



Four Head Start
University
Partnership Grants

Approaches to Meeting the Needs of Children and Parents Together in the Context of Head Start

This brief introduces four research projects testing promising interventions funded under the Head Start University Partnerships (HSUP): Dual-Generation Approaches¹ grant program. Two-generation approaches are typically designed to address problems associated with poverty by combining child-focused services with adult-focused services. Head Start programs provide a unique opportunity to serve as a platform for meeting the needs of children and families together. In this brief, the four HSUP grantees introduce their research projects, highlighting the goals and key features of each intervention, their approach to meeting the needs of children and parents together, and the targeted outcomes of the interventions. Future briefs will discuss implementation and impact findings.

¹ Funding Opportunity Announcement HHS-2013-ACF-OPRE-YR-0634 (“Head Start University Partnerships: Dual-Generation Approaches”). More recently, the field has used the term “two generation,” and that is the term used throughout this brief.

Introduction

Kathleen M. Dwyer, Erin Cannon, and the Head Start University Partnerships:
Dual-Generation Approaches Grantees

In 2013, the Office of Planning, Research and Evaluation (OPRE), within the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF), awarded four cooperative agreements through the Head Start University Partnerships (HSUP): Dual-Generation Approaches grant program. The goal of this grant program is to contribute to the knowledge base regarding the role that Head Start can play in promoting family well-being and school readiness. University-based researchers are leading these projects, working in partnership with Head Start programs. Each project team has implemented—and is in the process of evaluating—promising two-generation approaches. These approaches integrate intensive, high-quality, child-focused programs with commensurate adult-focused services to support both children’s school readiness and parent and family well-being within the context of Head Start.

Since its inception in 1965, Head Start has been considered a two-generation program, providing children with enriched learning environments and helping families access services that will enable them to support their child and family development (e.g., parenting education, social services, health and mental health services). To provide these comprehensive services, Head Start staff form partnerships with the parents of participating children to collaboratively identify family goals and strategies for achieving those goals. Head Start staff also form partnerships with community organizations to ensure that children and families can access needed services and resources. Considered a key component of the Head Start program, these family and community partnerships are reflected in [Head Start Program Performance Standards](#) (see 45 CFR 1302.52 and 1302.53) and in the [Head Start Parent, Family, and Community Engagement Framework](#). Yet, there is little evidence to guide programs’ decisions regarding the specific approaches and implementation supports that are most likely to result in improved parental well-being and positive child outcomes.

This brief introduces four innovative and promising interventions taking place across the country that contribute to this knowledge base.

Head Start University Partnerships

Power PATH

Grantee

University of Alabama

Program Partners

Community Service Programs of West Alabama

Jefferson County Committee for Economic Opportunity

Pickens County Community Action Committee



Creating Connections

Strong Families, Strong Brains

Grantee

University of Oregon

Program Partner

Head Start of Lane County, Oregon



KNOWLEDGE BASE OF TWO-GENERATION APPROACHES



Two-Generation English as a Second Language (ESL) Program

Grantee

Northwestern University

Program Partner

Community Action Partnership of Tulsa County, Oklahoma

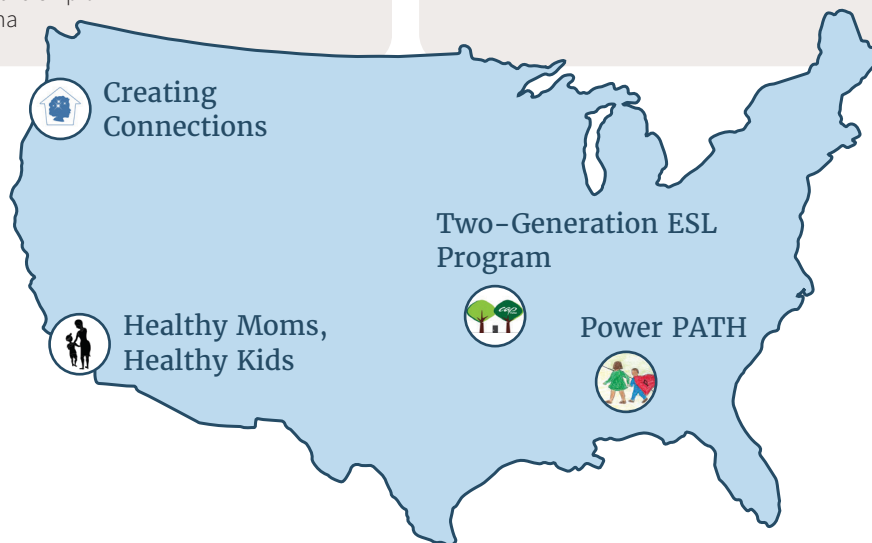
Healthy Moms, Healthy Kids

Grantee

University of Southern California

Program Partner

Children's Institute, Inc., Los Angeles, California



Broadly, a two-generation program is designed to serve, and aimed at meeting the needs of, both children and parents. Yet, two-generation programs can vary in many ways, even within the Head Start context.

Two-generation programs are designed to serve, and aimed at meeting the needs of, both children and parents.

They can vary in target population, topical focus, strategy (e.g., whether the intervention is designed to avoid negative outcomes by reducing risk factors and/or enhancing protective factors, or whether it addresses an existing challenge or need), and approach to service delivery. For example, as highlighted in Table 1, Power PATH and Creating Connections were universal programs providing self-regulation curricula to all Head Start children and their parents. In contrast, Two-Generation ESL Program and Healthy Moms, Healthy Kids provided interventions for a subset of families in the Head Start program who would benefit from additional services: English-language learners and mothers exhibiting depression, respectively. Also of note, the Two-Generation ESL Program and Healthy Moms, Healthy Kids interventions are examples of approaches that provided additional services to Head Start parents while leveraging the existing Head Start high-quality early childhood education already in place as the child component. Power PATH and Creating Connections integrated additional child-focused curricula into the existing Head Start

services and provided specific parent-focused curricula. Key elements of the parent and child components for each intervention are summarized in Table 2, along with their approaches to meeting needs of parents and children together. For example, three interventions (Power PATH; Creating Connections: Strong Families, Strong Brains; and Two-Generation ESL Program) implemented an approach that intentionally aligned the parent curricular content to complement the delivery of the child component. Lastly, Table 3 presents some of the key outcomes targeted by these interventions, which are currently being measured by the HSUP grantees.

