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ABSTRACT

The fourteen case study summaries included in this booklet are part of "Interim Report III" of the "Home Start Evaluation Study." Each case study was developed after field visits to each of the demonstration programs by case study workers from the evaluation agencies. The summaries are divided into seven parts: (1) a statistical description of the program site, (2) home visiting procedures, (3) history of the project, (4) program organization, (5) educational, health, psychological, and social program services, (6) problem issues, and (7) views of the program. An effort has been made in these reports to give the outside observer an accurate account of the day to day operation of individual project sites. (CS)

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Home Start Evaluation Study

Case Study Summaries

November 1973

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NATIONAL HOME START EVALUATION

Case Study Summaries
Fall 1973

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PROJECT HOME START
Huntsville, Alabama

SUMMARY CASE STUDY
Fall 1973

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Cleveland, Ohio
Spring, 1973

PROGRAM: Urban

HOURS: Monday through Friday
8:30 a.m. - 5:00 p.m.

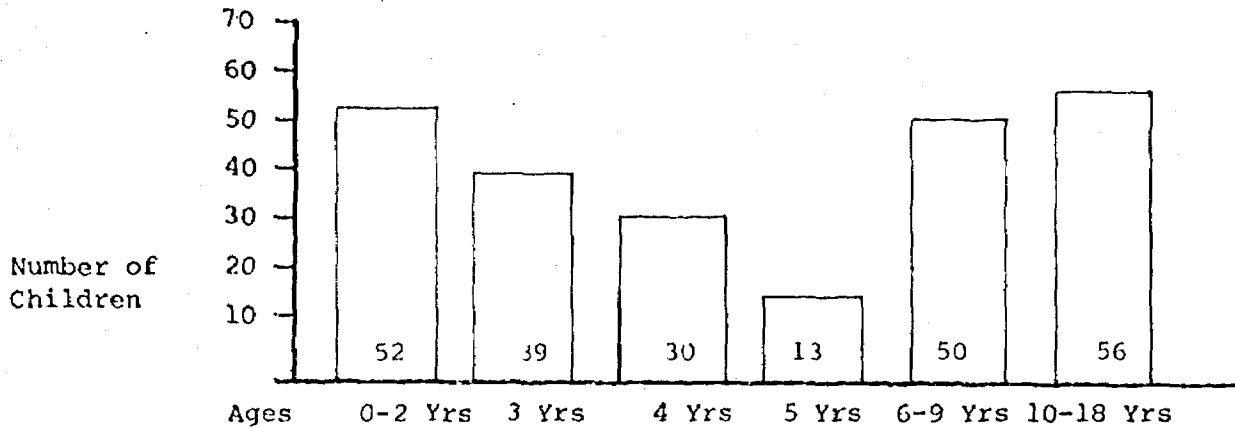
START UP: April 1972

SPONSOR: Delegate - Center for Human Services Div. of Day & Child Dev.
Grantee - Council for Economic Opportunity

ENROLLMENT: 69 Families

CHILDREN:

74 Focal¹ children ages 3 - 5
188 Total Children ages 0 - 18



STAFF

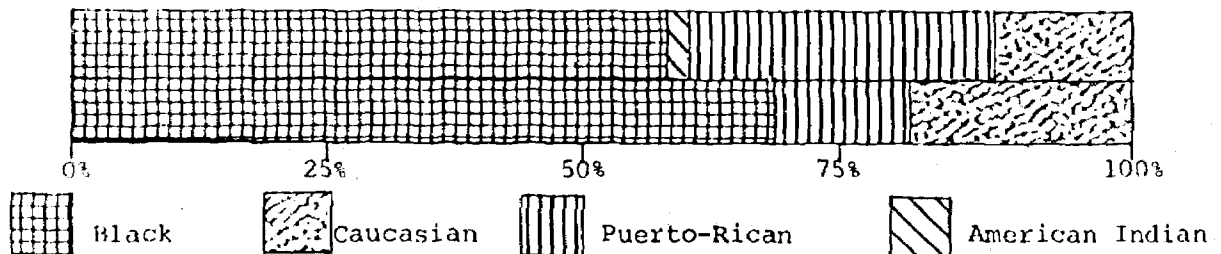
Paid Full Time 11
Paid Part Time -

Donated Full Time
Donated Part Time

Ages: Under 20 -
21 - 30 3
31 - 40 6
41 - 50 1
50+ 1

Positions: Project Director, Bookkeeper/Secretary, Program Coordinator, Education Director, Eight Home Visitors

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents ¹	107	Ages: Under 20 years	5
		21 - 30	54
Female Focal Parents	97	31 - 40	27
Male Focal Parents	10	41 - 50	15
		50+	6

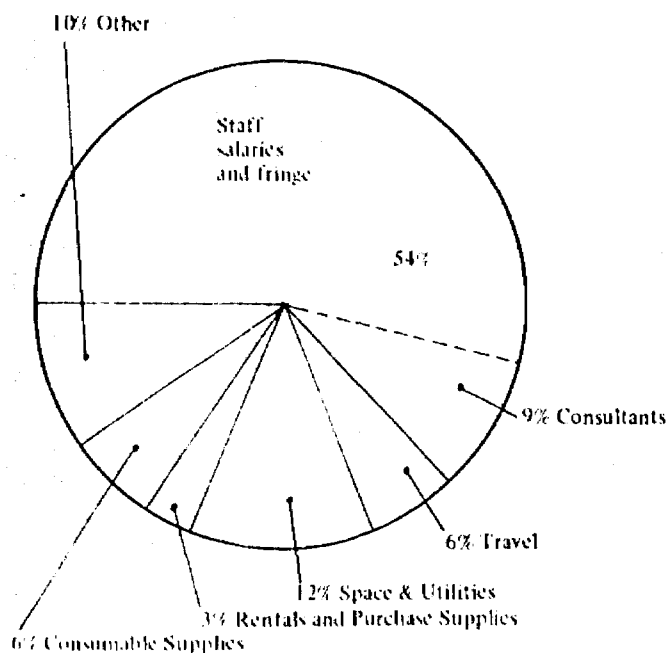
Annual Income of Families: All but four families are non-farm families²

Under \$2,000	28% ¹	\$6,001 - \$8,000	4%
\$2,001 - \$4,000	47% ¹	\$8,001 - \$10,000	-
\$4,001 - \$6,000	20%	\$10,001 - \$12,000	-

EMPLOYMENT OF FAMILIES: 76% Families in which one or more parents is employed

Regular Work:	58%
Part Time Work:	15%
Seasonal Work:	3%

EXPENDITURES³



Alabama reported \$23,567 in non-federal funding. The largest single item was donated space and utilities. The project also received a wide variety of consultant services in the area of staff training education, health and nutrition as well as medical exams and screenings for program participants

TOTAL BUDGET:	\$125,000	ACTUAL EXPENDITURES:	\$108,365
Federal Share:	\$100,000	Federal:	\$84,798
Non-Federal Share:	\$25,000	Non-Federal:	\$23,567

¹ The Focal Parent in each family is the one who is, along with the Focal Child the focus of the home visit activities.

² Of four farm families, two families had incomes of less than \$2000 and two families had incomes between \$2000 and \$4000.

³ Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973. Breakdown of non-federal expenditures by budget line item is not available. Shows percentages of federal expenditures plus budgeted non-federal expenditures.

HOME VISITING IN ALABAMA

Elizabeth Kelley is one of Alabama's black Home Visitors, a robust, friendly woman who visits twenty families a week in her target area or "pocket" near Brownsboro. Today's visit is to Tom and Ina Barlow and their daughter, Jenny, nearly six years old, who live in a trailer park. The Barlows are white (only one white family has rejected Elizabeth because of her color) and are as enthusiastic about Elizabeth as they are about Home Start. Elizabeth helped them budget their money so they could move out of their shack and into a nice trailer, and she even loaned them money when Jenny was sick and they couldn't manage the medical bill. Tom has put his drinking problem behind him and now has a part-time job. (There seems to be a tradition of helping in Alabama: Elizabeth was hired for Home Start while she was still on crutches from a serious car accident, and the program's Director, Dr. Kyo Jhin, helped her with financial arrangements for her bachelor's degree.)

Ina is an interested parent: she participates eagerly in the visit and does projects with Jenny during the week. She's made matching number and picture cards, various toys, and an Easter basket. Tom watches the sessions with interest, often takes part himself, and makes a point of encouraging his daughter. Today, Elizabeth's brought matching cards and cutouts featuring numbers and animals. Ina helps with the teaching, which next moves on to color identification. Jenny likes Elizabeth and does well with her lessons: she'll be going to school in the fall.

Curriculum for Alabama Home Start is the model developed by the Appalachian Educational Laboratory specifically for isolated, disadvantaged children, and is somewhat similar to the approach used by Tennessee Home Start. Here, however, the television series used is AEL's own "Around the Bend," broadcast on ETV daily, with support materials for both parents and visitors. Daily TV is supplemented by weekly home visits and by group experiences in a classroom once a week. In Alabama, the cost of mobile vans for group experiences was prohibitive, so the program uses local facilities -- community buildings and churches -- for children's and parents' meetings. In Brownsboro, for example, children meet under the supervision of a Home

Start Teacher and an Aide in the Little Flock Primitive Baptist Church basement for one afternoon a week. Parents meet at the Brownsboro Neighborhood Service Center of the Huntsville-Madison County Community Action Agency once a month to plan and arrange for preparation of the children's classroom snacks. Elizabeth coordinates this parent group and is currently trying to round up sewing machines and space for the sewing classes her mothers want. With 20 families to visit each week, there don't seem to be enough hours in the day for everything she'd like to do.

Alabama's Home Start program is administered by the Top of Alabama Regional Council of Governments (TARCOG), Human Resources Program, which serves five counties in northeastern Alabama: Marshall, DeKalb, Jackson, Madison, and Limestone. In the eastern counties, terrain is rugged and mountainous, typical of Appalachia, but to the west, gently rolling hills take over. Huntsville, with its electronics and space industry, is located here, and tends to skew overall statistics for the region. Only 18% of the families in Huntsville's Madison County have incomes of less than \$3,000 a year, while in the other counties, between 27% and 37% fall below this figure, and other statistics--median education and employment--parallel this discrepancy.

Home Start has headquarters in Huntsville and six additional towns where Home Visitors live and work: Tanner (Limestone County), Brownsboro (Madison), Scottsboro (Jackson), Pyffe (DeKalb), and Grant and Guntersville in Marshall County. Two Teachers and their Aides travel from town to town to conduct weekly classes for children who often lead isolated lives.

HOW HOME START BEGAN IN ALABAMA

Created in 1968 to coordinate regional programs for health, welfare, safety, education, economic conditions and housing, the Top of Alabama Regional Council of Governments is one of 12 such regional planning districts in the state financed by city and county governments. In 1971, TARCOG initiated a Human Resources Program to address area-wide educational problems and hired Dr. Kyo Jhin, a dynamic educator born in Korea, to head this division. Dr. Jhin, with Master's degrees in International Relations and Mathematics and a Doctorate in Education, Curriculum and Supervision, was selected in 1969 by

the U.S. Junior Chamber of Commerce as one of four outstanding young educators in America. Home Start seemed particularly well-suited to the needs of his clients, so Dr. Jhin and a Calhoun College consultant drafted a proposal which was accepted in 1972. Funding for the program, which had to be approved by Governor George C. Wallace's office, was made available in late May, 1972. Although Dr. Jhin had hired an experienced teacher and aide from the area and had been laying groundwork for the program since mid-March. As soon as they had the governor's signature the program was up and running.

Families were recruited from pocket areas which had three characteristics: a concentration of low-income families, good reception for ETV, and an available central location for classroom sessions. Home Visitors were recruited from each locale and visits began in late summer of 1972, with the educational program starting up in mid-September. An additional Teacher and Aide were hired, as well as Program Coordinator Shirley Holland.

Today, TARCOG Home Start serves 89 families with a total of 110 focal children, 58 of whom are black and 52 white. All 107 focal parents are women: 42 are employed either full- or part time, and 63 are unemployed. Fourteen families are single-parent-headed. Most focal parents are mothers, but several are grandmothers, aunts, older sisters or babysitters.

PROGRAM ORGANIZATION

Program Coordinator Shirley Holland oversees day-to-day Home Start operations and reports to Dr. Jhin, who is in turn responsible to TARCOG's Executive Director and Executive Board. Shirley is a native Alabamian (as are all staff) with a Master's degree in Counseling and some work toward her doctorate. She is a former Director of the Huntsville Achievement School for Children with learning disabilities. Teachers Sandra Rooks and Paulette Spicer were both with a local Education Improvement Program funded by the Ford Foundation. Aides are Becky Smith and Margaret Lee, who travel with the program's Teachers from town to town and help provide classroom experiences for Home Start children.

The six Home Visitors, all of whom live in the areas they serve, have diverse backgrounds and experiences. All are high school graduates, several have done some college work, and one is a college graduate. All but one had worked with preschoolers before joining the program. Home Start also has a Secretary who works with Shirley Holland and the program's Teachers out of the TARCOG offices in Huntsville. Of the staff of 12 women, four are black, eight are white and all are well qualified for their work by virtue of education and dedication. Each Visitor serves an average of 16 families, although as many as 19 or 20 families may be served by one woman.

All Home Start staff spent two hard-driving weeks in pre-service training at the University of Alabama in Huntsville in August 1972. This training, most of which was donated by professionals working in the field, included seminars, tapes, evaluation, role-play and demonstrations dealing with both theoretical and practical aspects of home visiting. A few topics covered were: Early Intervention in the Home; Curriculum Planning for Paraprofessionals; Screening or Diagnosis in Child Development; How to Visit and Work with Home Start Families (What Not to Do); Problems Home Visitors May Face; How Children Learn: Sensory-Cognitive Development; Parent Effectiveness; Importance of Movement to Child Growth and Development; Recordkeeping; Basic Nutrition Education; Buying Foods--Getting the Most for Your Dollar; Dental Health; Child Management; Community Services (How You Can Get Referrals); and many more.

In-service meetings are held bi-weekly because of the cost of bringing all Home Visitors into the Huntsville office. Recent sessions have dealt with how to demonstrate concepts (size, color, etc.) to children, speech therapy, nutrition, adult education and behavior modification. Many pre-service presentations were video-taped for future reference and training needs.

Parent participation in TARCOG Home Start is considered essential: so much so that it was listed as a fifth program component in the funding proposal. Moreover, staffing and policy decisions, wherever possible, were held up until parents had been recruited and the Policy Council could meet to pass on these concerns. Even during the pre-service training period, Visitors were asked to take parents to training sessions and 26 parents took advantage of the opportunity. Two parents from each Visitor's group serve on the

Policy Council, along with 9 community representatives. Although a parent is Chairman, parent members are still shy and let others take the lead. The program is working to build their self-confidence.

Parent groups meet monthly, and after a slow start are beginning to take hold. Mothers have worked on nutrition by planning and preparing snacks for weekly children's classes, and the program has promoted picnics both for social and nutritional education opportunities. Although parent interest dictates what each group will pursue, the program also uses these meetings to disseminate information about health, nutrition, adult education and community agency projects to all its parents. The latter is seen as especially important because, according to Dr. Jhin, "after Home Start is over, parents must be self-reliant."

PROGRAM SERVICES

Education

The Appalachian Educational Laboratory's three-phase curriculum calls for daily television activities supplemented by a Parent's Guide for additional projects; weekly home visits with curriculum based on the television programs; and weekly classroom sessions for children which also use various AEL materials. Curriculum is built around AEL's "Around the Bend" shows which are broadcast on ETV daily from 8:00 to 8:30 a.m. and again at 5:30 p.m. Parents are encouraged to watch the show with their children, and Visitors watch it with one of the families each morning, staggering their schedules to include everyone. Visitors also leave a Parent's Guide for upcoming shows so parents can gather materials for special at-home activities with their children. Visitors and Teachers also have lesson plans to help them use and extend the AEL basic materials, thus providing a certain uniformity of approach. But in Alabama as elsewhere, these materials serve only as a starting point. Teachers and Visitors are expected to, and do, prepare their own lesson plans which are tailored to the needs of individual children and the equipment available at each classroom (this can vary considerably).

The program also uses Frostig, Kephart and Metropolitan Workbook materials, various child development texts, ideas from workshop sessions and advice from child-care consultants. Child progress is recorded in a daily diary maintained by Visitors in anecdotal form. Testing has included use of the Purdue perceptual motor survey for creative and motor skills, Peabody kits for language development, and various matching and problem-solving exercises for cognition and sensory discrimination.

Home Start workshops have addressed adult education skills for Visitors, but Adult Basic Education classes are seen as a more effective approach if parents can be motivated to use these resources. The TARCOG Human Resources Program has received a \$34,000 grant to expand ABE capabilities in its five-county area, and parents will be encouraged to take advantage of these opportunities.

Health

TARCOG Home Start has now provided inoculations, physical examinations, dental examinations and follow-up work for all its focal children, using every resource it could find: county health departments, private dentists and physicians, an audiologist who donated his time, and a psychologist from the Huntsville-Madison County Mental Health Center. Services and costs vary from county to county (physical examinations cost \$17 in Madison County, \$10 in three other counties, and, because of a federally-funded program, are free in Limestone County). Inoculations through public health facilities were free in all areas. Although TARCOG Home Start prefers to deliver most services itself, it has no nurse of its own, and consequently most of its referrals have been health-related.

In addition, Home Start has taken its health education responsibilities seriously. Visitors have distributed brochures on specific health problems, home safety, and emergency medical procedures gathered from local and state health departments, HEW, and the March of Dimes to some 98 families. Dental problems were prevalent among Alabama children, and the program has supplemented dental examinations and follow-up care with basic dental hygiene instruction in the classroom, using toothbrushes and a fluoride treatment donated by a local dentist. Health education is also being included in weekly classroom lesson plans.

In the future, if funds permit, the program would like to turn its attention to the brothers and sisters of focal children, providing examinations and treatment where indicated.

Psychological/Social Services

So far, education and health have been the priority issues for TARCOG Home Start. While such problems as housing, employment, clothing and furnishings are addressed by individual Visitors as they arise, overall policies have not yet been established in this area. A major need perceived by staff is for parent education regarding child development and management and child needs. Home Visitors have been trained through workshop activities with psychologists and social service personnel in behavior modification techniques and pass these skills and attitudes along to parents in the course of their weekly visits and demonstrations. Parents have also been introduced to community agencies and their projects, and this is seen as extremely important for their future self-sufficiency. Many parents didn't know social service agencies existed for their benefit: by participating in their projects, they have made contacts within programs and have learned how to get the services they need.

Home Start has also sponsored workshops for parents, Visitors and first-grade teachers to make all of these educators aware of the needs of children as individuals. Specific needs of both parents and children have been referred to state Pension and Security and local health departments where the programs has had excellent cooperation. Home Visitors provide transportation and follow-up when families cannot arrange it and check with families to make sure plans for appointments have been kept.

Nutrition

Sandra Rooks, one of Home Start's Teachers, has a background in home economics and helps Visitors and parents with information and suggestions. Nutrition tips and skills are also passed along to Visitors by local Home Demonstration Agents of the Department of Agriculture in workshop sessions. Visits and parent meetings have been used to introduce parents to the four basic food

groups, meal planning and budgeting, and comparative buying. Home Visitors have taken parents to stores for shopping trips or have taken local newspapers into homes to encourage selective shopping. The USDA "Smart Shopper's Guide" is also used, and one suggestion regarding various ways to store, prepare and serve eggs was demonstrated and concluded with an Easter egg hunt for families. Families have also participated in picnics with a nutritional slant, with parents providing the food and Home Start donating beverages. Parents were quite enthusiastic about this project. Mothers, in their monthly meetings, also plan and arrange for preparation of the snacks their children will receive in their weekly classroom sessions. Fruit and milk or juice is provided by Home Start, while the Auburn Extension Service Agent provided mothers with lists of foods suitable for snacks. Mothers themselves prepare these meals.

The program has also been encouraging rural families to grow vegetables by offering instructions at parent meetings. Children and parents have participated, and Visitors have helped families mark off plots, buy seeds and fertilize their gardens, sometimes at their own expense. According to Dr. Jhin, parents are becoming more aware of their children's nutritional needs and some parents have learned the value of breakfast for their children.

PROBLEM ISSUES

One of TARCOC Home Start's greatest assets is Dr. Kyo Jhin, who has assembled a fine staff, arranged for practical and wide-ranging training, and coordinated the program's use of some 50 different agencies--state, local, regional and federal--to provide donated services. Dr. Jhin estimates the value of these donated services at approximately \$97,000. The program has been featured in Appalachia magazine and made its own presentation to the National Association of the Education of Young Children in Atlanta. Dr. Jhin is also pleased with the cooperation he's received from people and agencies the program works with. Among the problems he identified were:

- Occasionally, the program's films of the "Around the Bend" series, which come from AEL in Tennessee, were late and various segments had to be repeated in the interim. The material, however, had been designed for use with or without the video, which also made it possible to use them in homes without T.V.

- Dr. Jhin would like to have been able to give a 5.5% salary increase to all his staff, but was only able to give this figure to his paraprofessionals. Professional staff were given a 2.5% increase.
- In the area of dental services, the program could not afford to pay for teeth imprints which had been recommended and encountered some difficulty with scheduling dental follow-up as no dentists could give the families appointments within a reasonable period of time.
- Home Visitors would like to be able to meet more than twice a month, but the expense of bringing them to Huntsville is currently prohibitive for more frequent meetings. Memos and telephone calls now serve to keep visitors up to date.

VIEWS OF THE PROGRAM

Parents and staff of Alabama Home Start talk about their program:

Parents: "I always thought a child had to be a certain age before starting to learn. Now I know that even before school children can learn and I spend time with them." "She shows me how to teach and what to teach my child." "She's helped me get out, meet other people; she has even provided me with transportation." "I know now to make my child learn to do things for herself. But I play with her more and teach her things I thought she was too young to learn before now. I've learned how to save money and even learned how to buy things differently."

Staff: "We all have to work together. If I have problems I can't solve, like getting families to doctors or to parent meetings, someone usually manages to help me." "I make most of the materials I take with me on home visits. I think that encourages mothers to know that they can make things for themselves as well." "If we had more time we could have aides who were men to go along with us and do some activities with children." "Probably the most important aspect of the Home Visitor's work is 'parent involvement'. Helping them become independent and more able to arrange for themselves things their children need. We want to teach them how to fish rather than buying them fish."

PROJECT HOME START

Fairbanks, Alaska

SUMMARY CASE STUDY

Fall 1973

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IN BRIEF

Fairbanks, Alaska
Spring 1973

PROGRAM: Urban/Rural

HOURS: Monday through Friday
8:15 AM to 4:15 PM
Monday and Friday Evenings
6:00 PM to 8:00 PM

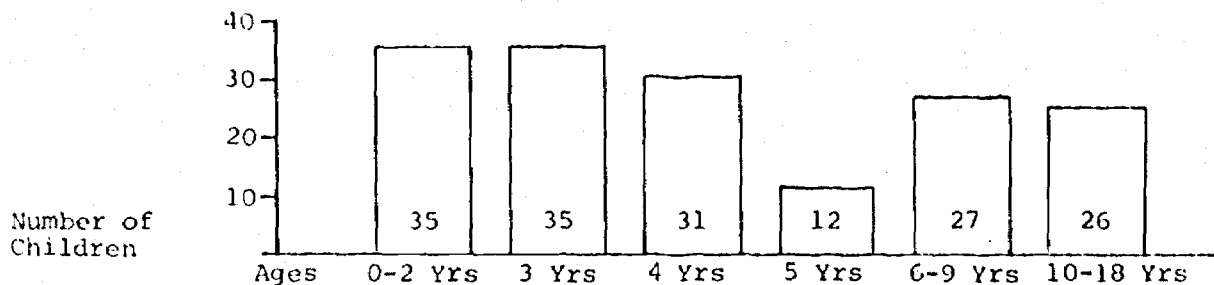
START UP: March 1972

SPONSOR: Grantee--Greater Fairbanks
Headstart Association

CHILDREN

ENROLLMENT: 50 Families

52 Focal¹ children ages 3 -
166 Total children ages 0 -

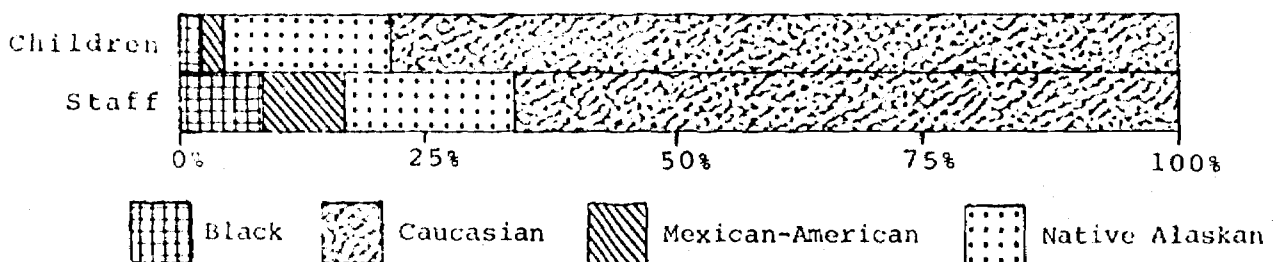


STAFF

Paid Full Time	9	Ages:	Under 20	0
Paid Part Time	2		21 - 30	4
			31 - 40	6
Donated Full Time	0		41 - 50	0
Donated Part Time	1		50+	2

Staff Positions: Director, Home Start Coordinator,
Home Visitors (5), Secretary,
Business Manager (Part Time), Nurse
(Part Time), Parent Coordinator (in-
kind), Clerk-Typist

ETHNIC MATCH: Focal Children and Staff



¹ Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents ¹	61	Ages:	Under 20 Yrs	0
			21 - 30 Yrs	37
Female Focal Parents	82%		31 - 40 Yrs	17
Male Focal Parents	18%		41 - 50 Yrs	4
			50+	3

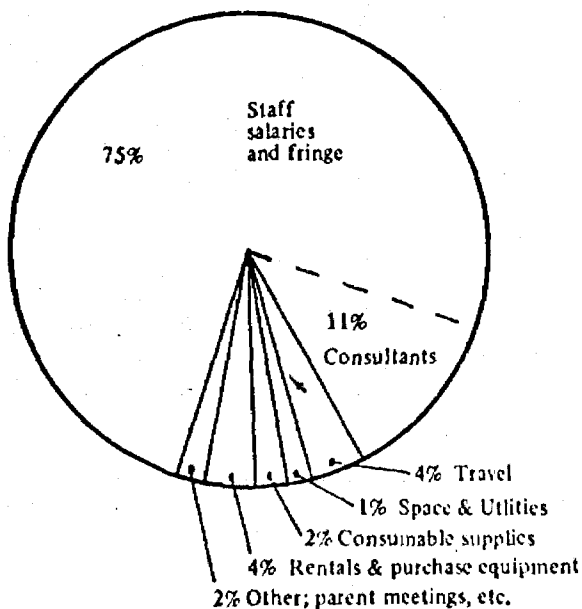
Annual Income of Families²: All Non-Farm Families

Under \$2000	8%	\$6001 - \$8000	16%
\$2001 - \$4000	24%	\$8001 - \$10000	8%
\$4001 - \$6000	22%	\$10001 - \$12000	22%

Employment of Families: 76% Families in which one or more parent is employed

Regular Work	N/I
Part Time Work	N/I
Seasonal Work	N/I

EXPENDITURES³



The Program collected slightly more than the \$10,000 budgeted for their Non-Federal share of the Program's funding. A significant amount of this Non-Federal share consisted of donated services: by parents, by University of Alaska faculty, by local health and nutrition service staff, and by the Director of the Fairbanks Head Start Association who donates some of his administrative time to Home Start. Space and office rental was donated in part by the City of Fairbanks and the Greater Fairbanks Head Start Association.

TOTAL BUDGET ³ :	\$110,000	ACTUAL EXPENDITURES:	\$111,500
Federal Share:	\$100,000	Federal:	\$100,000
Non-Federal Share:	\$ 10,000	Non-Federal:	\$ 11,500

- ¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.
- ² Federal poverty guidelines for Alaska are higher than those for the continental U.S. because of the comparatively higher cost of living in Alaska.
- ³ Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN FAIRBANKS

Alaska's unique climate and the way of life it fosters make Home Start in this region very different from its counterparts to the south. Fairbanks, about 100 miles south of the Arctic Circle, has winters characterized by six months of near sub-zero temperatures. During the long, dark days of mid-winter, temperatures may reach 60° below zero and outdoor activities must be kept to a minimum. Much of Fairbanks' employment is seasonal, so whole families may spend a great deal of time confined in small homes (the smaller, the cheaper to heat). Isolation magnifies problems of stress and tension, and many people develop "cabin fever." Summer brings days that never get dark, when people scatter to the countryside after the long winter confinement and most social action programs -- Home Start included -- close down until fall.

It's spring now, however, and Linda Timley is off to see four-year-old Jimmy and his mother, Ruth. Like most visits with working parents, this one is scheduled from 4 to 6 p.m., but now that winter's over, they can at least get out in the countryside. This week's study topic is farm animals, but since few conventional farm animals can survive Alaska's climate and limited grazing, the experimental farm's cows will have to do. For comparative purposes, they'll also visit a musk ox farm. But first, Jimmy's mother needs groceries, and the side trip is a good way for Linda to introduce her topic. She explains where milk and dairy products come from and makes a point of listening to Jimmy and giving him her full attention. He's a slight, dark, reticent boy, at times a problem for Ruth, a widow with a job and a 16-year-old son to worry about too.

The drive to the experimental farm is a good chance for Linda and Ruth to talk about Ruth's work worries and the difficulty of finding adequate child care. As a full time Home Visitor, Linda is sympathetic and knows about day care needs: she has a five-year-old of her own and another baby due very soon. She offers advice and moral support, but perhaps her greatest contribution is in showing Ruth alternative ways of

dealing and working with Jimmy. At the farm, she uses an animal book and songs to identify various creatures and engage Jimmy's attention. Jimmy can feed and pet the cows, but he's shy about them. Linda encourages him to talk and answers his questions fully. The musk oxen they visit are different; while they look like cattle, they are actually "Ovibos", members of the goat family. Fierce animals with long, shaggy coats and downcurved horns, musk oxen are adapted to the Arctic conditions in which they live. No petting here: one ox charged the fence, then swerved away again, an adventure Jimmy could tell his friends about. Linda drops her family at home, makes next week's appointment, and leaves her book and songs for Ruth and Jimmy to work with.

Each of Fairbanks' Home Start visitors has between 11 and 14 families to work with for a two-hour session each week. Addresses are especially descriptive of the distances Home Visitors must travel to make their calls: 10 Mile Steese, 35 Mile Richardson Highway, 13-1/2 Mile Nenana. During a typical week, Visitors adapt a general topic devised by the Education Coordinator to each child and family they visit, working with blocks, sorting tasks (macaroni, beans, and rice sorted into egg cartons), books, numbers, songs and records. Home Visitors stress nutrition and the help available from the cooperative extension service, a particularly important agency in Alaska, where food prices due to shipping costs are very high. Other program help can be fire safety advice, information about local government services, transportation to doctor's appointments, and so on.

