of intensity of involvement that they find attractive. This preference for a

particular level of involvement, or what the educator thinks is the right way to practice education, is thus a constitutive element of the philosophy of FLE. The appropriate level depends on several factors including the educator's training and self-confidence, as well as characteristics of the learners and the intention of the education. FLE professionals might find they require additional knowledge and skills to practice at their desired level. They might also find that their level of involvement may change as they develop new knowledge and skills.

An example of *Minimal Emphasis on Families* is school-focused interventions where parents and their children are "called in" to discuss issues with school personnel, or to listen to what professionals have to say. This level is more individual or organization-centered than family-centered. Much like a medical or enlightenment model (Hennon & Arcus, 1993), this level of involvement requires that families be compliant and support and cooperate with the designs of the professional. As Doherty (2009) noted, "Level One programs are increasingly being seen as inadequate ways to work with families and are even contrary to federal law in the case of children with special educational needs" (p. 255).

Activities at Level Two, *Information and Advice*, include the professional as a "speaker" at various social or civic functions, or offering one-shot didactic workshops, but that include families in collaborative ways. This level requires the

professional to provide information on community resources as necessary, have a good grasp of the basic theories and research on family functioning, and know how to convey this information in clear and interesting ways. Level Two also involves the use of good communication skills that allow clarity in engaging groups in the process of education, sharing information, asking and answering questions, and offering recommendations that are focused, effective, and honest. The professional must also be open to engaging families and their members in an accepting and collaborative manner, rather than “doing to” families. One strength of Level Two is that a large number of people can be reached with more generic and universally applicable information. This level also has its drawbacks including the following: (a) the information is conveyed in a “sterile environment” (i.e., little self-disclosure), (b) personal discussions are not encouraged, and (c) the presentations lack the depth many would think necessary for motivating participants to engage in meaningful change.

Doherty (2009) argued that Level Three, *Feelings and Support*, is the optimal in degree of intensity for most FLE, as it combines information and affect. At Level Three, educational interventions have participants share their feelings and personal experiences (e.g., series of parenting seminars/workshops with the same participants, stress management or conflict resolution workshops, socio-educative approaches) (Afonso, Hennon, Carico, Ormiston, & Peterson, 2009). Interventions of this type include the FLE’s knowledge and skills required for Level Two, plus certain additional skills (e.g., empathetic listening that creates an open, trusting, and supportive environment; collaborative problem solving approaches that provide tailored recommendations). The required knowledge for the FLE includes basic information on family functioning, as well as the emotional aspects of group process (Bredehoft & Walcheski, 2009).

Another characteristic of this level is that the education is directed toward what can be considered the normative stresses of daily family living. Traumatic personal memories and experiences are not the focus of inquiry, nor are they elicited.

In fact, the educator must be skilled in “only going so far” and not enticing learners to reveal more traumatic or intensely personal experiences, feelings, and meanings. The educator requires skills for both protecting learners from being too self-disclosing and for making appropriate referrals to mental health professionals as necessary. Likewise, educators have to be comfortable with and reflexive about their own feelings and responses so that they can act appropriately as information is disclosed. Appropriate skills include knowing how to remain “connected” to the participant without trying to rescue or flee. Common mistakes made by educators trying to operate at this level of intervention are: (a) directing attention too quickly back to the total group due to personal discomfort, (b) cutting off too quickly the person making a disclosure and thus premature recommendations are made without a full understanding of the total context, feelings, etc., and (c) in an honest attempt to be helpful, probing too deeply into the learner’s perceptions of distress. FLEs must know how to privately talk with the persons expressing pain in order to discuss referral to a trained clinician, or to a more appropriate Level Four educational intervention.

Level Four, *Brief Focused Intervention*, includes educational practices adding to the level of intensity and skills already discussed and bordering on family therapy. Level Four interventions are particularly suited for vulnerable or at-risk families (e.g., teen parents with multiple problems, families included in child protection services, or families with chronically ill members). Necessary skills for work at this level include assessing family problems and understanding context, and the development of appropriate interventions. It also requires the ability to ask appropriate questions for developing a detailed picture of family dynamics, and formulating hypotheses about particular family dynamics. Although not considered family therapy according to Doherty’s (2009) model, Level Four can resemble family therapy in its use of brief focused interventions involving brief periods of working with people in order to solve a problem and change family patterns beyond those “identified” as the “problem” and knowing when

to bring closure to this intensity of involvement, and providing referrals in an appropriate and acceptable manner. Level Four entails working with therapists, and not as therapists, as well as other community resources who can assist a particular family or families.

Educators wishing to engage participants at this level must have appropriate professional training, including having done personal work examining their own feelings and relationships with their families of origin and creation, as well as community systems (Doherty, 2009; Kilpatrick & Holland, 2009). This is necessary so that educators can avoid triangulated relations with the learner against the other significant people involved in the problem of focus. The appropriate knowledge base includes what was discussed above, as well as some level of sophisticated understanding of family systems theory and how to work with families.

Because educators are increasingly asked to work with at-risk families and those with multiple stressors or problems, the boundaries of FLE are enlarged beyond the more typical information provision and supportive services. FLEs working within this mode are likely to engage in collaborative relationships with other professionals, such as therapists (e.g., psycho-educational or socio-educative practices). FLEs can educate while other professionals can do what they are trained to do and in total, families will be well served.

Level Four demands: (a) careful curriculum planning and decision-making, (b) acceptance by participants, (c) and appropriate training for the leader, as well as good professional relationships with therapists, other clinical staff, mental health professionals, and social service providers in the community. At this level, the group work and group process differs from that found at the less intense levels of family involvement. During any given educational episode, the facilitator and group may work extensively on only one, two, or three problems presented by members. If the situation calls for it, Level Three groups may move to a more intensive Level Four for a time in order to be of assistance to a member facing a particular difficulty (Doherty, 2009).

Family Therapy, Level Five, is beyond the mission of FLE. Thus, Level Five interventions are not considered FLE and should only be engaged in by trained and licensed family therapists. The difference between Levels Four and Five is that family therapy includes a knowledge base grounded in family systems, family patterns, and distressed families, and how to collaboratively interact with professionals and other community systems (Corey & Corey, 2007; Doherty, 2009; Kilpatrick & Holland, 2009). Those engaged in family therapy must receive specialized training and be able to handle intense emotions, both their own and those of the families with whom they are interacting. Required skills include interviewing, dealing constructively with families' resistance to change, overcoming difficulty with engagement, and knowing how to escalate conflict so families can break through impasses. Family therapy involves working intensely with families during times of crises and negotiating collaborative relationships with others who are working with the same families, even when these others are uncooperative or at odds with each other. Marriage and family therapists (MFT), or couple and family therapists (CFT), currently have licensure requirements in all 50 states (see Bartle-Haring & Slesnick, Chap. 34). The requirements include a clinical master's degree, such as in Marriage and Family Therapy, or Counseling/Clinical Social Work with specific training in family therapy; and MFT/CFT supervised clinical experience (i.e., during graduate level training as well as post masters—depending on degree and the type/level of licensure).