In sections that follow, each HSUP grantee introduces their research project, presenting the key components of the intervention and unique strategies for meeting the needs of children and parents in the context of Head Start.

In future publications, the grantees will discuss implementation and impact findings from their projects.

The projects described were supported by grant numbers 90YR0073, 90YR0074, 90YR0075, and 90YR0076 from OPRE. Kathleen M. Dwyer served as the federal project officer, and Erin Cannon assisted with coordination across the grantees.

The contents are solely the responsibility of the authors and do not necessarily represent the views or policies of OPRE, ACF, or HHS.

Table 1. Targeted Populations of Each Two-Generation Intervention within the Context of the Families Served by Head Start

	Power PATH	Creating Connections	Two-Generation ESL Program	Healthy Moms, Healthy Kids
Who was the intervention designed to benefit?	All Parents AND All children	All Parents AND All children	Parents who are English-language learners AND Children who are dual-language learners	Mothers who exhibit depressive symptoms AND Children of mothers with depression



Within the context of Head Start, two-generation approaches target a range of populations.

Table 2. Key Elements and Approach to Meeting the Needs of Parents and Children Together for Each Two-Generation Intervention

Key Elements	Power PATH	Creating Connections	Two-Generation ESL Program	Healthy Moms, Healthy Kids
Parent Component	<p>Social-emotional curriculum: Coping Power</p> <hr/> <p><i>1 hour/month x 8 months</i></p>	<p>Small-group parenting curriculum</p> <hr/> <p><i>2 hours/week x 8 weeks</i></p>	<p>Family-centered ESL classes along with other supportive elements (e.g., coaching, financial supports)</p> <hr/> <p><i>3 hours/day, 3 days/week with 2 additional hours of training/week x 16 weeks</i></p>	<p>Interpersonal Psychotherapy-Group (IPT-G) and a shared meal</p> <hr/> <p><i>2 hours/week x 12 weeks</i></p>
Child Component	<p>Social-emotional curriculum: Promoting Alternative Thinking Strategies (Preschool PATHS—1 to 2 short lessons a week)</p>	<p>Attention/self-regulation curriculum: “Brain Train”</p> <p>Behavioral management strategies from parent curriculum</p>	<p>Head Start as usual (high-quality early childhood education)</p>	<p>Head Start as usual (high-quality early childhood education)</p>
Approach to Meeting the Needs of Children and Parents Together	<ul style="list-style-type: none"> • Children and parents learn complementary topics at similar points in time • Children teach parents what they are learning in PATHS for use at home 	<ul style="list-style-type: none"> • Children and parents learn to use similar strategies, practices, and vocabulary for use in the classroom and at home 	<ul style="list-style-type: none"> • ESL curriculum is contextualized to parents’ interest and motivation to support their children’s learning • Parents learn English vocabulary related to children’s development, family functioning, and school activities • Parent classes are provided during children’s school hours • Parents are encouraged to share homework time with children 	<ul style="list-style-type: none"> • Depression screening embedded in family intake session • Therapy groups formed among Head Start mothers • Mothers learn coping strategies, create personal goals related to depression, and identify and build a social support system that can lead to improved parenting, sensitivity to their children’s needs, and improved child outcomes

Table 3. Key Outcome Areas of Interest for Parents and Children for Each Two-Generation Intervention

Key Outcome Areas for Parents and Children	Power PATH	Creating Connections	Two-Generation ESL Program	Healthy Moms, Healthy Kids
Parents	<ul style="list-style-type: none"> • High-quality parenting • Family support • Good mental health • Family cohesion • Family organization • Reduced stress 	<ul style="list-style-type: none"> • Brain function for attention • Stress regulation • Self-regulation • Language use with children • Parenting stress 	<ul style="list-style-type: none"> • ESL program completion and persistence • Class attendance • English-language advancement • Engagement in children’s schooling (and other domains) 	<ul style="list-style-type: none"> • Depression • Executive functioning • Social support • Parent-child interactions
Children	<ul style="list-style-type: none"> • Self-regulation • Socioemotional learning • School readiness 	<ul style="list-style-type: none"> • Brain function for attention • Stress regulation • Self-regulation • School readiness (measured via T.S. GOLD assessments and laboratory measures) 	<ul style="list-style-type: none"> • School attendance • Academic skills • Executive functioning • Language skills • Socioemotional skills • Behavior problems 	<ul style="list-style-type: none"> • Behavior problems • Executive functioning • School readiness



Power PATH

Ansley Gilpin, Caroline Boxmeyer, Jason DeCaro, and John Lochman

Grantee

University of Alabama

Program Partners

Community Service Programs of West Alabama
Jefferson County Committee for Economic Opportunity
Pickens County Community Action Committee

Background and Purpose

Research has demonstrated that Head Start participation can contribute to positive impacts on child health and academic success. Factors outside the classroom, such as parent mental health and neighborhood safety, can also support children's development and academic and occupational success (Morales & Guerra, 2006). Thus, additional preventive interventions can supplement existing programs to support Head Start children and their parents.

Social-emotional curricula offered in Head Start settings, such as PATHS (Domitrovich, Cortes, & Greenberg, 2007) and Incredible Years (Webster-Stratton, Reid, & Stoolmiller, 2008), have demonstrated gains in children's self-regulation skills that extend into the early elementary school years (Bierman & Torres, 2016). Parent training may further support improvements in children's self-regulation skills by reducing chronic stress in the home that can impede

the brain development responsible for self-regulation (Bernier, Carlson, Deschenes, & Matte-Gagne, 2012).