Because of seasonal employment patterns, many men are also home with their families during home visits and they are encouraged to participate. Said one Home Visitor, "We ask parents to spend fifteen minutes a day with the child. If they seem reluctant we say, 'Okay, how about five?' It's a beginning."

HOW HOME START BEGAN IN FAIRBANKS

Fairbanks Home Start is sponsored by the Greater Fairbanks Head Start Association, an organization formed by parent association and community advisory panel members when Fairbanks CAP lost its funding in 1969. In

November 1971, the Association's Director, Elizabeth Wescott, submitted a letter of intent for a home visiting program to the Office of Child Development, and after attending a Home Start planning session in Chicago began laying the groundwork for this program in the Fairbanks community. Her planning and organization activities were seriously interrupted when she injured her back, and recruitment of families for the new program proved a difficult problem, with families scattered over a wide area and part-time recruiters canvassing door-to-door without adequate transportation. The program was able to open in March 1972 with 12 families and 7 Home Visitors.

A setback occurred when the program closed down in June 1972 for the summer: Ms. Wescott left Alaska and the Education Coordinator left the program. Taking stock of the situation when the program seemed to be faltering, Dr. Niilo Kopoen, Head Start/Home Start Director, and Westeen Holmes, Home Start Supervisor, restructured the organization, redefined goals and recruited new staff and more families. Older, more experienced Home Visitors were brought on board because it had become evident that program mothers could not relate successfully to 18-year-old home visitors.

Finally, the program had problems finding a home. In mid-Fall of 1972, Home Start moved into its present office, the last of five homes since the end of August, when its sponsoring agency was forced to vacate the basement of a local church. Now housed in a log cabin on the back lot of the Fairbanks exhibition center, the program has acquired a stability of purpose as well as location. Home Start works closely with Head Start, which provides personnel as part-time administrators and consultants, shares some staff training, educational materials, and includes Home Start parents on the Head Start Association board.

Today, there are 50 families enrolled in Home Start, with a total of 52 focal children, of whom 79% are Anglo, 2% are black, 2% are Mexican Americans and 17% are Native Alaskan (Eskimo, Tlinget, Atapascan). Home Visitors list 11 men as focal parents within families in which both parents are considered the focus of home visits along with their

children. In 12 families, only one parent is present. No family in Alaska is considered a farm family, although many families live as far as 15 miles from Fairbanks. Annual incomes of the Home Start families indicate that about half made less than \$6,000, and another half made between \$6,000 and \$12,000. Bear in mind that in Alaska, poverty guidelines are much higher than in the continental United States, where living costs are substantially lower.

PROGRAM ORGANIZATION

Dr. Niilo Koponen is Executive Director of Head Start/Home Start for Fairbanks and devotes part-time to the Home Start program, as does Head Start's business manager, Richard Farris. Westeen Holmes is full-time Home Start Supervisor and oversees the day-to-day operation of the program. Part-time educational planning support to Home Visitors is shared with Head Start. Back-up support by Head Start personnel is substantial: a nurse is available to look over children and advise Home Visitors; the Head Start head teacher observes children suspected of having emotional or learning problems; and Head Start's Parent Coordinator visits prospective Home Start families and helps with special referrals. A secretary and a clerk-typist round out the support staff.

The program has five Home Visitors, all women, one of who is of Eskimo descent. Visitors use the log-cabin office as a base between home calls, but except for filing reports, using the phone to set up appointments and regular training sessions, most of their time is spent away from the office. Distances to homes may be considerable, and visits are accommodated to parent schedules. Some occur on Saturdays or in the evenings. Westeen Holmes meets frequently with Visitors either singly or in small groups to offer advice and counsel, to coordinate services, or simply to exchange information. Thursday and Friday mornings are set aside for staff training in early childhood education provided by a University of Alaska teacher, training which will soon earn college credit toward the Associate in Arts degree. Staff sessions also focus on seasonal problems particularly relevant to the region: fire safety is a critical need in winter, as is proper

clothing for children. Nutrition and budgeting are also very important to Home Start's families, and this is handled by Westeen, who has a home economics background.

Because of its start-up problems and the fact that the program winds down in spring, closes for summer and must re-start in fall, parent participation is only now getting underway. Home Start parents will have their own policy councils and will also be represented on the Head Start Association Policy Council. Transportation is a problem here, since Home Start families tend to live even farther from the city than Head Start parents, but cooperative transportation arrangements are being explored. Parents are now getting together in parent meetings which discuss housing, nutrition, child development and other concerns.

PROGRAM SERVICES

Education

"We try to let the family set the goals about where the child is going to be," Home Visitors explain. Visitors and parents together discuss the program's educational goals and formulate objectives both for the child's education and his relationship with his family. The Home Start Education Coordinator develops general lesson plans and discusses with each Home Visitor how to apply the material to individual families and which items and strategies are appropriate for specific children.

Although the content of home visits varies from week to week, the general format remains the same: the Visitor reviews the assignment or activity she left on the previous visit; conducts physical exercises (particularly important in severe winters when children can't get outside); provides a song and reads from a storybook which she will leave in the home; conducts a specific educational activity based on the material read -- a game or making an object; clean-up and assignment for next week. Visits typically last two hours, and Visitors adapt their timing and techniques depending on parent, child, and home environment.

Visitors spend some 43% of their time in the home on education, and have been working with parents to give them a broader understanding of child development. Parent group meetings have provided Parent Effectiveness Training for nine families so far (in 12 evening sessions), and 20 parents attend the University of Alaska, along with Home Start staff, for weekly college-credit sessions on child development.

Health

Most health care in the Fairbanks area, Home Visitors point out, is available through complex, overlapping agencies. Visitors see their jobs as health advocacy because each agency serves only a limited eligible population. A good deal of time outside actual home visiting is spent on planning the delivery of health treatment. Physicals are planned for all focal children and for other children in the family where possible; so far

117 children have received examinations. Hearing and related speech problems are common in Alaskan preschoolers because of the extreme cold, and the program emphasizes early screening in these areas. Speech and hearing workshops for parents of children with diagnosed difficulties have been conducted by the Alaska Crippled Children's Association. The Head Start nurse is available for consultation with Home Visitors and helps with referrals. Visitors often provide transportation to medical and dental appointments. Although the program is able to pay only for examinations for focal children, they have helped families register for public health and other federal health programs for which they are eligible. The program uses the Fairbanks Health Center, the Alaskan Native Health Service, the Public Health Nurse, the Guilded Cage Association, (a local chapter of the Alaska Crippled Children and Adults, specializing in speech and hearing problems).

Psychological/Social Services

Home Visitors spend about 33% of their time in the home on psychological and social services and consider this aspect of their work very important for their families. Before referrals can be made in this area, before discussion can even begin, a trusting relationship must be built between the family and the Home Visitor. This takes considerable time.

All five Home Visitors have lived in Alaska long enough to understand the difficult psychological stresses experienced by families isolated together through a long winter. Weekly visits, when a new face is in the house, help alleviate the problem, as do parent meetings outside the home, field trips, drives to the doctor, and other outings. Many of the program's children need contact with other children, particularly in winter. When referrals are necessary, they are made either by Home Visitors or by Westeen primarily to the Alaska Mental Health Center. A parent group has been organized, with help from the Farm Home Administration to study and discuss home building to be done cooperatively by several families.

Nutrition

Home Start Coordinator Westeen Holmes worked with the Fairbanks Cooperative Extension Service before joining Home Start, and her background has enabled her to train Home Visitors and provide many additional services. Because of the high cost of living in Fairbanks, the seasonal employment and the seasonal selling campaigns of local merchants, good budgeting and nutrition are essential for Home Start families, particularly in the winter.

The first five visits to each family are concerned with food and nutrition information, climaxed by a shopping trip. In fall of 1972, Home Visitors were spending about 12% of their time in the home on nutrition, but were expecting this time to increase substantially as winter progressed. The Fairbanks Head Start Association newsletter which is also provided to Home Start parents, contains articles on nutrition and recipes, and some parent meetings have focused on 5-month courses (4 hours a week) in nutrition.

After a shaky first six months, the Fairbanks Home Start program seems to be zeroing in on its families' problems and concerns. While providing preschool experiences for children, it is also dedicated to helping the whole family, whether that help is a referral, a recipe, or simply an informed and sympathetic ear.

Problem Areas

Many problems encountered by the Alaska Home Start Program are directly related to the climatic and economic circumstances of its location. For instance:

- Extremely cold temperatures for much of the year often cause hearing problems for preschoolers. Because some have undiagnosed hearing problems, they also may develop related speech problems. The program has made speech and hearing checks a regular part of the physical examination procedure. More than 25% of the children tested need follow-up treatment which the program has also arranged.

- The City of Fairbanks has no public transportation that can be regularly used by Home Start families. Most families have no car, or because of the high cost of purchase and maintenance have only old, undependable cars. As a partial remedy, the Head Start Association has bought four cars which it leases to Home Start for use by Visitors on the job. At least two Home Visitors use their own cars.
- Although materials and toys are not cheap in any part of the country, the high cost of living in Alaska limits the amount of educational materials the program can supply to Home Visitors and to families. To supplement the commercial materials used by the program, parents have donated time and carpentry skills to make developmental toys and games for Home Start.

Other problems reflect the difficulty of defining to participants and to staff the aims and emphases of this new program:

- The program's first Director, who left Fairbanks shortly after setting up Home Start, hired Visitors who were quite young and had little working experience of any kind. The succeeding Director and Program Coordinator redefined job descriptions, and held conferences with the home visiting staff, several of whom decided the redefined job was not what they really wanted. All but one of the original Home Visitors were replaced before the program opened again in fall, 1972.
- Parents, too, had many different views of the purposes of Home Start, some of which had been implied by the original inexperience of Home Visitors. With the organization of parent meetings and discussion groups, and with the continued training of new Home Visitors, parents have ceased to think of the program as a babysitting service or a visiting teacher arrangement and are beginning to appreciate their cooperative role in the education of their children through Home Start.

VIEWS OF THE PROGRAM

Parents and Home Start staff in Alaska talk about their program:

Staff: "We try to plan topics and choose materials for home visits such that the parents will have specific things to do during the visit with the children." "I'd like to expand in-service training to include the linguistics of the Alaskan language and specific sessions on Alaskan values and culture." "We're trying to move away from too much orientation toward the child. It invites rivalry with parents, especially when children get attached to the Visitors and become upset when the visit must be postponed. Parents can accept ending the relationship with Home Start: for children this is more difficult." "Encouraging cooperative activities is very important: we want to help parents become interested in things like housing and nutrition in a group where they can give each other support." "I learn a lot from parents in sharing ideas with them."

Parents: "I like field trips for the children. They're learning to take care of their bodies. They're happier and more alert." "My child is opening up to other people and learning to eat different foods." "I like for my child to be with other children and have an opportunity to know adults other than his parents." "I'm more reliable now: I do things when I say I'll do them. I look at my children from a different viewpoint after having the Home Visitor work with them." "My attitudes have changed some: I don't rush the child and try to give reasons for doing things." "She's given me inexpensive good recipes and provides an ear -- she's someone to talk to." "Home Start and our Home Visitor kept me sane last winter."

PROJECT HOME START
Ft. Definance, Arizona

SUMMARY CASE STUDY
Fall 1973

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IN BRIEF

Ft. Defiance, Arizona
Spring, 1973

PROGRAM: Rural, two centers on the Navajo
Reservation

START UP: April 1972

SPONSOR: Office of Navajo

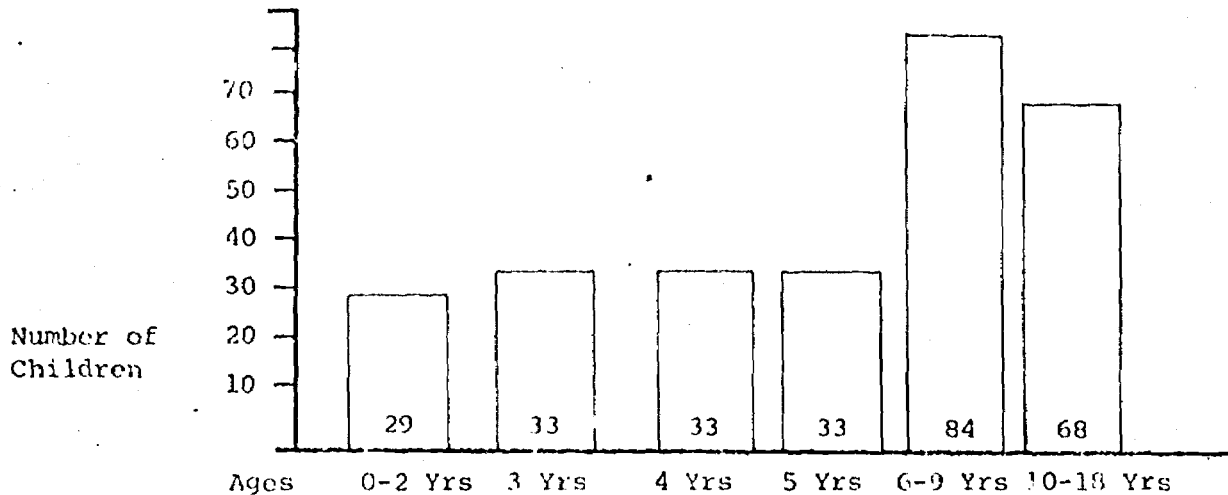
HOURS: Monday-Friday

8:30-5:00 in main office
weekdays, evenings and weekends
target areas.

ENROLLMENT: 72 families

CHILDREN: 93 Focal Children

333 total Children ages 0-18



STAFF

Paid Full Time 10

Paid Part Time 0

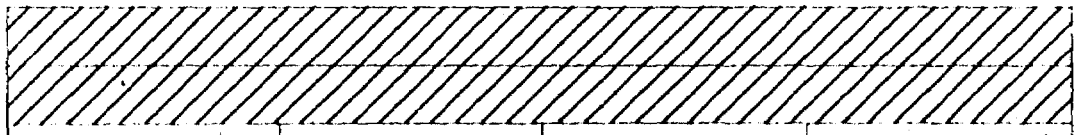
Donated Full Time

Donated Part Time

Ages:	Under 20	0
	21 - 30	6
	31 - 40	2
	41 - 50	0
	50+	0

Positions: Home Start Coordinator, Home Visitor(4), Parent Aides (4)
Secretary

ETHNIC MATCH: Focal Children and Staff



American-Indian

The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents¹ 132

Female Focal Parents 72
Male Focal Parents 60

Ages: Under 20 years 0
21 - 30 31
31 - 40 54
41 - 50 32
50+ 13

Annual Income of Family; All non-farm families

Under \$2,000	78%	\$6,001 - \$8,000	4%
\$2,001 - \$4,000	15%	\$8,001 - \$10,000	1%
\$4,001 - \$6,000	1%	\$10,001 - \$12,000	0

EMPLOYMENT OF FAMILIES: 43% Families in which one or more parents is employed

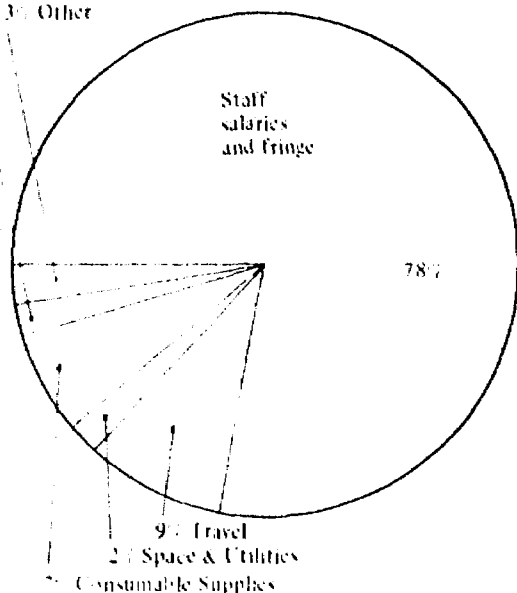
Regular Work: 35%
Part Time Work: 7%
Seasonal Work: 1%

EXPENDITURES²

27 Rentals and Purchase Supplies

30 Other

Arizona reported no non-federal expenditures.



TOTAL BUDGET: 100,000

ACTUAL EXPENDITURES: 69,621

Federal Share: 100,000

Federal: 69,621

Non-Federal Share:³ 0

Non-Federal: 0

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

³ Indian and Migrant programs are currently exempt from Non-Federal Share requirements.

HOME VISITING ON THE NAVAJO RESERVATION

In some parts of the massive Navajo Reservation (25,000 square miles in Arizona, New Mexico, Colorado and Utah), mere survival is an accomplishment. Many families live crowded into small, traditional hogans in what seem to an outsider to be unspeakable living conditions. Services are far away, traders can be unscrupulous, and many children are not seen by a doctor until they are five or six, when they are taken from their parents and sent far away to Bureau of Indian Affairs boarding schools where they struggle with the white man's language, customs and values. While Home Start cannot solve the complex and long-standing problems facing the Navajo nation, it can at least encourage parents to work with their children and, in the comfortable surroundings of home and the Navajo language, begin giving children the concepts they'll need to succeed in school.

Although Home Visitor, Isabel Nuvayouma, has to drive 45 miles to visit the Harjo family, they are nearly always aware that she's coming. Their hogan is set near some weathered trees and low scrubby bushes on a slight rise. They can see for miles across the arid and open land -- if they don't see her car they see the dust cloud that accompanies her along the dirt path that serves as a road.

Thomas 5 and Marita 7 are playing in the yard when Isabel arrives. She observes their game for a short while -- they have drawn pens in the dirt with long sticks and are moving imaginary sheep from one to another.

"How many sheep in your flock, Thomas?" asks Isabel. The three spend a brief time talking about the flock and drawing numbers in the dirt. Soon Grandmother brings 2-1/2 year old Sandra out of the hogan and into the yard where Isabel, Thomas and Marita are busy with color pegboards. Grandmother greets Isabel eagerly, knowing she will have brought precious news of family and friends from other parts of the reservation. In addition to reminding Grandmother about a Home Start family/parent meeting being planned, Isabel also brings news of the tribal council meeting held two weeks ago. For the Harjo

family the Home Visitor and Family Aide are the most reliable sources of community news and concerns. The health clinic has agreed to do check-ups for the families in this area so Isabel begins to talk with Grandmother about when and if the children can be taken for their visit. Isabel knows that the checkups will not take place for some time but she will discuss the procedure for the checkups and the arrangements with both the Grandmother and the children's Mother before the journey to the doctor is actually done. Home Visits regularly take place with either Grandmother or Mrs. Harjo. The family is fortunate enough to own a small flock of sheep and Mrs. Harjo is tending them today. Other days Grandmother watches the sheep and Mrs. Harjo stays with the children for the home visit.

The conversation has moved from tribal news to discussions of the food surplus stocks available through help of Home Start. Marita and Thomas are interested; they often help Grandmother cook over the small fire in the hogan. Isabel has just begun to ask the children about their use of new toothbrushes when Mrs. Harjo shouts from some distance. She is waving her arms and Grandmother knows immediately what is the matter.

"The sheep have strayed" she says -- "we must help." Marita stays with Sandra while Grandmother and Thomas hurry to help Mrs. Harjo with the sheep, the family's only source of income as well as an important source of food.

The interruption is not an unusual one. Isabel stays for a short time while reading a book with Marita and Sandra -- Soon she bids them goodbye and drives toward her afternoon visit several miles away.

Home Start on the Navajo Reservation is located in two regions about 200 miles apart. The Grey Mountain-Cameron area is slightly south of Tuba City, Arizona, on the western edge of the Reservation; the Rincon Marcus area is just off the eastern edge near Crownpoint, New Mexico. Headquarters, where the Program Coordinator and secretary have their offices, is located in between, at Fort Defiance, Arizona. Each of the four communities has one team, a team consists of one Home Visitor and one Parent Aide. Referral services are located in Tuba City and Crownpoint, while local tribal chapter houses provide the focus for Navajo life in the widely scattered communities.

Navajo Home Start has had a difficult time getting underway. Start-up and selection of families took a great deal of time, and two Program Coordinators have left. The most recent Coordinator, Harriett Marmom, got the program on the track, and her departure has affected staff morale. The program is also experiencing administrative delays which make operation in the field difficult, but staff have begun to address critical needs, particularly in the medical area, and are gaining confidence in their ability to provide services to families for whom any attention is a real improvement.

HOW NAVAJO HOME START BEGAN

Home Start's sponsoring agency, the Office of Navajo Economic Opportunity (ONEO), was established in 1965 as part of OEO's War on Poverty and today administers a \$10 million budget for programs such as VISTA, Neighborhood Youth Corps, Community Development, Head Start, and other child-care projects. In November 1971, the Navajo representative in HEW's Indian Migrant Division contacted Lettie Nave, Child Development Director in charge of ONEO's \$2.3 million Head Start program, and explained the Home Start concept. After attending the Chicago Home Start meeting, Mrs. Nave, with help from her staff and others, drafted and revised a proposal which was accepted and funded in March 1972.

A Coordinator, secretary, and three Visitors were recruited from Head Start and ONEO, and Parent Aides were selected from the communities in which they would work. Visitors received the names of potential Home Start families from ONEO staff, traders, the census, and tribal chapters. Three months -- June, July and August -- were spent surveying need, explaining the program to families, selecting eligible families, and training staff. Selection criteria included the number of children in the family, location (to minimize staff travel time), poverty guidelines, parent interest, and overall family needs. Most recruiting was completed by September. In October, feeling the program needed more direction and supervision, Mrs. Nave named Harriett Marmom, Coordinator. Harriett gave the project new impetus, and her resignation in March 1973 was a blow to staff. Acting Coordinator Floyd Ashley is

now substituting until the Coordinator, Elsie Earl, newly hired, can assume the position.

Presently, Navajo Home Start serves 72 families with a total of 93 focal children, all of them Navajo. Staff estimate that they reach approximately 333 children, including brothers and sisters up to 18 years of age. Of 132 focal parents, 63 have had no schooling and 59 have had less than eight years. Some 32 parents are employed, 96 are unemployed: in 60% of the families, both parents are focal parents, and 12 families are single-parent-headed. Of the program's 72 families, 56 earn less than \$2,000 a year; 11 are between \$2,000 and \$4,000; one between \$4,000 and \$6,000; three earn less than \$8,000 and one less than \$10,000. Some 38 families receive Aid for Dependent Children; 29 receive food surplus; 24 have food stamps; 11 children are in Head Start programs; five families have public housing assistance.

PROGRAM ORGANIZATION

ONEO's Child Development Director, Lettie Nave, directly oversees Home Start from her Fort Defiance offices just across the hall from the program's space. Lettie in turn reports to ONEO's Executive Director, who is responsible to the Executive Board. She meets regularly with Floyd Ashley, Acting Program Coordinator. Floyd spends alternate weeks in the two Home Start target areas, supervising, evaluating and assisting Home Visitors and Aides. Central office staff also includes secretary, Pauline Marshall, in essence an administrative assistant, who has helped the program stay together during rough periods.

All Home Visitors and Aides are women, and all are Navajo, fluent in English. Each of the four Visitors has had some college experience, and Aides live in the communities they serve. Visitors are former Head Start staff (as is the secretary), and each is responsible for 20 families. In the past, a Visitor called on a family one week, with the Aide following up the next week, but as Aides have gained experience, they are being upgraded to Visitors and taking on their own families. Visitors cover enormous distances in GSA vehicles, coping with terrible weather conditions. Winter is bitterly cold,

summer brings heat and dust storms, and August is the start of the rainy season, when the program all but closes as roads are washed away.

Staff training for Navajo Home Start has been unique, with the first session held on a canyon floor, with parents, Home Start and Head Start staff camping out over the three-day period, living in the traditional Navajo way. Parents talked about their lives and needs, and Visitors were introduced to their roles and the resources they could call on. Training staff included the Head Start Director, Curriculum Specialist, Nutritionist, Nurse, a consultant from the Midwest, and representatives of several community agencies such as legal aid, emergency food and medical services, and public health.

In-service training consists of bi-weekly meetings in the two target areas, and is closely coordinated with Head Start training, calling on the Navajo Community College's Early Childhood Education Training and Technical Assistance program. Harriett Marmom was an education specialist and was able to bring needed content to these sessions, but staff feel the need for more extensive training, and would like to include parents. Training was given in Crownpoint on food stamps and books in the curriculum, and in Tuba City on economics, supply and demand. Staff made arrangements during the summer of 1973 through Head Start's Career Development Director, to attend the summer school of their choice.

Parent participation in this program is really family participation, since brothers, sisters, parents, aunts and uncles, grandparents and cousins may all be involved. Participation varies with the distance families live from the local tribal chapter house, a central meeting point. A recent meeting in Cameron drew 17 of 19 families because it was accessible to them. Elsewhere, meetings are held in smaller, separate groups to accommodate geographical limitations. Parents interview and hire, with the advice of Lettie Nave, when staff openings come up. They also elect four representatives to the Head Start Policy Council to serve with 15 Head Start parents.

PROGRAM SERVICES

Education

Education during the program's first year has been less of a priority than the critical needs Visitors have found in health and nutrition, but as these needs are being addressed, staff are now devoting more time to education. This Home Start program is bicultural and bilingual, and staff use Navajo culture, the natural environment and items found in the home to teach parents how to teach their children. Visitors also take pictures, magazines, books, lotto games and number games on their rounds, and the Red Cross has donated hogan kits for program children. Each child receives a bag containing books, blocks, paper and pencils, crayons, scissors, dolls, paints, jumping ropes and other items, many of which have never been seen in the homes.

A Crownpoint resident, Amos Sloan, has translated the Toy Lending Library into the Navajo language, and original tapes are being duplicated so Visitors will have copies for each family. Some families have already been introduced to the eight basic toys and have copied them in their homes. Staff have spent a great deal of time helping parents understand the uses and objectives of each toy, using group sessions in each local area. Cameron parents have had a session on the use of the Toy Lending Library in their area as well.

Many Navajo children have no toys of their own and need educational stimulation. Parents, for their part, need basic education and an understanding of child development and the needs of children as they're growing up. In accordance with parent wishes and program philosophy, the education component of Home Start on the Reservation emphasizes things that are important to the Navajo people: the land, the weather, and natural forces which shape Navajo life. Children learn about growing things, the folk tales of the Navajo nation, the wisdom of elders and the medicine man as well as Anglo letters and words. Hopefully, with a start on the educational process, they'll be able to adjust to BIA schools and continue their education.

Health

The health component of the Navajo Home Start program got a real boost when American Academy of Pediatrics consultant, Dr. William Carlile met with Home Start staff to discuss health needs among Navajo families. The program decided to take every family to the nearest health facility for a medical and dental examination, and this is an ongoing process. Visitors took care to explain the physical examination to parents before the date of the appointment and provided transportation to the health service facility. So far, 32 families have had physical examinations and six have had dental care. Common medical problems are impetigo, malnutrition, diarrhea, tuberculosis and dental troubles. Head Start staff are training Home Visitors in recognizing symptoms, keeping medical records, necessity for immunizations, blood tests, and other screening tests. The Tuba City Health Service has been most cooperative, with Crownpoint somewhat slower. (One health official suggested that Home Start not bother with the children now, since they'd eventually be seen when they go away to school.) Elizabeth Fields of the Arizona Health Department in Phoenix trained Visitors in vision screening, and program children were tested during the training.

A major area of need, according to Home Visitors, is information for families about cleanliness and sanitation. Some families live with little awareness of modern sanitary practices and perpetuate health hazards for themselves and their children. In Rincon Marcus, the local water is bad and families must travel 40 miles to get water. Alcoholism is a problem for some families --not surprisingly, where hunger, unemployment, illiteracy and poor living conditions are the rule. For now, however, Visitors are concentrating on identifying and assessing needs and services available.

Social/Psychological Services

While Navajo families have multiple and overlapping social and psychological needs, Visitors have been wary of rushing in with well-intentioned advice, and rightly so. "After all," says one Visitor, "in some families if we talk about their marital problems, they won't let us come back to work with the

child." It will take a long time and much effort before Visitors have established the kind of rapport to allow them to help with family problems. For now, Visitors are relieving the isolation for families, and occasionally putting them in contact with services. When a mother came home to find her husband drunk and next morning was discovered to be dead, the mother could not return to a house inhabited by the spirit of her husband, and staff helped her find another home for her family. Many families have no jobs, no homes of their own, and few prospects. Others have emotional problems, no furniture, warm clothes or bedding. For their part, Visitors feel they need much more training before they venture into family affairs, and prefer to find services rather than provide counsel themselves. The resources which do exist on the Reservation can only provide superficial relief from the pressing problems of poverty and isolation. There are only a handful of psychologists and medicine men on this giant compound, and psychiatrists are difficult to find. Occasionally, local Community Action programs and Career Development personnel can help, and the Navajo legal services program has offered its assistance.

Nutrition

Many Navajo families live on the traditional diet of fried bread, fried potatoes and coffee, with now and then a special treat of mutton stew. "I don't see very much food in the home," was a typical Visitor's comment summarizing the great needs of some families. The Emergency Food and Medical Services program operated by ONEO is some help here, and many families receive surplus foods or food stamps. The basic need, however, is for education about the basic rules of nutrition and low-cost meals which are nutritionally balanced. Visitors have had some training from Jerry Gee, Food Service Agent for Head Start and Emergency Food and Medical Services Food Demonstrators from the Crownpoint Agency on food stamps. Acting Coordinator, Floyd Ashley, trained Cameron-Grey Mountain staff at Tuba City in economics and the law of supply and demand, and this information is passed along to families in the course of home visits. Visitors still need more training in this area, however, to help mothers prepare tasty and beneficial meals for their families.

PROBLEM ISSUES

Navajo Home Start has had major problems with slow start-up and the loss of Harriett Marmon who did much to get the program on the road. Administrative delay has caused some problems in getting approval for new candidates to Home Start positions and for carrying out program activities. Acting Coordinator, Floyd Ashley, has identified these additional problems:

- Staff feel the need for more training and assistance in every component.
- Assistance is also needed from supportive agencies such as Navajo Field Health units and the Bureau of Indian Affairs road crews. Unmaintained dirt roads make it especially difficult to reach isolated families during bad weather, and the problem is compounded when Visitors must drive as much as they do in this program.
- Educational resources for parents -- in fact, resources of all kinds -- are scarce on the Reservation.
- Guides or materials for planning home visit activities have been scarce for all Home Start programs -- The need to translate few existing materials into appropriate form for Navajo families has made extra demands on already limited staff time and energy.

VIEWS OF THE PROGRAM

Parents and staff of Navajo Home Start talk about their program:

Staff: "The emphasis here is on parents, children, and staff working together." "Chapter members and councilmen of the Navajo Tribal Chapter provide assistance to our program, especially to Home Visitors, in working with specific families and in developing Navajo materials." "For our programs, Navajo Child Development includes language, writing, arts and crafts both in our native culture and with some of the Anglo culture as well." "We need many more materials in Navajo translation, particularly in health, nutrition, and in child education materials for parents." "Home Start tries to combine the traditional and the new. We work with both the Navajo psychologist in the community and with the Navajo medicine man."

Parents: "Our Home Visitor has been a great aid to our family: she's helped with food buying and budgeting that is hard within our limited income." "I'm happy that my child has become more self-aware and able to work by herself more." "Being in Home Start has meant that we're not so alone: the Home Visitor brings us news of the Reservation and the community." "I am sure my child will learn English and that she will understand what is involved in school life without fear." "The winter has been hard for everyone on the Reservation. The children received clothing from Home Start that helped us very much." "With Home Start we have things in our home that we could never have had -- paper, pencils, crayons."