Family Protection and Enhancement Continuum

Another continuum useful in thinking about a FLE philosophy is the Family Protection and Enhancement Continuum (Briar-Lawson et al., 2001; Hennon & Jones, 2000) (see Table 33.3). For programs in the first place on the continuum, *family-insensitive* interventions, families are not served well and sometimes are actually harmed. Examples include sex education programs developed without regard to the impact they may have

Table 33.3 Family protection and enhancement continuum

| Title | Description | Role(s) of learner | Role(s) of educator |
|--------------------|--|--|--|
| Family-insensitive | Educational interventions developed within social service sector (e.g., health, education) that ignore families | Not involved or considered | All knowing expert |
| Family-sensitive | Policies or practices that offer only superficial consideration of family needs | Not involved | All knowing expert, little real regard is given to the many potential positive or negative impacts the program might have on families as systems |
| Family-focused | Programs that are specifically aimed at helping families but do not involve specific perspectives of families in program development | Families are considered and accommodated in program design and delivery | Expert responsible for program design, delivery, and evaluation |
| Family-centered | Programs focused on considerations of what is best for families | Families come first in planning and delivery of the intervention | Expert who uses and perhaps input from families empirically based information in program design |
| Family-centric | Programs that consider families' perspectives and not special interest groups, or sector specific specialists | Families considered partners/coauthors of educational plan, not clients to be served | Partners/coauthors of programming with families |

Adapted from Briar-Lawson et al. (2001) and Hennon and Jones (2000)

on families or what parents desire their children to learn, and how home–school policy is formulated and practiced without regard to consequences for families with diverse capacities and resources (e.g., employed single parents who may not be able to meet school expectations for parental involvement do to constraints on their time).

Interventions can be “falsely” regarded as *family-sensitive* when families receive “lip-service” and may be mentioned, or presumed impacts are considered in often general or vague terms. For example, a health sector sex education program may mention families but does not really take families and their functioning into account as the program is developed. As a result, families are still not well served or supported, and may even be unintentionally harmed. Educators may assume that they know what is best when designing a program with little real regard given to the many potential positive or negative impacts the program might have on families as systems. On closer inspection, however, it might be discovered that it is difficult to predict the ways families will be assisted or supported, or further deteriorated.

In Doherty's (2009) levels of involvement continuum, work done at Level One (i.e., *Minimal Emphasis on Families*) could be family-sensitive and even family-insensitive. Doherty's Level Two, *Information and Advice*, is similar to the Family Protection and Enhancement Continuum's *family-focused* intervention. With these types of interventions, families receive the attention and consideration they deserve. Planners begin to ask questions concerning assurances for families, such as: Will this intervention harm families? Have a full range of potential benefits and the range of drawbacks been identified? Actual consulting with families is not likely to be done, but outcomes of the intervention for the support of families have been carefully considered. At the same time, all possible consequences of programming for families are not precisely investigated, cultural and other values might not be adequately considered, nor are families' various roles in the educational process necessarily well thought-out. As a result, families may still unintentionally be in harm's way with this type of FLE process.

Family-centered approaches are based on more holistic, systemic, and ecological approaches. These approaches assign priority to the family level of analysis at least equally or more relative to other sectors considered as necessary. In these types of intervention designs, families are not simply regarded as just another sector of society, but as the cornerstone of society. The primary concern driving family-centered interventions is the question “what is best for families?” Individual family members or other social sectors are not ignored; rather they are considered in terms of how they relate to family systems and how their policies and practices may be adjusted or accommodated so that they “wrap-around” or are otherwise supportive of families. This type of FLE is similar to the third or fourth levels of involvement as discussed by Doherty (2009).

There are two major characteristics of family-centric interventions. First, families are enfranchised and empowered, with capacity building, strengthening, and democratizing the planning, implementation, and evaluation of the FLE intervention cycle as major goals. Not only whose voice is heard, but related concerns involve determining how problems are named and framed, as well as how educational policy and conduct decisions are made. Likewise, who participates in the accountability and processing of FLE is given careful thought, with emphasis being placed on ensuring that inclusiveness of all families served by the program/intervention is practiced. Two family accountability questions are asked: To what extent are families included in the decision-making processes concerning their education and support, and to what extent are families included in implementation and evaluation of FLE programming? Second, family-centric perspectives are holistic in that they consider the family as a whole, but nevertheless hold the premise that families are basic units of society influencing social behavior in many important ways. Consistent with family systems and social ecology theory, this approach to intervention situates the individual and the family within a larger ecology or systems.

Helping Models/Paradigms

An important aspect of developing a FLE philosophy is to set forth precisely and systematically the educator’s views concerning the location of, and responsibility for, family problems and who is most accountable for solving these problems. One way to do this is to identify the helping model or paradigm that the educator finds most comfortable, as this will likely form the framework shaping many aspects of an intervention. A helping paradigm may include several components such as: (a) how family problems are named, framed, and prioritized, (b) the necessity of offering FLE, and (c) the approaches undertaken in designing and delivering FLE (Briar-Lawson et al., 2001; Hennon & Arcus, 1993; Hughes, 1994). Clear enunciation of an approach to helping, as well as the articulation between it and the delivery of FLE, can result in the design of better intervention programs that achieve desired goals. This can also help intervention planners realize that they could have been applying the wrong helping or delivery model to the prevention, abatement, or remediation of identified family issues. Brickman et al. (1982) suggested that many times programs have failed to alleviate a problem, and the response has been to apply a similar ill-designed program to that problem. Failure may be the result of having developed a program that does not match the intentions of either the target population or the educator.

It is important to consider a variety of ways of thinking about FLE in order to best understand the types of FLE strategies. Two such strategies are the Brickman et al. (1982) approach that identified four helping models or paradigms, and the strategy by Guerney and Guerney (1981) and Guerney, Coufal, and Vogelsong (1981) that offered various service delivery models. These two strategies are presented in order to highlight the unique perspectives on FLE provided by both helping paradigms and service delivery models. Helping models or paradigms focus on identifying where the locus of the problem lies and whose responsibility it is to address the problem.

Service delivery models go further and define various roles of the actors who must deal with the problem. Together these two strategies elucidate the various ways FLEs might approach their work.

Brickman Typology of Helping Models/Paradigms

The Brickman typology (Brickman et al., 1982) varies on two important dimensions—who is considered responsible for the problem (i.e., who is to blame) and who is considered responsible for alleviating the problem (i.e., who is to take actions toward a solution). The models or paradigms include the moral, enlightenment, medical, and compensatory/empowerment approaches. Table 33.4 summarizes each of these models/paradigms with regard to their strengths and weakness and these dimensions.