Coping Power (Wells, Lochman, & Lenhart, 2008) is an example of such a parenting program. It is a highly successful, empirically supported, preventive intervention designed to teach parents to support their children's development by reducing family stress and improving parenting strategies, discipline, academic support, and family problem-solving. Coping Power has significant effects on children's academic performance as well as on improving children's behavior (Lochman et al., 2012). However, it is a targeted intervention designed to treat children and families who are already struggling.

Alternatively, universal preventive interventions provided in early childhood can have lasting positive effects on children's long-term academic and functional outcomes (Bradshaw, Zmuda, Kellam, & Jalongo, 2009). Researchers posit that a combined classroom and parent intervention (i.e., aligned two-generation curricula) may have the strongest effects, especially when parents are actively engaged in the intervention (McKay et al., 2004). This project used Power PATH, a universal intervention composed of an integrated social-emotional classroom curriculum (such as Preschool PATHS®), with an integrated parent group focusing on parent mental health and child socioemotional skills (Coping Power®). We hope to learn best practices for two-generation service alignment; build evidence for the use of two-generation programming on parent, child, and family outcomes; and identify what programming or individual difference predictors strengthen the impact of the program.

Approach to Meeting the Needs of Children and Parents Together

The Power PATH program contains two key elements of aligned two-generation programming: (1) PATHS, a socioemotional classroom curriculum, and (2) eight Power PATH parent group meetings. The PATHS preschool curriculum contains 52 socioemotional lessons and extension activities throughout the year, approximately one to two per week, along with extension activities and parent handouts. Teachers receive the PATHS curriculum and training on how to implement it in the classroom. (Note that an alternate, evidence-based, socioemotional classroom curriculum may be substituted, although the current trial funded by ACF and the existing evidence base uses PATHS.) Parents attend eight parent group meetings, one per month, that are carefully aligned with the child curriculum. Teachers and children are encouraged to share their classroom lessons at the Power PATH parent group meetings so that there is direct parent-child interaction and practice of these skills. At these meetings, children show their parents what they have learned in the classroom, such as demonstrating a self-control technique. Parent groups also discuss related parenting and adult well-being topics. For example, when children are learning how to manage uncomfortable feelings in the classroom, parents are learning how to help children with these feelings at home, in addition to learning how to manage their own stress (see this alignment in Table 4). Importantly, parents are getting their needs met by learning techniques like stress management and social support to improve their own well-being, and parents are encouraged to model good socioemotional strategies at home using what they learned in the parent groups. This curriculum is carefully aligned to simultaneously meet the needs of children, parents, and families' socioemotional well-being, and to extend learning from school to home for long-term success.

Targeted Outcomes

Parents and children are assessed in the fall and spring of the preschool year. Child outcomes hypothesized to change as a result of this intervention include self-regulation and school-readiness skills. In parents, indicators of well-being are being measured, including perceived stress and mental health. In addition, we are measuring indicators of family well-being, such as cohesion, household chaos, and (social) supports.

In summary, Power PATH provides a universal, preventive, socioemotional curriculum for all preschool parents and children, and although measurement of long-term outcomes is beyond the scope of this project, it is also hypothesized to have long-term impacts on children's development and academic success, as well as parent and family well-being.

References

- Bernier, A., Carlson, S. M., Deschenes, M., & Matte-Gagne, C.** (2012). Social factors in the development of early executive functioning: A closer look at the caregiving environment. *Developmental Science*, *15*, 12–24.
- Bierman, K. L., & Torres, M.** (2016). Promoting the development of executive functions through early education and prevention programs. In Griffin, J. A., Freund, L. S., McCardle, P. (Eds.), *Executive function in preschool age children: Integrating measurement, neurodevelopment and translational research*. Washington, DC: American Psychological Association.
- Bradshaw, C. P., Zmuda, J. H., Kellam, S. G., & Ialongo, N. S.** (2009). Longitudinal impact of two universal preventive interventions in first grade on educational outcomes in high school. *Journal of Educational Psychology*, *101*(4), 926–937. doi:10.1037/a0016586
- Domitrovich, C. E., Cortes, R. C., & Greenberg, M. T.** (2007). Improving young children's social and emotional competence: A randomized trial of the preschool 'PATHS' curriculum. *The Journal of Primary Prevention*, *28*(2), 67–91. doi:10.1007/s10935-007-0081-0
- Lochman, J. E., Boxmeyer, C. L., Powell, N. P., Qu, L., Wells, K., & Windle, M.** (2012). Coping power dissemination study: Intervention and special education effects on academic outcomes. *Behavioral Disorders*, *37*, 192–205.
- McKay, M. M., Hibbert, R., Hoagwood, K., Rodriguez, J., Murray, L., Legerski, J., et al.** (2004). Integrating evidence-based engagement interventions into "real world" child mental health settings. *Brief Treatment and Crisis Intervention*, *4*, 177–186. doi:10.1093/brief-treatment/mhh014
- Morales, J. R., & Guerra, N. G.** (2006). Effects of multiple context and cumulative stress on urban children's adjustment in elementary school. *Child Development*, *77*(4), 907–923. doi:10.1111/j.1467-8624.2006.00910.x
- Webster-Stratton, C., Reid, M. J., & Stoolmiller, M.** (2008). Preventing conduct problems and improving school readiness: Evaluation of the Incredible Years Teacher and Child training programs in high-risk schools. *Journal of Child Psychology and Psychiatry*, *49*, 471–488. doi:10.1111/j.1469-7610.2007.01861.x
- Wells, K. C., Lochman, J. E., & Lenhart, L. A.** (2008). *Coping Power parent group program: Facilitator guide*. New York, NY: Oxford.