PROJECT HOME START
Dardanelle, Arkansas

SUMMARY CASE STUDY

Fall 1973

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Dardanelle, Arkansas
Spring, 1973

PROGRAM: Rural serving 5 counties

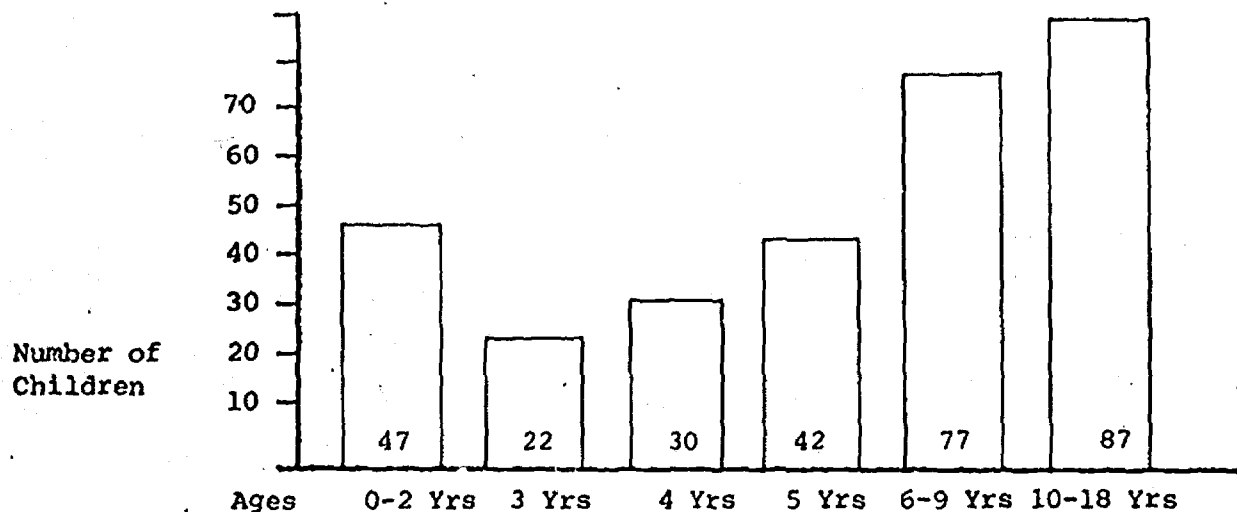
HOURS: Monday through Friday
8:00 a.m. - 4:30 p.m.
(staff on-call evenings
and weekends)

START UP: March, 1972

SPONSOR: Arkansas River Valley Action's Council Inc. (ARVAC)

ENROLLMENT: 81 families

CHILDREN:
94 Focal¹ children ages 3 - 5
305 Total children ages 0 - 18



STAFF

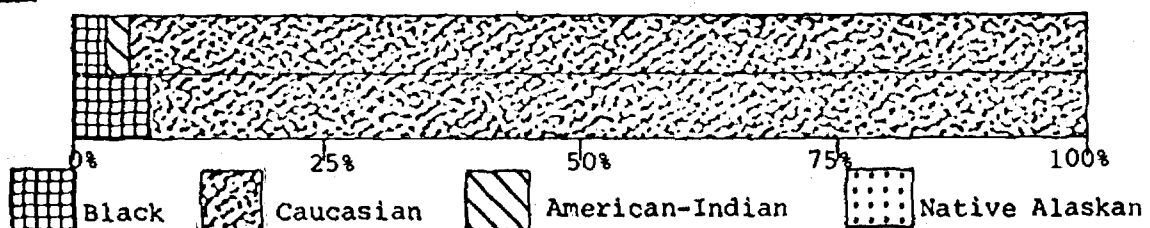
Paid Full Time 12
Paid Part Time 8

Donated Full Time
Donated Part Time

Ages: Under 20 -
21 - 30 3
31 - 40 3
41 - 50 2
50+ 5

Positions: Exec. Director, Deputy Director, Head Start/Home Start Director, Secretary, Family Educational Specialist, Medical Specialist, Speech and Language Development Specialist, Nutritionist, Child Development Specialist, Head Start Nurse, Asst. Director for Home Start & Social Services Coordinator, Supervisor, Home Start Visitors (8)

ETHNIC MATCH: Focal Children and Staff



¹The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents ¹	96	Ages: Under 20 years	2
		21 - 30	51
Female Focal Parents	78	31 - 40	26
Male Focal Parents	18	41 - 50	13
		50+	4

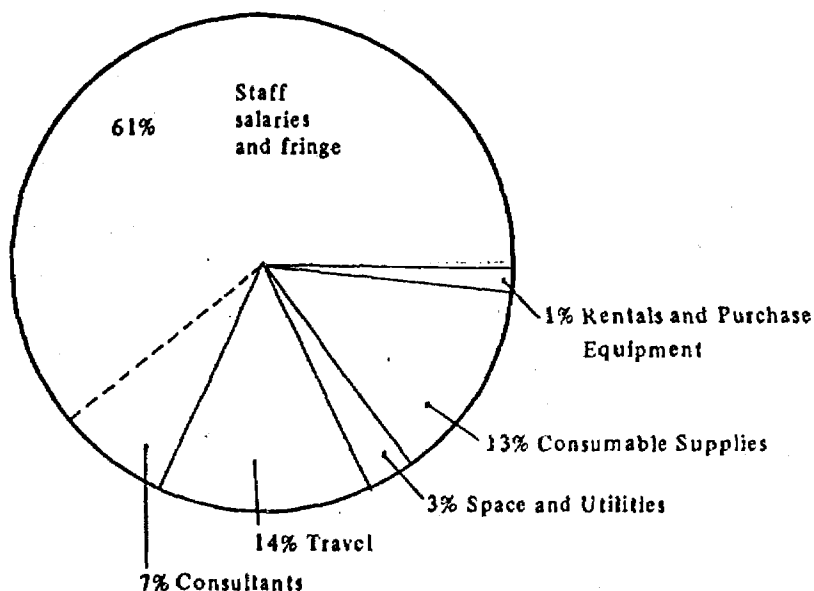
Annual Income of families: all but 5 non-farm families²

Under \$2,000	24% ¹	\$6,001 - \$8,000	1%
\$2,001 - \$4,000	45% ²	\$8,001 - \$10,000	-
\$4,001 - \$6,000	28% ³	\$10,001 - \$12,000	-

EMPLOYMENT OF FAMILIES: 80% Families in which one or more parents is employed

Regular Work: 70%
Part Time Work: 9%
Seasonal Work: 1%

EXPENDITURES³



Arkansas received more than their budgeted \$11,140 non-federal share in in-kind resources. The major portion of in-kind was non-personnel, mainly consumable supplies from local agencies. The program also received donated services included local volunteer program aides and psychological testing.

TOTAL BUDGET:	111,440	ACTUAL EXPENDITURES:	412,505
Federal Share:	100,000	Federal:	100,000
Non-Federal Share:	11,440	Non-Federal:	12,505

¹The focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

²Of five farm families, one had income under \$2000, two had incomes less than \$4,000 and two had incomes less than \$6000.

³Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN ARKANSAS

LaVerne Beaty's office is in the courthouse at Waldron, Arkansas, but the 10 families she visits are scattered all over Scott County so she spends most of her time on the road. LaVerne visits each family twice a week and may drive an hour and a half to reach the next family on her schedule. Many homes are isolated in the hills, accessible only by gravel roads that are snowed under in winter and washed out each spring. She also travels 60 miles to Dardanelle each week to consult with central Home Start about family needs and curriculum. Although she's reimbursed for mileage, Home Start can't pay for maintenance of her personal car, and the wear and tear is taking its toll. LaVerne doesn't seem to mind the hectic pace: she's got phenomenal energy. In her forties, she's lived in Scott County most of her life and knows the kinds of problems her families face. Her own family is growing up; her husband operates the farm and cuts timber to help make their living.

Today, LaVerne's visiting Orpha Harney, a woman in her fifties who cares for her granddaughter, Mary-Jo, as well as her own son, Rusty. The kids are 5 and 4 years old respectively. LaVerne unloads her portable record player and a bulging home visiting bag and sets up shop inside the small, frame house tucked into the woods. Her sessions are highly structured and provide a variety of activities. This is particularly important because Mary-Jo has a short attention span while Rusty is hard to interest.

First comes music, and LaVerne's capacious bag yields up a small rhythm band--marimbas, bells, a small drum, a kazoo--with an instrument for everyone. The group accompanies a record, sings, and then spends a few minutes dancing. For geography, LaVerne has a globe and paper dolls dressed in national costumes. As the dolls are pasted on the countries they represent, LaVerne talks about customs in different lands. The room is then darkened and LaVerne uses a flashlight to explain how the earth turns around and the sun rises and sets. Art offers a change of pace, with Mary-Jo and Rusty fingerpainting one side of the paper and folding it to make interesting double designs. Orpha becomes teacher.

as she reads a story about a boy who learns about many countries by visiting different stores in his town.

It's almost time for LaVerne to go when she makes a quick trip to her car and comes back with five tiny baby rabbits for the kids to look at and pet. Before she leaves, she reminds Mary-Jo and Rusty about brushing their teeth and talks with Orpha about which immunizations they need. Not one of her 90 minutes has been wasted, and another hour, later in the week, will reinforce today's work.

The Arkansas River Valley Action Council Inc. (ARVAC) Home Start program serves a five-county rural area of some 3,560 square miles with headquarters in Dardanelle, Arkansas and eight local Home Start offices, one for each Home Visitor. Visitors serve an average of 10 families and can rely on a number of back-up specialists for extra help. Friday staff meetings in Dardanelle give Visitors a chance to exchange ideas and solutions with two Home Start Supervisors and each other, and to talk with the Assistant Director and the Family Education Specialist about next week's lesson topics. There's a nurse, a nutritionist, and specialists in child development and family education on call from Head Start. The program has its own speech and language development specialist.

ARVAC Home Start is currently working to involve parents more directly as teachers in the home, and anticipates that the most pressing health and nutrition needs of families will soon have been addressed. Focus will then shift to psychological and social needs.

HOW HOME START BEGAN IN ARKANSAS

The Arkansas River Valley Action Council is a Community Action Program serving eight counties in western central Arkansas. ARVAC was established in the mid-sixties by Development Councils in these counties to coordinate and plan regional economic development, and has worked extensively with other agencies to help the disadvantaged. Head Start began in this region in 1965 with 12 full-year Centers and a summer program.

In the same year, ARVAC received an OEO grant for a Home Management Program in which homemaking aides went into local homes to teach mothers basic skills. JoAnn Braddy, Director of the Child Development Program for ARVAC (both Head Start and Home Start) was in charge. When funds were cut in 1967, this program became a community service organization working out of centers, and in the winter of '71-'72, the Child Development Program prepared a proposal for the Home Start Demonstration project with help from the Manpower, Community Development, Housing and Mental Health Divisions of the CAP agency.

Home Start thus had a solid base to build on in Arkansas. Funded in March, 1972, the program reaches families for whom no Head Start has been possible due to transportation problems and provides some of the services formerly offered to low-income families by homemakers. Families were recruited through information from public service aides, community development specialists, local welfare departments, public schools, and public health nurses. Staff came from a variety of programs operated by ARVAC, all of them with extensive backgrounds in availability of local services. Local Home Start offices are located in five counties: Pope County has three, Scott has two, Johnson, Franklin and Perry have one each.

ARVAC Home Start serves 82 families with 94 focal children, of whom 94% are white and 6% black. The program also reaches an additional 203 children up to age 18 who are brothers and sisters of focal children. Of the focal parents, 82% are women, 18% men. Some 29 families earn less than \$2,000 a year; 31 earn less than \$4,000; and 23 less than \$6,000. In 65 families, one or more parents are employed. Many participate in federal programs: 22 receive Food Stamps, while others have Medicaid, Aid to Families with Dependent Children, or work with Neighborhood Youth Corps and Upward Bound.

PROGRAM ORGANIZATION

JoAnn Braddy, Director of the ARVAC Development Program, oversees Home Start and Head Start both. Linda Reasoner is Assistant Director for

Home Start (and Social Services Coordinator for Head Start). Lesson plans are developed by Linda and Marie Mowery, Family Education Specialist, and tailored for individual families by Home Visitors. Home Start also has the services of Head Start Medical Specialist, Rose Schneider, Head Start's Nutritionist, Cora Halcrombe. Ann McElroy is the program's speech and language development specialist.

The program also has two Home Visitor Supervisors who divide their time between the Head Start Centers they run and Home Start. These women, Winona Vaughan and Ruby Sanders, often accompany Visitors on their rounds to help with special problems, observe, and offer suggestions about curriculum and materials. All eight Home Visitors came from community programs such as Head Start and CAP where they held parent organizing, social services and similar posts. Several Visitors were formerly Home Management Aides, and their experience in child development and home-based social work has made them excellent staff for Home Start. Of the total staff of 13 women, 12 are white and one is black.

Staff received extensive pre-service training in Home Start's goals and methods from central staff and from Head Start staff in preschool centers where they could work with children directly. In-service training has been continuous, and has included sessions with various outside personnel on art and music, psychological services, medical and dental services, and a toy workshop. All Home Visitors attend supplementary training classes in the community in speech, health and safety, parent education and community relations, sociology, and preschool education.

Each Home Visitor coordinates the parent meetings for her families. Groups meet monthly (or more often if parents wish), and Visitors and central staff may help with transportation and special activities for the children. Each group elects one representative to the Parent Policy Council which sets policy for both Head Start and Home Start. This council includes 16 Head Start and eight Home Start parents as well as eight community representatives. It meets quarterly. Some fathers participate in group activities and some are focal parents.

Unfortunately, most parent meetings are held during the day while fathers are at work, but staff are looking for ways to involve more men.

Parent meetings have dealt with speech and language techniques to use with children, child development and behavioral problems, home safety, nutrition and low-cost meal planning. In addition to monthly meetings, field trips are organized to local points of interest to alleviate the social isolation many mothers experience. The heavy rains that inundated the south central portion of the county in the spring of 1973 made meetings and trips difficult, but the schedule was soon resumed.

PROGRAM SERVICES

Education

Lesson plans developed by central Home Start staff, after input by Home Visitors and parents, are adapted by Visitors to meet agreed-upon family goals for both children and parents. Visitors have a wide variety of materials to work with -- pamphlets, books, art supplies, games, puzzles, toys, and even live animals for kids to play with. After an initial 90-minute session, the Visitor returns for an hour later in the week to reinforce her weekly topics. Progress is charted on a checklist which is part of the weekly lesson plan, and Visitors leave educational guides with parents to explain the week's objectives and suggest simple ways to work with children around the house. Recent home visit activities have centered around classification skills; concepts such as begin, in front of, below; eye-hand and eye-foot coordination; and fine and large motor skills. Visitors estimate that 44% of the time they spend in the home is devoted to education, both for parents and children.

The program's speech specialist researches topics to include in weekly lesson plans to help child language development, and language problems are screened with the Developmental Articulation Screening Test, the program's own articulation test, and the Peabody Language Kit. Home Visitors and central staff have also held workshops for parents on language development and communication with children.

Parent education objectives are included in weekly lesson plans as well. Parents are in need of basic education (nearly 40% of the focal parents have formal education of less than eight years), but transportation and scheduling are major problems, as is motivation. All visitors are certified tutors in the methods of home-based learning, and a few parents have enrolled in vocational school. Visitors are now surveying parents to determine how many will attend basic adult education, GED or vocational training classes. Non-Home Start parents will be drawn in to form classes large enough to fulfill state department of education requirements.

Health

Ruth Kendrick, a VISTA Nurse was assigned full-time to Home Start until March 1973. She visited all the program's families and established a health record for each focal child, making preliminary appointments for health care and asking Visitors to follow up to make sure services were received. Ruth spends about 12 hours a week, and the Home Visitors about 19% of their visiting time, on health needs.

While Ruth was still serving Home Start, Medical Specialist Rose Schneider was handling health care for all of Head Start. When Ruth's service as a VISTA volunteer ended, responsibility for both Head and Home Start health was assumed by Rose. She splits her time between both programs and says she has been able to maintain the same volume of health services to children by increasing the Home Visitors' responsibilities for health care in their respective counties.

Most referrals are made to county health departments for lab tests, hearing and vision screening, immunizations, family planning and medical treatment. Because there are no free clinics, the program uses private physicians and dentists for basic examinations. Waiting lists are long and the process is slow, but these specialists work on a reduced-fee basis--\$5 per physical, \$6 per dental examination. Home Start helps families who cannot pay for medical help: only 3% of its families have Medicaid. Most of the children have received examinations and follow-up care, and the program is now trying to secure immunizations for siblings and parents. Home Start uses materials from health

departments and the regional Office of Child Development training officer to make parents aware of preventive dental and health measures. Parent meetings have also covered many health-related topics.

Social/Psychological

Referrals for social and psychological services during the program's first year were limited in comparison with other kinds of referrals because Visitors were carefully building relationships of trust with their families. People can not be helped until they themselves identify a need: Visitors do not push their standards on families or initiate change unless the family is ready for it. Most referrals have been for parents--to the welfare department for Food Stamps, financial assistance and Social Security; to the Employment Security Division and ARVAC for jobs; to the public schools for Title I clothing; and to the Community Mental Health Center for counseling. Housing problems are a major item and include needs for new wells, indoor plumbing, safer heating, more room, and so on. The ARVAC Housing Division, which helps locate low-cost housing and provides housing loan information, has recently had a funding cutback and has had to curtail some activities. Home Visitors often help parents with job applications, and several mothers have gone to work. Information about jobs comes from newspapers and word-of-mouth.

Dr. Calvin Dunham, a sociologist at Arkansas Tech, often attends staff meetings and accompanies Visitors to help with special problems. The most pressing needs for children are for social experiences; monthly group meetings and field trips help to some degree. Parent meetings have helped inform parents about the developmental stages their children are going through, and the program is pleased that many parents are now able to make their own contacts with community agencies when they perceive needs.

Nutrition

"There is not a family I go to that doesn't have plenty to eat," says one Home Visitor. "The problem is that the children don't always eat

the right kinds of food." Home Visitors spend about 20% of their time in the home on nutrition, working with mothers and children on the basic four food groups with nursery rhymes, fingerplays, food charts and leaflets from Head Start's Nutritionist, Cora Halcrombe, and from local extension services. Because several Visitors were formerly Home Management Aides and one was a Head Start cook, they bring a great deal of experience to this component. Group meetings have included demonstrations of cooking techniques, canning and freezing information and meal planning advice. Visitors will soon be given canners to take from home to home, but gardens are late because the unprecedented spring rains washed them out and they had to be replanted. Cora Halcrombe has developed a questionnaire for Visitors to fill out to help her determine family nutrition needs. The information will be used to produce relevant topics for the weekly home visit lesson plans.

PROBLEM ISSUES

JoAnn Brady, Director of the Child Development Program, is generally pleased with the way Home Start is working in her area. With a year's experience now, the Home Visitors feel more confident in their roles and able to do more for their families. In addition, they can give more guidance to ARVAC about what they need and want, and through talks to civic and church groups, the program is getting more community support. Problem issues JoAnn identified were:

- The program has difficulty meeting all the needs of its families because some services are simply not available. Home Start would like to be able to provide classes for older siblings of focal children, but has not had funds to do so. Housing and home improvement are problems for many families and the program cannot do much in this area because families are ineligible for home improvement loans.
- From its first months of operation, Arkansas Home Start has required considerable planning and record keeping from all staff -- from Home Visitors to Director. In addition to federal record keeping requirements, each component area regularly identifies objectives for all program services: education, health, nutrition, parent involvement, and social

services. Objectives are planned for 3 and 6 month intervals. While Director JoAnn Braddy readily says that some programs suggest this may be overplanning, she believes that a multi-county program like Home Start requires solid organization and common objectives if it is to provide services to all its families in several counties.

- Transportation problems are simply accepted as on-going. Program staff recognize that as long as they intend to serve families isolated from towns and services, they are going to have to travel long distances, often on poor roads in bad weather, to reach their families.

VIEWS OF THE PROGRAM

Parents and staff of Arkansas Home Start talk about their program:

Staff: "We like to try to arrange group meetings for parents in the same county. They like to do it, but it's just hard because there's so much distance between everyone. We've gone to the circus, had health clinics and a workshop about health with slides, but we haven't been able to do much more." "We try to help parents learn why we're including ceratain kinds of learning in the lesson plans. We try to show mothers different ways of using the environment for learning." "If we had to choose, in selecting Home Visitors, between candidates who had experience with children and those who had experience with adults, we would choose those with adult education experience. We work with both children and adults, but the emphasis is on parents," "Overall, we try to get families together more and help parents become aware of community, churc' and other events going on around them."

Parents: "I set aside some time each day to spend only with my child: we both like it." "The Home Visitor really gets my kids interested in learning. She's been able to help my children learn to concentrate." "She's helped me make my family more nutritious meals by using recipes she brought." "I ask for opinions from the Home Visitor: I talk to her about everything." "I'm more aware now of what kinds of things the kids will be learning in school." "She's really taught me now to teach my children things."

PROJECT HOME START
San Diego, California

SUMMARY CASE STUDY
Fall 1973

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IN BRIEF

San Diego, California
Spring, 1973

PROGRAM: Urban

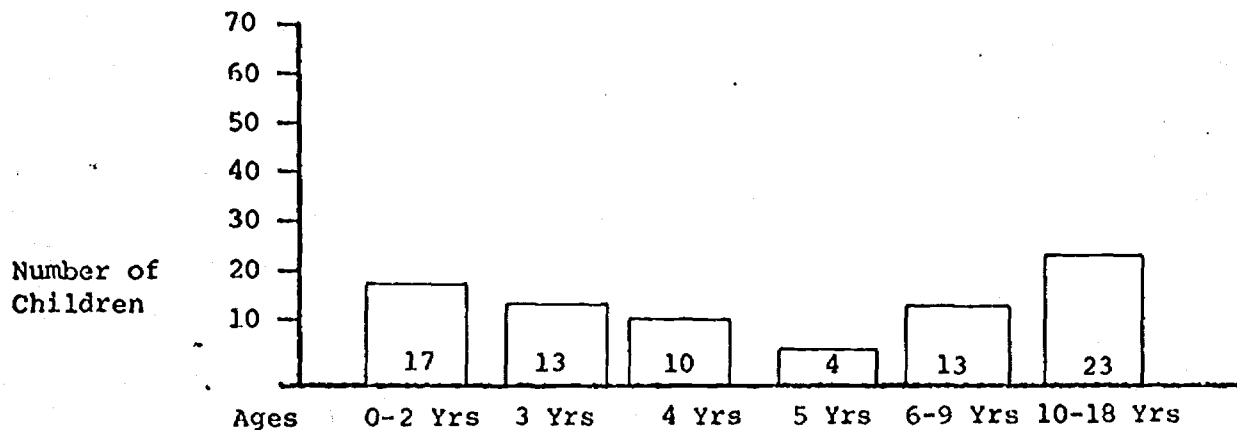
HOURS: Monday - Friday, 8:30-5:00

START UP: November 1972

SPONSOR: Grantee: Economic Opportunity Commission of San Diego County, Inc.

ENROLLMENT: 14 families

CHILDREN: 15 Focal Children²
80 total Children ages 0-18



STAFF

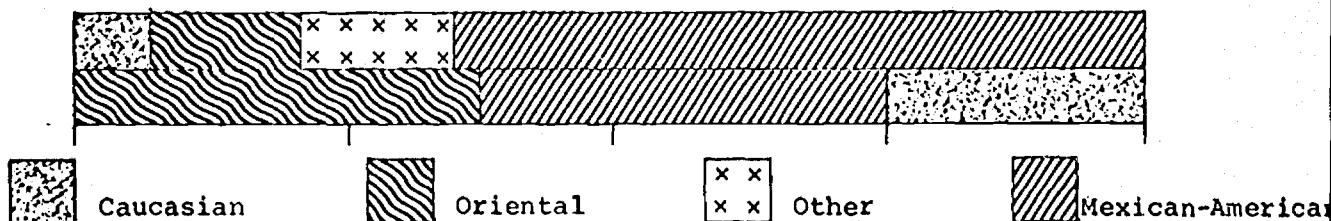
Paid Full Time 8
Paid Part Time 0

Donated Full Time
Donated Part Time

Ages: Under 20 0
21 - 30 4
31 - 40 2
41 - 50 2
50+ 0

Positions: Director, Resource Specialist, Home Visitors (6)

ETHNIC MATCH: Focal Children and Staff



¹ San Diego Home Start was funded in November 1972. Consequently information contained in this report represents the period of start-up from November 1972 to June 30, 1973 in San Diego.

² The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

³ The program had not yet recruited its full number of families at the time of this report.

FAMILIES

Total Focal Parents¹ 25

Female Focal Parents 14

Male Focal Parents 11

Ages: Under 20 years

21 - 30 7

31 - 40 13

41 - 50 5

50+ 0

Annual Income of families:

Under \$2,000

\$2,001 - \$4,000

\$4,001 - \$6,000

\$6,001 - \$8,000

\$8,001 - \$10,000

\$10,001 - \$12,000

EMPLOYMENT OF FAMILIES:

Families in which one or more
parents is employed

Regular Work:

Part Time Work:

Seasonal Work:

EXPENDITURES²

TOTAL BUDGET:

Federal Share:

Non-Federal Share:

ACTUAL EXPENDITURES:

Federal:

Non-Federal:

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Budget figures shown above are for the year 1973-74 while budget figures for other programs represent their first start up year 1972-73.

HOME START AND SAN DIEGO

San Diego is the oldest permanent European settlement in California and its architecture is heavily influenced by the Mexican and Spanish heritage remaining from the years these countries ruled the area. Today, San Diego is a port of entry, site of extensive U. S. Navy installations, and a mecca for tourists with an eye for beauty. Balboa Park, in the heart of the city, boasts an art gallery, museums, gardens, a zoo, lovely grounds, and exposition buildings dating back to the early 1900s. Because Tijuana, Mexico is a short distance to the south, and because the city is a port of entry to the United States, San Diego also has thriving ethnic communities of Chinese, Japanese, Filipino, Samoan, Guamanian, Chicano and black residents. Home Start in San Diego works with these communities as well as the Anglo sector. San Diego as a whole is rich in community services and resources of all kinds... more than 500 different agencies provide services to families in the area. Home Start plans to use as many as possible.

Just northwest of Balboa Park in the Hillcrest section of the city is the Head Start Workshop where Home Start's offices are located. A resource for Head Start staff, parents and community members, this building contains a senior citizens' swap shop, a darkroom, a book and toy lending library, arts and crafts, a pottery workshop and a carpentry shop. Plans are that parents can come and learn together while their children are cared for in a colorful, imaginative environment. Head Start parents are fortunate to have such a facility, and it will be available to Home Start parents as well.

For now, however, the building is primarily used by staff -- Director Allana Elovson; Mary Jo Rudolph, Resource Specialist; and the program's six Home Visitors. Home Start is just being organized in San Diego, and families are in the process of being recruited. No home visits have taken place yet, but staff are in training and this urban, multi-ethnic effort program is taking shape.

HOW HOME START BEGAN IN SAN DIEGO

San Diego Home Start is sponsored by the city's Economic Opportunity Commission and administered through its Head Start program. The proposal came about partly

as a result of discussion in Head Start's Policy Council about center-based vs. home-based programs.

When funds for a National Home Start program became available, Head Start staff worked together to draw up a proposal. Various sections were developed by Head Start's Chief Social Worker, Peter Luh; Nutritionist Pat McGovern; Mary Clark, Head Start Director; and Bill McGinnis, Early Childhood Development Coordinator, all of whom have helped organize the program and have remained available for consultation and staff training. Home Start's grant began in November of 1972.

Information on Home Start was distributed through various public and private agencies, including the welfare department, public schools, churches, and community organizations such as the Urban League, the Japanese-American Citizens League and the Mexican-American Advisory Council. Various ethnic organizations were contacted to help with recruitment, and informational leaflets were translated into Spanish, Japanese and Chinese. Posters were placed in local newspapers and on community bulletin boards.

Recruitment has been an extremely difficult process in San Diego, partly because of differing cultural attitudes towards seeking and accepting outside help. However, the program's income guidelines for eligibility, made work in the Chinese and Japanese communities especially difficult. Cultural attitudes of embarrassment associated with conditions of poverty inhibited some groups from disclosing any information about families in need of assistance. This is particularly true in communities with almost no previous history of outside assistance, where cultural training, in fact, militates against it. Each sector of the population requires a different kind of approach and operating style, so much so that Dr. Elovson felt at first as if she were running not one but eight different programs. Says Dr. Elovson, "One cannot, for instance, recruit families in the Japanese community in the same manner that one recruits families in the black community. It simply won't work. For starters, the institutional structures and relationships of these communities, not to mention the attitudes of the residents themselves, are different." Recruitment is proceeding, however, and the program now has fourteen families. Ten of these families are Mexican American; others are Oriental and Filipino.

PROGRAM ORGANIZATION

San Diego Home Start is very simply organized, with a Director, Dr. Allana Elovson; a Resource Specialist, Mary Jo Rudolph, a secretary, and six Home Visitors. Dr. Elovson is a psychologist whose specialization at Columbia University was education and development. She came to the program from the faculty of the University of California at San Diego Extension. She is responsible for day-to-day operation, training, and supervision of the project. Because Home Start is technically a part of the Head Start program in San Diego, Dr. Elovson is responsible to the Director of Head Start, Mary Clark.

Dr. Elovson relies heavily on Mary Jo Rudolph, whose background with the welfare department has given her a thorough familiarity with community resources. (The program has no full-time health nutrition or social/psychological staff, so this position is especially important.) Mary Jo has also been busy helping organize staff training sessions, parent involvement and volunteers.

The six Home Visitors reflect the populations they serve -- Filipino, Japanese, black, Chinese, white, Indian and Chicano -- and were recruited from these communities. The program is also considering hiring a Samoan to work with these residents. Staff training during this start-up phase has stressed the necessity of understanding children's development needs, and the problems Visitors are likely to face in meeting and recruiting families. "We want the Home Visitors to know their own limitations, to know what they can do best, and to know what should best be handled by referral. The more the Home Visitor understands this, the less likely is the possibility that this program will become a kind of crisis intervention effort," says Dr. Elovson.

The availability of service agencies in the San Diego area has had important implications for the focus of Home Visitor training and thus for the kinds of assistance the program will offer families. Training has emphasized Home Visitors as facilitators of social services. They have learned about the

many services available and how to help families use them. As in other Home Start areas, mass transit is poor in San Diego, so Home Visitors will still have to spend time helping families get to the services offered. According to Dr. Elovson, the very presence of community services and staff in the area means that Home Visitors will be able to spend more attention and time on critical aspects of child development such as cognitive development, nutrition and child safety.

Training has also stressed the role of the Visitor in helping parents see the many ways they can help the educational development of their children. Visitors are being trained to show mothers that they are already teaching their own children at home. A great deal of effort has gone into preparing for home visits. Staff have gone over procedures and strategies of an effective home visit. Head Start parents have been used in early training periods because of their familiarity with the kinds of issues likely to arise. Role playing among staff and in the home of a Head Start parent has helped familiarize visitors with the problems and circumstances they are likely to encounter.