The moral and enlightenment models/paradigms share a focus on who is considered responsible for the problem. These two models/paradigms differ, however, as to who accepts the responsibilities for alleviating or ameliorating the problems and in terms of what roles both families and educators would take in this regard. Intervention programs based on the *moral model* require participants to take clear moral stances on accepting responsibility for both the mess they are in and for getting out of it. For example, FLE grounded in principles of the moral model would consist of instruction designed to motivate families to take actions to change their ways. Families might be reminded or educated about what they have done and perhaps why this has happened. Likewise, families would be rewarded for taking positive actions to self-solve their problems and getting themselves out of their situations.

Programs designed using the *enlightenment model* are aimed at enlightening people about the “true” nature of their problems and the difficult actions required to deal with them. The educational and perhaps support intervention program being offered is presented as *the* acceptable and correct way to change one’s life and alleviate identified problems. Various 12-step programs fall under the enlightenment model umbrella. Similarly, any program that tells families exactly

how to achieve a desired goal, especially in a lock-step fashion, is typically of the enlightenment type. The key difference between programming based on this versus other models is that this programming expects the recipients to accept responsibility for their problems and to accept the correct (enlightened) path to alleviate these problems.

FLE intervention programs based upon the *medical model*, like the enlightenment model, require participants to place faith in a program. The creators and the dispensers of solutions (i.e., prescriptions) also probably hold strong opinions about the correctness of the designed intervention. After all, they are the experts and the recipients are merely clients or people to be educated. Problems can be traced to such “root causes” (i.e., diseases of social origin) as racism, sexism, a class society, or globalization; inadequate access to the opportunity structure; or weak or inadequate values being transmitted through a culture of poverty. According to the users of the medical model, the current problems or needs of families are not necessarily their fault. The victims should not be blamed, nor should they be expected to be responsible for alleviating their problems. Experts take the role of physician and thus observe the situation, diagnose the problem, and prescribe the remedy. Recipients provide information asked for, accept the expert advice, and carry out the prescribed course of action exactly as directed. Recipients are expected to do whatever is prescribed to “get well” in order to have a healthy family. That is, learn the correct concepts, skills, and motivation, and then apply this to their situation. The expert might only “see” things narrowly or sector specific and thus name and frame (i.e., assigning a conceptual label to and providing a solution context for a phenomenon) without consideration to broader contexts and situations.

The fourth model is the *compensatory* or *empowerment* model and is based on several fundamental assumptions. First, people are assumed to be cognizant of their own needs, desires, values, and goals, and further, that people have the capacity to identify these and put them into action. Empowerment is based on a non-deficit model; that is, one assuming that all individuals,

Table 33.4 Brickman's typology of helping models (Brickman et al., 1982)

| | Moral model | Enlightenment model | Medical model | Compensatory/ empowerment model |
|-------------------------|---|---|--|--|
| Description/goal | Helping families accept responsibility for problems rather than blaming others, and motivating them to improve situations | Enlightening families to accept responsibility for their problems, and encouraging acceptable pathways to change | Based upon research and theory, experts design best courses of action to alleviate identified problems | Educators act as collaborators within empowerment mode of intervention or helping |
| Locus of problem | Families | Families | External factors | External factors |
| Locus of responsibility | Families | Families with enlightenment provided by professional | Experts/professionals | Families and experts/professionals |
| Strengths of model | Families become independent and innovative while taking care of themselves without dependency on others | Programming provides emotional support and access to opportunities, motivation, and education | Allows families to claim and accept help without being blamed for personal weakness or for having created their own problems | Directing families' energies outward toward solving problems, without self-blame for having created the problems |
| Weaknesses of model | Families viewed as solely responsible for themselves and thus systemic, cultural, and situational causes are ignored | Fanatical/obsessive concerns with problems Restructuring life around behaviors and interpersonal relations designed to help Programs require acceptance of both negative images of self and submission to agents of change Alternatives are rejected | Families seen as ill, exempt from ordinary social responsibilities, and often required to accept a passive role Families may become dependent because of expected passivity and willing acceptance of expert diagnosis Families' expertise ignored May be narrow in scope or disregard alternatives | Alienation that can result from being held responsible for solving problems not of one's own making |

families, and communities have strengths upon which they can build. FLE based upon this model takes the view that families are not considered responsible for their problems, but are considered responsible for devising and carrying through on solutions to these problems. In this category of FLE programming, participants are viewed “as having to compensate for the handicaps or obstacles imposed on them by their situation with a special kind of effort, ingenuity, or collaboration with others” (Brickman et al., 1982, p. 371). To develop these solutions, people often must be empowered (Hughes, 1994). For the educator, this means asking questions like, “What can we do together to address this problem?” or “How can I be of help?” (Hennon & Arcus, 1993). Using this model, FLEs and others (i.e., acting as collaborators and facilitators) are experts in the means of arriving at solutions judged most appropriate. In this sense, the FLEs can provide information and work collaboratively to find a solution that is suitable for the family.

Second, diversity is useful and adaptive (Hughes, 1994). Rappaport (1981) noted that empowerment should be based on divergent reasoning that encourages diversity through the support of many different local groups, rather than one centralized social agency or institution. That is, centralized groups that control resources and use convergent reasoning attempt to homogenize people and assume that there are standardized ways by which people should live their lives. This might not fit the reality of many families. Professionals also may assume that all people deserve and should seek help when necessary, and even blame families who do not comply with this supposedly normal behavior. But individuals or families who value self-sufficiency might not go to service agencies for help. Rather they may rely on more informal sources of support (e.g., other families, friends, relatives) if the need arises (Newsome, Bush, Hennon, Peterson, & Wilson, 2008). This type of education can be more culturally appropriate and sensitive than FLE based on other approaches (Allen & Blaisure, 2009; Gentry, 2007; Radina et al., 2008). A related implication is that problems, needs, issues, solutions, or required information and other resources are identified in concert with

those who are the targets of education efforts (Hennon & Arcus, 1993; Hennon et al., 2008, 2009; Hughes, 1994).

While it is important to engage in culturally competent FLE development and delivery, it is also important to note that there can be difference and commonalities across cultures. The challenge to FLE is to provide flexible approaches that recognize both the diversity and the commonalities in human behavior. If all FLE is reduced to paying specific attention to individual diversity, there is the risk of too few resources to effectively provide assistance to all individual and unique situations. Thus, there must be a compromise. FLEs need to be both “experts” in content to help provide “clients” with new strategies and scientifically grounded common patterns, but also masters of “process” in order to tap their uniqueness and strengths.