Table 4. Power PATH Parent Group Sample Sessions Illustrating Alignment between Parent and Child Program

	Child-led Social-Emotional Skill Lessons (PATHS)	Power PATH Parent Mental Health Topic
	First 30 minutes	Remaining 30–60 minutes
Meeting 1	Creating a Positive Environment: Routines, rules, and voice tone Giving and receiving compliments	Social Support: Developing a caring and supportive community & creating a positive home environment (labeled praise, positive reinforcement)
Meeting 2	Emotional Intelligence: Comfortable feelings	Stress Management: Taking care of yourself so you can take good care of your child



Two-generation programs often align their curricula to maximize the impact for parents and children.



Creating Connections: Strong Families, Strong Brains

Eric Pakulak, Melissa Gomsrud, Mary Margaret Reynolds, Theodore Bell, Ryan Giuliano, Christina Karns, Scott Klein, Zayra Longoria, Lauren O’Neil, and Helen Neville

Grantee

University of Oregon

Program Partner

Head Start of Lane County, Oregon

Background and Purpose

Disparities related to socioeconomic status have been documented across the lifespan and across a wide range of outcomes. Two aspects of brain function that predominantly underlie these disparities are stress physiology and self-regulation (e.g., Pakulak, Stevens, & Neville, 2018). Guided by evidence of the neuroplasticity of systems supporting stress regulation, selective attention, and self-regulation, and by evidence from successful parenting programs, we developed a two-generation intervention that

targets attention and self-regulation in preschool children by engaging the broader context: parents and the home environment. We have shown that, relative to two comparison groups, parents in the program demonstrate reduced parenting stress and improvements in child-directed language, and children in the program display significant improvements in cognition, parent-reported child behaviors, and brain functions supporting selective attention (Neville et al., 2013).

After finding these positive outcomes in a smaller scale implementation, our next goal was to develop a model of the program that could be broadly implemented and integrated into existing services. In the current project, we worked with our Head Start collaborators to develop a scalable delivery model of the intervention that focuses on stress and self-regulation by closely integrating child and parent programs (O’Neil et al., 2018; Pakulak et al., 2017). In this implementation and impact study, we hope to learn how a small-scale, two-generation intervention can be integrated into existing Head Start services.

Approach to Meeting the Needs of Children and Parents Together

Creating Connections: Strong Families, Strong Brains is designed to be deliverable by Head Start specialists and replicable by other Head Start programs. Creating Connections features full-year classroom implementation of the child-training component (“Brain Train”; BT) and mid-year delivery of the parent-training component. BT consists of 20 activities that target aspects of attention and self-regulation, including positive social interaction, metacognitive awareness, stress regulation, focused attention, and dealing with distractions. The parent component was adapted from evidence-based programs developed at the Oregon Social Learning Center (e.g., Fisher, Gunnar, Chamberlain, & Reid, 2000; Reid, Eddy, Fetrow, & Stoolmiller, 1999) and is delivered in eight weekly small-group meetings to facilitate discussion and role playing. Meetings take place at Head Start sites, with food and child care provided, and are led by a combination of research staff and Head Start educators. The parent program includes learning strategies targeting multiple domains, such as age-appropriate communication, contingency-based discipline, problem solving, emotion regulation, and

family stress management. In addition, each meeting includes a discussion of BT, with encouragement to provide further practice at home. For example, to facilitate practice of a strategy to help children breathe deeply to cope with strong emotions, parents are given a “Bird Breath” poster and encouraged to display it at home as a visual reminder for both themselves and their children.

To expand the emphasis on stress and self-regulation, we also adapted strategies from the parent component for use by teachers as classroom behavioral management strategies. As shown in Table 5, this also increased the degree of alignment between the core curricula of both adult (i.e., teacher and parent) and child components of Creating Connections. These behavioral management strategies include those for using enhanced language with children, such as specific praise and noticing, clear statements, and specific metacognitive (“thinking”) vocabulary, as well as strategies to improve consistency and predictability through schedules, routines, and calendars. Teachers are trained via large-group, in-service training before the academic year, and the strategies are implemented across the whole year.

We reasoned that increasing the degree of integration between child and parent components would then, as parents received the parent component in the middle of the school year, increase the level of consistency and predictability between the classroom and home environment. This would potentially reduce stress for children, given the potential increase in consistency experienced by children between the two environments in which they spend most of their time. We also reasoned that by giving children experience with these strategies in the classroom before their parents learned them, parents might experience greater success when

using the strategies with their children. In addition, we reasoned that consistent use of these strategies in the classroom would provide benefits for teachers via improvements in overall classroom climate.

Targeted Outcomes

Targeted outcomes focus on the key mechanisms of stress and self-regulation. In both children and their parents, we are assessing brain function for selective attention as well as heart rate variability, a measure of autonomic nervous system function. These measures are acquired simultaneously, capturing the dynamic interaction between heart and brain. We are also assessing child outcomes in other domains: behavioral testing measures of language, nonverbal

IQ, and executive function; parent-report measures of child problem behaviors and sleep problems; and Head Start classroom performance measures (T.S. GOLD) in several domains, including social-emotional competence, language, and cognition. In addition, we are also assessing parent and family outcomes in other domains, including brain function for inhibitory control and self-report measures of parenting stress and household organization. For all outcome domains, we are also assessing factors that may moderate the potential effects of Creating Connections, such as socioeconomic risk, family needs, and attendance at the parent component.