Plans are to have each home visitor "specialize" as a resource person in some program area in which she might have some special background such as nutrition, health care, child development, community resources so that Home Visitors can help each other, with each responsible for gathering information and becoming an expert in one facet of operation such as community resources or child development. They can then train other Visitors in their area and bring new ideas to bear on various aspects of the program's operation. A teach-back technique helps the staff to strengthen the training process.

Parent participation is not yet a reality, since families are only now being recruited, but the staff expects that, because of the different ethnic groups, parent meetings will at first be held in separate groups, at least until parents are comfortable. In time, staff feel that individual parents, if not the groups themselves, will be able to meet around issues common to the program. Two Home Start parents will serve on the Head Start Policy Council, and Home Start will have its own Policy Council as well.

PROGRAM SERVICES

Education

Child development is the most difficult and most critical area for staff training, Dr. Elovson feels. Staff are learning about the various development stages of child growth with suitable educational activities for each stage. They are also learning about P.E.T. which stresses active listening and active communication. This emphasis is passed along to Visitors who will model P.E.T. principles with parents. Educational training is also designed to show parents the many ways they can work with their own children, with appropriate activities suggested depending on the resources available in the home.

Because of the variety of ethnic groups included in the San Diego program, the educational component will stress the basic needs of all children rather than specific styles of child rearing which might not be acceptable to particular ethnic communities. The training program is designed to be sufficiently flexible so that staff can turn their attention to any problem that a Home Visitor faces. "We want to wait and see what are the differing and specific educational needs Home Start families face before attempting to design appropriate strategies for meeting those needs. We expect there will be some real differences. All good parents have certain skills in common: these skills are what the training program stresses."

The bi-lingual (Spanish and English) monthly magazine "Heads-Up", published by the Junior League and Head Start, is available to all Home Start families and contains useful educational games children can play in a coloring-book format with number and letter recognition pictures. The Visitors will have access to a wide variety of toys for planning their home visits, and the substantial resources of the Head Start Workshop are at the disposal of Home Start staff.

Health and Nutrition

The health and safety component of staff training covers the general areas of home safety, fire prevention, and nutrition. Head Start staff is available for help in these areas. The goal is not to make Visitors expert

nutritionists, or safety specialists, but simply to give them enough background that they will recognize needs in order to make proper referrals. As training in these areas proceeds, Dr. Elovson hopes to expand the program's efforts to include budgeting and consumer issues and has contacted state agencies for informational pamphlets which Home Visitors can take to their families. In San Diego there are no food stamps, but a commodity foods program is available to disadvantaged families. The difficulty here is that some of their families are unfamiliar with best use of commodity foods. Visitors are being trained to be aware of basic nutritional needs and how various families' diet patterns could be supplemented. They call on the local Expanded Nutrition Education Program of the U. C. Extension of the U. S. Agriculture Department.

Training for health has included the need for accurate medical record-keeping for both the physical and dental examinations the program will be providing for its focal children, and for follow-up where necessary. Arrangements for these services will be made through Head Start and local public health personnel. Again, the object in staff training has been not to make experts of Visitors, but to show them enough that they'll know when help is needed and where it can be found. The program's Resources Specialist will be available to help with referrals.

Social/Psychological Services

Visitors are being trained in the availability of community services, how to make use of them, and problems likely to arise with referrals. Services covered include community and ethnic programs as well as city and county agencies. Staff are being taught the various intake procedures used by these services, and personnel from various agencies have come to staff meetings to discuss the role they might play in Home Start.

Although Dr. Elovson does not want Home Start to be involved in crisis intervention, staff training does try to address the many kinds of social and psychological problems Visitors are likely to run up against. For instance, the Legal Aid Program has spoken about its work in order that Visitors will be

able to make appropriate referrals. Staff has also been familiarized with debt collection procedures, insurance problems, small claims court, tenant-landlord problems among many others.

PROBLEM ISSUES

Because San Diego Home Start is only now beginning to gear-up for service, major operational problems have not yet surfaced. The greatest problem during start-up was recruitment of families from the various ethnic communities, each of which required a different style and different sensitivity. Recruiting Visitors from potential ethnic communities certainly reduced this problem, but it was still a difficult one, particularly where cultural mores militated against participation in programs felt to be "charity."

VIEWS OF THE PROGRAM

Staff of San Diego Home Start talk about their program:

"Our ideal Home Visitor would have worked with children and would be non-judgmental in attitude. She would be able to think, and would keep in mind how people are pushed by circumstances." "We want to say 'Here is information -- you choose what is most helpful to you.'" "Information -- available information -- is valuable. Most poor people don't participate in the usual information flow." "I would like Home Start to be able to start different groups in the program so that parents could organize to help themselves." "Home Visitors learn that they don't have to have all the answers, but that the rest of the staff will help them find out what they need to know." "I came to this country as a foreign bride and could not speak English, only Japanese. Many Japanese young girls here have the same problem: we hope to reach some of them in Home Start." "As Home Visitors we want first to pay careful attention to what people want from Home Start."

PROJECT HOME START

Wichita, Kansas

SUMMARY CASE STUDY

Fall 1973

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IN BRIEF

Wichita, Kansas
Spring, 1973

PROGRAM: Urban

HOURS: Monday through Friday
8a.m. - 5 p.m.

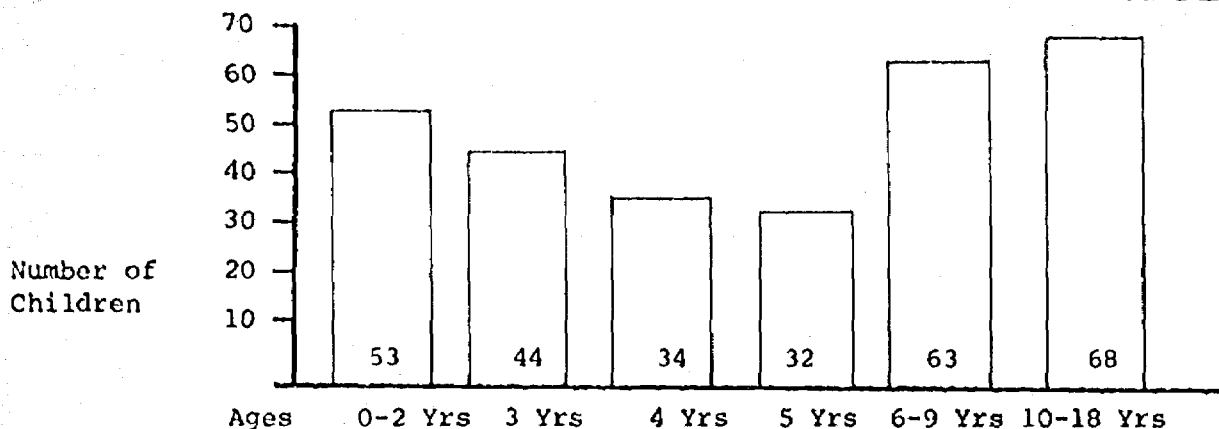
START UP: April 1972

SPONSOR: Wichita Area Community Action Program, Inc. (Grantee)

CHILDREN:

ENROLLMENT: 75 Families

104 Focal¹ children ages 3 - 5
294 Total children ages 0 - 18



STAFF

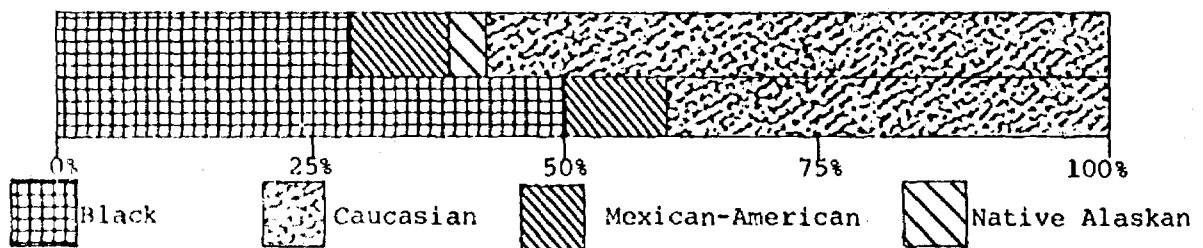
Paid Full Time 10
Paid Part Time -

Donated Full Time
Donated Part Time

Ages: Under 20 -
21 - 30 4
31 - 40 3
41 - 50 2
50+ 1

Positions: Director, Home Visitors (8), Secretary

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents ¹	89	Ages: Under 20 years	0
		21 - 30	52
Female Focal Parents	75	31 - 40	26
Male Focal Parents	14	41 - 50	10
		50+	1

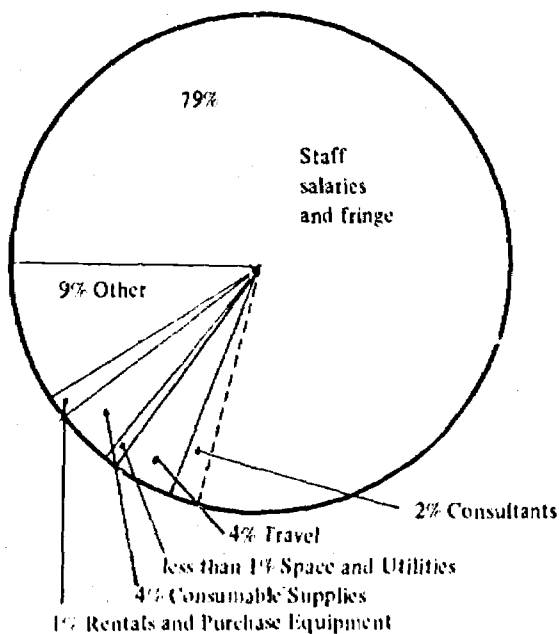
Annual Income of Families: All non-farm families

Under \$2,000	3%	\$6,001 - \$8,000	9%
\$2,001 - \$4,000	51%	\$8,001 - \$10,000	4%
\$4,001 - \$6,000	33%	\$10,001 - \$12,000	-

EMPLOYMENT OF FAMILIES: 49% Families in which one or more parents is employed

Regular Work: 48%
Part Time Work: -
Seasonal Work: 1%

EXPENDITURES²



Kansas reported \$4562 in non-federal funding. Most of this was non-personal donations such as clothing, toys and food from local sources.

TOTAL BUDGET:	110,350	ACTUAL EXPENDITURES:	79,868
Federal Share:	100,000	Federal:	75,306
Non-Federal Share:	10,350	Non-Federal:	4,562

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN WICHITA

Candy Griffith pulls into the parking lot of the small duplex she helped Martha Robinson find for herself, her nephew and nieces. Martha looks after three children, one of whom, four-year-old Teddy, is in the Home Start program. A frail boy, Teddy has just seen the doctor about his asthma, and Candy asks about his cough and his breathing. While Candy's preparing the lesson, Martha talks about a new problem that's cropped up. The children have birth certificates with no names on them, and this must be cleared up. What to do? Candy suggests writing their mother for birth records, and if that fails, writing to the county courthouse in the state where they were born.

Today's topic has been developed by Candy in response to parent requests. Children are learning about the American flag through a variety of activities, and today Teddy is going to finish making and coloring his own flag. Candy initiates the task and then asks Martha to take over, supporting and praising both participants and redirecting Teddy to his aunt when he comes to her for help. The next project is a calendar, complete with pictures and laboriously drawn numbers. Sizes, shapes, and colors in the pictures are matched, and the three move on to language development rhymes. When Teddy's sisters appear after school, Candy gives them things to work with in the kitchen so Martha and Teddy can proceed undistracted.

Candy encourages the parents she works with to take the front seat in teaching. Tall, black, and in her mid-thirties, she has a quiet, patient style all her own. She takes a passive role in parent meetings for her group, but she helped organize them originally. The chairman of the program's Policy Council is in Candy's group, which includes 10 families in Wichita suburbs. The chairman began to get involved in local politics when she became interested in parks for children. She invited a Head Start staff member to speak to her group about parent rights, community services and advocacy roles Home Start parents might want to understand better, and initiated the idea of "drown-proofing" the program's children through a local Y water safety program.

Candy holds weekly group sessions for her children to give them sharing opportunities. A former Head Start aide, she's familiar with parent problems and needs, and her non-directive, low-key approach has helped her be effective. Her car is filled with boxes of clothing: when one set of children outgrows their clothes, she picks them up and makes them available to other families. She works closely with another Home Visitor who is especially good at turning "junk" into educational materials.

Jackie Lugrand, another of the program's eight Home Visitors, is a source of creative ideas for Home Visitors as well as for her families. She used found materials to put together an activity kit which is used by other Wichita Home Visitors, and which was exhibited at a regional conference and copied by many child-care programs in the region.

In a recent self-evaluation of her work as a Home Visitor, Jackie has written, "I find myself in the role as a Home Visitor a chauffeur, cook, nurse, counselor, formula mixer, bathroom attendant, teacher, rash identifier, competent diaper changer, interviewer, friend, mother, grandmother, sounding board, and referee between rival siblings... There are many, many steps for me as a Home Visitor to climb. Some days I feel as if I take three steps forwards and five or six back; but it is a rewarding learning experience... Each time I visit a family and they have new creative ideas for me to see or explore and I watch them formulate new concepts or find new answers to problems and new questions for which to seek answers, I am ready to climb upward all over again and ready for a new day."

HOW HOME START BEGAN IN WICHITA

Wichita Home Start is an adjunct of Head Start, providing services to families for whom no Head Start has been possible due to limited funding. Head Start began in Wichita with three summer programs in 1965 operated by the Board of Education. To continue these services year-round, two volunteer programs were started, one to serve 175 preschoolers in a center setting, the other to provide assistance to the families of those children. In the Spring of 1970, this program was turned over to the Neighborhood CAP Center operated by Wichita Area Community Action Program, Inc.---WACAPI.

The low level of Head Start funding available meant that only a small percentage of the eligible children in Wichita could be served. A Head Start proposal for a half-day at home, half-day at center program was turned down, but shortly thereafter, WACAPI Head Start was invited to submit a proposal for the Office of Child Development's new Home Start Demonstration program. After attending the Chicago Home Start conference, the Head Start Social Service Coordinator and three Head Start parents sat down and revised their proposal to adhere more closely to Home Start guidelines. The proposal was funded in March 1972.

The Head Start Personnel Committee, consisting of five parents, interviewed and hired Betty Besser as the program's Director. They also met and determined what qualities they wanted in their Home Visitors, and proceeded to interview candidates, eight of whom (of an original number of more than 100) were selected. The committee also selected Home Start's secretary. Home Visitors recruited families in a door-to-door effort, and the program got underway in April 1972.

Today, WACAPI Home Start serves 75 families with 104 focal children and its original staff of 10. Most families participating in Home Start have incomes between \$2,000 and \$4,000 annually. Some 84% of focal parents are women, and 51% of the families enrolled are receiving Aid to Families with Dependent Children. Of the 104 focal children, 59% are Anglo, 29% are black, 9% are Chicano, 3% Indian, and 1% Oriental.

At the moment, the future of Wichita's Home Start program is uncertain. In line with the dismantling of the Office of Economic Opportunity and the Community Action Program, WACAPI lost its funding in April and was performing only administrative functions for both Head Start and Home Start until a new grantee agency could be found. Staff were asked to sign termination notices for WACAPI, with no guarantee that they would be rehired. Staff morale was extremely low, although Home Visitors continued to plan field trips, provide services to families, and make arrangements for the first Home Start graduation for families leaving the program in June.

PROGRAM ORGANIZATION

Wichita's Home Start staff is straightforward, with a Director, a secretary, and eight Home Visitors. Betty Besser, the Director, has a background in social work and reports to Head Start's Director. All Home Start personnel are women, 4 of them Anglo, 5 black, and 1 Chicano. Several Home Visitors are former Head Start parents, teachers and administrators. Staff meetings are held weekly, but Home Visitors tend to work independently of each other in assessing and providing for family needs. Each Visitor handles an average of 10 families.

Pre-service training consisted of two weeks of lectures, discussions and field visits covering child development, interviewing techniques, nutrition and health, parent/child interaction, early childhood education and special problems. These sessions were jointly undertaken with Head Start, as are many in-service training activities. Staff have received in-service training in psychological and social services focusing on self-concept and self-discipline; first aid and health; alcoholism, social services and parent involvement. Some staff have participated in a seminar on counseling and a weekend of sensitivity training.

In addition, WACAPI allowed four hours/week for staff to attend supplementary training classes at Wichita State University in sociology/psychology, administration of justice, early childhood development, elementary education and music.

Eight parent groups, one for each Visitor, elect officers and representatives (a regular and an alternate) for the Home Start Policy Committee which meets once a month. Parent groups meet monthly or more often to discuss Policy Committee topics and other parent concerns. Some groups are very active politically in efforts to improve their communities, while others are more social in nature and have planned parties, made toys, and organized sales to help the program. Some fathers participate regularly, and the program is planning additional activities to encourage more involvement.

Originally, families were recruited in specific "clusters" in neighborhoods and from the city's social services. Each Visitor served families in a particular area. However, family turnover was significant during the program's early stages

(27%), and recruitment of additional families has meant a dilution of this concept. Some Visitors now have families scattered throughout the region, and lack of public transportation has hindered attendance at some group endeavors. Staff are reluctant to change their caseloads to help the situation since a delicate relationship of trust has been built over time. One solution has been for Visitors to spend several hours transporting parents to a central home. Parents invited officials of the local bus company to their meetings to explain the city's transportation system and took rides on buses to familiarize themselves with the system.

Despite transportation problems, parent involvement in this program is high. Eight parents recently participated in a day-care conference in Kansas City, and one was elected to the regional board of the Day Care and Child Development Conference. As one staff member said of her group's meeting, "One of the important things I've learned is that once a group is organized, parents can begin to see that they really do have some power."

SERVICES

Education

Home Visitors spend approximately 53% of their time with families on educational topics, and additional time each week is spent planning activities. Visitors work independently and plan individually for each child and family. While there is no set curriculum, Visitors and parents discuss together goals for both child and family, and then work toward those goals. Most educational materials are made by staff members--cloth books, cut-out paper shapes and pictures, and so on. Emphasis is placed on materials already in the home. Says one Visitor, "It wouldn't be fair to bring (commercial) materials into the home since the mother would want to buy additional toys which she couldn't afford." Because of red tape, Visitors often purchase the supplies they need from their own funds.

Hearing evaluations are complete for three-quarters of the program's focal children, and all children with speech problems have been evaluated by the Head Start Speech Therapist. Those requiring speech therapy are being assisted by the Speech Department of Wichita State University and the Institute of Logopedics. Other language problems have been referred to the Crossroads Center, and the Diagnostic Center of the city's public schools handles special educational

problems. In response to Home Visitor requests for more early childhood education information, Jan Yokum of the Wichita Day Care Association will be offering a 5-week course on this topic as soon as the program finds a new grantee and is able to plan for the future.

For parents, 6 referrals have been made for adult basic education. Visitors take GED books to parents and are helping adults upgrade their basic reading skills. Adult education (and employment) opportunities are hampered, again, by transportation problems and scheduling which requires that mothers find and pay babysitters.

Health

Health needs occupy about 15% of the time Visitors spend in homes. For referrals, emphasis is placed on informing parents about community resources and encouraging them to make arrangements themselves. Since transportation is a problem, Visitors often drive families to appointments. Private physicians in the area will take only a limited number of Medicaid families (37 Home Start families are in this program), and no dentists accept Medicaid patients. The program is using the local health department for physical examinations of all focal children as well as clinics and private physicians. While the program can pay medical bills for families not on Medicaid, the problem has been in finding services. Free medical and dental care is available in the Model Cities area, but is almost non-existent in outlying communities. The well-baby clinics and health units which travel to various communities cannot provide illness or emergency care.

Most referrals during the recent months have been to the Model Cities Health Stations and the Health Department, neither of which does physical examinations. Referrals also were made to the Mental Health Clinic, the Family Planning Clinic, two private physicians, the Wesley Hospital, St. Joseph's Family Practice and well-baby clinics of the Presbyterian Church. Most of the program's focal children have been "drown-proofed" through a water safety program at a local YMCA.

Psychological and Social

Betty Besser stresses that the Home Visitor's role is to help families help themselves: "You're not really helping them at all if you solve all their problems for them. Families become too dependent on Home Start that way. We should help them become more independent and better able to use our local resources."

Some 19% of the time spent in the home is devoted to psychological and social needs: these services usually consist of identifying needs and discussing family problems. Psychological and social referrals constituted about half of all referrals made during the first six months of the program; of 26 referrals, 24 families received services. Staff have been working with representatives of various community agencies to make them more aware of and sensitive to the needs of Home Start families. Referrals can be made to the Welfare Department for a variety of services, including protection for abused children; Alanon for alcoholism problems; Legal Aid; Catholic Social Services; Lutheran Social Services; the Presbyterian Church for counseling, financial assistance and clothing; the Family Consultation Service; and WACAPI's Operation Mainstream for employment. Staff find it difficult to help families locate better housing because most low-income housing projects are on the outskirts of the city where there is no public transit. Without cars, families are marooned, cut off from jobs and services.

Parents often discuss psychological and social problems at group meetings and have given each other invaluable support. The program is planning to help its staff in this area by using a private psychologist as a trainer as soon as the program's present uncertainty is cleared up.

Nutrition

This component is the lowest-priority area for both children and parents, and has consequently not occupied major Home Visitor time. In addition, Visitors generally find it difficult to tell mothers they don't know how to feed their families properly, especially when the family doesn't have the money to purchase an adequate diet. Home Visitors do, however, share recipes and literature on nutrition, take families on shopping trips and give cooking demonstrations in the home. Mothers also discuss nutrition in group meetings and attended nutrition lecture. The program will be using the Kansas State Extension Ser-

vice and local universities for additional nutrition information and assistance, and had contacted the U.S. Department of Agriculture about helping parents learn how to use surplus foods.

PROBLEM ISSUES

Wichita Home Start's major problem is the paralyzing uncertainty of its future, since its grantee agency, WACAPI, is going out of business and staff have had to sign termination notices with no assurance that they will be rehired by the agency which takes over the program. This situation has made future planning extremely difficult and contributed to the already low staff morale. Other issues:

- Staff do not appear to work well together: each Home Visitor goes her own way, with little general sharing of experiences and solutions. Staff have very different backgrounds and outlooks, and resentment is close to the surface. Home Visitors also express the need for more guidance from the Director and feel insecure about their work.
- CAP supervision has been on-again, off again. According to the Director, the program has received adequate supervision for only two months of the entire program year. Supervisors have been changed often, and this has contributed to conflicting CAP directives. Hopefully, a new grantee agency will establish a better relationship.
- The program has had difficulty finding in-kind donations, and despite efforts to get out the word about Home Start, is not satisfied with the level of local cooperation.

VIEWS OF THE PROGRAM

Parents and staff of Wichita Home Start talk about their program:

Staff: "Home Visitors must be people who believe that people do not choose to be poor; who believe that there are other ways of doing things; who are imaginative; who are daring." "It is important that we listen to what parents want and help them see how they can make arrangements themselves to get what they want." "We try to arrange lots of things for children to do on field trips because public transportation in Wichita is so poor and they don't get out to see lots of things if their families don't have cars." "It's important to accept families right where they are...and to accept the fact that

change doesn't happen overnight." "I enjoy working in the Home Start Program because it is flexible and I can work on each of my 10 families' goals individually at their own rate."

Parents:

"The Home Visitor has more patience with the kids than I do: she helps me work with them." "I like it because she teaches the children the basic things like colors, numbers and shapes that they need to know." "The Home Visitor uses everyday things as learning experiences." "I don't feel so alone now-- I can always call the Home Visitor or Home Start." "Since Home Start, I have more patience. We were ignorant about kids. I wish Home Start had been around 20 years ago." "Now I try to listen to the kids more and really try to explain things to them." "The Home Visitor helped me out at a difficult time with help in budgeting and handling money."

PROJECT HOME START
Gloucester, Massachusetts

SUMMARY CASE STUDY
Fall 1973

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IN BRIEF

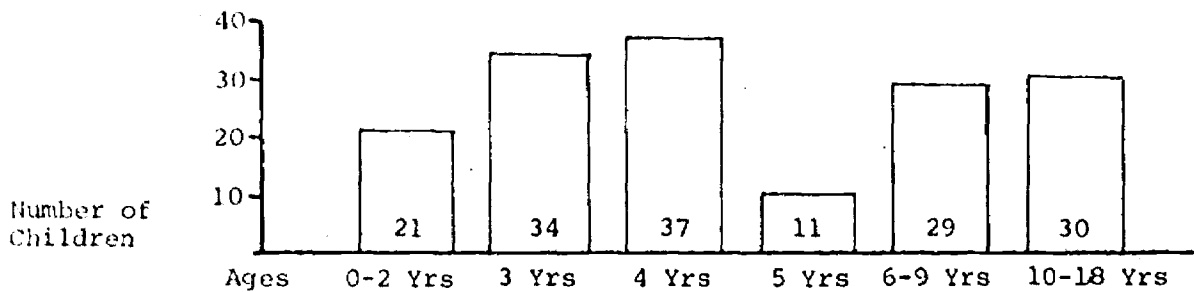
Gloucester, Massachusetts
Spring 1973

PROGRAM: Urban/Rural Five townships HOURS: Monday through Friday
9:00 AM - 5:30 PM
START UP: March 1972 On Call evenings and weekends
SPONSOR: Grantee--ACTION, INC. weekends

ENROLLMENT: 57 Families

CHILDREN

70 Focal¹ children ages 3 - 5
162 Total Children ages 0 - 18

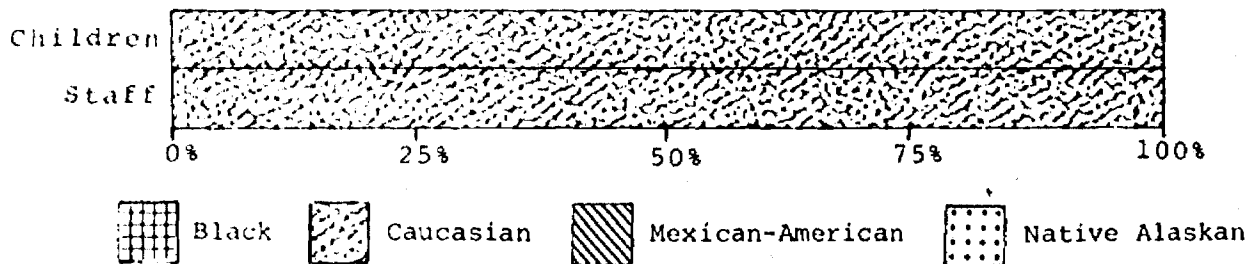


STAFF

Paid Full Time	10	Ages:	Under 20	1
Paid Part Time	0		21 - 30	3
			31 - 40	5
Donated Full Time	0		41 - 50	1
Donated Part Time	0		50+	0

Positions: Director, Home Visitors Coordinator, Family Services Administrator, Home Visitors (6), Secretary

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

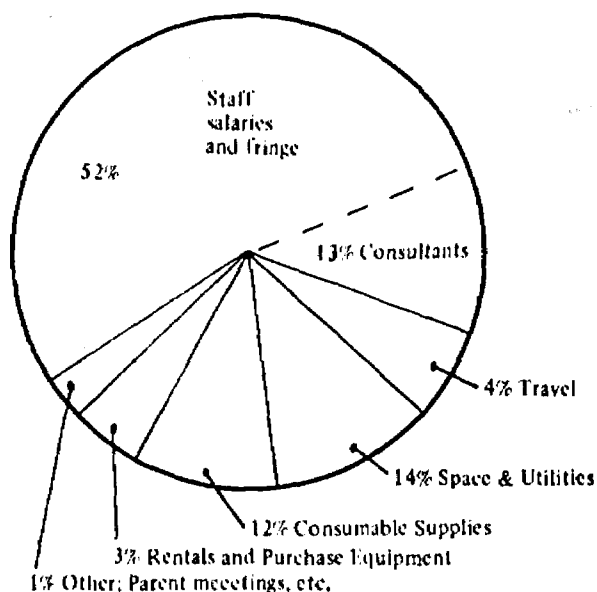
Total Focal Parents ¹	57	Ages:	Under 20 Years	0
			21 - 30	28
Female Focal Parents	100%		31 - 40	27
Male Focal Parents	0%		41 - 50	2
			50+	0

Under \$2000	12%	\$6001 - \$8000	2%
\$2001 - \$4000	74%	\$8001 - \$10000	0%
\$4001 - \$6000	12%	\$10001 - \$12000	0%

EMPLOYMENT OF FAMILIES: 51% Families in which one or more parents is employed

Regular Work: 39%
Part Time Work: 2%
Seasonal Work: 11%

EXPENDITURES²



Program collected more than \$11,332 in-kind funding for the program, much of it donated goods from local sources such as toys, books and used furniture for the Materials Workshop. Donated services were a significant contribution from local sources and included time by psychiatrists and social workers in staff training; as well as home visits by state agricultural nutrition aides.

TOTAL BUDGET:	\$113,326	ACTUAL EXPENDITURES:	\$96,832
Federal Share:	\$101,933	Federal	\$83,506
Non-Federal Share:	\$11,332	Non-Federal	\$13,326

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN GLOUCESTER

Home Visitor Fran Callahan's Volkswagen swings into a parking slot at the East Gloucester beach and out clamber Fran, five-year-old Paul Daniels¹ and Paul's mother, Donna. Fran's bulky home visiting bag stays in the car, but she brings along a small book for identifying seashore plants and animals and a plastic bag for the small treasures Paul likes to collect. Today's a treat, since Paul has learned his colors, numbers and letters for kindergarten next fall, but it's a treat with a purpose. Fran wants to try to determine whether Paul's hesitancy about physical exercise is uncertainty and lack of confidence, or whether there's a developmental problem that needs assessing. Fran and Donna have been discussing inexpensive exercise equipment Donna can get for her home -- a chin-up bar, large blocks -- when they come across a large square drawn in the sand.

"Paul," calls Fran, "come look at this square. Can you walk around it, putting one foot right in front of the other?" The exercise is one of many suggested by Gloucester Home Start's Coordinator of Home Visitors at the last weekly meeting. The Coordinator also ran through normal developmental stages and abilities to help Fran appraise Paul's progress. So far, so good. Paul steps the square easily and moves on toward the water.

"I think I can take that other job, the one at the nursing home," Donna is saying. "Between that and what I make waitressing, I think we can get off welfare." Fran is encouraging, but reminds her that holding down two jobs can be very demanding, especially since Donna is separated from her husband and has almost sole responsibility for Paul. The two women settle themselves in the sand and talk, keeping an eye on Paul, who prefers

¹ Fran Callahan is a Gloucester Home Visitor; the names of families mentioned in this case study are not their real names.

the sun-warmed beach to the chilly Atlantic. Donna remembers the minor speech problem Paul had when he began Home Start a year ago: it's gone away, and Fran's weekly visits, with exercises, songs, games, books and art projects for Donna and Paul to work on have given Donna confidence about Paul's growth. Just having Fran to talk to has helped, too. Paul had never seen his father until he returned from Vietnam and she was worried about how both of them would react to meeting. They get along fine, really well, she says. Home Start's been good for her, and she would like to work for the program when Paul goes to kindergarten.