The third assumption is that help is most effective when it is provided by small, intimate social institutions (Hughes, 1994). People find meaning in their lives through their families, neighborhoods, churches, and voluntary organizations. These social institutions may be the best for providing appropriate assistance. It has been asserted that one method for reaching people is to facilitate informal resource exchanges among individuals and groups, perhaps at the neighborhood level (Afonso et al., 2009; Hennon et al., 2008). Effective methods of reaching people in a diversity of families, particularly for maintaining knowledge and skills, would include developing support groups, including socio-educative interventions for encouraging and supporting behavioral change.

A fourth assumption is that empowerment can be at several different levels, such as the individual, family, and community. An implication is that family life educators who are engaged in program development must consider the most appropriate intervention level or levels. Some might consider the strength of this approach to be part of the transformative, or emancipatory, learning process. In this process the person is transformed through a learning process that is experienced in ways other than just through the direct acquisition of pre-specified knowledge (Afonso et al., 2009; Apps, 1979; Freire, 1970; Gentry, 2007;

Hennon et al., 2008; Mezirow et al., 1990). Freire justified the view that adult education should function to raise the consciousness of the participants, helping them realize how personal and social oppression limit personal and family development. Outreach or adult education could thus serve an emancipatory role, allowing for personal and family growth and development. Mezirow et al. testified that programmatic efforts should be structured to foster critical thinking and assessment of personal paradigms that might limit reaching one's full potential, as well as the full potential of more optimal family functioning. With this agenda, the educator should promote learning opportunities that assist program participants to critically assess their unspoken and non-questioned personal life assumptions that might be barriers to more optional living. Duncan and Goddard (2005) mentioned that educators might use a "critical inquirer" approach related to critical/humanist orientations that realize the importance of learners' self-actualization to guide participants to the desired outcome of critical and rational thinking and autonomy (cf. Hitch & Youatt, 2002).

There are three issues that FLEs might reflect upon as the strategy of empowerment may be accepted without much critical reflection. First, to what extent do all or certain people deserve empowerment and to what extent is ensuring empowerment a moral responsibility for FLE? Second, to what extent do vulnerable people or those who might just be considered ordinary, require professionals (i.e., FLEs) in order for them to be empowered? A third issue is the extent to which people can become empowered, transformed, or emancipated simply by obtaining access to relevant resources and services. Is FLE as a resource enough, even if it includes the development of support networks, critical thinking, and other aspects beyond just the "pouring knowledge into the unknowing's heads," or, is a combination of these most appropriate?

The four helping models/paradigms used by many interventionists (e.g., Van Vliet, 2009), vary as to their views on the locus of responsibility for creating problems or solutions, the roles of the educator/expert and learner/recipient, and identified strengths and weaknesses. Depending upon circumstances, one model may be more

appropriate than others. However, an educator might, without much reflection, accept a model as correct for all or most situations. The result can be erroneously force fitting of an intervention to a situation. As a word of caution, "if someone is drowning, they need to be saved, not asked if they want swimming lessons." That is, while some models/paradigms, such as empowerment, have currency now and hold intrinsic value for an educator, in some cases families or individuals first have to be "saved" from their crisis situations before other approaches might be effective or appropriate. Thus, FLEs must determine the appropriate balance between goals of conveying information and empowering clients.

Guerney Model of Service Delivery

In addition to helping models/paradigms that focus on loci of problems and the responsibility to solve them, educators might also vary in terms of their service delivery modes, which identify specific roles and responsibilities of those involved in solving the problem. Becoming more self-reflexive about both can help planners develop better interventions. Guerney (1982) identified the spiritual, medical, and educational models for the delivery of services (Table 33.5). Here we review the spiritual and educational models as the medical delivery system is quite similar to the medical model/paradigm just reviewed.

With the *spiritual model*, the intervention is by someone who can rid the person or family of the "bad spirits" or "exorcise the devil" (Guerney, 1982). While Guerney does not go beyond this level of thinking about this model, it might well also include offering or seeking intervention based on changing fate or luck, guidance of a religious or at least spiritual nature (including astrology and perhaps new age spirituality), or perhaps even finding "one's way," "true path," or "guiding light," based on traditional wisdom and values, and more ancient beliefs (e.g., tribal, communal, folk, kin, etc.). This approach might be found, and considered acceptable, more often among particular ethnic, religious, or subcultural groups. It might include combining education about family life with religious education or the importance of prayer and other devotional activities in helping families find guidance. Whatever

Table 33.5 Guerney (1982) model of service delivery

| | Spiritual model | Medical model | Educational model |
|-------------------------|---|---|---|
| Aims/focus | Personal or family problems are due to some type of supernatural force | Using disease, illness, and pathology analogies/terminology for problems of living that are not biochemical in nature | Presentation of new knowledge, skills, ways of thinking, and value orientations so that informed decisions about implementing new or better lines of behavior can be made |
| Role of educator/helper | To offer/provide spiritual guidance and educate families accordingly | May act as clinicians rather than educators | To teach personal and interpersonal attitudes, concepts, and skills that families can apply presently and in the future to solve problems |
| Role of families | To believe and place faith in a higher order or system that can provide direct intervention or guidance of a spiritual type | To follow the prescribed course of action | To be receptive to learning new information and skills and be willing to implement them to solve problems |

From Guerney (1982)

the programming content, the techniques utilized are aimed at changing families' predicaments through use of external, perhaps supernatural or divine, forces. These approaches may include extorting families to give up ills that have separated them from more pure, traditional, and/or "value-based" lifestyles. FLEs who use this service delivery model should consider the appropriate balance between conveying research-based information and making use of spiritual metaphors during information delivery.

The *educational* model of service delivery can be used to implement different types of interventions grounded in many different theoretical models (Guerney, 1982). The educational model is based on learning "how to do it if you want to" rather than a "follow these directions" or "seek this guidance" mentality. Rather than thinking in terms of having to locate pathology and design an individualized prescriptive program to eliminate such, the educator thinks in terms of the needs, aspirations, and desires of the learners, then endeavors to teach them how to reach their goals. This makes it "feasible to embark upon skill-training, the building in of enduring strengths and skills, rather than only the removal of an irritation or weakness" (Guerney, p. 247). The educator teaches how to better fish and how to prepare the catch, rather than formulas for enhancing one's fishing luck, or handing out fish dinners. By reaching larger groups with sustainable knowledge,

more may learn to improve their quality of life over the longer term.

Challenge #5: Choosing Appropriate Approaches to Family Life Education

Each of these various approaches to designing, implementing, and evaluating interventions offers strengths, weaknesses, and trade-offs in terms of time, energy, and other resources. Family life educators likely will find one or more of these approaches acceptable. Some practicing FLE could be in environments where approaches are being used that differ from what the educator would prefer. The approach preferred and/or used will be influenced by, and influence, one's philosophy of FLE, as well as how well one believes he/she fits with the employer or job. Educators may want to educate employers about other methods, be convinced that the employer's methods are better, or seek another place of employment.