References

- Fisher, P., Gunnar, M. R., Chamberlain, P., & Reid, J. B.** (2000). Preventive intervention for maltreated preschool children: Impact on children's behavior, neuroendocrine activity, and foster parent functioning. *Journal of American Academic Child Adolescent Psychiatry*, 39(11), 1356–1364.
- Neville, H., Stevens, C., Pakulak, E., Bell, T. A., Fanning, J., Klein, S., & Isbell, E.** (2013). Family-based training program improves brain function, cognition, and behavior in lower socioeconomic status preschoolers. *Proceedings of the National Academy of Sciences*, 110(29), 12138–12143.
- O'Neil, L. V., Pakulak, E., Stevens, C., Bell, T. A., Fanning, J. L., Gaston, M., et al.** (2018). Creating connections between researchers and educators. *Journal of Cognition and Development*, 20, 110–133.
- Pakulak, E., Gomsrud, M., Reynolds, M. M., Bell, T. A., Giuliano, R. J., Karns, C. M., et al.** (2017). Focusing on families: A two-generation model for reducing parents' stress and boosting preschoolers' self-regulation and attention. *YC Young Children*, 72(2), 25.
- Pakulak, E., Stevens, C., & Neville, H.** (2018). Neuro-, cardio-, and immunoplasticity: Effects of early adversity. *Annual Review of Psychology*, 69, 31–156.
- Reid, J. B., Eddy, J. M., Fetrow, R. A., & Stoolmiller, M.** (1999). Description and immediate impacts of a preventive intervention for conduct problems. *American Journal of Community Psychology*, 27(4), 483–517.

Table 5. Alignment of Selected Adult and Child Core Curricular Components

Adult Core Component	Description	Classroom Management Activities	Child Core Component	Description
Positive Involvement	<i>Positive involvement</i> reflects the many ways adults provide children with loving attention. Adult shows empathy, warmth, support, genuine interest	Specific Noticing, Specific Praise, Success Charts, Weekly Calendar	Positive Social Interaction	<i>Positive social interaction</i> involves practicing of appropriate and positive interactions with others to support the child’s developing social skills
Age-appropriate Communication	<i>Age-appropriate communication</i> boosts understanding, thinking, and child confidence; adult engages child in calm, clear, and effective language, picture oriented for pre-readers	Clear Statements, Picture Notes, Success Charts, Weekly Calendar	Metacognitive Awareness	<i>Metacognitive awareness</i> involves exercises to build the child’s awareness of different cognitive and emotional states, emphasizing emotional vocabulary to support emotional regulation development
Emotional Regulation	<i>Emotional regulation</i> develops vocabulary, communication, and management; adult models and cues communication of emotions and regulation/coping skills, child learns emotional vocabulary and a system for communicating	Bird Breath, “Oh well, I can...”, Neutral Words & Broken Record	Self-regulation	<i>Self-regulation</i> involves practice with self-directed strategies (e.g., deep breathing, self-redirection) to manage the response to typical preschool stressors (e.g., delay of gratification, emotional saturation)
Child Cognition	<i>Child cognition</i> includes strategies for increasing child attention; adult promotes child problem solving skills by cuing child to choose, think, and solve	Clear Statements, Golden 3 (Choices, Thinking, Solving), Optimized Play	Focused Attention	<i>Focused attention</i> involves auditory, visual, and kinesthetic exercises that naturally engage children so they experience and practice sustained focus on an attended stimulus
Stress and Problem Solving	<i>Problem-solving</i> skills help develop child’s sense of control; adult provides consistent & predictable environments, models and cues coping tools to prevent & manage stress	Success Charts, Weekly Calendar	Dealing with Distractions	<i>Dealing with distraction</i> complements and builds upon the focused attention component by including fun exercises to practice managing realistic classroom distractions



A Two-Generation English as a Second-Language Program

Teresa Eckrich Sommer, Lauren A. Tighe, Terri J. Sabol, Elise Chor, P. Lindsay Chase-Lansdale, Kenn Lacsamana Dela Cruz, Marisa Sclafani

Grantee

Northwestern University

Program Partner

Community Action Project of Tulsa County, Oklahoma

Background and Purpose

Adult English-language literacy is the foundational stepping stone toward educational attainment, rates of employment, and wages (Zong & Batalova, 2015). Parents' English-language literacy is important, not only for their own well-being, but also for their children's well-being. Parents' English-language proficiency plays a critical role in fostering children's development and academic achievement (Karoly & Gonzalez, 2011; Sibley & Dearing, 2014).

Many community-based English as a second-language (ESL) programs are not well-designed for intensive training because they often follow open enrollment policies (e.g., “drop-in, drop-out”) with few, if any, attendance requirements (Chrisman & Crandall, 2007; Tamassia, Lennon, Yamamoto, & Kirsch, 2007). These programs also tend to have very few resources to offer supportive services (e.g., student counseling, coaching, or child care). Under these circumstances, English-language learners find it difficult to build and retain new English skills (Condelli, Wrigley, & Yoon, 2008;

Good, Masewicz, & Vogel, 2010). Furthermore, few ESL programs tailor their curricula to the specific interests and needs of parents. They often fail to address both the fact that immigrant parents are often motivated to learn English so that they can better support their children's education (Buttaro & King, 2001; Park & McHugh, 2014; Waterman, 2009) and the need for high-quality, low-cost care for their children if parents are to attend classes.

A promising approach for immigrant parents and children is the expansion of two-generation education programs designed specifically to suit their strengths and needs. These programs take a family systems perspective and strategically combine education and job training for parents with early childhood education for children (Chase-Lansdale & Brooks-Gunn, 2014; Sommer et al., 2018). Head Start serves 300,000 dual-language learner children annually, yet only five percent of Head Start parents typically receive ESL services (Office of Head Start, 2016). In the current study, we partnered with the Community Action Project of Tulsa County, Oklahoma, (CAP Tulsa) to examine the implementation and impact of its two-generation ESL program, serving a largely Latino immigrant population of parents with young children enrolled in Head Start. Children receive high-quality, full-day, center-based Head Start services (Phillips, Gormley, & Anderson, 2016) while parents enroll in high-quality ESL instruction coordinated around their children's school schedule. We hope to learn the ways in which delivery of a two-generation ESL program shows promise over traditional ESL programs.