After several exercises and games with Paul, it's time to head home. Fran has tentatively determined that Paul's timidity is due to a lack of confidence and she's already planning strategies to help him. Other staff will have suggestions too. Gloucester's Home Visitors see their families once each week for a one- to two-hour session of numbers and letter games, stories, art work, or trips to the beach, local farms, and so on. Brothers, sisters and friends of the program's focal child may be part of the session with the mother. In each home, children have different needs and parents different ways of relating with their children. The program's Director and Coordinator of Home Visitors agree that home visits should be geared to each child's age and developmental level rather than to a defined "curriculum" for all 3-, 4- and 5-year-olds. Not everyone agrees about what children should be learning: in some instances parents have stressed that they want their child to learn colors, numbers, writing and other pre-school readiness skills for which he or she may not be developmentally ready. Gloucester's administrators feel Home Visitors should be able to help parents understand what to expect from their children at different ages, and help them plan home activities that reflect what mother and child like to do. But the job is more than education for preschoolers. Fran's week is typical for a Home Visitor. She has looked into and explained one mother's welfare rights to her, determining that she could keep the money from her part-time job. After lengthy conversations with another mother about a strained relationship between the woman and an older child, she has located counseling for the child. Fran has also been busy reminding

parents of doctor and dental appointments the program pays for if parents don't qualify for Medicaid, and she provides transportation where necessary to make sure treatment is received.

Staff training currently has two emphases. One is to provide Home Visitors with child development information which, along with their own experiences in teaching, will be available to parents for a better understanding of the growth of their children. The other is to help Home Visitors understand how to encourage communication with families and listen for problems that are identified; how and when to help by informal or referral counseling. Staff meet weekly with a community psychiatric social worker to learn specific counseling skills and do individual family problem-solving.

HOW IT BEGAN IN GLOUCESTER

Cape Ann's rocky coastline juts into the Atlantic northeast of Boston, Massachusetts, providing snug harbors for the local fishing industry and weatherbeaten, picturesque communities to delight seacoast tourists. Gloucester, the cape's largest community, is also headquarters for Gloucester Home Start, which services the surrounding towns of Ipswich, Rockport, Manchester, Essex, and Gloucester itself. The program is located in a storefront near the harbor: downstairs there are displays, toys, books and desks for the program's three administrators and upstairs are the Home Visitors' desks and a bright, airy Materials Workshop. The atmosphere at Gloucester Home Start is one of purposeful haste. Although Cape Ann has an Interagency Council coordinating almost 30 educational, social, health, and psychological facilities, community needs seem to be leapfrogging available services, and several programs are now frozen for lack of funds. There is a single hospital in the area, few medical and dental clinics, few facilities to care for children, and no public kindergarten.

Gloucester Home Start is one of four child development programs administered by ACTION, Inc., the local Community Action Program. Home visiting actually began in 1971 when Rose Margosian, Gloucester's Head Start

Director, helped develop a pilot program for eight Head Start families with young children, using Title I funds granted through the public schools. The program was a success with both parents and children, and Rose was invited to help the Office of Child Development plan its Home Start Demonstration program. Her own proposal for federal funding of Gloucester Home Start was approved in January of 1972. Startup came in March of that year with 43 children, six Home Visitors and an administrative staff of four.

Today, Gloucester Home Start serves 70 focal children (and reaches 162 children in all), still with a staff of 10. All of the program's 57 focal families are white, a mixture of Greek, Italian, Anglo-Saxon, Portugese and other ethnic groups. All focal parents are mothers, 56% of whom rely on Aid for Dependent Children. Nearly half the program's families receive surplus foods. Annual incomes for 74% of these families are between \$2000 and \$4000.

PROGRAM ORGANIZATION

Gloucester Home Start's staff of 10 is simply organized and informally run. Three administrative positions include the Director, a Coordinator of Home Visitors and a Family Services Coordinator who arranges for referrals and outside services. Six Home Visitors and a secretary complete the staff. During the program's first year, each Home Visitor was responsible for an average of 11 families.

"Responsible" means informally assessing the developmental level of children as well as family needs in planning home visit activities; it means they must determine the families need for and willingness to seek health, nutrition, or social services such as housing, legal aid, welfare or counseling. Most referrals and arrangements for services are handled directly by Home Visitors. In assessing needs and delivering services, they have the assistance of the Coordinator who directly supervises them and helps plan for individual families. The program has no full-time specialists for health or psychological services but shares with other child development projects the services of a part-time psychiatric social worker and her assistant for staff training and family counseling.

Home Start's Director in Gloucester also serves as the Chairwoman of the Child Development Council which administers ACTION, Inc.'s four child development programs: Home Start, Head Start, Image (school-age counseling) and a small family day care project. Although Home Start must conform to ACTION agency regulations and hiring must be approved by ACTION's Personnel Committee, the program is relatively independent in its operations. As with many CAP agencies, continued OEO funding is doubtful, but ACTION continues to function despite this uncertainty. Relations between Home Start and Head Start are informal and cooperative, with the two programs sharing materials, toys, and some training sessions. Head Start parents were initially suspicious that Home Start might replace the program they'd worked so hard to build, particularly when Head Start Director Rose Margosian left her position to direct Home Start. The suspicion was short-lived, however, and both programs are well thought of in Gloucester.

Staff training, aside from an initial intensive three-week course, has been a continuous process at Gloucester Home Start. Each Friday is set aside for curriculum planning, materials development, individual and group meetings, and specific training sessions. Some Home Visitors have demonstrated lessons they have "Tried and Tested" with success while others have demonstrated sections from the Ypsilanti Perry Pre-School curriculum. Guest speakers from the Massachusetts Department of Mental Health, the Welfare Department, Work Incentive and Medicaid have been scheduled. Two Home Visitors are attending night classes, one for GED and the other for college credit, while several Home Visitors and the program's secretary have regularly attended evening sessions in materials development at the Rockport Rain-Shine School.

Parents are involved in Home Start not only as educators of their children but also as program participants and decision-makers. Center meetings have begun on a somewhat irregular basis, with the families of at least two Home Visitors meeting in a central location to study nutrition, participate in exercise and creative movement classes and discuss problems such as welfare rights. Gloucester's Parent Policy Council is only now getting

underway. During the spring of 1973 the Council, composed of 2 parents elected from each Home Visitor's roster, met once a month and drafted its by-laws and selected community representatives to serve with parent members.

SERVICES

Education

Gloucester Home Start's headquarters maintains a toy-lending library to furnish Home Visitors with toys, books, games and other materials (including hamsters, guinea pigs and mice) to be used in their home visits. The center's spacious Materials Workshop modeled after the Advisory for Open Education workshop) is used by groups of Home Visitors and parents to devise low-cost curriculum materials suitable for the home learning format.

Educational activities command between 50 and 75% of the time Home Visitors spend in each home, and additional planning and training time each week is devoted to developing lessons, materials and activities for home visits. Both the Director and the Home Visitors are currently writing curriculums for development levels based on their home visiting experiences.

Although each Home Visitor decides which activities and materials are appropriate for the children she visits, Visitors exchange ideas and successes, and each has a special area of expertise: one, a former Montessori teacher, helps define activities for particular age groups; another knows how to use the community for exciting field trips; a third can suggest useful craft projects.

Home Visitors also provide education opportunities to parents and other family members. One Visitor works informally with parents who want to learn English; another succeeded in having a child moved from a remedial to a regular classroom where she's doing well. Four

mothers are working on their high-school diploma, another has obtained a tuition-paid course for her Associate of Arts degree, and one child received a Montessori scholarship as a result of staff work while her sister got a scholarship for private high school. Visitors have also found full- or part-time jobs for family members and are scouting for job training opportunities.

Health

Gloucester's six Home Visitors spend a short time each visit discussing with their families general health problems, the need for warm clothing in winter, the advisability of flu shots, the relationship of nutrition to health, and so on. Home Visitors also try to motivate families to obtain needed health treatment and may themselves make appointments and provide transportation for such services. Some 75% of the program's families are eligible for and have enrolled in Medicaid: those who do not qualify can get financial help from the program for health needs. The Family Services Administrator for Gloucester Home Start may be called in to help where referrals, appointments, transportation and follow-up are required. While many focal children need physical and dental examinations, the process of providing these services has been slow due to the area's lack of clinics and public health facilities.

Social/Psychological Needs

As with other program components, Home Visitors generally provide most social/psychological services themselves. This area includes job opportunities, housing, social groups, public assistance and psychological counseling. Problems and solutions are shared among program staff and when necessary, the Family Services Administrator is called in to help with referrals.

When isolated children need companionship and sharing opportunities, Home Visitors combine visits with two or more families, or arrange group activities at a central location. Center meetings also help focal mothers expand their social horizons and gain support in an often lonely world. Families have been referred to the Cape Ann Children and Family

Center for counseling; to ACTION, Inc. for employment, legal aid, and Neighborhood Youth Corps work. Although day care is not readily available in Gloucester, three families have obtained services through Homestart referrals. Housing has been a difficult problem for Home Visitors to solve, since low-cost homes in the Cape Ann area are scarce.

Nutrition

Home Visitors refer needy families to the Surplus Commodity Food Office through ACTION, Inc. and are helping families learn how to use these foods through center demonstrations and discussions planned and directed by a Nutritional Aide from the Essex County Agricultural Extension Agency based in Gloucester. Home Visitors have also distributed the "Commodity Cookbook," a local Department of Agriculture publication containing recipes using surplus food.

Problem Areas

Most of Gloucester's first-year program changes were growth changes. Staff turnover was very low; the original Home Visitor Coordinator moved to another job within the CAP agency and was replaced, and the secretary became a Home Visitor. During the start-up year, program staff dealt with the following typical problems:

- Lack of institutional and public health services made prompt referrals difficult for medical and dental needs. The program staff helped enroll many families in Medicaid and is still investigating alternative means of providing examinations and treatment to families.
- Pressure from some parents for their children to learn preschool skills like writing, and number and color recognition led to the formation of parent groups to discuss child development stages with program staff. A series of parent seminars on child development and learning are planned for the fall, to be taught by the Program Director.
- Absence of a well-defined guide to home-based preschool curriculum presented both challenges and problems to Home Visitors. The Director and Coordinator are developing an activities guide which identifies exercises and games for learning skills at appropriate ages. The guide is to be developed in conjunction with parent education seminars on child development.

Views of the Program

Parents and Home Start staff in Gloucester talk about their program:

Home Visitors: "The training we've had with the psychiatric social worker in learning to listen to families and how to deal with family relationships has been most helpful to me in working with families." "Part of our planning comes from mothers: what one mother suggests as an activity or a way of doing something, we Home visitors share with each other and with our own families." "I always take two things with me into the home. One at the top of my bag so it can be discovered first and is easy enough to help kids feel good about a success. The other is something new and different: it's to be left in the home until next week."

Coordinator: "For potential Home Visitors, I'd look for people who have been able to grapple with and solve problems of their own: then we could train them in child development and teaching skills."

Parents: "She (the Home Visitor) does things with them that I wouldn't take so much time to do, like messy projects-- artwork, finger painting. She helps J. with her letters." "She gives P. choices of things to do and brings things she knows will interest him. She makes learning experiences out of everyday things." "She helps me understand what the kids can do and gives me new ideas for what they like to do." "Now I read to the kids more and spend more time talking with them, doing exercises the Home Visitor does on visits. I know more how to pick books and games they'll like and can do."

Director Rose Margosian describes her program this way: "I think we're beginning to ask questions about how much we can do for our families and still help them learn to help themselves....I spend Fridays with the Home Visitors and I feel good. They have terrific ideas, they work well together, and they're very careful about how they try to help families."

PROJECT HOME START

Reno, Nevada

SUMMARY CASE STUDY

Fall 1973

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IN BRIEF

Reno, Nevada
Spring, 1973

PROGRAM: Urban

HOURS: Monday-Friday

8:30a.m. - 5:30 p.m.

START UP: July 1972

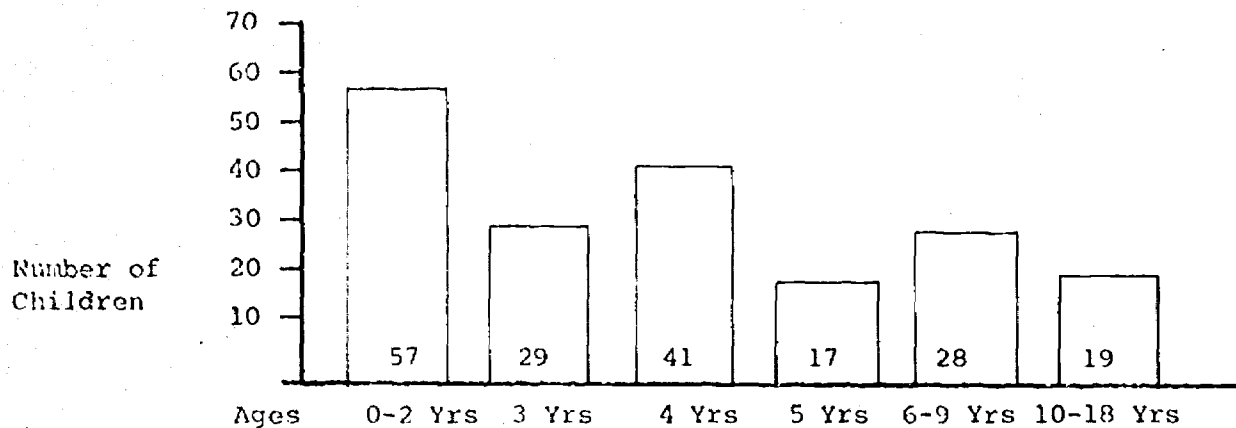
Staff on call evenings and weekends

SPONSOR: Economic Opportunity Board of Washoe County

CHILDREN: 70 Focal Children

191 total Children ages 0-18

ENROLLMENT: 61 Families



STAFF

Paid Full Time 9

Paid Part Time 9

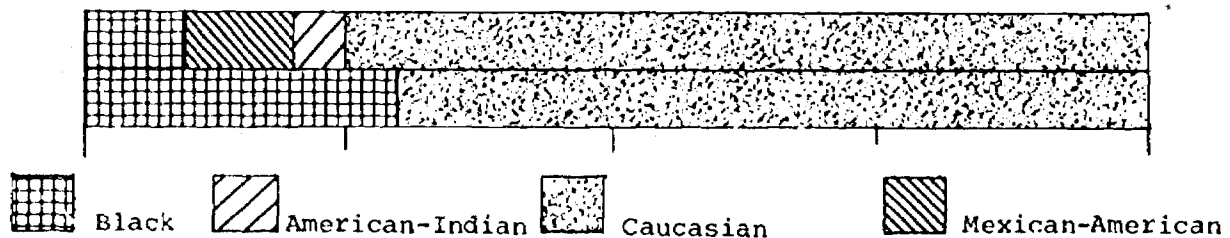
Donated Full Time

Donated Part Time

Ages:	Under 20	0
	21 - 30	8
	31 - 40	4
	41 - 50	3
	50+	3

Positions: Education Division Head (Head Start/Home Start Director);
Home Start Supervisor; Education Specialist; Social Services
Specialist; Health Service Specialist; Home Visitors (7)

ETHNIC MATCH: Focal Children and Staff



¹The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents¹ 69

Female Focal Parents 88

Male Focal Parents 12

Ages:	Under 20 years	4
	21 - 30	75
	31 - 40	13
	41 - 50	3
	50+	4

Annual Income of Families: All non-farm families

Under \$2,000	23%	\$6,001 - \$8,000	5%
\$2,001 - \$4,000	38%	\$8,001 - \$10,000	2%
\$4,001 - \$6,000	33%	\$10,001 - \$12,000	0%

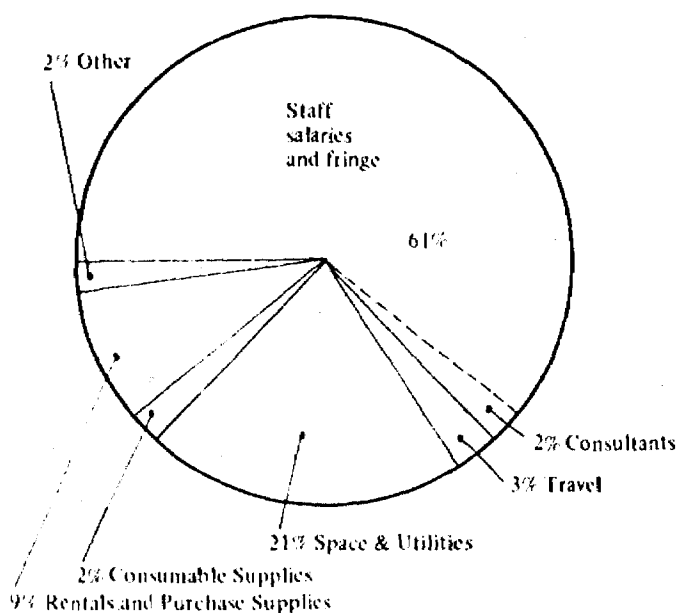
EMPLOYMENT OF FAMILIES: 75% Families in which one or more parents is employed

Regular Work: 54%

Part Time Work: 18%

Seasonal Work: 3%

EXPENDITURES²



Nevada reported \$11,494 for its non-federal share of the program expenditure. Almost all of this was for donated space and utilities.

TOTAL BUDGET: 112,350

Federal Share: 100,000

Non-Federal Share: 12,350

ACTUAL EXPENDITURES: 69,353

Federal: 57,859

Non-Federal: 11,494

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN RENO

Although Reno's gambling casinos attract an estimated 8 million people each year and per capita income in Nevada is among the highest in the nation, conservative Nevadans are reluctant to spend money on social welfare programs, believing instead in rugged individualism and the value of hard work. Since the cost of living is quite high, many low-income families live on the edge of disaster. Welfare payments are low (40th in the nation, as of 1971), according to residents, because state legislators want to discourage women who come to Nevada for divorces from staying and becoming public dependents. But many do stay and find their support payments inadequate. Low-paying casino and waitressing jobs often require long and late hours, and child care is a critical need for many parents, both mothers and fathers. But the day and night nurseries that do exist charge between \$15 and \$25 per child per week, and quality of staff and care vary considerably. Reno Home Start, with its emphasis on education rather than babysitting, with its insistence that parents can and should help educate their children, has its work cut out for it.

Jens Davidson is a rarity among Home Visitors--a man in a heavily (so far) woman-oriented program. A former Peace Corps volunteer who taught second and third grade and organized a community center for parents in Peru, he's especially valuable for Reno's Spanish-speaking parents. He's taught English as a second language for seven years now, and at night he handles an adult education class. Jens is currently participating in a seminar on audio-visual teaching and learning how to develop educational materials.

It's a beautiful day in May, and Jens is driving to the outskirts of Reno, almost into desert country, to visit George Fenton, his four-year-old daughter Tina, and three-year-old Barbie. George's wife works during the day, and nine-year-old Kenny is at school. There are lots of toys and home-made materials for the kids to play with, and George is presently, among many projects, converting a bus into a van so the family can travel. Today's session takes place outside, at the family's picnic table. Jens has brought a painting project developed by Home Start's Education Specialist, and he explains that the project is designed to teach children color discrimination and help re-

fine coordination skills. George is good with his kids, helping them mix paints, asking them questions, identifying colors, and relating to them in an easygoing way. Tina is the focal child for Home Start, and Jens works with her when George is busy with Barbie. Before he leaves, Jens talks with George about other fine-motor activities the family can do during the week. Jens works with 10 families, visiting each one for an hour-long session weekly, with extra time spent planning his visits and arranging for other services his parents and children need.

Reno Home Start is only now moving into high gear, after a slow and fitful start. The program shares many of its staff with Head Start and suffered a real setback when Marie Mills, Education Division Head of the sponsoring agency and Home Start/Head Start Director, resigned two months after the program got underway. Ms. Mills had planned and guided Home Start, hired the staff, worked out operational goals and generally shaped the program. In addition, three Home Visitors left and were replaced over a period of six months just as Home Start was reaching its enrollment capacity, and this was another disrupting influence. When the Education Division Director left the program much of the responsibility for keeping the program operating fell to Home Start Supervisor Mike Greenan. When the Economic Opportunity Board of Washoe had difficulty finding a replacement for the Divisions position, Mike began to work closely with Jack Peters, a Deputy Director for the EOB. Together they modified plans for Home Start services, wrote objectives for the program and worked with staff specialist in health, education and social services in training Home Visitors and operating the Home Start with the focus as it had been intended...on service to families.

Administrative staff feel that the frustrations of dealing with other peoples' problems day after day, when Visitors have the same problem themselves, contributed to high staff turnover during the program's initial months. The position of Home Visitor demands a strong individual and substantial moral and administrative support, and Reno Home Start is working to give its Visitors this essential back-up

HOW HOME START BEGAN IN RENO

Sponsored by the Economic Opportunity Board of Washoe County (EOB), Home Start is one of several programs serving the low-income community in the area. EOB also handles a Foster Grandparents program, a family planning service, an emergency food and medical program, Neighborhood Youth Corps, and legal aid. Head Start and Home Start are both located in the building that houses EOB's administrative offices.

EOB gained some experience with home visiting when it sponsored a project in 1970 using VISTA volunteers as Visitors. The agency expressed interest in the Home Start project in November 1971, and in March 1972 was invited to submit a proposal. The proposal was tentatively approved the same month, and Marie Mills, Head of EOB's Education Division and Head Start Director, began screening administrative and Home Visitor applicants with the help of Jack Peters, Deputy Director of EOB. Unfortunately, the program experienced delays in getting its funding, and it was August before Visitors could be brought on board. In September, Director Marie Mills resigned, causing further dislocation, and by October the program was at approximately half-strength.

Today, Reno Home Start has 61 families, of which 18 are single-parent-headed. Of a total of 70 focal children, 8 are Mexican-American, 52 are Anglo, 7 are black, and 3 are American Indians. Some 14 families earn less than \$2,000 annually; 23 less than \$4,000; 20 less than \$6,000 and 3 less than \$8,000. One family earns between \$8,000 and \$10,000, but it must be remembered that Reno is an expensive place to live. A total of 29 parents are employed, 36 are unemployed, 4 are in school or training, and in 6 families, both parents are considered focal parents. Some 21 families receive surplus food, 13 have Medicaid, 13 receive Aid for Dependent Children, and 6 participate in a Work Incentive Program.

PROGRAM ORGANIZATION

Reno Home Start is organized so that most personnel are shared with Head Start. Both programs are supervised by the Head of the Education Division of the Economic Opportunity Board, who reports to EOB's Director through the Deputy Director, Jack Peters. Marie Mills was Head Start/Home Start Director during the program's start-up phase, but resigned and was not replaced.

Mike Greenan is the Home Start Supervisor, has no Head Start responsibilities. He assumed the responsibilities of running the Home Start Program, along with the help of EOB Deputy Director John Peters, who is also Director of the Education Division and Deputy Director of CAP. Mike supervises the day-to-day activities of the Home Visitors and coordinates family needs, resources, and planning for the staff. Visiting staff work with three Head Start/Home Start resource people: Education Specialist Leila Beard, Health Specialist Sarah Battle, and Social Services Specialist Kerry Harris.

The program has 8 Home Visitors, each calling on an average of 12 families weekly, for an hour long session of demonstration teaching and attention to family needs. Of the total staff of 18, 5 are black and 13 are white, 14 are women and 4 are men. Nine of the staff are considered part-time employees.

In August 1972, the program had four Home Visitors to start off with, and it gave them two weeks of pre-service training about community resources (with visits to local agencies), early childhood education, interviewing and recruiting techniques, Reno's low-income neighborhoods, and a description of the Far West Learning Model. The following month, more training was given in workshop form, with seminars on making education culturally relevant, child development, and early childhood education. As new Home Visitors have been added to the staff, the pre-service sessions have been refined and tailored to the needs of Visitors.

In-service workshops are held every Monday morning with the three Head Start/Home Start specialists. A University of Nevada extension course in Preschool and Kindergarten Education is offered, for which college credit is available. One night each week, Visitors are getting an introduction to Reno's Far West Toy Lending Library. A representative from the Children's Television is providing training to Home Visitors in how to train parents to use Sesame Street as a resource for children's learning. Additional in-service sessions have included a University of Nevada course in Communication for Visitors, ongoing nutrition training, and a first-aid course for Visitors and parents by the Washoe County Red Cross.

Parent groups, one for each Home Visitor, meet monthly to discuss problems, concerns, and program issues. These groups request speakers and make recommendations to the overall program. The program hopes that as groups solidify, parents with particular skills will be willing to conduct workshops for other parents. Home Start has used the Head Start classroom to give parents nutrition instruction with help from the Washoe County Extension Service. Parents have also participated in first aid training offered at the community health clinic and the Washoe Medical Center.

Each parent group has elected 10 representatives to the Parent Policy Council, a joint Head Start/Home Start body which follows Head Start policy regarding parent responsibilities. The Council, in the process of preparing the annual proposal and budget, receives recommendations from Head Start and Home Start staff and in turn recommends expansion or changes in the goals of the program.

PROGRAM SERVICES

Education

Home Visitors discuss needs for specific educational activities with Education Specialist Leila Beard and Home Start Supervisor Mike Greenan. Staff in this program share problems and solutions as a matter of course, and Leila's or Mike's suggestions are supplemented by ideas from other Home Visitors. If a straightforward solution to a problem isn't available, staff will determine what additional information, training, or resources might meet the need. Leila makes arrangements for acquiring new materials and for in-service training resources. In addition, Head Start Supervisors and staff have a great deal to offer Home Start staff in the way of materials and experience. Leila is currently working to translate the program's overall educational objectives into behavioral goals which are sequenced and easily evaluated. Child progress is charted on an Activity Sheet which lists the projects the Visitor undertook, the materials used, and the parent's and child's reaction to each activity. As mentioned earlier, the program is using Far West materials, and it also is developing Parent Guides for families to use in conjunction with "Sesame Street." Reno Home Start has recognized a need for children to get together with each other to learn cooperation and sharing as well as basic social skills. Periodically, all children are taken to the Head Start classroom where Head Start and Home Start staff conduct group activities.

Parents with a need for adult education or vocational training are referred to the Washoe County School District, which offers these services. Some parents need to feel more confidence about their roles as educators of their children, and the program encourages parent groups to invite child development speakers to their sessions. Head Start teachers are planning Head Start staff workshops to which Home Start parents will be invited.

Health

Health Specialist Sara Battle is responsible for health services for both Head Start and Home Start, coordinating resources, making referrals, and arranging for health training for staff members. Sarah visits each family upon acceptance to the program to begin a medical history of the focal child and try to determine health attitudes and needs of the parents. Each child is referred to the Washoe County Health Department for a physical examination. All children five years and under have been checked by the state health department for speech and hearing problems, and those needing follow-up care have been treated by health department clinics. Home Start provided transportation for this service and got good cooperation from parents. In addition, the state health department has performed laboratory tests for all children in the program, including urinalysis, and blood tests. These tests were free. So far, 40 children have had dental examination by the State Dental lab, and 10 have had follow-up treatments by private dentists. The cost of follow-up treatments in both the physical and dental areas must be absorbed by the program for those children not on Medicaid.

Although Sarah Battle visits each family initially, Home Visitors are responsible for alerting her to special or emergency health needs in the families they visit weekly. Visitors also maintain Home Start health records for their families. Parents and Home Visitors, as mentioned earlier, have participated in first aid training donated by the Washoe County Red Cross. Four sessions were provided at a community health clinic and the local medical center, with expert assistance from ambulance drivers.

Social/Psychological

Home Start provides few direct social and psychological services, but it does make referrals. Kerry Harris is Social Services Specialist for both

Head and Home Start, and has spent a good part of her time locating agencies willing to help and making families aware of the assistance those agencies can provide.

Reno Home Start has compiled a Social Services Guide for its families and Visitors show parents how to use this aid, which is left in the home. Kerry points out that if staff really do the job in this area and direct parents to appropriate agencies, the number of referrals will gradually decrease, and this is now happening. Parents are learning who can help them and making their own arrangements. Visitors received extensive pre-service training in community services, visiting each agency so they would know which procedures were necessary for families to receive legal aid, clothing, furniture, housing, treatment for developmental problems, and other services, many of them provided by Economic Opportunity Board programs.

Parent group meetings and classes have provided adults with important opportunities for social contact, and the program gives children the same experience with occasional group sessions in the Head Start classroom. One graduate psychology student from the University of Nevada has been doing staff consultation four hours a week.

Nutrition

Kerry Harris also supervises this area, which provides nutrition education for both Home Visitors and parents. In-service training classes have covered such topics as "The Function of Food," "The Four Food Groups," "Feeding Younger Children," and "Weight Control." Parents are invited to participate along with Visitors, and Home Start Staff have worked with Washoe County Extension Service personnel to conduct nutrition education and demonstration for parents at the EOB center. The Extension Service also has a Nutrition Aide Program and practical literature on budgeting and meal planning available to all families.

PROBLEM ISSUES

Reno Home Start was slow getting underway due to delayed funding, and the resignation of Marie Mills, Director of both Head and Home Start, was a further complication. Essentially, the program has been running to catch up

and is now finding a comfortable operating level. According to Jack Peters, Deputy Director of EOB, "Families are beginning to understand the Home Start concept. They realize that the success of the program depends on them." Jack and Home Start Supervisor Mike Greenan both identified staff turnover as a problem:

- Home Start has lost 4 Visitors during its first year, and supervisory staff are concerned about keeping Visitors motivated, citing the frustrations they feel about dealing with people's problems day after day, many of which they share. Visitors have to be social workers, outreach workers, community organizers as well as educators, and the program would like to have separate staff to handle parent involvement. This would take a burden off the Visitors.
- Because Reno has a somewhat transient population, there has been a good deal of family turnover as well. The program has tried to remedy this situation by being more careful at the time of family selection, making sure the family plans to remain in the area.

VIEWS OF THE PROGRAM

Parents and staff of Reno Home Start talk about their program:

Staff: "I do a lot of explaining during a home visit. I talk about the purpose of the things we do and what effect it should have on the child in terms of learning." "Home Visitors need to be caring, strong, flexible, intelligent--and have a healthy sense of humor." "Good training for Home Visitors takes from six months to a year. There are so many subjects to cover and you need time to experience many learning situations." "The Home Visitor's most important attribute is empathy--for the family's total situation--and this must be gained through personal experience by the Home Visitor." "Having been a mother in low-income bracket has helped me as a Home Visitor: I've been through it and can help my families in some ways because of it."

Parents:

"The Home Visitor has helped my girl come out of her shell: she's much less shy." "What means the most to me is the Visitor's genuine feeling for the kids--it's not just a job to her." "I didn't know that you don't just wait until the child goes to school to do things with them about learning." "Although Lucy is the focal child and much of what we do is with her, the Home Visitor always brings something for or plans something to do with my 2½-year-old, and that's important to both of us." "She's helped me see things from the kid's level and I do things now that might have seemed foolish before. I've gained a lot of patience." "My girl is getting a good feeling about the word 'teacher'." "The kids used to watch 'Sesame Street'; now they actually do things and are interested in participating. There are just lots of things to do with the kids and we don't always realize what they do and don't know."

PROJECT HOME START
Binghamton, New York

SUMMARY CASE STUDY
Fall 1973

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IN BRIEF
Binghamton, New York
Spring 1973

PROGRAM: Urban

HOURS: Monday through Friday
8:00 a.m. - 4:00 p.m.