Issues in Curriculum Development

Another issue facing family life educators is curriculum development (i.e., what to teach). There has been some debate about terminology when it comes to curriculum development. Here we provide some accounting of this in an effort to

clarify the terms we use to describe the curriculum development process. Curriculum is a term that has been used to describe different aspects of the educational process, as well as the content to be conveyed (Apps, 1979; Tanner & Tanner, 1995). For example, Apps (1979) wrote that *curriculum* has been narrowly defined as a set of courses taught in an educational institution (e.g., courses necessary to complete a bachelor's degree in family studies), and that the broader term *program* has been used to denote what is taught in continuing education and other nonformal educational settings (i.e., community-based FLE). In contrast, Treichel (2009, p. 222) defined *programs* as "educational activities offered for an indefinite period of time (like a university's continuing education program) whereas a *project* [emphasis added] consists of activities offered for a shorter period of time (e.g., a 2 day workshop about a particular instructional strategy)." So, there are at least these three terms, all of which are meant to convey a similar idea—a planned system for action toward a goal. The confusion seems to come from what is meant by "curriculum" in different contexts and with different purposes.

For the purposes of our discussion, the term curriculum is used to denote the largest, most inclusive, whole from which other aspects of FLE programming flow. That is, a curriculum serves as a guide for some larger body of knowledge to be covered under the rubric of a broad or general topic, as well as the process of delivering a sequence of content (e.g., from simple to more complex; from basic to advanced). For example, "Divorce and Remarriage" and "Family Stress" could be two components included in a curriculum titled "The Family." The structure of a curriculum is made up of programs within which lessons, activities, or episodes are organized. An example of curriculum on Developing as Couples (Curriculum title) might include:

Program 1: Developing couple relationships

Unit 1.1: What is intimacy?

Unit 1.2: Gender expectations and relationships

Unit 1.3: What's love got to do with it?

Unit 1.4: Pairing up

Program 2: Developing sexuality

Unit 2.1: Sexual socialization

Unit 2.2: Sexual scripts

Unit 2.3: Pregnancy and outcomes

Program 3: Developing as a couple

Unit 3.1: Marriage as process

Unit 3.2: Let's talk

Unit 3.3: Conflict management

Unit 3.4: Growing in love

Program 4: Developing a dark side

Unit 4.1: Disaffection

Unit 4.2: Violence

Unit 4.3: Addictions

Program 5: Developing apart

Unit 5.1: Divorce: process and consequences

Unit 5.2: What about the kids?

Unit 5.3: Starting over

The curriculum in this example is divided into five *programs* with each having three or four *units*. The content and skills intended to be conveyed in the program are likely too comprehensive to be absorbed in one instructional *episode* (i.e., a unit of time-bound "contact" with learners). Thus, the program (e.g., Program 3: Developing as a couple) is reduced into a related and sequential set of units (also called *modules*), such as Marriage as Process, Let's Talk, Conflict Management, and Growing in Love. Each unit is made up of several *lessons*. For example, Let's Talk could consist of lessons on Why Clear Communication is Important, Active Listening, Body Language, and Rules for Effective Couples Communication. Each lesson, depending upon time constraints, characteristics of the learners, the goal for comprehensiveness and thoroughness of coverage, may be more inclusive than what can be effectively delivered in one episode. For example, Active Listening may require many episodes to teach, lasting over several days or weeks.

In the example, the total set of content and delivery processes is the curriculum from which the educator is working. This is based on knowledge from the field of family science. This knowledge is winnowed, distilled, and organized into a

set of concepts, facts, skills, etc. that are coherent in meeting some educational goals. Given this rather comprehensive knowledge, it cannot all be learned at one time by the intended participants in the “courses” (or workshops, meetings, seminars, receivers of newsletters, etc.). The curriculum is thus further organized into smaller, self-contained, but interrelated programs. These consist of a set of concepts, facts, skills, and so on that are logically related to a more specific topic such as Developing as a Couple. Beyond the organization of content, curriculum and these self-contained programs include schema for the process of content delivery (e.g., lectures, small group activities, and the utilization of educational resources).

Curriculum Development

There are several approaches to curriculum development in FLE. We have chosen to focus on the Tyler (1949) and the Freire (1970) approaches. These approaches, while dated, offer timeless models for the development of FLE curricula.

The Tyler Approach

Tyler (1949) developed a linear model of curriculum development based on the objectivist education paradigm (Vrasidas, 2000) that has dominated education. Many approaches to instruction and learning are founded on behavioral and cognitive theories sharing philosophical assumptions with *objectivism* or basic realism, where reality is considered to exist independent of humans. Assumptions of objectivism include: (a) entities structured according to their properties and relations constitute the real world and can be categorized by their properties; (b) the real world can be modeled; (c) symbols are representations of reality and are meaningful in the degree to which they correspond to reality; (d) human’s have a mind that can processes abstract symbols allowing for the mirroring of nature; (e) human’s think via symbol-manipulation; (f) the meaning of the real world exists objectively independent of the human mind; and (g) the world is external to the human knower. A practitioner using the objectivist paradigm understands that there is one true and cor-

rect reality, knowable using logical-positivism approaches of science. An illustration would be to base parenting stress programming on the empirical results from research that reveals nomothetic or predictable patterns related to this topic. Consequently, parenting stress really (or probably) exists, is governed by natural laws/forces (or predictable patterns), and the correct application of scientific knowledge can help in preventing or elevating parental stress. Such thinking about parenting stress programming could likely result in the application of the Tyler method.

The *Tyler approach* to curriculum development consists of four steps that are to be carefully followed in correct sequence. These are determining: (a) the purpose that the educational organization seeks to attain (identify curricular goals and instructional and educational objectives); (b) the educational experiences to be provided to obtain these purposes; (c) how these experiences can be effectively organized; and (d) if these purposes are being attained (evaluation). Following in this mode, all aspects of a curriculum should be purposeful and goal driven (Brophy & Alleman, 1993; Vrasidas, 2000). This includes the subject matter, instructional methods, assessment techniques, and so on.