Approach to Meeting the Needs of Children and Parents Together

CAP Tulsa's ESL program offers a package of services that draw on the most innovative practices in two-generation approaches, adult education, and ESL services. The goal of the program is to promote parents' English-language proficiency by offering a curriculum tailored to the needs of immigrant parents in high dosage (i.e., three class hours per day, three days per week with two additional hours of training) that supports parents' interest and motivation to promote their children's learning. The program also encourages cultural and linguistic awareness and parents' ability to speak and read in their home language.

The ESL curriculum is implemented in courses designed only for parents of children enrolled in CAP Tulsa's Head Start centers and delivered in small groups. Importantly, the curriculum also uses constructs of child development (e.g., socioemotional learning), school activities (e.g., parent-teacher conferences), and children's learning materials (e.g., early stage readers) to teach English-language skills and support parents' engagement in their children's learning, both in English and in their home language. One specific example of this aligned learning occurs when parents practice simple sentences in English that relate to children's domains of learning during their ESL classes. For example, for the perceptual, motor, and physical development domain, parents learn to describe their children's learning (in English) with statements like "My child can tie her shoe" or "My son can jump." For the language and literacy domain, parents practice writing sentences such as "My daughter can read books to my son" or "My daughter can write."

Figure 1 presents our change model for two-generation ESL programs. The key program elements are high-quality classrooms and family support services for children in Head Start and an ESL program for parents, which includes a family-centered ESL curriculum and other supportive elements, such as coordinated parents and child classes, coaching, and additional child care and financial supports. We expect that these program elements delivered in a two-generation ESL program will lead to intermediate benefits to families, such as higher parent attendance and advancement (as compared to regular, community-based ESL services), improved parent English-language skills, and increased parent engagement in children’s schooling. These benefits in turn should lead to long-term positive child

development, although they are beyond the scope of this study. We use a randomized control design to study the effects of CAP Tulsa’s two-generation ESL program on parent and child outcomes one and two years after parent-child entry.

Targeted Outcomes

Parent outcomes include ESL program completion and persistence (i.e., whether the participant elected to enroll in a second semester of the ESL program), class attendance, English-language advancement, and engagement in children’s schooling (and other domains). Child outcomes include school attendance, academic skills, executive functioning, language skills, socioemotional skills, and behavior problems.

References

- Buttaro, L., & King, K.** (2001). Understanding adult ESL learners: Multiple dimensions of learning and adjustments among Hispanic women. *Adult Basic Education, 11*(1), 40–60.
- Chase-Lansdale, P. L., & Brooks-Gunn, J.** (2014). Two-generation programs in the 21st century. *The Future of Children, 24*(1), 13–39.
- Chrisman, F. P., & Crandall, J.** (2007). *Passing the torch: Strategies for innovations in community college ESL*. New York, NY: Council for Advancement of Adult Literacy.
- Condelli, L., Wrigley, H. S., & Yoon, K. S.** (2008). “What works” for adult literacy students of English as a second language. In S. Reder & J. Bynner (Eds.) *Tracking adult literacy and numeracy skills* (pp. 152–179). England: Routledge.
- Good, M. E., Masewicz, S., & Vogel, L.** (2010). Latino English language learners: Bridging achievement and cultural gaps between schools and families. *Journal of Latinos and Education, 9*(4), 321–339.
- Karoly, L. A., & Gonzalez, G. C.** (2011). Early care and education for children in immigrant families. *The Future of Children, 21*(1), 71–101.
- Office of Head Start.** (2016). Office of Head Start—Head Start services snapshot national 2015–2016. Retrieved from <https://eclkc.ohs.acf.hhs.gov/sites/default/files/pdf/service-snapshot-HS-2015-2016.pdf>.
- Park, M., & McHugh, M.** (2014). *Immigrant parents and early childhood programs: Addressing barriers of literacy, culture, and systems knowledge*. Washington, DC: Migration Policy Institute. Retrieved from <https://www.migrationpolicy.org/research/immigrant-parents-early-childhood-programs-barriers>.
- Phillips, D., Gormley, W., & Anderson, S.** (2016). The effects of Tulsa’s CAP Head Start program on middle-school academic outcomes and progress. *Developmental Psychology, 52*(8), 1247–1261.

Sibley, E., & Dearing, E. (2014). Family educational involvement and child achievement in early elementary school for American-born and immigrant families. *Psychology in the Schools, 51*(8), 814–831.

Sommer, T. E., Sabol, T. J., Chor, E., Schneider, W., Chase-Lansdale, P.L., Brooks-Gunn, J., et al. (2018). A two-generation human capital approach to anti-poverty policy. *Russell Sage Foundation Journal of the Social Sciences, 4*, 118–143.