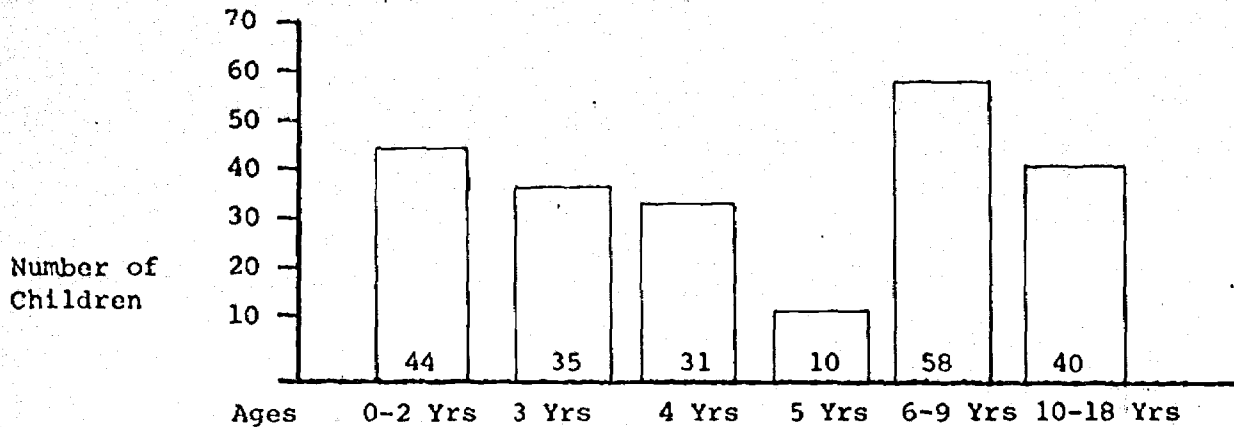
START UP: May 1966

SPONSOR: Delegate - Catholic Social Services

ENROLLMENT: 69 Families

CHILDREN:

74 Focal¹ children ages 3-5
218 Total Children ages 0-18



STAFF

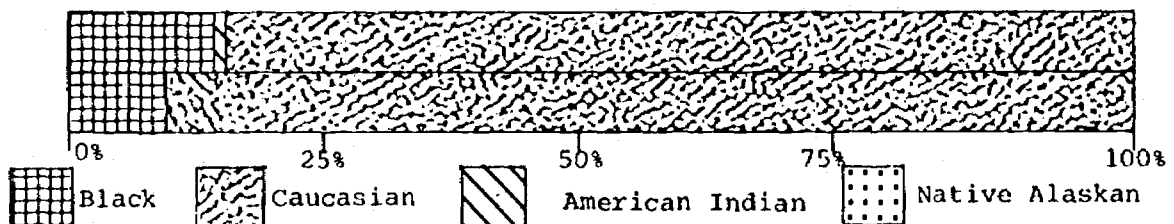
Paid Full Time 11
Paid Part Time 0

Donated Full Time 0
Donated Part Time 0

Ages:	Under 20	0
	21 - 30	1
	31 - 40	5
	41 - 50	3
	50+	2

Positions: Executive Director, Assistant Director, Mother's Group Moderator, Home Visitors (6), Secretary-Bookkeeper, Secretary-Receptionist

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents¹ 69
Female Focal Parents 69
Male Focal Parents 0

Ages: Under 20 years 0
21 - 30 43
31 - 40 17
41 - 50 3
50+ 6

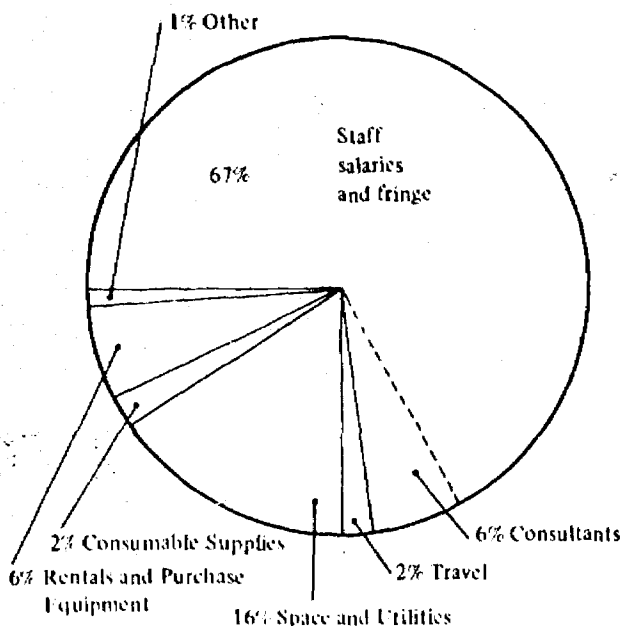
Annual Income of Families: All non-farm families

Under \$2,000	10%	\$6,001 - \$8,000	4%
\$2,001 - \$4,000	55%	\$8,001 - \$10,000	-
\$4,001 - \$6,000	30%	\$10,001 - \$12,000	-

EMPLOYMENT OF FAMILIES: 58% Families in which one or more parents is employed

Regular Work: 55%
Part Time Work: 1%
Seasonal Work: 1%

EXPENDITURES²



New York reported \$18,032 in non-federal expenditures. They captured considerably more than the \$11,758 originally budgeted. The majority of this funding was for donated space and utilities. Substantial amounts were also reported for donated office space, equipment and consultant services in the areas of social work and health.

TOTAL BUDGET: \$111,759

ACTUAL EXPENDITURES: \$105,164

Federal Share: \$99,989

Federal: \$86,862

Non-Federal Share: \$11,770

Non-Federal: \$18,302

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN BINGHAMTON

Sonobia Page has handled just about every job a home visiting program can offer, from recruiting families, making referrals to community services, and teaching and demonstrating in the home. She's one of two original staff of the Binghamton (New York) Home Start program, serving her community since 1965. She's very comfortable knowing what she can and cannot do for her families and which local services are available to whom. Black and in her mid-forties, she can also give special support to black parents and children in the program.

This morning's visit is to four-year-old Jerry Kingsley, a bi-racial child, and his mother, Suzanne, who is white. Nutrition is the primary topic, partly because Jerry isn't eating enough and partly because his mother needs help in providing the best food value on a limited budget. Last visit, Sonobia talked about breakfast, and today she'll cover lunch. After a preliminary discussion with mother and child about the major food groups, Sonobia gives Jerry pictures of various foods to paste on a food chart which is then prominently displayed on the refrigerator. Jerry is drawn out about his favorite foods and describes what he ate for lunch yesterday. Sonobia proposes a two-item lunch and asks mother and child whether this is enough for a balanced diet. Suzanne responds that it would be if cheese or milk were included.

The lesson moves on to finger painting, cutting out shapes, and story time. Sonobia produces pictures of smiling and frowning faces for a session on differences and similarities, and then it's time for large-muscle exercises. Jerry needs to let off lots of steam -- so much so that at one time his mother was afraid he was hyperactive. Sonobia had Jerry tested and was able to report that although he has a high energy level, he's not hyperkinetic. While Jerry exercises, Suzanne and Sonobia talk about his reaction to his father's occasional visits. The visit ends after Sonobia and Suzanne have determined what the next session should cover.

Sonobia has a heavy workload, covering 14 families in each one-week period. A regular visit lasts about two hours and covers nutrition, health, child development, personal problems and social and educational goals for both children and parents. Sonobia also conducts informal small-group activities at her own home to give children sharing opportunities. This week she was called on to handle a family crisis. A father who is an epileptic drank too much,

threatened his wife and children, and was hospitalized after the incident. Upon release, he again threatened his family. Sonobia worked with the welfare department to enable the mother to take the children with her to her sister's home. Home Start made sure the family had money and adequate transportation to the nearby city, and Sonobia kept the children overnight, until plans were firm. For Sonobia, it was all in a week's work.

Staff training for the program's six Home Visitors is currently focusing on early childhood curriculum approaches. Director Louis Conn and his staff are more interested in child development than the cognitive approach and are directing their energies to this area. Weekly staff training sessions have also dealt with recognizing and dealing with behavior problems of children, discussions led by Marcia Keith, Deputy Director of the program. Other training sessions have brought in community professionals, including Red Cross, local police, narcotics and school system personnel and social services workers. "If we could have our way," says Director Lou Conn, "I'd like to see us have consultants and specialists for each component area to work with the staff on a day-to-day basis."

HOW HOME START BEGAN IN BINGHAMTON

When, in 1965, Broome County became one of the first areas to have a Summer Head Start program, results indicated that although children's skills and I.Q.s showed temporary improvement, when the youngsters returned home and into public schools these gains were quickly lost. Staff and other agency personnel who had worked with low-income Binghamton residents concluded that mothers, who are a prime influence on their children, must be involved in child education if gains are to be lasting. A new Community Action program called Opportunities for Broome, Inc. (OFB) received funding in 1966 from the Office of Economic Opportunity for a Home Start-type program which it delegated to Catholic Social Services (which had submitted an earlier proposal). A staff of five began working with mothers and children on Binghamton's West Side.

In 1970, the OFB Board of Directors decided to cut back some of its programs (an alcoholism halfway house, a prisoner rehabilitation program, family planning and legal services) and let them make their own way. Home Start funds

dwindled and were cut completely in Summer of 1971, and the program's staff and parents scraped along until they were able to apply to the Office of Child Development for inclusion in the Home Start Demonstration project. Funding was received in March 1972.

The new funding, however, carried new program requirements. Families once eligible for the program no longer met the criteria Home Start's National program had stipulated for child age and income. Binghamton Home Start was faced with dropping many of its families, some of whom had worked hard to keep the program alive and secure funding for it. Of a total of 177 families served in Spring 1972, 99 had to be phased out by March 1973. For a year, however, the program served both eligible and ineligible families as well as it could.

Incomes for the project's current 69 families range from under \$2,000 to between \$6,000 and \$8,000, with only three families earning more than \$6,000. Seven families earn less than \$2,000. Forty-seven families are enrolled in Aid for Dependent Children, 58 in Medicaid, 61 in Food Stamps. Some 24 families live in public housing projects, and all focal parents are mothers. Eighty-one percent of the program's focal children are Anglo, 12% are black, 1% are American Indian, and 5% are other.

PROGRAM ORGANIZATION

Binghamton's Home Start program has experienced considerable staff turnover as the focus and resources of the program have changed to accommodate new funding guidelines. Louis J. Conn, a former elementary school teacher and business manager, has recently been hired as Director, and Marcia Keith, a former teacher and Head Start Director, is Deputy Director. Mr. Conn is making it a point to meet all program families, and has visited about half of them. There are six Home Visitors, two of whom have been with the program since it began. A Mother's Group Moderator, a bookkeeper and a receptionist round out the staff who occupy the two lower floors of a pleasant brownstone. Ten staff are Anglo, and one is black.

Louis Conn has general responsibility for program administration and planning, while Marcia Keith supervises staff and curriculum development. Home Visitors recruit families, make referrals, and work weekly with an average of thirteen families. Child progress is recorded on individual summary sheets in terms of large and small motor activities, perceptual, language, and social-emotional development. Special problems are noted and attended to.

Debbie Welty is the new Mother's Group Moderator, supervising five parent groups which meet monthly and visiting each mother to remind her of the upcoming session. While the mothers meet, the children are taken care of by volunteers at the project's offices or Head Start center across the street. (Previously, children were supervised by two full-time staff members who planned group activities for educational purposes.) Parent interest has fallen off since the children's groups have been discontinued, and Home Start can no longer provide transportation for mother's group meetings, which has also reduced attendance. (Meetings held in housing projects, however, have quite good attendance.) Debbie spends a good deal of time arranging her meetings and finding a central location -- one home -- to accommodate the mothers of each group.

Topics covered at mother's group meetings have included family planning, Binghamton's social services (particularly child welfare and child abuse policies), public school entry and Red Cross first aid. Mothers are beginning to work for social change by writing their congressmen about welfare problems, tenants' rights and other concerns. The program is also trying to involve fathers by organizing a woodworking shop to make toys and equipment for the project's families.

The Home Start Policy Council consists of 12 mothers and 10 community representatives. Mothers are elected by their groups and community members are elected by parents. One Council member serves on the Head Start Policy Council, while another represents Home Start on the Board of Opportunities for Broome, Inc., the program's Grantee Agency. The Policy Council meets once a month and is considering a proposal to allow non-board members to serve on open committees. The Director also plans to train parents in decision-making and policy issues and feels, overall, that he has a good relationship with his board, with open lines of communication.

PROGRAM SERVICES

Education

"Our greatest educational goal," says Director Conn, "is to help parents understand the developmental stages of their children and equip them to cope with the problems of those stages. Then they can feel better about the ongoing relationship between themselves and their children that's so important." Staff of

Home Start are being trained with the "School Before Six -- A Diagnostic Approach" curriculum prepared by Cornell University and the Peabody Language Kit, and are passing along child development information to parents through home visits and mother's group meetings.

Although some games are available from Home Start's central office frequent use of these materials is discouraged. Instead, staff try to use "beautiful junk" -- common, everyday materials -- to make parents aware that children can learn without expensive new equipment. Tasks taught are generally practical, such as tying shoelaces, buttoning coats, handling zippers and bulky winter clothing, and so on. Children who seem to have special problems are referred to community agencies such as the Cerebral Palsy Clinic for speech therapy, or to other pre-school programs. Twenty-four focal children are simultaneously enrolled in pre-kindergarten part-time, and a few are in regular kindergarten or the Model Cities pre-school program. One child was referred to the Broome State School for evaluation.

While mother's groups focus more on psychological and social needs of parents than on education per se, a good deal of discussion deals with parent feelings towards their children, special problems parents have with the schools, and general child development topics. Parents invited a public school official to discuss community schools with them, and a number of Home Start mothers are also actively involved in Title I Compensatory Education mini-councils. A few parents have been referred for job or skill training, and arrangements were made for a tutor to help one parent upgrade reading and writing skills. Many parents could benefit from high-school equivalency diplomas.

Health

Binghamton Home Start has arranged for free physical examinations for the majority of its 74 focal children through the Broome County Health Clinic and free audiometry testing for all by the Ithaca Mobile Unit. Staff have themselves tested all children for visual problems, and four children have been screened for sickle cell anemia. In addition, all children received dental examinations: for families on Medicaid, free dental exams were given by Dr. O'Brien of the program's Parent Policy Council; other families were charged no more than \$5. The program plans to maintain its own medical and dental treatment records for local children. The Public Health Department

and child care conferences are the main recipients of referrals for well-baby care of the program's children. For illness and specific medical problems, youngsters are sent to a pediatric clinic, a private pediatrician, hospital clinics and an orthopedic clinic. The Red Cross has provided training for staff and 20 parents in emergency first aid, and Home Visitors have had training in preventive health and dental care. Home Start has had excellent cooperation from the Family Practice Clinic in nearby Johnson City, and parents are being encouraged to use the clinic for their family health care.

Parents are referred to the Family Planning Clinic of Planned Parenthood on request, or to the Family Practice Clinic mentioned above, which provides a two-hour comprehensive physical examination for adults for only \$7. Counseling is also provided by the Clinic. Mother's group meetings have addressed health topics, including the need for sex education and presentations on birth control and early cancer detection.

Psychological/Social

Home Visitors estimate that they spend an average of 21% of their time in the home on social and psychological problems, although they feel there is some overlap here with educational time (estimated at 49%). For children, referrals have been made to a foster home, the Child Welfare Department of Binghamton Social Services, a local mental health clinic and the Association for Retarded Children.

Mother's group meetings have dealt with how parents talk with children, ways parents can help their children communicate their feelings, the importance of listening to kids, child abuse, housing and tenants' rights, drug abuse, and role definition. The program has helped 20 families obtain emergency financial assistance through Catholic Social Services and the State Department of Social Services. Staff has helped 13 families find better housing, occasionally through the Binghamton Housing Authority. Some 20 families have received clothing and furniture through the Salvation Army, Project Concern, the Nearly New Shop and the Volunteers of America. Staff help families draw up realistic budgets and have arranged for legal assistance to be available to Home Start families through Opportunities for Broome, Inc.

Nutrition

Deputy Director Marcia Keith, the program's six Home Visitors and staff of the New York-Pennsylvania Cooperative Extension Service have provided nutrition and meal planning assistance for 15 families. Some 20 families were similarly helped with food buying and budgeting tips. Mother's group meetings have addressed nutrition topics, and Home Visitors estimate they spend about 12% of their time in the home on this subject. Of the four kinds of service offered to families, nutrition has the lowest priority in Binghamton's program. The most frequent problem in the nutrition area is simply lack of money to buy food, and the program cannot solve this problem directly. Almost half of the program's families rely on Food Stamps.

PROBLEM ISSUES

The Binghamton Home Start program has faced a unique problem in switching an already-established organization from one set of guidelines to another. Repercussions are:

- In order to conform to Home Start funding requirements, many families had to be dropped and the focus of the operation was shifted from a strong group educational outlook to one of visits in the home supplemented by group meetings for mothers only. Many of the mothers who were phased out had fought hard in the past for their program and were understandably bitter. Dr. Dorothy Gradel, who came on board as Director just as the new program was getting underway, was seen as the agent of change and was unable to meet her own goals. Staff and parent resentment contributed to her resignation in November 1972, and staff cutbacks and role changes have kept the program from achieving unity and cohesion. With the hiring of a new Director and Deputy Director, the difficulties are beginning to be resolved, but staff morale still needs bolstering and there is some resistance to additional change.
- Parent involvement is another problem. Home Start is no longer able to furnish transportation for mother's group meetings, and interest has dropped off. Says the Deputy Director, "There has been a tradition of parent strength in this program. With the new mothers, though, we're still learning about the uses of power by a group of people. We talk about it a lot in mother's group meetings." Staff have been unable so far to involve fathers in the program, but hope to upgrade this aspect of parent participation by offering a woodworking shop.

- Early in the program's start-up months, Home Visitors occasionally expressed a need for more administrative support and help in defining their responsibilities during home visits. With the change in staff organization and the addition of an Assistant Director, Home Visitors are receiving more direct supervision. In addition to supervising Home Visitors, the Assistant Director helps develop educational plans for home visiting.
- Binghamton's Home Start experienced difficulty in obtaining cooperation from the local Health Department to compile health records for each family. Attempts made by Director and Assistant Director to arrange this exchange of records were not successful and the program staff are investigating their legal position regarding family health information.

VIEWS OF THE PROGRAM

Parents and Home Start staff in Binghamton talk about their program:

Staff: "I think we have a good idea of what agencies in Binghamton can and will help out families, but it would be so much better if we had some money which could be used for immediate problem response." "Love and understanding are important in my relationships with the families I visit. Faith is important. The parent has to feel she can have faith in the Home Visitor." "I'd like to take my families to the grocery store for shopping or teach them about budgeting by planning real menus and buying some new clothes. We can't do that; families don't have money and we don't have it to give them."

Parents: "The Home Visitor makes my child feel part of something important by teaching her words and skills." "I feel much more positive about my life: I can discuss it with her. She's really helped me understand and work with my child." "My child just takes to the Home Visitor and seems to want to learn things with her." "She listens to me." "I just spend more time with my children now, working with them, taking them places, appreciating the things our Home Visitor does." "There's not just one thing she does that I like -- it's anything and everything."

PROJECT HOME START
Franklin, North Carolina

SUMMARY CASE STUDY
Fall 1973

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Franklin, North Carolina

Spring, 1973

PROGRAM: Rural

HOURS: Monday through Friday
8:00 a.m. - 4:00 p.m.

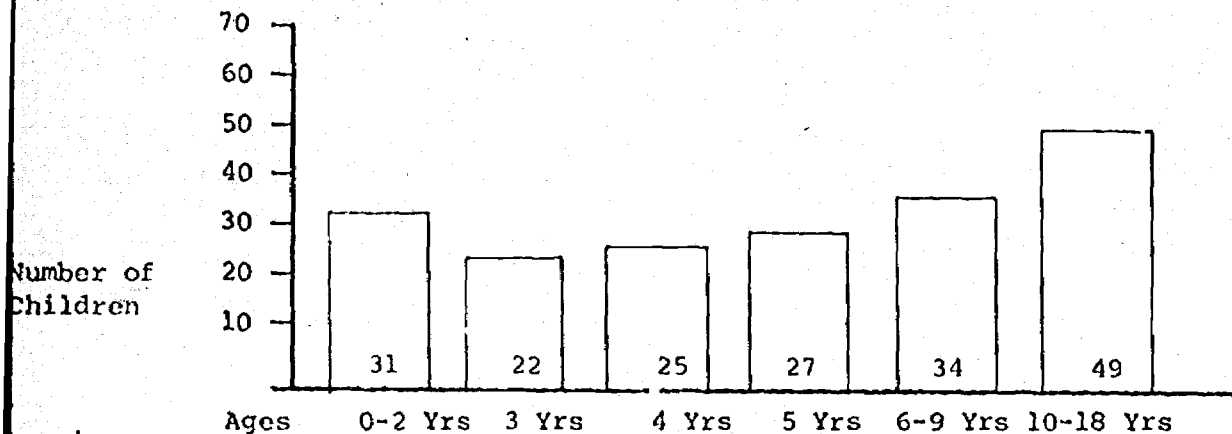
START UP: May 1972

SPONSOR: Delegate: Macon Program for Progress
Grantee: Same

CHILDREN:

63 Focal¹ children ages 3-5
188 Total children ages 0-18

ENROLLMENT: 63 Families



STAFF

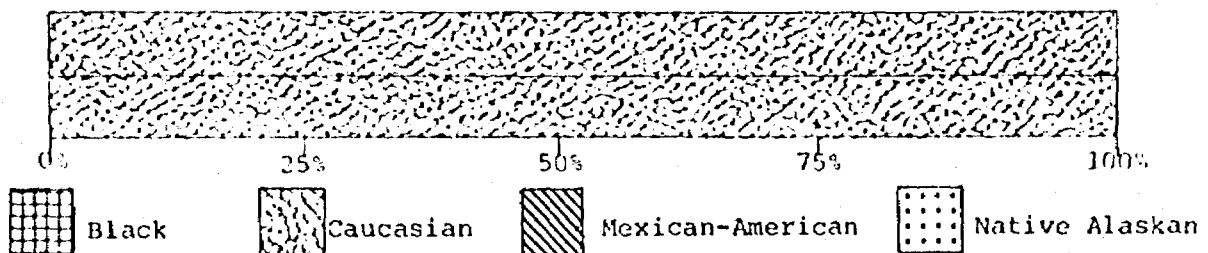
Paid Full Time 10
Paid Part Time 2

Donated Full Time
Donated Part Time

Ages: Under 20 1
21 - 30 5
31 - 40 5
41 - 50 1
50+ -

Positions: Director, Parent Activity and Education Coordinator,
Nurse, Home Visitor (7), Secretary (40%), Bookkeeper
(40%)

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents¹ 63

Female Focal Parents 62

Male Focal Parents 1

Ages:	Under 20 years	1
	21 - 30	33
	31 - 40	17
	41 - 50	5
	50+	7

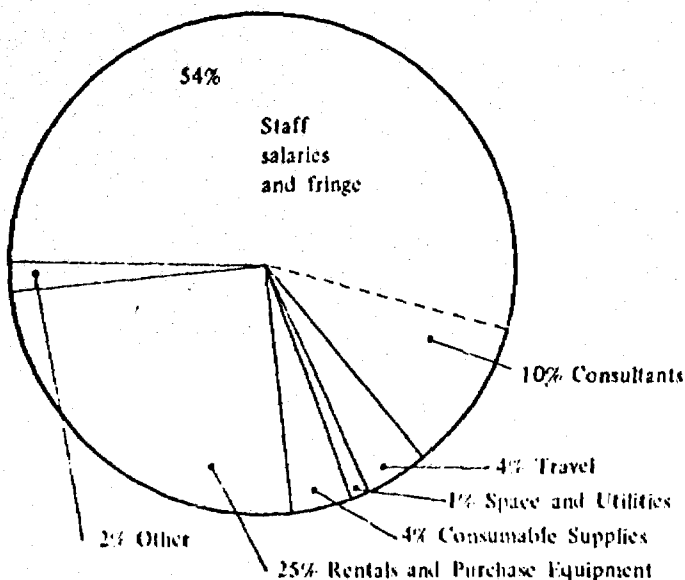
Annual Income of Families: all but 3 non-farm families²

Under \$2,000	17%	\$6,001 - \$8,000	6%
\$2,001 - \$4,000	51%	\$8,001 - \$10,000	-
\$4,001 - \$6,000	25%	\$10,001 - \$12,000	-

EMPLOYMENT OF FAMILIES: 97% Families in which one or more parents is employed

Regular Work:	87%
Part Time Work:	3%
Seasonal Work:	6%

EXPENDITURES³



The most notable items for which North Carolina received non-federal funding were consumable supplies (food, clothing and miscellaneous) and donated salaries of local volunteers workers.

TOTAL BUDGET:	169,310	ACTUAL EXPENDITURES:	90,394
Federal Share:	100,000	Federal:	85,677
Non-Federal Share:	69,310	Non-Federal:	4,717

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Income of three farm families is \$2,001-\$4,000.

³ Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN NORTH CAROLINA

The orange and white four-wheel-drive Chevrolet Blazer with the Home Start logo bounces along the gravel roads of Macon County, North Carolina in Southern Appalachia. Without these sturdy vehicles, Home Visitor Geralene Henry's job would be harder - if only because of the wear and tear on Home Visitor and car caused by mountain roads and North Carolina seasons.

Geralene's visit today is to Sylvia Mooney's family some distance into the hills. Spring is beautiful here, just south of the Great Smoky Mountains National Park, and the drive is not unpleasant. Geralene, in her thirties, is about to take her high-school equivalency exams. She's very enthusiastic about her job and the ten families she visits every week.

The Mooney yard holds three dogs and several thin children. Sylvia herself is thin and looks older than her 28 years. Unlike many women in the hills, Sylvia is an avid reader, and the house is strewn with books and papers. She takes a great interest in her children and likes to show Geralene what she's been doing with them since the last home visit. This week she brings out some poems she wrote to teach Andy, her four-year-old boy, his colors. Geralene brings a nutrition pamphlet and a book to leave for the week and a record they can all listen to.

Geralene is a particularly skilled Home Visitor because she has a talent for setting up activities (she develops them herself) and being able to involve parents in doing things with their children without seeming to push them into things they don't want to do. She doesn't need this knack with Sylvia, but many of her parents have less motivation.

Sylvia, Andy and Geralene sit down in the living room; Geralene unpacks and explains the various ingredients for a chemical garden -- salt, bluing, ammonia and food coloring. Everyone's enthusiastic about this household project. There are ooohs and aaahs when Geralene produces a magnifying glass and a butterfly, and when everyone's had a chance to look, Andy settles down to some artwork. Today's project is a crayon drawing of the favorite animal he saw two weeks ago on a field trip to the Atlanta zoo. Andy liked the elephant the most, but when he encounters difficulty drawing one, he decides he likes lions better. The

visit ends with a simple picture puzzle for Andy to work and some advice for Sylvia about family health.

North Carolina's Home Start program has headquarters on Franklin's Main Street in quarters housing its sponsor, the Macon (County) Program for Progress, a local Community Action Agency. Five Home Visitors operate out of this storefront building, but two more are stationed in the outlying towns of Highlands and Nantahala where their families are located. The region's main industry is tourism, but behind the beautiful countryside there's great poverty and isolation. Average income in Macon county is \$1,500, but only 2% of the population are on welfare, which is seen by residents as charity and proof that a man cannot support his family. The county's people are 98% white and are served by MPP, the Department of Social Services and the local public health department. There are no doctors or dentists in Franklin (the nearest dentist is 40 miles away) so all health services must be provided at higher costs, in money and time, to the program.

Health was the program's top priority during its first year, but an overriding concern for the staff was the building of good relationships between Visitors and their families. Without this rapport, nothing can really be done, and staff feel confident in their relationships now and able to serve effectively.

HOW HOME START BEGAN IN NORTH CAROLINA

In 1967, the Director of Macon County's Head Start program initiated the idea of a traveling teacher to take the Head Start concept into isolated homes scattered through the region's rural, mountain terrain. Geneta ("Hoppy") Rogers, who is now Head Start's Director, was hired as the County's -- and perhaps the nation's -- first traveling Head Start teacher. When Ms. Rogers left her post temporarily, budget cut-backs forced cancellation of the position, but when she returned in 1970, she reactivated this service and hired Shirley Young, who served in this capacity until May of 1972, when she became Director of Home Start. Ms. Rogers wrote the Home Start proposal, which was funded in March 1972. Shirley Young couldn't have had better training for this new kind of program.

Staff for Home Start were recruited through newspaper and radio ads announcing a pre-service training program. Applications were screened by Geneta Rogers and Shirley Young as well as Macon Program for Progress staff and Head Start's Parent Policy Council. The 28 best applicants were invited to take in-service training

with no guarantee of employment and no pay. Twelve accepted, one dropped out, and nine were hired (seven Home Visitors, a Licensed Practical Nurse and the program's first Parent Coordinator).

The program's families were recruited by the Home Visitors with the help of lists compiled by Head Start centers, ministers, teachers, and other community workers. The lists were a starting point, but more often than not, Visitors had to simply drive the mountain roads, stopping at houses where toys or children's clothing on the line indicated the presence of youngsters. The program's families are clustered fairly evenly around the Head Start centers of Franklin, Union-Otto, Burningtown, Nantahala and Watauga. Today, Macon County Home Start serves 63 families with 63 focal children. Almost three-quarters of the families served have incomes below \$4,000 a year. Only one focal parent is a man; 62 are women; and there are five single-parent families. All families are white. Eleven focal parents are employed, 52 are unemployed.

PROGRAM ORGANIZATION

Shirley Young, Director of Macon County Home Start, is a petite, well-organized woman with a background in school teaching and home visiting for Head Start. A native of the Franklin area, she was educated in North Carolina colleges where she majored in health, physical education and biology. She is responsible to Head Start Director Geneta Rogers who, in turn, reports to the Macon Program for Progress Executive Director.

The program's second Parent Coordinator, who organized parent activities and education, recently resigned and will be replaced by one of the Home Visitors as soon as another Visitor can be found. All seven Home Visitors are women, and all are white. Each handles nine or ten families, providing transportation to medical appointments, developing lesson plans and materials, and offering health, nutrition and social services information and counseling. The Home Start Nurse, an LPN, accompanies Visitors on their rounds and coordinates the program's health education and community liaison aspects. Home Start also has a part-time secretary/bookkeeper. Full-time staff are supplemented by volunteer Home Start/Head Start trainees who often travel with Visitors and may be used as substitutes.

All staff members participated in an intensive three-week training session before Home Start got underway. The training, which also earned college credit,

dealt with Home Start policies, child development, human relationships, preventive health care, curriculum, county agencies and resources, and many other topics and was presented by Home Start, Head Start, university, college and professional people.

At present, in-service training sessions are held weekly as a joint effort with Head Start staff. Home Start feels it would be beneficial to have some training more specifically geared to Home Visitor needs and is looking into ways to provide this service.