While there may be a singular statement of purpose serving to guide curriculum programming, likely there will be several goals that this programming is designed to achieve. Goals, which are articulated with *goal statements*, are distinguished by their level of generality or abstraction (Learning Objectives, 2007; Martorella, 1996). They might, for example, indicate or propose a level of competency, or state a broad concern to be addressed, or a condition to be obtained, and are the impact the programming is ultimately to achieve. *Objectives* are more specific, and should achieve the goals of the curriculum or program (Learning Objectives, 2007). Objectives are usually stated in and guide lesson plans. *Instructional objectives* must align with the learning experiences and the evaluation process, whereas, *educational objectives* should actuate the curriculum development process. Sometimes objectives are referred to as *competencies*. The educator identifies the knowledge to be transferred to learners before designing

instructional experiences for a selected topic. This knowledge is stated in specific behavioral (i.e., measurable or criterion referenced) objectives using clear and intentional language. This is to ensure understanding of what the learner is expected to know and do when the instruction is complete, and each learner is expected to achieve the objectives and know the same material and behave in the same manner. Evaluation procedures ascertain the extent to which objectives are reached (Vrasidas, 2000).

Educators might consider how to handle the assumption that everything learned is demonstrated behaviorally. For example, participating in a workshop on parenting can lead people to discover new insights about themselves, gain self-confidence, acquire a new sense of empowerment and self-mastery, and acquire ways of thinking and learning that are transferable to other, novel situations. How are these, and other perhaps unintended but important outcomes, to be predetermined and/or measured? What if people acquire the insight that they are failures, incompetent, with no control over their lives and environments, and feel worse about themselves as a result of attending the workshop? Is this a good or bad outcome? Who is to decide if “feeling in control” is realistic or that people ought to feel good? Perhaps bad self-esteem will motivate a person to do something about it, or get out of a dysfunctional relationship. In other words, not all outcomes may be intended or measurable. FLEs should consider the implications of these outcomes in program development and evaluation.

A major component of the Tyler approach is the use of written objectives for the instruction. These are a priori assumptions about what people need to know or do that guide the instructional process. That is, educators teach to the objectives and use them in determining if the instruction was effective or successful. An assumption in this process is that educators know and can decide before a lesson or activity what the outcomes ought to be. Another assumption is that knowledge lies outside the individual and that objectives are a systematic way for bringing the knowledge and learner together in the appropriate way. Depending upon one’s view of knowledge,

and who might control it, an educator might not accept this assumption.

It is assumed in the Tyler approach that learners’ needs are important and that these can be empirically and objectively determined. *Needs* are often defined in terms of something that is absent, but this may be an incomplete viewing of what, exactly, constitutes a need (Hennon & Arcus, 1993). A need is a normative concept based on the premise that an absence ought not to exist. Thus, needs cannot be just determined through observing cases; some standard or benchmark is necessary for comparison and these often are social norms, professional values, personal taste, unchecked biases, religious values, etc. Needs are defined as the gap between “what is,” with “what should be.” The determining of “what is,” can be done empirically using needs assessments (i.e., an empirically based determination of learners’ current level of functioning, knowledge, skills, resources, etc.).

But determining needs or establishing “what should be” is not simply an empirical process. It requires a guiding standard and a commitment to certain values. That is, determining “what should be” is more difficult and requires judgments and standards. “What should be” is concerned with what is normative, proscriptive, moralistic, and includes values. Therefore, “what should be” cannot be determined solely through analyzing empirical data but may require interpretive and judgmental leaps from data. For example, what does the number of children being born to unwed mothers (and even the use of this phrasing vs. labeling them illegitimate children) or the number of divorces in a state or community mean in terms of cultural, normative, and moral standards?

The “should-be” is arguable the most difficult decision in the curriculum planning process, but one perhaps often done with little reflection and critique. FLEs must therefore ask themselves the question, what are my values, training, or situated place in society that may be coloring what I believed to be correct? For example, if professionals are middle class and religiously conservative, they might have strong opinions about what is appropriate family behavior. This frame of mind may blind them to other, accommodating,

acceptable, behavioral choices with which people function quite well in other segments of society. Likewise, determining “what should be” is a political and a powerful process. Who gets to define the reality of what is and what should be? Who gets to say who is deficient and “needs” something? Who (e.g., learners, teachers, school administrators, funding agencies, social service agencies, churches, elected decision-makers) is the “best” in determining what needs exist (and relative to what goals)? Thus, due to lack of sensitivity to differences, professionals might believe that their own way is the right way, and everything else is deficit, if not worse. FLEs are therefore encouraged to maintain self-reflexivity throughout the curriculum development process in order to avoid unintentionally determining needs in ways that are detrimental to those they intend to help.

One answer is to conceive of the FLE process as a procedure for informing people about what researchers and practitioners think is appropriate, and then letting people make their own judgments and decisions based upon this information. Rather than trying to force people to act a certain way, or perhaps even assuming that they should act a certain way, educators can provide what is believed to be the best and brightest information based upon specific standards of scholarship, professional practice, ethics, values, and personal convictions. Educators should, however, keep in mind the political and value-based decisions they are making when determining instructional content and writing objectives. The FLE offered could implicitly or explicitly be suggesting that some people are deficient, backward, immoral, or inadequate. Likewise, certain problems develop when practitioners evaluate their programming. What if people do not accept, or value, what one is teaching them? Does that mean the educator has failed, or the learners?

One problem with objectives, therefore, is that because they are previously determined, there can be less flexibility in the programming than might be optimal for learning and meeting the “real” needs of the learners. Once the learning activity is begun, for example, it might become known that the focus should be changed. The lesson may be “too simple” for the level of current

knowledge possessed by the participants or other more pressing needs or wants may emerge. The learners themselves may demand a change in the content and/or expected outcomes. These kinds of emergent contingencies can mean that some previously determined objectives should be abandoned, some modified, and others added. However, if the educator is rigid, insensitive, not well trained, lacking a broad grasp of relevant content and activities, or required to teach a specific curriculum determined by others, these options may not be possible.

One criticism of the Tyler approach is that it is a stepwise process. As we have outlined, curriculum development using this approach is planned on a “first you do this and then you do that” model. This is a reductionist process (Apps, 1979), that the whole equals the sum of the parts and that the curriculum can be disassembled and dealt with one piece at a time, in sequential order (cf. Hitch & Youatt, 2002). The process of first determining needs and then writing objectives, followed by determining a sequenced pattern of learning experiences, and then evaluating the outcomes, might not always be the most efficient or practical. This can especially be so if the professional holds to an empowerment model of helping, or views him/herself more as a facilitator rather than a teacher. If so, then other methods of programming might work better. Howard (2007) concluded that the most important objection to Tyler’s approach, and the cause of its relative demise in the 1970s (even though it still guides the essentials of curriculum development, applied to ideas reinterpreting his principles) was the seeming mechanistic orientation to curriculum development.