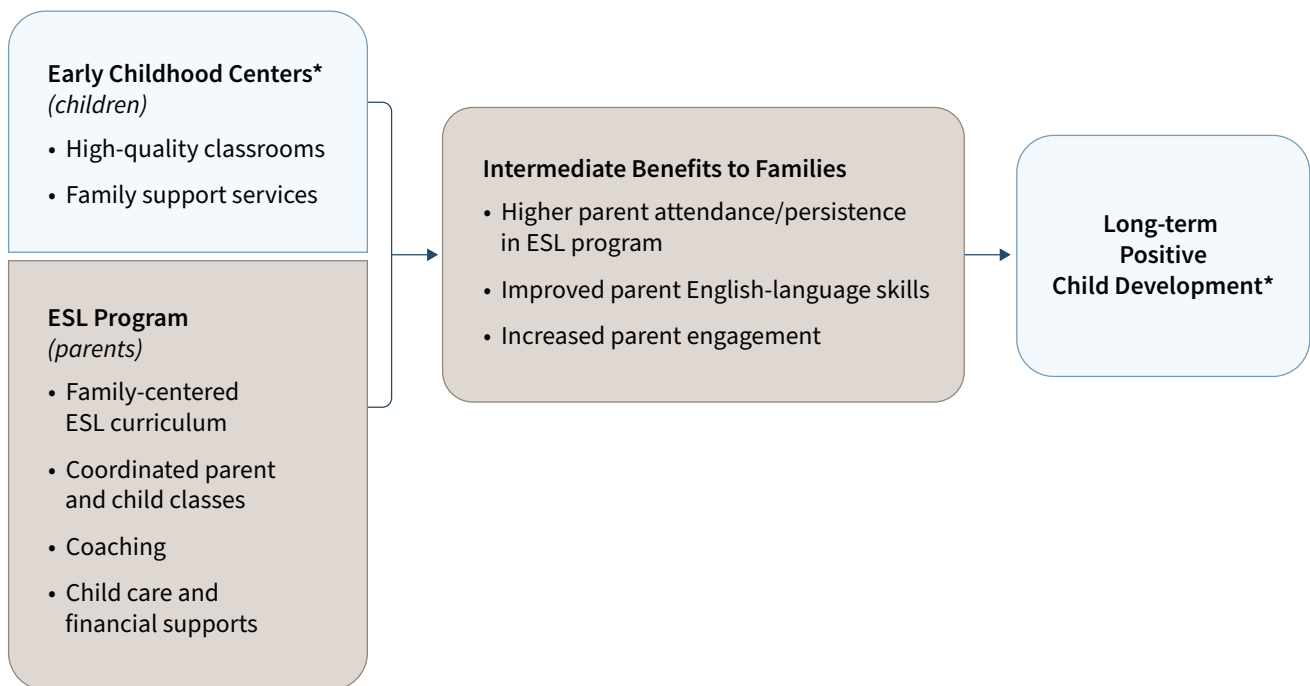
Tamassia, C., Lennon, M., Yamamoto, K., & Kirsch, I. (2007). *Adult education in America: A first look at results from the adult education program and learner surveys*. Princeton, NJ: Educational Testing Service.

Waterman, R. (2009). Communication is more than language: Adult ESL classes foster parent-school collaboration. *Bilingual Research Journal, 31*, 227–250. doi:10.1080/15235880802640698

Zong, J., & Batalova, J. (2015). The limited English proficient population in the United States in 2013. *Migration Information Source*. Retrieved from <https://www.migrationpolicy.org/article/limited-english-proficient-population-united-states-2013>

Figure 1. Change Model for Two-Generation English as a Second-Language (ESL) Program

Two-Generation ESL Programs



Note: An asterisk indicates child-focused inputs and outcomes not directly addressed in this study.



Healthy Moms, Healthy Kids

Ferol Mennen, William Monroe, Abigail Palmer Molina

Grantee

University of Southern California

Program Partner

Children's Institute, Inc., Los Angeles, California

Background and Purpose

Maintaining emotional well-being and robust mental health are important to being an effective parent and can have profound effects on both mothers and their children. Research has shown that having fewer depressive symptoms has a positive impact on children's development (Weissman et al., 2006), the parent-child relationship (Alhusen, Gross, Hayat, Rose, & Sharps, 2012), and parenting behaviors (Lovejoy, Graczyk, O'Hare, & Neuman, 2000). Rates of maternal depression can be especially high for mothers in poverty (Beeber, Perreira, & Schwartz, 2008). Evidence

suggests supporting well-being and reducing mothers' depression can result in better outcomes for their children (van Loon, Granic, & Engels, 2011). Head Start, with its two-generation focus, offers an opportunity to encourage positive mental health, address maternal depression, and improve the outcomes for children.

Healthy Moms, Healthy Kids is a collaboration between the University of Southern California Suzanne Dworak-Peck School of Social Work and the Children's Institute, Inc., (CII), a multiservice community agency offering a wide array of services including mental health and early education

(Head Start and Early Head Start) to urban families in Los Angeles. Our partnership began years earlier through our collaboration on implementing and evaluating infant mental health programs in urban Los Angeles. Experiences from these efforts, backed by data, showed extremely high rates of depression among low-income minority mothers and negative effects on their children (Mennen et al., 2015; Palmer Molina, Negriff, Monro, & Mennen, 2018). The opportunity to collaborate on a two-generation grant from ACF, combined with our past work, led us to focus on alleviating maternal depression as a way to improve outcomes for Head Start children. We implemented, and are evaluating, a group therapy intervention model to address maternal depression at CII's Head Start program in South Central Los Angeles. This service area is located in Los Angeles, with primarily African American and Latino families, many of whom are immigrants and monolingual Spanish speakers.

Approach to Meeting the Needs of Children and Parents Together

Our program screens mothers for depression and offers a free intervention to address the mother's depression. We chose Interpersonal Psychotherapy-Group (IPT-G) as our intervention model because of its long record of effectiveness in the treatment of depression, including with low-income mothers. The group model offers the advantage of being cost effective and allowing for increased social support among mothers.

Screening mothers for depression is the first critical step in the process. Family service workers screened mothers during the family intake session, using a

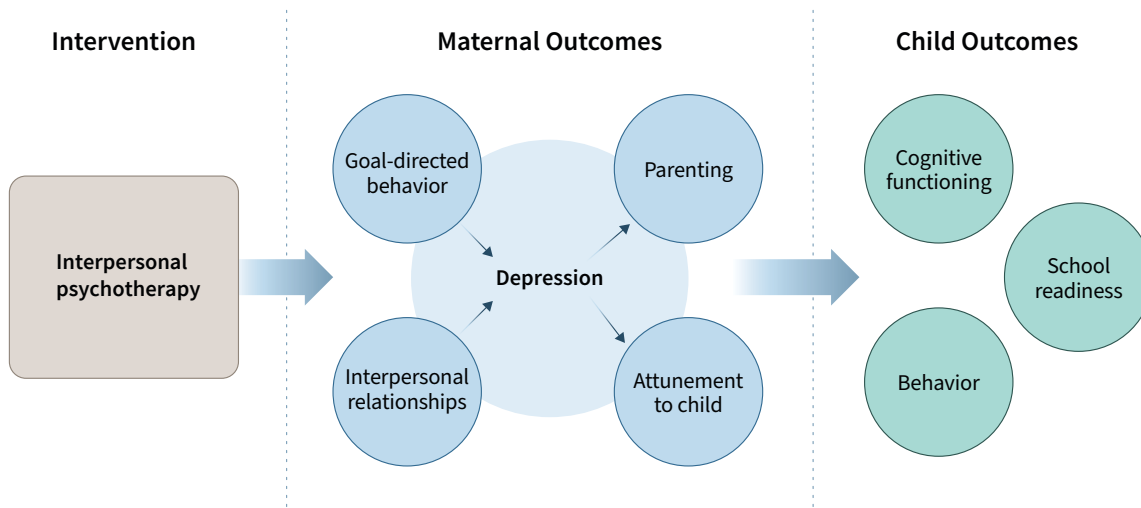
short-form depression measure. Mothers with a score that indicated they were suffering from depressive symptoms were referred to the group. If a mother screened in the danger level, she was immediately referred to outside depression treatment with followup from the Head Start mental health worker.