After a rather tentative start, parent participation in Home Start has picked up considerably. The former Parent Coordinator made home visits along with the Visitors and developed a questionnaire to determine areas of interest for parent education sessions. Parent groups (one for each Visitor, consisting of the parents she works with) started out primarily as social gatherings but are moving toward educational goals. Mothers wanted sewing and cooking classes, and Home Start has provided these through the Southwestern Technical Institute's extension service. Parents have gradually been drawn into outings to movies and points of interest. Joint Home Start/Head Start ventures have been quite successful as well. A picnic attracted 300 people, and 20 Home Start parents attended a session conducted by the Children's Television Workshop to discuss Sesame Street when it first came to the area.

Parents also serve on the Head Start/Home Start Parent Policy Council which includes two parents from each local Head Start Center, one community representative from each Center, social service agency personnel, and one Home Start parent from each parent group (seven in all). Home Start parents have gradually taken more active roles here, too. Both the Chairman and the Secretary of this group are Home Start parents. Parent participation in home visits picked up after all parents signed a pledge to take an active part in teaching their children.

PROGRAM SERVICES

Education

Home Visitors report that education consumes about 52% of their time in the home. Each week, Visitors prepare an activity schedule for the coming week using a Master Schedule prepared by the Director with suggested activities.

Visitors modify and augment suggestions to fit the needs of their families. Anecdotal progress reports measure child achievement and are filed with the Director for monthly review.

Home Visitors have distributed kits containing scissors, crayons, paper, rulers, paint brushes and pencils to each child and taught them how to use these articles, many of which were new to the children. Field trips have been organized to emphasize the local mountain culture, and most home visits incorporate one or more of the creative arts (music, musical instruments, artwork, song, dance), mathematics and science. The program also distributes Captain Kangaroo support materials developed by Tennessee's Home Start program. Home Visitors share with each other their successes and failures with various materials and approaches, and most report that child attention spans have improved considerably. Many of the program's children live in isolated settings and need social contact and chances for sharing and learning from their peers. Group activities are important here, and Home Start children play together while their parents are attending classes sponsored by Southwestern Technical Institute and held in various Head Start centers, and join in outings with parents and staff.

Parent interest has led to sewing and cooking classes, and some parents have been referred to the Franklin High School Learning Lab. Consumer education and home management is handled by Southwestern Tech's Home Extension office and by Macon Program for Progress homemakers, who have given slide presentations in the homes. Driver education is another parent need, and although one parent has gotten a license through a course at the local high school, the \$16 fee is prohibitive. The program is looking for ways to help parents obtain this service.

Health

"If all we do is meet medical and dental needs," one Home Visitor said of Home Start, "the program will have been successful." Health care has been the priority for North Carolina Home Start in its first year, and this is reflected in its referral rate: 95% of all referrals during this period were health-related. Visitors spend some 23% of their time on this area, most of it in transportation and waiting for appointments.

The program's American Association of Pediatrics representative from the University of North Carolina helped staff mobilize health resources to give all focal children physical examinations, inoculations and dental treatment. Follow-up has also been seen to, even through it involves a 50-mile trip for Home

Visitors. Complete health and dental records have been prepared and are maintained by the program's Nurse. Parents accompany children on medical appointments in the hope that they will use these resources themselves, and this is now happening. The program would like to be able to provide services for parents as well as children ('If the mother's sick, it's awful hard to work with her'). The local Public Health Service has been used for well-baby clinics and immunizations, and six children have had heart murmurs checked at local heart clinics. Four children have received special speech and hearing help from an Ashville clinic, and the program has also used a private eye doctor, a urologist, the Social Services Department, an orthopedic and a diabetic clinic and the public health nurse for services. Macon Program for Progress provides iron for anemic children, and nine parents have been helped by the local family planning agency. A private dentist located outside Macon County who did initial dental exams is providing follow-up care at his regular fee. Children were given toothbrushes on the first Home Start visit and get prizes for regular brushing. The Home Start nurse accompanies Visitors, offers advice, gives minor treatment, keeps records, and coordinates all referrals and appointments.

Social/Psychological Services

This service area has accounted for about 22% of the time Visitors spend in the home, but there is some overlap between educational and social services. Staff see critical needs here, but have been busy so far with health care and building the relationships that will eventually permit service for these needs, a time-consuming job that requires considerable patience. A primary need is for socialization for both parents and children, and the program is addressing this through group activities and parent policymaking as well as the home visit itself.

Employment is a problem in this low-industry region. Parents have been referred to MPP's Operation Mainstream program, but only one has been enrolled. Motivation is a problem here in addition to lack of resources. The Social Services Department has tried counseling Home Start families about personal problems but feels it is not very well qualified for this work. MPP operates a self-help housing and a home improvement program, and five Home Start families are taking advantage of this service. Although the program has been able to do little about alcoholism, it has succeeded through its Visitors in distributing family planning information. Director Shirley Young points out that mothers will

confide in their Visitors about this problem where they won't talk with strangers at an agency.

Nutrition

Home Visitors spend only about 3% of their direct service time on nutrition, in part because there are MPP homemaker aides and Home Demonstration agency nutrition aides available to help parents. All Home Start families get MPP's monthly homemaking newsletter containing recipes, and group picnics are sometimes incorporated into long trips to the doctor or dentist. When Food Stamps were recently made available in the county, every family received a chart describing the program and parents were briefed on how to take advantage of this service. Department of Agriculture Nutrition Aides and MPP homemakers are working with parent groups on well-balanced meals and have made home visits and distributed questionnaires to determine parent needs in this area.

PROBLEM ISSUES

Director Shirley Young cites lack of funding and professional resources in her community as problems in providing services to parents as well as children, but generally speaking, North Carolina's Home Start program has done an excellent job of coordinating and using the services available to it. Other problems identified by Shirley:

- The high cost of purchased health services, due to the lack of public clinics and reduced physicians fees, has left the program with little money for parent and group activities. The program staff have chosen to emphasize health before group activities, hoping that, as coordination of services improves, some money and more time will be available for group activities.
- Parent involvement has suffered from the lack of money and time available for activities other than home visits. Another factor which influences the level of involvement may be the turnover of parent coordinators. The program has had two such coordinators and in the fall of 1972 the position was again vacant.
- Program staff felt that the proposal writing necessary for obtaining second year grant was more difficult than it might have been for them. The first Home Start proposal was written primarily by Geneta "Hoppy" Rogers, who was not available during the writing of the second proposal because she was having a baby. Director Shirley felt that the

assistance received from the regional office was not as responsive as it might have been under the circumstances.

- Many of the program's families work long hours in their fields during certain seasons and are unavailable when the Home Visitor arrives. Home Visitors are making no plans to change their visiting schedule, however. Such interruptions, they feel, are part of the style of life in North Carolina and they will have to work around them.

VIEWS OF THE PROGRAM

Parents and staff of North Carolina Home Start talk about their program:

Staff: "The Home Visitors draw a great deal of support from each other -- not only in planning activities, but also emotionally." "A Home Visitor must really be a jack-of-all-trades." "In the beginning, more time must be spent on health and nutrition -- at least with our families. Once that 'takes,' then you can devote more time to education." "I have mixed feelings about educational materials. On one hand, it's nice to be able to take games and toys and books in to them, nice things they can enjoy, but it's also important to have home-made toys made from things around the house. I guess variety is the key." "As the nurse for the program, I like to make as many visits to families as possible; when they know me they take some of the health concerns more seriously and they can contact me when they need special help. Just sending notes from the office can't do much." "I'd like to get the families out and together more, but transportation is always a problem. We just need bigger vehicles to transport them places in groups." "I'd like to get families interested in using recreation parks that are available to them so they don't think these things are just for rich people."

Parents: "She's been lots of help in lots of areas." "I just sit down and talk to him and take more time to answer his questions." "She made me realize a lot about my children -- I'd been letting them go on their own." "She's taken him places by himself and he needed that since he's sort of a Mamma's boy." "My boy's speech has gotten better since the Home Visitor started working with him." "He's learning right smart with counting, putting puzzles together, things like that."

PROJECT HOME START

Cleveland, Ohio

SUMMARY CASE STUDY

Fall 1973

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IN BRIEF

Huntsville, Alabama
Spring, 1973

PROGRAM: Predominantly Rural although some families reside in metro areas.
START UP: June 1972

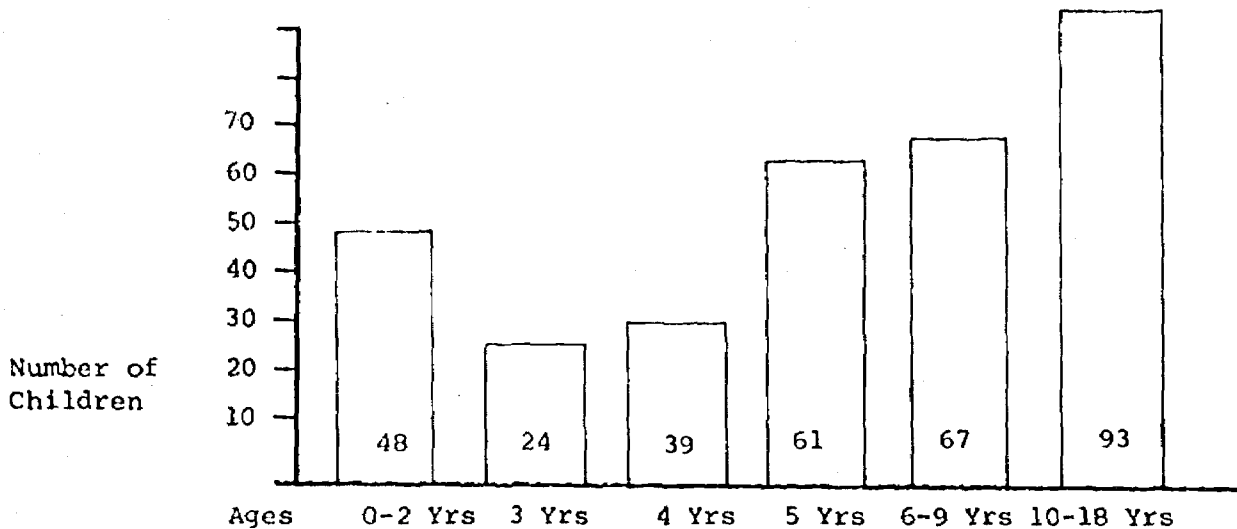
HOURS: Monday through Friday
8:00 a.m. - 4:30 p.m.

SPONSOR: Delegate - GOP of Alabama
Regional Council of Govt.'s.

ENROLLMENT: 89 Families

CHILDREN:

110 Focal¹ children ages 3 - 5
332 Total Children ages 0 - 18



STAFF

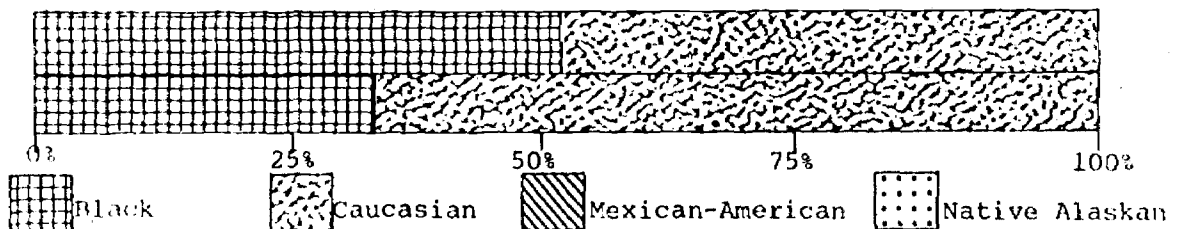
Paid Full Time 12
Paid Part Time -

Donated Full Time
Donated Part Time

Ages: Under 20 1
21 - 30 9
31 - 40 2
41 - 50 -
50+ -

Positions: Executive Director, Human Resources Director, Home Start Coordinator, Secretary, Teachers (2) Aides (2) Home Visitors (6)

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents ¹	86	Ages: Under 20 years	9
		21 - 30	36
Female Focal Parents	17	31 - 40	35
Male Focal Parents	69	41 - 50	2
		50+	2

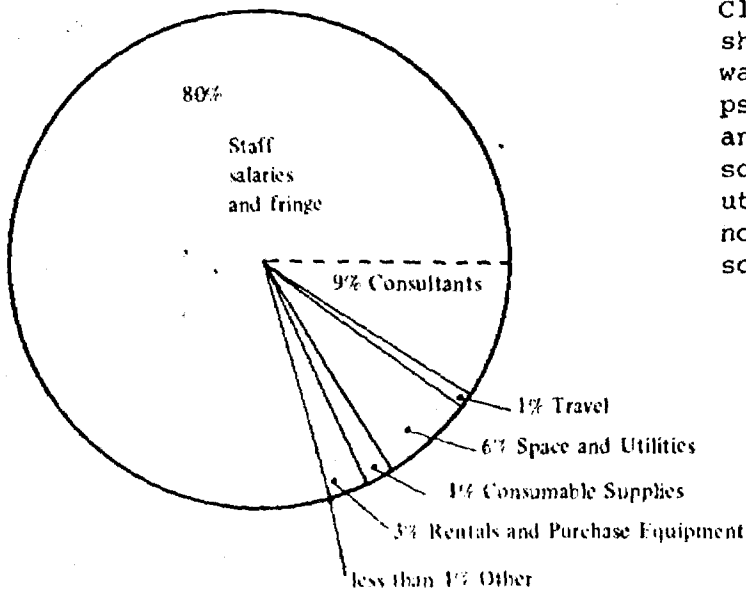
Annual Income of families: All non-farm families.

Under \$2,000	20%	\$6,001 - \$8,000	-
\$2,001 - \$4,000	61%	\$8,001 - \$10,000	-
\$4,001 - \$6,000	19%	\$10,001 - \$12,000	-

EMPLOYMENT OF FAMILIES: 12% Families in which one or more parents is employed

Regular Work:	12%
Part Time Work:	-
Seasonal Work:	-

EXPENDITURES²



Cleveland reported \$13,488 as the non-federal share of program expenditures. Most of this was for donated consultant services-notably psychologist, payroll services, nutritionist and health services. The largest non-personnel item was locally donated space, utilities and telephone services. Another non-personnel item which came from non-federal sources was office equipment.

TOTAL BUDGET:	192,219	ACTUAL EXPENDITURES:	89,011
Federal Share:	100,000	Federal:	75,523
Non-Federal Share:	92,219	Non-Federal:	13,488

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN CLEVELAND

Maria Berrios is a vivacious, self-starting Home Visitor in her thirties who came to the United States from Puerto Rico nine years ago. Cleveland's Spanish-speaking community has settled on the West Side, and that's where Maria's families are located. Her red Firebird is a familiar sight in this neighborhood, where she's been instrumental in organizing and setting up a storefront bilingual library, motivating families to help themselves, and setting an example by finishing high school, joining Home Start, and enrolling in a community college.

Maria climbs a long, dark flight of stairs to get to Velia Sanchez' apartment. Velia is a quiet, attractive woman who has taken pains to brighten up her small home with flowers, handmade curtains and religious pictures. Her daughter, three-year-old Anna, is as pleased to see Maria as Velia is. Anna, who is bright and a little shy, wants to do artwork first and Maria complies. As she's unpacking her equipment, Maria talks with Velia about immunizations for the child, who just recovered from a cold. Did Velia need any help with shopping? No? -- Good. How are the sewing workshops for the fashion show going?

Maria's lesson plan calls for fine motor and hand-eye coordination activities, and this week's task is stringing thread through various cardboard shapes. As child and Visitor work, Maria speaks in English except when she wants to emphasize or explain something. About half of Maria's parents speak English well enough to get by in the Anglo world, and Maria takes a pragmatic view of teaching them. She works to make sure they have the English they need for their transactions with Anglo merchants, and she's learned to develop teaching units that emphasize both cultures while preparing children for predominantly Anglo schools. Anna, Velia and Maria examine the finished cardboard sewing projects and compare the shapes, sizes and thread colors. Maria next turns to counting games. Anna is learning to count in Spanish, and mother and Home Visitor count along. The two-hour visit ends with singing, this time in English.

Across town, Marva Wagner is visiting in one of Cleveland's black neighborhoods. Attractive, educated and quiet, Marva's known as being "life smart" as well as "college smart." She's been active with parent groups, one of which lobbied for and got more parks for children and city maintenance of these areas.

Today's visit with Lucy Arthur and her sons, George, 5, and Willy, 3, came at an inconvenient time for Lucy, who suggests putting it off for a week. Marva prevails, however, and sits down with the family, tailoring the week's lesson for George, who will soon go to preschool. Lucy is a strong, outspoken woman, a seamstress who makes beautiful clothes for herself and her sons. She's an excellent parent organizer for Home Start and has helped make the program's field trips a success. In her own neighborhood, she's planted flowers to beautify the housing project, helped her neighbors with their gardens, and made her own small, dark duplex apartment a pleasant home. Lucy is very firm with her sons but buys them lots of toys and games. As the lesson ends, Marva leaves books with the boys and exercises for mother and sons to do during the week.

Cleveland's Home Start program serves black and Spanish-speaking (Cuban, Puerto Rican, Mexican and other South American) families located in poverty pockets of the city. There are currently no Anglo families enrolled, although the program has tried to recruit in the Appalachian community, which is primarily West Virginian and clings to a traditional insularity. Home Start in Cleveland has been working hard on the health and education components of its program, and sees social and psychological services increasing as critical health needs have been addressed.

HOW HOME START BEGAN IN CLEVELAND

The Day Nursery Association (DNA) of Cleveland, established in 1882, has offered the city's people child-care and family development services over the years in a variety of settings -- in nurseries, kindergartens, homes and day-care centers. DNA operated a demonstration program in Family Day Care in the late 1930s, and has always seen child-care and supportive services for the family as interlocking responsibilities. In 1965, at the request of the Council of Economic Opportunity of Cleveland, the Family Day Care Homes and Centers Program was developed by the Day Nursery Association. As an early model of home based programs staff from the Day Nursery Association were contacted by National Office of Child Development planners to provide insight and experienced ideas to the National Home Start program design. In this role the Day Nursery Association shared ideas with the Office of Child Development

as did other staff experienced in home based education from programs across the country.

In 1970, Cleveland incorporated a number of its programs under one agency, the Center for Human Services. DNA was included, along with the Cleveland Home-maker Service, Family Service, Traveler's Aid and Youth Services. The Day Nursery Association submitted a proposal late in 1971 to the Home Start Demonstration project which was funded in March 1972 and began operation in April, 1972. Staff were drawn from the Day Nursery Association and the communities in which they would work.

Cleveland Home Start serves the city's two largest minority groups, Spanish-speaking and black families. Census figures reveal that in the city's poverty pockets more than a third of the population is on welfare or is below the poverty level. In the city's core, more than 70% of the population is on welfare. In all but thirteen of the Home Start families, incomes are below \$4,000. In 17 families, both parents are considered focal parents; the remaining 52 are single-parent, mother-headed families.

The program's 69 families have a total of 80 focal children 3, 4, and 5 years old. Twenty families live in public housing, 59 are enrolled in Medicaid, and 57 in Aid for Families with Dependent Children. Some 61 Home Start families participate in the Food Stamps program.

PROGRAM ORGANIZATION

Cleveland Home Start's first Director, Mary Martin, has become Assistant Director of the Division of Day Care and Child Development, Center for Human Services, which directly oversees Home Start. Since it is through this Division that Home Start calls on other agencies in the city, Ms. Martin's new position is very helpful for the program. She was directly involved in getting Home Start off the ground, and she knows the problems Home Visitors face. Mary Martin was succeeded as Director by Mrs. Dell Graham, former Program Coordinator, who has a Master's in Social Science Administration from Case Western Reserve University. The MESA is similar in scope to the M.S.W. Dell has given a good deal of her time to the program's nutrition, social/psychological and health components, and

as Program Coordinator directly supervised several Home Visitors. Ruth Correll, Education Director, is responsible for Home Start's curriculum and weekly lesson plans. She has been developing a unit system of curriculum which Home Visitors can modify to suit their families. Central office staff also includes a secretary/bookkeeper and a graduate student from Case Western University's Nutrition School who acts as Home Start's nutritionist.

In addition to the Central Office in Cleveland, Home Start has 6 satellite offices where Home Visitors make local "headquarters" within the communities where they work. Of these 6 offices, 3 share locations with other social service programs, 2 are located in housing projects and a site is in a neighborhood settlement house. All office space at these 6 sites has been donated to the Home Start Program.

All eight Home Visitors are women who were recruited from the communities they serve, and each serves an average of 10 families. Of the program's full-time staff of 11, seven women are black, two are Spanish-speaking, and two are Anglo.

Pre-service training for Home Start staff consisted of lectures, discussions, role-playing and demonstrations to explain Home Start's role vis-a-vis other community services and the families to be served, and to introduce techniques for intervention, interviewing and implementation of the program in the home. Home Visitors also observed teaching strategies in local day-care centers. Each Monday is given over entirely to in-service training and staff meetings. The program believes in working out approaches for each component before taking them into the home, and staff also develop materials for their work in these sessions. Personnel from the Mental Development Center at Case Western, the Center for Human Services and other agencies have been called in to present information on nutrition, child development, social and psychological services and family development. Home Start in Cleveland is particularly fortunate in having access to the substantial experience gained by the Day Nursery Association, now part of the Center for Human Services. Current training is focusing on group dynamics and involvement; family life and life styles; and low-income families compared with those of the middle class.

Each Visitor arranges parent group meetings for the families she serves. Parent groups meet at least once monthly and discuss issues concerning their

neighborhoods, life styles and problems. Individual groups pursue their own interests as well as parent education information provided by the program. Groups have gone to the Health Museum, the circus, zoo, post office and fire station.

Each parent group elects two representatives to serve on the Parent Policy Committee for Home Start. According to Dell Graham, this policy board is working very well, and recently sponsored an outing so all families in the program could see "Winnie the Pooh." Two members of the committee serve on the large Parent Policy Council composed of representatives from all of the federally-sponsored projects coordinated by the Cleveland Council of Economic Opportunity.

PROGRAM SERVICES

Education

The program has examined many curricula and modified several approaches for its own use. Ruth Correll, Education Director, has put together a number of original teaching units; for example, sessions on Thanksgiving, malnutrition and obesity, and winter. Visitors spent one fall day at a local camp where they walked through the woods collecting leaves, flowers and berries to use in a unit on the changing seasons. Most units are designed to help sharpen children's sensory discrimination; encourage comfortable expression of thought and feeling; develop language skills; and stimulate curiosity, questioning and exploration. "Beautiful junk bags" were prepared to show parents that teaching materials need not be expensive.

Typically, home visits last two hours and are recorded in the Visitor's log which is filed with the Director and Education Director for review and discussion at weekly meetings. Child progress is charted on a checklist. Visitors who work with Spanish-speaking families are bilingual and work with parents as well as children on English reading and writing skills. The program is especially concerned with helping parents discover their own communities so they can use available services to help themselves. Parent groups have made many trips to tour and hear about local services and will soon be learning about Cleveland's transportation system.

Ruth Correll wants to encourage mothers' interaction with their children with a kit of pre-designed activities. The kit will contain exercises corresponding to the developmental stages of children up to 12 years of age. The Visitors will show mothers how to use the kit and will leave these materials in the home. Kits will also help Visitors evaluate the progress of their families.

The program has other educational plans. A local church will be the site of group learning experiences for parents and children. Each Visitor is now organizing and planning for her group. Home Start is looking for library films to use at parent group meetings, and is scouting the community for basic education, job training and English instruction programs for its parents.

Health

The program has been very fortunate in having the help for Dr. James Leau of the East 35th Street Clinic and Dr. Ronald Swanger of the West Side, who have donated their services. Each Saturday for several months, Dr. Leau scheduled three complete families for physical examinations and immunizations which he provided free. Parents and children with special medical needs have been referred to other physicians, hospitals or clinics, and Home Visitors have helped with follow-up at various facilities. In addition, program staff have coordinated with local health services to ensure cooperation. All focal children have also received dental examinations and necessary care from Dr. George Kallins if they live on Cleveland's East Side, or from a group of dentists from the Naval Reserves on the West Side.

Home Start has also been very active with health education for its families. A program sponsored by the Health Museum, with transportation by the Urban Services Division of the Cleveland Public Library, has included sessions on nutrition, alcoholism, reproduction, the parts of the body and their functions, dental education, and diseases of the lungs. Home Start produced a booklet listing Cleveland's health services, telling people where to go for different needs, with information about transportation and babysitting included. Staff can now report that families are beginning to make their own contacts and take care of their own health problems.

Social/Psychological

As with the health area, the program is attempting to change the crisis orientation of many families by making them aware that there are community agencies which can help them before needs become critical. Referrals have included those to county welfare, a thrift shop, a day camp, the board of education, a crisis center, legal aid, the Christ Child Society, a day nursery, and the Garden Valley Neighborhood Center. The program has distributed clothing to about a third of its families, and the Matthews Clothing Store sells items to Home Start for as little as ten cents apiece. Staff have referred three parents for counseling but have encountered problems with follow-through.

Dell Graham, who has a background in social work, is a good resource for Home Visitors and has prepared a list of community agencies for Visitors to leave with their families.

Nutrition

The program's student nutritionist from Case Western Reserve is completing a cookbook for Home Start families offering well-balanced, economical recipes. Through Home Start's National Office, the program has been able to get surplus foods to use in cooking demonstrations, although it cannot distribute the food to families. Six groups of mothers have participated in cooking demonstrations which are also aimed at providing inexpensive but well-balanced meals. Another student nutritionist worked with the Home Visiting staff to encourage parents to compare prices when buying food. Although 61 of the program's 69 families are enrolled in the Food Stamps program, some use all their stamps early in the month and simply run out. Visitors are working with mothers on budgeting and home management, but staff agree that basic and traditional food patterns should not be altered. The program feels that lack of money to buy food is more often the problem than poor nutrition practices.

PROBLEM ISSUES

While she is pleased with the general direction of her program and particularly with the health activities accomplished so far, Director Dell Graham has identified several problem issues:

- The program has experienced high turnover of families and difficulty in recruiting families because many parents have relocated in different parts of the city or have moved away.
- Recruiting Home Visitors has been difficult because staff salaries are quite low. These low salaries have tended to affect staff morale as Visitors learn how much they must do for their families. Dell Graham is trying to find some other source of income to help supplement Visitor salaries.
- Home Visitors need more accountability to the Director to increase their own sense of identity and motivation, and they need a centralized place where they can gather and socialize informally. The staff is exploring ways in which they may improve staff communication rather than renting considerable space for a building to be used only part time by a single group.

VIEWS OF THE PROGRAM

Parents and staff of Cleveland Home Start talk about their program:

Staff: "Although it's useful for Home Visitors to have some college training (particularly in child development) and some experience in working with children and parents or adults, personal qualities are most critical: they must be patient, be extremely flexible and open to new ideas." "I've referred some of my families to a neighborhood recreation center where they take karate, modern dance and charm classes. I even take karate with some of my families in the evenings." "Mothers seem to like to get together for the children's sake more than do things together themselves, but our attendance at group meetings is very high." "The most important thing is to create in parents the attitude 'I can do this myself.' Independence is the key, and this is true of all components."

Parents: "She brings Spanish language tapes that are good. I like everything she brings--games, colors, blocks..." "The Home Visitor has helped me with welfare problems." "Mainly, the difference now is that I play with the children much more." "I just like everything about our Home Visitor."

PROJECT HOME START
Harrogate, Tennessee

SUMMARY CASE STUDY
Fall 1973

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IN BRIEF

Harrogate, Tennessee

Spring 1973

PROGRAM: Rural

HOURS: Monday through Friday
8:30 a.m. - 4:30 p.m.

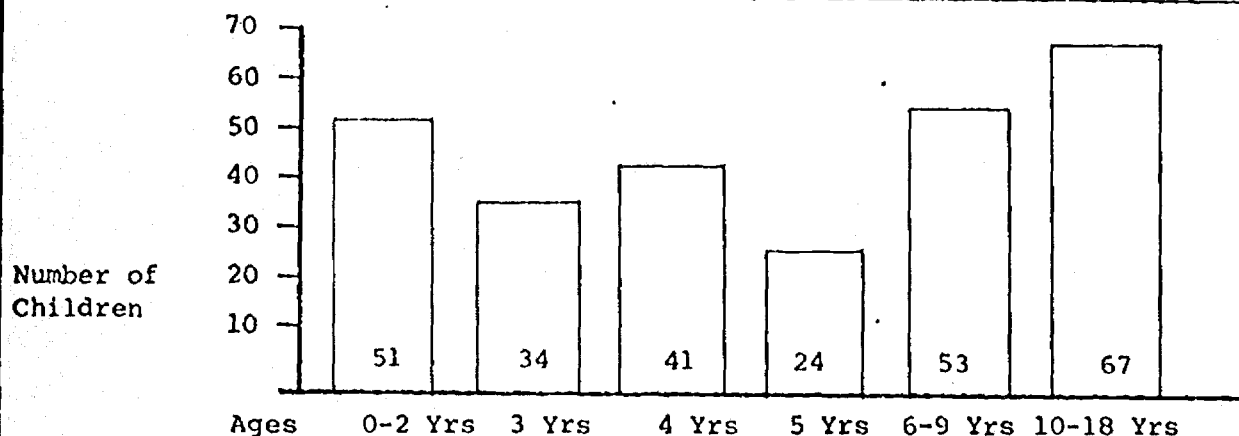
START UP: June 12, 1972

SPONSOR: Delegate-Clinch-Powell Educational Cooperative

CHILDREN:

ENROLLMENT: 80 Families

98 Focal¹ children ages 3-5
270 Total children ages 0-18



STAFF

Paid Full Time 9

Paid Part Time 2

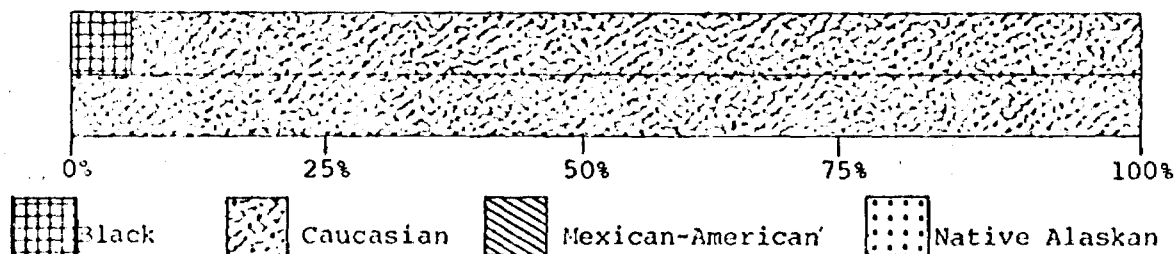
Donated Full Time

Donated Part Time

Ages: Under 20 -
21 - 30 9
31 - 40 2
41 - 50 -
50+ -

Positions: Director 50% , Field Supervisor, Teacher, Home Visitor (5), Nurse, Secretary

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending on the interpretation of the program.

HOME VISITING IN TENNESSEE

Hazel Bright is a perky, petite Home Visitor, 31 years old with a four-year-old son. She's an effective Home Start worker who's able to immerse herself in whatever she's doing and draw parents along with her. Everyone calls her Hazel, perhaps because she's gotten close to her families by doing things with them on weekends -- taking kids to the doctor, going on fishing trips, being more than a once-a-week caller. Today Hazel has had a long day. One of her families had noticed a strange smell in the house and Hazel had helped them find the cause -- the family's hound, which had slipped unnoticed under a chair and died of old age.