Apps (1979) offered another critique of curriculum developed using the Tyler approach—that much of the programming focuses on “survival skills.” That is, this type of curriculum focuses on improving the quality of people’s lives by helping individuals cope with various aspects of day to day living—how to parent, how to love, how to talk, and how to budget. Much of FLE responds to the question, what do families in my community need in order to deal effectively with the problems they face? When educators say they are grounding their programming on the needs of

the community, what they conceivably are saying is that the programming is based on some concerns or what is needed for survival as a family, couple, parent, or adult. This is admirable and useful, but is it sufficient and is there more to life and being human than mere survival, even at an “improved” quality of life? One concern is that by adhering strictly to the Tyler approach, FLE may stop short of providing opportunities for people to grapple with what it means to be human, or to consider what “living” means, or to discover and enhance hidden talents and potentials beyond those covered in particular lessons.

If a group of farmers gets together most mornings at the local cafe to have coffee and discuss the world’s events, at some point they may realize that there is a common problem they are all facing—stress. Nothing has been planned ahead of time and no objectives are spelled out, but the farmers all realize that they face a common challenge to living. As a result, they decide to take some steps to do something about it for themselves and interested others. They decide that more information is necessary and discuss what methods for getting this information would be best. One gets a pamphlet from his farm cooperative, another gets a video on farm stress from the local Cooperative Extension Office, and another asks a social worker friend to join the group for coffee one morning. They are not sure what their goals are (to get out of farming, to develop stress management strategies, to just feel better knowing they are not alone in their feeling?) or what they should do. As they go along, different people in the group decide on different courses of action, some ridicule the plans of others, some drop out of the group, and others join. Nevertheless, they all learn some things that were not predetermined. Is it possible for educators to view educational situations in their entirety without first dissecting them into component parts, to see the ebb and flow of learning, to understand that learning may be spontaneous and unplanned, and perhaps “disorganized” and not following in some predetermined way “from here to there with a specific set of objectives in mind?”

A standard role enacted by FLEs is that of *expert* through which some have argued that FLE

evolved over the years into a “trickle-down” modality (Doherty, 2000, p. 319). That is, as experts, scientists had discovered empirical facts about families, and these elements of knowledge are then distilled into forms that can be shared by practitioners with lay audiences. The educator takes on the status of expert dispenser of what families need to know to function better, and, whatever preexisting knowledge and expertise that families possess is virtually ignored, a weakness of the Tyler approach. Families are given the status of “consumers of academic knowledge” (p. 321). A strength of this “academocratic” (p. 319) model for informing lay audiences lies in its ability to discern scientific information where there is little or none available, and to address, in a more objective fashion, topics that have ideological splits, are debated, and/or for which there are differing viewpoints about what is best for families. However, there are other roles that FLEs can play, and other approaches to education and support of families to consider.

The Freirian Approach

According to Freire, the educational process is organic and rejects such strategies as Tyler’s that evolve as a stepwise procedure starting with needs assessment/identification, followed by writing behavioral objectives, and so on. The Freirian approach is critical of traditional educators who frame knowledge as something “out there” to be distributed (Afonso et al., 2009; Apps, 1979; Smith, 2002). Traditional education is viewed as a banking model where teachers are depositors of information and learners are depositories (i.e., banks) who patiently and passively receive, memorize, and repeat. The Freirian approach portrays educators as facilitators who guide without directing, raise questions more than answer them, and engage in dialogs with learners.

In this approach the facilitator works from the beginning with a group of people through a dialogical process. The facilitator endeavors to raise the consciousness level of the group concerning their social situation and their social relations within it. This approach assumes that people

cannot always verbalize their most fundamental needs and problems, but through consciousness raising these issues are brought to a greater awareness and discussed. This, in turn, leads to awareness of broader needs and problems through a process termed “problem posing” (Freire, 1970; Smith, 2002).

Freire (1970) stressed the political and socioeconomic contexts of education. He saw the educational process as having two phases—the thematic research and the educational program—that inform each other in a reciprocal manner. Thematic research (i.e., understanding, knowledge) results from the interactions of educators (facilitators) and learners and what can be learned together in that interaction. The process of “research” itself is viewed as education, a cultural action, as part of becoming liberated and is not just a preparation for learning or education (Freire, 1970; Smith, 2002). The educational program phase includes presentations made to groups of people (“circles of culture,” ideally no more than 20 people). In this part of the process the educator/coordinator poses questions about the themes (e.g., family life, work–family linkages, family violence, health, poverty and stress) related to a focal problem established during the thematic research phase. Coordinators, who are likely and preferably people from the local area rather than “experts” or outsiders to the community, head the discussions in the circles. Education, according to Freire, is thus one unified process consisting of research and information discovery. Methodology (or process) and content are to be seen, in this approach, in a reciprocal and holistic manner.

According to Apps’ (1979) explanation of the Freirian approach, people begin to understand their social reality through the process of thematic research, and their reality is expressed in interrelated themes (i.e., topics, ideas, problems). Thematic research involves the discovery and naming of these important themes as well as their interrelationships. Research also poses the themes (and their dialectic opposites) as problems. These problems are considered from the particular sociohistorical context of the people involved (including the learners or audience).

Because the Freirian approach is a much less stepwise process than the Tyler approach, we offer an example here. In this example, a facilitator engages a local community in a process of co-exploration and creation of educational solutions to meet a need or solve a local problem, in this case adolescent truancy. During the thematic research phase, information is gathered and created through interactions between the family life educator and members of the local community (e.g., teachers, parents, administrators, church leaders, social service providers). Themes that might come out of this process could include: family poverty, gang activity, lack of community culture that emphasizes education and academic achievement. Based on the shared understandings of the problem identified (i.e., themes) through this process, the facilitator and the community may move to the educational programming phase. The facilitator then enlists the local expertise of community members who set in motion small group interactions with other members of the community that center around these themes. This phase is aimed at both educating the community about how to deal with the problem, perhaps with information provided by the facilitator/educator, and empowering them through a process of identifying, naming, framing, and potentially solving the focal problem.

Throughout this approach to curriculum development, diverse people are heavily involved. During the thematic research phase there are volunteers from the target population who participate in the investigation and planning. During the educational programming phase locals are recruited, to the extent possible, as coordinators and as many people as possible in the focal community are involved in small groups. Within each group there is participation by all members, with no person or coalitions of people dominating the discussion.

There are several assumptions to Freire’s (1970) approach that we discuss briefly in an effort to further explain what can be an abstract approach to curriculum development. First, education is not viewed as a neutral act. Instead, education is seen in dialectic terms—either helping people liberate themselves or contributing to the loss of their freedom and their humanity.

Humans are viewed as having agency and who thus act on and can change themselves and their world. Even so, humans are still historical and social beings, each with their own biography shaped by their contexts of living (Hildenbrand, 2005). Actions and reflections do not occur in a vacuum, but rather in specific social structures where people are socially situated.

