

Fifth, the same general process described in "four" above can operate with respect to other service agencies like welfare, health, employment, Salvation Army, etc. That is to say, if the center through its referral functions helps to create a new clientele for the traditional service agencies, these same agencies may well reciprocate in kind. In this way the center's outreach effort can be strengthened by the recruiting efforts of the more traditional service agencies.

SUMMARY

Most center are well designed to engage in outreach efforts and there is evidence that the technique of utilizing local residents for this purpose is effective in reaching at least one segment of the poor. Resident participation as staff members, particularly in outreach roles, appears to work well but there is evidence that there is little effective resident participation on boards and councils. Training programs, to the extent they exist, do not appear to be adequate to enhance substantially the capabilities of the persons, both resident and professional, involved with centers.

VI. ACTIVITIES OF THE NEIGHBORHOOD CENTERS

INTRODUCTION

In the two preceding chapters dealing with the role of the centers and the outreach of the centers numerous references were made to the activities of the centers. However, except for examples cited for illustrative purposes, these references were rather general in nature. The purpose of this chapter is to flesh out the skeletal structure of center activities sketched earlier. This will be done by discussing the pattern of service activities, the community action effort, and the costs that seem to be involved in neighborhood center operations.

SERVICE ACTIVITIES

The specific kinds of services offered through the neighborhood center programs vary widely. Generally speaking, three determinants seem to be operating here. One is the obvious factor of need. Particular problems require particular service solutions. A second is the factor of service personnel. Regardless of need, where appropriate personnel are unavailable, the service in question cannot be provided. A third determinant (and one clearly related to the first) refers to the auspices under which the center programs were established. In several instances the neighborhood service center organization was built upon previous programs in research and/or service. Understandably, the center programs have reflected this specialized interest. It might also be pointed out here that the composition of the policy-making board which oversees the center operation (usually at the CAA level) influences the programs that are developed. For example, if public health professionals are prominent on the board, services in this area are likely to become a conspicuous part of the center program.

Among the variety of services represented in our twenty centers,¹ employment-counseling-and-placement clearly is the most prominently represented. Eighty-five percent of our centers have this listed by their directors as a particular service offered. The next most frequently mentioned service is welfare of the AFDC type. Seventy percent of our centers offer this kind of aid, according to the center directors. Education and health services follow in frequency with just over one-half of the centers offering them. Education here refers to basic education in the three "Rs", as well as nursery school, grade school, and high school tutoring, etc. Falling below the fifty percent mark in center representation (and in order of decreasing frequency) are such services as housing (finding housing, coping with eviction problems, etc.), recreation, information provider, consumer education, legal aid, and probation and parole assistance. These last two are not at all represented in our small communities and rural areas. However, they do appear in our intermediate size and large communities. Size of community also seems to be related to the frequency of education services offered. More specifically, this service is much less frequently listed in the center programs of the large communities than it is in the small and intermediate size communities and rural areas.

¹ See Appendix VIII.