We enlisted Scott Stuart, M.D., founder of the IPT Institute, a researcher in the effectiveness of IPT, and an international trainer in IPT, to adapt his group model for postpartum depression to our population. The group is 12 sessions with an individual assessment before the group sessions to develop an "interpersonal formulation," or the way the mother understands herself, and to develop goals for therapy. Child care, lunch, and transportation were provided to remove barriers for attendance and to increase the interaction among mothers. IPT focuses on interpersonal problem areas linked to depression as well as other psychological issues. Each group was led by two therapists trained in the model and consisted of five to eight mothers. Both English and Spanish groups were available to meet the language needs of members.

Targeted Outcomes

As displayed in the change model in Figure 2, we hypothesized that IPT-G would relieve the mothers' depression, increase social support through better interpersonal relationships, improve parenting behaviors, and increase goal-directed behavior. These changes in mothers would lead to their children's improved behavior, better cognitive functioning, and, thus, improved school readiness.

Figure 2. Change Model for Healthy Moms, Healthy Kids



References

- Alhusen, J. L., Gross, D., Hayat, M. J., Rose, L., & Sharps, P. (2012). The role of mental health on maternal-fetal attachment in low-income women. *Journal of Obstetric, Gynecologic, & Neonatal Nursing: Clinical Scholarship for the Care of Women, Childbearing Families, & Newborns*, 41(6), E71–E81.
- Beeber, L. S., Ferreira, K. M., & Schwartz, T. (2008). Supporting the mental health of mothers raising children in poverty. *Annals of the New York Academy of Sciences*, 1136(1), 86–100.
- Lovejoy, M. C., Graczyk, P. A., O’Hare, E., & Neuman, G. (2000). Maternal depression and parenting behavior: A meta-analytic review. *Clinical Psychology Review*, 20, 561–592.
- Mennen, F. E., Pohle, C., Monro, W. L., Duan, L., Finello, K. M., Ambrose, S., et al. (2015). The effect of maternal depression on young children’s progress in treatment. *Journal of Child & Family Studies*, 24, 2088–2098. doi:10.1007/s10826-014-0010-9
- Palmer Molina, A., Negriff, S., Monro, W., Mennen, F. E. (2018). Exploring the relationships between maternal mental health symptoms and young children’s functioning in a low income, minority sample. *Journal of Child & Family Studies*, 27, 3975–3985. doi:10.1007/s10826-018-1225-y
- van Loon, L. M. A., Granic, I., & Engels, R. C. M. E. (2011). The role of maternal depression on treatment outcome for children with externalizing behavior problems. *Journal of Psychopathology and Behavioral Assessment*, 33, 178–186. doi:10.1007/s10862-011-9228-7
- Weissman, M. M., Wickramaratne, P., Nomura, Y., Warner, V., Pilowsky, D., & Verdelli, H. (2006). Offspring of depressed parents: 20 years later. *American Journal of Psychiatry*, 163, 1001–1008. doi:10.1176/appi.ajp.163.6.1001

Next Steps

This brief serves as an introduction to the four projects funded through the HSUP: Dual-Generation Approaches grant program. As these grantees complete their analyses, they will publish their findings in academic journals. The grantees are addressing not only questions regarding the effectiveness of the interventions but also questions regarding how the programs have their effects, who benefits most from the interventions, and the supports needed to implement these approaches within the context of Head Start. In future briefs, we will share those findings, so that programs have full information regarding the implementation and effectiveness of these promising two-generation interventions.

Suggested Citation

Gilpin, Ansley, Ferol Mennen, Eric Pakulak, Teresa Eckrich Sommer, Kathleen M. Dwyer, Erin Cannon, Theodore Bell, Caroline Boxmeyer, P. Lindsay Chase-Lansdale, Elise Chor, Jason DeCaro, Kenn Lacsamana Dela Cruz, Ryan Giuliano, Melissa Gomsrud, Christina Karns, Scott Klein, John Lochman, Zayra Longoria, Abigail Palmer Molina, William Monro, Helen Neville, Lauren O’Neil, Mary Margaret Reynolds, Terri J. Sabol, Marisa Sclafani, and Lauren A. Tighe. (2020). Approaches to meeting the needs of children and parents together in the context of Head Start: Four Head Start University Partnership grants. OPRE Report # 2020-32. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

This report and other reports sponsored by the Office of Planning, Research and Evaluation are available at <https://www.acf.hhs.gov/opre>.



Sign-up for OPRE News



Follow OPRE on Twitter
[@OPRE_ACF](https://twitter.com/OPRE_ACF)



Like OPRE’s page
on Facebook
[OPRE.ACF](https://www.facebook.com/OPRE.ACF)



Follow OPRE
on Instagram
[@opre_acf](https://www.instagram.com/opre_acf)



Connect on LinkedIn
[company/opreacf](https://www.linkedin.com/company/opreacf)