Second, it is assumed that education changes society as well as changes individuals (Freire, 1970). One way this is done is through consciousness raising aimed at elevating people from passive and isolated victims to active people who are capable of learning and acting together. During consciousness raising, groups reflect on problems and formulate actions in attempts to deal with their problems. After action is initiated, the group reconvenes to reflect on this course of action before other action sequences are tested. This dialog is part of action, and for those living in “cultures of silence,” a poignant action. Freire claimed that in educational institutions and wider society, cultures of silence quieted the voices of the marginalized. His pedagogy hunted for ways of breaking this silence, and learning has been attributed a role in giving voice to oppressed and marginalized groups (Armstrong, 2007).

The third assumption is that the approach to social problems is dialectical. Freire (1970) characterized the modern world as one of domination by the few (the oppressors) over the dependent masses (the oppressed). Education is to liberate the oppressed; the oppressors become liberated as they cease being oppressors.

Like with the Tyler approach, there are concerns with using the Freire approach, especially among those who tend to be “bottom-line oriented,” or impressed by the virtue of efficiently achieving “results,” to justify the time, money, and effort required. Such concerns often view the Freirian approach as time consuming and “messy.” Ideas like reflexive iteration, rather than a more planned, lock step, and linear strategy seem hard to evaluate and thus to justify. Questions about the value of time and the investment required by this approach are raised. In addition, questions arise as to the roles and functions of professional educators and program planners, such as who is

supposed to do what and when? Who initiates and who organizes? The application of a Freirian approach, it is argued, is situational in the sense that what works in one situation may not work in another. The consequence is that a “cook book” approach is not appropriate. Moreover, in the Freirian approach, educators are encouraged and have the responsibility to develop specific procedures with specific groups in specific situations. Careful blueprints for developing curriculum are not provided, only general guidelines for the educator can be provided. Each educational situation or new group requires starting over from scratch rather than relying on preplanned or “canned” programs.

Other considerations surround the role of the professional educator. What prevents this person, who is likely more educated and trained, from becoming dominant in the group? Instead of carrying on dialogs, a professional educator might lecture, dispense information, impose her/his perspective and values, as well as guide the learning and action schemes. This may especially be a problem when the group expects the educator to be the “authority,” and not to just sit there but “to do something.” And, how is this dependency of learners on the professional educator to be prevented? After all, educators are trained and are leaders and leaders are supposed to have answers. If they do not have answers, why are they the leaders? Thus, FLEs, especially those who prefer a more empowerment model of service delivery, are both encouraged and cautioned in using the Freire method given its complexity, messiness, and the important questions of process and product that it raises.

Challenge #6: Choosing an Effective Approach to Curriculum Development

Program planners and FLEs have a variety of curriculum development approaches at their disposal, including use of previously developed, perhaps evidence based, best practices. We have discussed two opposite approaches to curriculum development. A challenge is understanding the implication of each approach, including strengths

and drawbacks, and developing the skills to use an approach most pertinent to a specific situation. We have offered a prototypical view of the two polar opposite approaches; combining aspects of both approaches is also possible. Developing flexibility in approach, the role to be played, and the relationship to the learners are important to help ensure quality FLE.

Looking Ahead: Challenges in Family Life Education

There are certainly additional challenges we have not discussed, but we have identified six challenges facing the field of FLE and practicing FLEs. *The first challenge is the ongoing efforts to adequately define the field of FLE as to its scope and content*, which should receive renewed professional and intellectual attention. Efforts by NCFR to enlist the perspectives of FLEs in this process is a positive step toward the development of a definition of FLE that best reflects the complex focus and content of FLE practice. FLE is being asked to broaden its focus and work with diverse populations in a multitude of settings, often in collaboration with other professions. FLE is ideally preventative in nature, but also includes aspects of secondary and tertiary intervention that should be recognized. The definition of FLE offered by NCFR is comprehensive and detailed, thus offering a good footing for future elaboration or refinement.

A second challenge is recruiting and retaining FLEs from diverse backgrounds and having FLEs who can address, in an effective manner, the diversity found in society. Because the majority of FLEs are white and female, concerted efforts must be made to recruit FLEs whose backgrounds reflect the populations with whom FLEs work. *Developing FLEs' cultural competency is a third challenge.* There is recognition that effective FLE must incorporate relevant and sometimes specific cultural values, norms, and life ways of diverse (e.g., class, ethnocultures, sexual orientation) populations into content and delivery systems. FLEs are to respect cultural diversity,

encourage diversity in the staffing within their organizations, and participate in ongoing training to improve skills and increase knowledge. While scientific knowledge about diverse cultures and ethnic groups provide a basis for greater cultural sensitivity and understanding, the process of acquiring cultural competence, including the acquisition of “enduring understanding, goes beyond specific empirical knowledge”. Diverse cultural enlightenment can be a goal, even if absolute cultural competency cannot be achieved. Professionals may not achieve cultural competency totally, nor be expected too, but it is important to achieve at some level to be effective with groups differing from a professional’s own native culture. At the same time, it is important to remember that there are differences and similarities across and within cultures.

Challenge four is increasing the professional profile of FLE. Only 20 % of CFLEs are in community-based services, and less in other types of placement (e.g., schools, private practice). CFLEs thus have a low professional profile and there is substantial need to expand their career options and the marketing strategies for this career path. Despite the growing number of NCFR-approved CFLE programs and efforts to have the U.S. Department of Labor include family life educator as a profession, FLEs currently have less recognition than other professionals such as social workers or school psychologists. As a field, unabated attempts to raise the visibility of FLEs and unique contributions to servicing and supporting families have to continue.

Choosing appropriate approaches to FLE is a fifth challenge. Various approaches to designing, implementing, and evaluating interventions currently exist, each having strengths, weaknesses, and trade-offs in terms of time, energy, and other resources. Although FLEs likely find one or more of these approaches to be more acceptable than others, broad knowledge and flexibility in approach are strengths to be fostered in FLEs. This can be accomplished through the education of FLEs in training, the NCFR certification process, and continuing education. A “One size fits

all” approach to the education of families is not desirable, not effective, and perhaps harmful. As a field, FLE should continue to promote quality professional education and development as means of preparing and maintaining competent FLEs who can best serve families in diverse manners as necessary.

The sixth challenge identified is choosing an effective approach to curriculum development. Program planners and FLEs have a choice among a variety of curriculum development approaches, including previously developed programs. Many FLEs desire to, and do, develop their own curriculums or programs. Two opposite methods for curriculum development are the Tyler and the Freirian approaches, both used in FLE, with the Tyler approach in some form likely the most common. Understanding the implications of using either approach, including strengths and drawbacks, and developing the skills for using the approach (or some creative amalgamation of the two approaches) most applicable to a given situation, is vital. Being flexible about employing different approaches, the role (i.e., expert, facilitator) each plays, and the relationships with the learners are important attributes for FLEs. Training programs and textbooks should cover both of these and other approaches to help ensure well-rounded FLEs who can make the best choices about curriculum development.

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