Her next visit is with Lou and Nina Bordoff and their four-year-old daughter, Susie, live in a trailer park. Lou, in his 50's, is custodian; Nina's in her 20's and is about to have their third child. When Hazel drives up, Lou shuts off the lawn mower and comes over, in overalls and engineer's cap, to join in the session. He's a devoted father who takes time to play with his kids and make them toys. Nina is shy and reserved, often distracted by two-year-old Joey, who is hell on wheels.

Hazel talks briefly with the parents about the day's activities and lets Susie pick what she wants to do first. Curriculum is based on the Captain Kangaroo TV program supplemented by Parent Guides for day-by-day activities related to the show. Today Hazel's brought a cassette tape and recorder with a song about colors; paper and paint; coins; samples of home-made musical instruments and materials to make more.

First, everyone sings the week's song along with the tape. It's about colors, and Hazel gives everyone a crayon. They all play at being different colors, even Lou. Next, the family traces various coins to make play money, and then moves on to string paintings. Lou does most of the talking with Susie but defers to his wife when storytime comes because he reads very little. Nina is too shy with an outside observer in the house, so Hazel reads today's story.

The visit lasts an hour and a half, but before she leaves, Hazel remembers to give Nina some recipes she found for disguising eggs, which Susie won't eat. The two work together to fill out a nutrition questionnaire the program has sent around to try to determine the needs and interests of Home Start families.

Once a week Susie and the other children Hazel serves congregate in the program's mobile van for group activities, highly important in this Appalachian region where rugged mountain terrain cuts people off from each other. Each morning, families watch Captain Kangaroo from 8 to 9 and, using a Parent Guide, follow along and supplement the television activities with at-home projects. When the Home Visitor comes for her weekly call, she builds on these activities and leaves a new Guide for next week so parents will have what they need. Visitors also bring along health and nutrition information for their families and are available for advice and referral on social or family problems, although resources are somewhat sparse in this part of Tennessee.

Tennessee Home Start serves Campbell and Union counties in upper East Tennessee, a predominantly rural region of small towns, the largest of which is LaFollette. Industry in the area is limited (mainly mining and manufacturing), and fully one third of the families in the two-county area have incomes of less than \$3,000 a year. Residents are predominantly white and families tend to be large. Social services are principally handled by the county welfare and health departments.

This Home Start program suffered a major setback just as it was getting underway when it lost its Director and spent four months trying to find a replacement. Because its sponsoring agency already had a mobile van/home visiting service, Home Start was able to deliver educational services fairly quickly, while other services are just now coming into their own.

HOW HOME START BEGAN IN TENNESSEE

Tennessee Home Start is sponsored by the Clinch-Powell Educational Cooperative (CPEC), a four-county organization developed by local school systems in 1970 to permit joint projects which no one system could afford. In addition to its child education operations, CPEC conducts a cooperative school district demonstration program, driver education, staff development, student teaching, media specialist, paraprofessional aide and administrator training. In 1971 the system initiated a progressive Early Childhood Education project developed by the Appalachian Educational Laboratory, with Title III Elementary and Secondary Education funding, which used television, mobile vans and home visiting to serve the special needs of isolated Appalachian children. During the Title III program's first year, Home Start funds became available, and CPEC applied for this project. Its experience with the home visiting format made it a natural candidate.

Shortly after the program was selected by Home Start's National Office, however, CPEC's Early Childhood Education Director and principal author of the Home Start proposal had to leave the region. The program limped along with partial staff and part-time supervision until present Director, Bill Locke, was found. Since that time, the program's form and thrust have solidified and staff are moving forward in all four service areas.

Five Home Visitors were recruited to serve families clustered in their own areas, and they helped Home Start recruit families. While the program was in a state of suspension looking for a Director, families were "pre-registered" so they could be brought in at once when Home Start got underway. While the Title III project has its own criteria for enrollment, Home Start follows Head Start eligibility requirements which specify lower incomes. Home Start parents also tend to have less education than Title III parents, and Home Start provides nutrition, health and social services while Title III focuses strictly on education for children.

Today, Home Start serves a total of 80 families with 98 focal children, 4 of whom are black and 94 white. Some 85 focal parents are women and 64 are men; in 62 families, both parents are considered focal parents. Of 80 families, 13 are single-parent-headed. Nearly half of Home Start's families have annual incomes between \$2,000 and \$4,000; 15 earn less than \$2,000. Many participate in other federal programs, primarily Food Stamps, but also public housing, welfare and Medicaid.

PROGRAM ORGANIZATION

Executive Director of the Clinch-Powell Educational Cooperative is Tom Gentry, to whom Bill Locke, Director of Early Childhood Education project reports. (The ECE area encompasses both the Title III and Home Start programs.) Bill is a 29-year-old Tennessean formerly with the State Department of Education. He has an MA from East Tennessee State University and was at one time the only male kindergarten teacher in the state. Bill devotes half-time to Home Start.

The program is currently experiencing some staff turnover. The Field Supervisor, who was responsible for day-to-day staff supervision and the social services area, has recently resigned. The program has located a candidate and hopes to hire him soon. In Campbell County, Elizabeth Shuford runs the mobile van used by the program. Elizabeth had a year's experience in this position with the Title III project.

There is no Home Start Teacher in Union County: Home Start children there attend the Title III van classroom. The program also has a secretary, Susan McDavid, and a Nurse, Kathy Poutsch, both of whom work full-time for Home Start. Kathy has recently taken over the nutrition component of the program in addition to health services.

Of the five Home Visitors, one is on maternity leave and one has moved from the area. A replacement has been hired for the Home Visitor on maternity leave and the program is interviewing for the other position. One Visitor is located in Union County, and four work in the more populous Campbell County (three in LaFollette, one in Jellico). Two Visitors had previous experience with the Title III project, one as an aide and one as a parent. Each Visitor sees an average of 16 families a week -- a heavy workload compared with other programs in the study. All staff except Bill Locke are women, and all are white.

Home Start staff received three days of pre-service training in June 1972 and attended the appropriate portions of the three-week Early Childhood Education pre-service training session held in August. Wednesday is in-service training day, when Home Start staff meet with ECE Title III staff to review the upcoming Captain Kangaroo support materials and practice activities related to the shows. In-service training sessions have recently dealt with basic first aid and behavior modification techniques. Staff meet with each other after training to exchange information, discuss problems, and plan for individual families.

CPEC staff is providing college-credit in-service training in conjunction with Walters State Community College in Morristown. The classes are specifically tailored to CPEC's needs and Home Start staff participate in these sessions.

Not until the program was organized and underway with its new Director was there time to form parent groups and coordinate their sessions. Staff were busy establishing relationships with their families, and Bill Locke did not arrive until September, four months after start-up. However, parent groups are now taking hold, and staff want parents to determine which direction their own groups will pursue. The program has used these meetings to disseminate general community resources information. Parents have been told how to use the program's Toy Lending Library and Home Start is looking for films to use in sessions on accident prevention. One parent from each group is elected to the Home Start Parent Policy Council

composed of five parents and several community members. The Council, which meets monthly, advises the larger CPEC Board of Directors, composed of county superintendents, county school board members, a state education department representative and a representative of a higher learning institution.

PROGRAM SERVICES

Education

The program had intended originally to use Appalachian Educational Laboratory's own television program, "Around the Bend," but transmission and reception difficulties precluded its use. "Sesame Street" also had to be dropped, and Home Start eventually settled on "Captain Kangaroo." The program develops Parent Guides which describe each day's episode, suggests related activities for parents to do with their children, and lists the supplies needed. A guide is also prepared for Home Visitors which lists the program's objectives and suggests ways to work with parents and children together. While Visitors and mobile van teachers base their own activities on the Guides, these support materials are considered starting points, not rigid curriculum. All guides are developed by Helen Skinnell, a former Title III van teacher. Helen receives scripts for "Captain Kangaroo" four weeks before telecast date and spends a week developing materials. Production takes another week, and Visitors deliver Parent Guides a week in advance so parents can be ready with the appropriate materials. Cost for development of the guides is shared by Home Start and Title III. Staff feel their curriculum goes a long way toward encouraging mother/child activity throughout the week, not just on the day of the home visit.

Elizabeth Shuford operates the program's mini-van, which makes 10 stops a week all over Campbell County to give kids in small groups (between 6 and 10) a chance to play with each other. Children from Home Start's isolated homes appear to be much more reticent than those in the Title III program, and need social interaction. They love going to the van, where they have a chance to see movies, have snacks, and play with toys and games they don't have at home.

The program's primary emphasis has been on education -- not surprising, since this has been the focus of CPEC, its sponsor, and much of the curriculum and equipment was available from the beginning. Child progress is charted on Visitor logs and in anecdotal form.

Health

Fully 83% of Home Start's referrals have been for health services: of 143 health referrals, 131 were made to local Public Health Clinics. Kathy Poutsch, the full-time Home Start Nurse, encountered problems early in the program getting parents to keep their appointments. Of 81 people referred for inoculations during the first months at the program, only a third kept their appointments. Kathy followed up with parents and encouraged Home Visitors to emphasize health services. In the past few months, health services actually received by families have increased.

Transportation, however, continues to be a serious problem here, since many parents don't own their own cars and the rugged terrain is impossible in some weather. The program's policy has been that parents should arrange their own transportation rather than relying on Home Visitors, but Home Visitors still spend significant amounts of time transporting families to services they need.

Almost all the program's children have now had their physical examinations, which were provided by a private physician in Clinton, near Knoxville. Recommendations for immediate treatment (anemia, urinalysis) have all been followed up, and eye examinations are being done by a Tennessee Valley Authority-sponsored clinic in Briceville. Most children have also had a dental exam, cleaning, and fluoride treatment through an Army Reserve dentist. Follow-up work will be by a private dentist in Jacksboro. Kathy Poutsch keeps Public Health records up to date for all children.

Social/Psychological

Home Start is developing a list of social and counseling services to be distributed to its families. It has found the welfare department most helpful but has encountered difficulty with other agencies, notably the housing authority, in getting basic information. The Campbell County welfare director has designated a staff for all Home Start referrals. Home Visitors have alerted families who don't already use them to the availability of food stamps, and the Field Supervisor, whose responsibility includes this component, helps clarify eligibility requirements for families. Families have received clothing through the LaFollette Rescue Squad and the Save the Children Federation, and parents needing jobs have been referred to the local employment service. In several cases, Home Visitors have personally tried to locate jobs for parents.

The Clinch-Powell Educational Cooperative has received a grant from the state which will provide psychological examinations for the children in its four-county area at a cost of \$30 per child, but staff point out that parents are unwilling to use such services. Satellite mental health clinics have been established in Jellico and LaFollette, and parents can be referred, but parent education is clearly needed before these services will be used. Staff are also exploring vocational rehabilitation, social security and Community Action agencies in their areas to see how they can be used.

A real need for both parents and their children is social interaction, and the program is addressing this problem through home visiting, mobile classes and parent group meetings.

Nutrition

Some Campbell County families are participating in a USDA Extension Service program which uses paraprofessional nutrition aides and home visits. Visitors have also found that asking each parent for a recipe for the Home Start cookbook is a good way to introduce the topic of nutrition. The cookbook has been distributed to all families and each recipe is accompanied by a brief discussion of its nutritional benefits. Visitors have conducted pantry checks of each home, using a food intake checklist developed by Teacher Elizabeth Shuford, to determine what nutritional needs families have. The local health department has helped the program identify children with iron and protein deficiencies, and the program is addressing these problems by attention to individual family nutrition.

Kathy Poutsch, the program's Nurse, is working with the University of Tennessee's Agricultural Extension Service to provide basic nutrition education to Home Start staff. Training will be done by home demonstration agents. Kathy also developed nutrition information which was included in weekly Parent Guides during the summer months.

PROBLEM ISSUES

Tennessee Home Start had a major problem during its critical start-up months when the Early Childhood Education Director had to leave the program and staff were without direction and supervision for four months until a successor was found. Two Home Visitors (of a total of five) have left the program, as has the Field Supervisor, an important position for a rural program. Home Start has had difficulty filling these slots: CPEC standards are high. Other problem areas:

- Transportation for Home Start families to medical appointments, parent meetings and other outings has been a problem from the beginning. Many families don't have cars and public transportation is non-existent. Visitors have heavy schedules to follow as it is, and the program is concerned about liability should an accident occur while a Visitor is taking a child or parent to an appointment. While families are not inaccessible, they are scattered and the wear and tear resulting to Home Visitor's private cars is an added expense for them.
- The program has had difficulty motivating parents to use the services available to them. This is partly a transportation problem and partly one of attitude. Residents of this area reject what they consider charity and are unwilling to have children tested for psychological disturbances. Established Home Visitor/family relationships may change this attitude, as can parent education, once the program has found the ways and means.
- Home Visitors each handle an average of 16 families, which is a heavy caseload. Morale seems to be high, and Visitors are enthusiastic about their work. There are presently no plans for reducing the number of families visited by each Visitor. Families are rather tightly grouped so it is possible for Home Visitors to visit four families each day and still have a day each week for in-service training.

VIEWS OF THE PROGRAM

Parents and staff of Tennessee Home Start talk about their program:

Staff: "Visiting 16 families in a week is a pretty hectic schedule. I wish we could spend more time with other children in the families and help more with problems like food stamps and welfare, but we can't do everything." "I'd like to see Home Visitors have 8 families and visit them twice a week instead of having 16 which they visit once. Twice a week they could have one visit for information-giving and child activities; the other could be devoted to non-child things like shopping or nutrition." "Home Visitors have to be able to teach without instructing and have compassion without pity for the families they visit." "We would like for Home Visitors to be able to spend some time with parents away from their children, although group activities are difficult for families in really isolated areas. Children often feel that the Home Visitors are 'theirs'." "We try to emphasize that the Home Visitor is not there as a social worker but because parents invite them to do things with children. Group meetings are really for things parents want to do."

Parents: "I can't think of just one thing the Home Visitor has done. It would take all day to tell all the things she's done. She helped get Debbie to eat, for one thing." "I've just learned lots. Just coming by every week is good for the child." "I appreciate the

chance to talk. I don't get out much and really look forward to the visits." "The Home Visitor helps me trade, buy things, shop." "She's taught my child to be interested in learning." "The Home Visitor has helped me save money." "My kids love the Home Visitor. They kick me in the shins if she's late."

PROJECT HOME START

Houston, Texas

SUMMARY CASE STUDY

Fall 1973

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IN BRIEF

Houston, Texas

Spring, 1973

PROGRAM: rural/Urban

HOURS: Monday through Friday

8:30 a.m. - 5:30 p.m.

(staff avail as needed)

START UP: April 1972

SPONSOR: Delegates - Houston Head Start

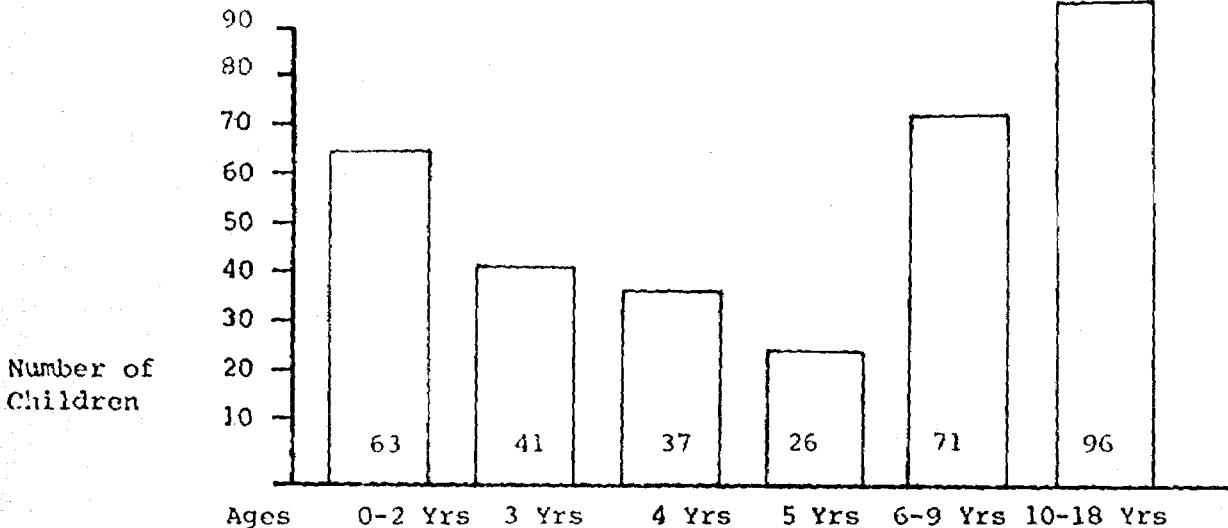
Grantee - Harris County Community Action Association

CHILDREN:

64 Focal¹ children ages 3 - 5

334 Total Children ages 0 - 18

ENROLLMENT: 80 families

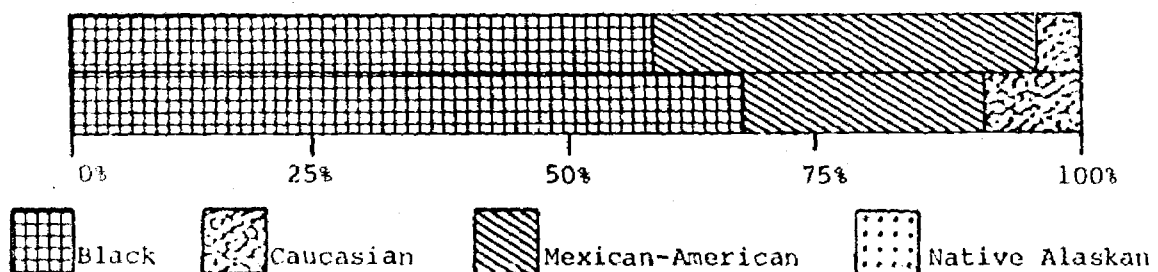


STAFF

Paid Full Time	12	Ages:	Under 20	-
Paid Part Time	1		21 - 30	9
			31 - 40	2
Donated Full Time			41 - 50	1
Donated Part Time			50+	1

Positions: Program Coordinator, Social Service Coordinators (2)
Home Visitors (8) Nurse (2) Home Visitor Supervisor

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents ¹	80	Ages: Under 20 years	-
		21 - 30	39
Female Focal Parents	80	31 - 40	18
Male Focal Parents	0	41 - 50	12
		50+	6

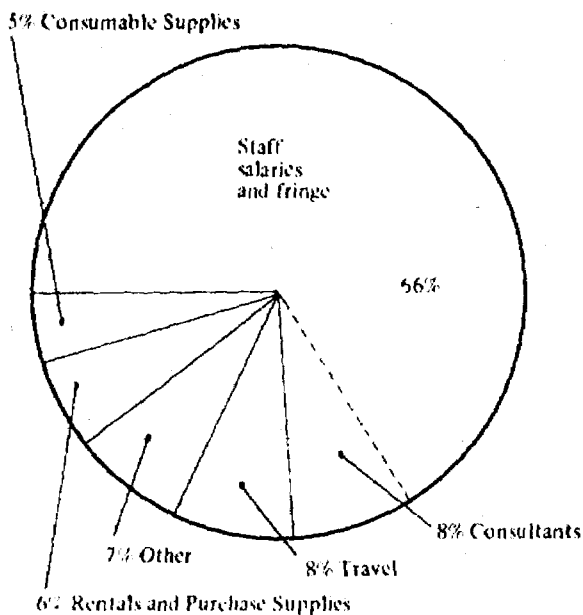
Annual Income of Families: All non-farm

Under \$2,000	24%	\$6,001 - \$8,000	4%
\$2,001 - \$4,000	36%	\$8,001 - \$10,000	-
\$4,001 - \$6,000	33%	\$10,001 - \$12,000	-

EMPLOYMENT OF FAMILIES: 30% Families in which one or more parents is employed

Regular Work:	18%
Part Time Work:	10%
Seasonal Work:	3%

EXPENDITURES²



Houston reported \$11,401 in revenue from non-federal sources. Consultant services and donated labor were mainly in the area of health. Another large item was donated consumable supplies.

TOTAL BUDGET:	111,110	ACTUAL EXPENDITURES:	96,257
Federal Share:	99,999	Federal:	84,656
Non-Federal Share:	11,111	Non-Federal:	11,601

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

Note: Since this case study was written, Program Coordinator Janetta Gilliam has resigned her position with the Home Start program. Mr. A. B. Leonard, Director of Head Start, is acting as the Home Start Coordinator until a new Coordinator can be hired.

HOME VISITING IN HOUSTON

At 56 years of age, Mrs. Ronnie Cook might be expected to relax a little, but that's not her style and never has been. A long-time Houston resident, she's a social worker by inclination, if not by formal training. She's had two years of college, with courses in child development and home economics, and she's worked as a nurse's aide in a well-baby clinic, as recreation director for a children's program, and in posts with the Catholic Youth Organization and the PTA. Nearly 10 years ago she initiated a home visiting program for needy families operating out of NAACP offices with help from the local Catholic parish. Mrs. Cook does more for Home Start than any job description demands: she often does cooking to take to a bedridden parent, and she helps out with housework or finds a babysitter for families with emergencies. Because she's black, Mrs. Cook can give black parents and children special support and inspiration.

Today, Ronnie takes the highway out of central Houston and turns onto an unpaved street in a semi-rural community where the houses aren't crowded and dogs can roam. She makes a brief stop to deliver a good shirt to a boy who is going to a concert, then drives on for her regular home visit with Cassie Porter and her five-year-old son, Charles, who runs out to the car to greet her. Charles has tremendous energy and a short attention span, and Cassie, in her late thirties, finds him a real handful. She represents, however, precisely the attitude Home Start would like to see in parents: she's learned that she can teach her own son things she used to think only a teacher could teach him; she takes the job seriously. She's even set aside part of a room in her small house where she keeps a blackboard, letter and number chart, color wheels and other materials she's made in her parent group meetings.

Ronnie, Cassie and Charles sit down at the table for today's session on numbers, letters and colors. Cassie immediately takes over with a pointer and color chart: she wants to review this because she and Charles had just been playing games with colors when Ronnie arrived. Ronnie occasionally helps Cassie, but in a non-directive way. As they're going over the alphabet, Cassie says, "You know, there are some things here I'm not always sure about, and this is good for me too." Not only is she excited that she can teach

Charles things in new ways, but she's also glad she knows games to play with him when he's at loose ends. She wants to stay with Home Start in some capacity next year when Charles goes off to kindergarten.

When the hour's over, Ronnie drops in on the family next door for a chat and a cup of coffee. This Home Start family isn't scheduled for today (each family is visited twice a week), but Ronnie is keeping in touch, making sure they'll be home when she does call. Most of her nine families are located in this community, so when she's in the neighborhood, Ronnie stops by.

Houston Home Start serves black and Chicano families, about 70% of whom live in outlying districts of the city, in communities like Spring, Kohnville, Huffville, Cedar Grove, Barret Station, and Bordeville, as much as 100 miles from Home Start's main offices in downtown Houston. City services don't reach these communities, but many of the programs that do are under the auspices of the Harris County Community Action Association, a huge social service agency with more than 700 employees which operates Concentrated Employment, Emergency Food and Medical, Head and Home Start, and many other programs, as well as planning for new services. Planning is essential, since Harris County encompasses 2,500 square miles and almost one and three-quarters million people as of 1970. And it's still growing: during the last 10 years, the Anglo population has increased about 27%; blacks by about 42%; and Spanish-speaking people by 147%.

HOW HOME START BEGAN IN HOUSTON

Houston Home Start is sponsored by the Harris County Community Action Association (HCCAA) and administered through Head Start, one of the agency's many programs. HCCAA was the result of a merger, in 1967, of the Houston Action for Youth (HAY) and Houston-Harris County Economic Opportunity Organization. HCCAA operates an extensive Head Start program with 38 centers scattered throughout the metro Houston area. Because many community services are located in Houston proper and inaccessible to people on the outskirts of this sprawling city, Houston was a logical choice for a home visiting program. HCCAA hired Program Coordinator Janetta Gilliam from Houston Head Start and two Home Visitors who had worked with the Florida Parent Education Program, and sent them

to the Home Start Conference held in St. Louis in April, 1972. Returning home, they set about building a program, Janetta finding staff, Home Visitors Mary and Linda recruiting families.

Head Start and other community agencies were informed about the new program and asked for referrals of eligible families. Local churches and community clinics, many of the latter under HCCAA supervision, proved useful both for disseminating Home Start information to their communities and identifying potential families. The most effective recruitment method, however, was door-to-door canvassing. As new Visitors were hired, they too went into Houston's neighborhoods looking for people to serve.

Today, Home Start in Houston includes 80 families with a total of 104 focal children, of whom 62 are black, two are Anglo, and 40 are Spanish-speaking. All focal parents are women, and 24 families have a single parent present. Nearly two-thirds of these families have incomes below \$4,000 yearly. Some 30% of the program's focal parents are employed, either full- or part-time, and 70% are unemployed.

PROGRAM ORGANIZATION

Janetta Gilliam, Home Start Program Coordinator, is responsible for day-to-day program operations and policy and reports to HCCAA's Executive Director and Board of Directors through Mr. A.B. Leonard, Director of Head Start. Home Start's staff is all-female, consisting of two Social Service Coordinators, two Nurses, and eight Home Visitors. One staff member is Anglo, nine are black, and three are Chicano.

The Social Service Coordinators, an Anglo who is bilingual and one black visit all their families bi-monthly and coordinate transportation, referrals and other non-direct services. They are also responsible for the record-keeping Home Start requires. The Nurses, an Anglo who is bilingual and one black visit families and are responsible for the health and nutrition aspect of the program. Nurses make referrals both directly with and through the Social Service Coordinators, provide follow-up, and maintain the health sections of the program's Family Service records.

Each of the Home Start's nine Home Visitors sees her families twice a week, for approximately an hour each time. When the program reaches full strength of 80 families, each Visitor will serve about 10 families. One Visitor, who suffered a serious accident, was replaced by a Home Start mother from her neighborhood. Families in one community are generally served by the same Visitor. Because this program has both Nurses and Social Service staff, Visitors are able to concentrate on education, although other family concerns may be brought to their attention as well. Visitors here, as elsewhere, are the real link with family needs.

During the program's start-up phase, all staff members received more than a week of pre-service training, and in-service sessions, held each Wednesday, have drawn on Head Start personnel (the Nutritionist, Psychologist, Sociologist, Education Directors) and local university staff for ongoing instruction. In-service training is an all-day process, with Visitors working together to develop educational activities, trade ideas and materials, and practice strategies before taking them into homes.

Program Coordinator Janetta Gilliam describes parent participation in Home Start activities as very good, mostly as a result of hard work on the part of staff. Each Visitor coordinates meetings for the parents she works with, usually in the same neighborhood. In each group, members select one parent to represent each of the program's four components--Health, Nutrition, Social Services and Education-- and that parent is liaison between the group and Home Start staff for all questions, suggestions and changes in that area. Each group also elects one member to serve on the Home Start Parent Policy Committee. Because Home Start parallels the structure of Head Start and communication between the two sets of parents is encouraged, a Home Start Policy Committee member serves on Head Start's Committee and vice versa.

During the program's first year, staff had trouble involving parents, who didn't know each other and often lived some distance apart. The program began a campaign stressing the importance of these meetings and planning different kinds of get-togethers, both educational and social. Visitors spent a good deal of time rounding up people and driving them to and fro, and participation has since improved. With help from Head Start volunteers, the whole program has gone to a rodeo, Sea-A-Rama and Disney on Parade. Parents

are also organizing to improve their communities and lobby for services--such as local health clinics--in areas which need them. The resulting dialogue between Home Start families and public servants is seen as beneficial for all concerned.

PROGRAM SERVICES

Education

The program has purchased a variety of materials--puzzles, blocks, games, photographs, and storybooks--to supplement staff-designed and home-made educational materials. Many of these aids are in Spanish, and are designed to help improve the self-image of Mexican-American children. The program also uses some materials developed for black children and families. Parent workshops have focused on the preparation of low-cost teaching materials, and staff have developed two kits to leave with their families. One is a collection of colored paper, crayons, paint, brushes, scissors, pencils and newsprint for the focal child, with additional crayons for brothers and sisters. The second kit includes soap, a face towel, toothbrush and toothpaste, and is intended to reinforce discussions with parents about the need for physical hygiene.

In-service workshops held all day Wednesday are primarily a chance for staff to develop new materials: Home Start has put together its own bilingual tapes, filmstrips and puzzles. The program is currently testing its children with performance evaluation materials to determine each child's strengths and weaknesses. Home Visitors will then be able to tailor their visits to the specific educational needs of each child. Child progress is charted on the Home Visitor's log of daily activities, which includes objective data plus descriptions of home visit incidents.

For parents, the program is trying to locate vocational and GED courses.

"Families want to get off welfare, they want to improve their home environment," says one Visitor. Staff make a real effort to devise activities which will involve parents in teaching their own children. According to one Visitor, "My parents are really working with their children. I can see significant change in the amount of parent and child interaction on several levels." Staff also feels that when parents' immediate concerns about employment, housing, health

and food have been met, parent/child interaction will have a chance to improve. As one staff member put it, "If parents are worried about food or shelter, if parents are worried about getting a job or providing good health care, then the time they spend with the child in a learning situation often suffers."

Health

Geraldine Moore and Mary Collins, who is bilingual, are Home Start's Nurses. They visit homes and work with Visitors to address both health and nutrition problems. During start-up, many children were found to have impetigo, a skin irritation caused by unsanitary conditions. In part, this can be remedied through education, but there are other factors. Many families don't have running water, and buying water from the city is costly. The city delivers to rusty barrels outside the homes in barrels without lids, in some cases. Visitors and Nurses must be sensitive to the living conditions of the families they work with and motivate parents to act. Nurses have begun conducting health workshops for parents.

A Head Start Pediatrician and Pedodontist have provided physical and dental examinations for Home Start's children: only those new to the program have not been seen. Children about to enter public schools received a visual examination from the University of Houston School of Optometry, and Home Visitors have been trained to give hearing tests. Those with problems are referred to the Houston Speech and Hearing Center. Children with special medical problems receive the treatment needed; Social Service Coordinators provide transportation to and from appointments, and Home Start pays costs when it can do so.

Many Home Start neighborhoods are without clinics, and existing clinics may be far away and unwilling to accept new patients because they are already overburdened. Parents are concerned about community health care and plan to petition the city for clinics in areas where no medical services are available.

Social/Psychological

Ruth Wyatt and Susan Wagman, who is bilingual, are the program's Social Service Coordinators. They make bi-monthly home visits, handle referrals, maintain Home Start records, and provide transportation where necessary. They use

their own cars and cover tremendous distances in doing their jobs. The coordinators provide supportive counseling for parents and try to make them aware of the services Houston offers. Referrals have been made to the welfare office, legal aid, Volunteers of America, and the various social services sponsored by the Harris County Community Action Association. Children with psychological problems have been referred to the Harris County Center for the Retarded.

Home Start has held a parent workshop on legal aid, with time donated by a local attorney. Head Start's Psychologists held a seminar for parents on child development and behavior, and HCCAA set up a meeting between parents of one community and county officials to discuss a drainage ditch problem. Neighborhood flooding was reduced as a result of this effort. Staff believe that the ability to solve problems builds self-esteem and will increase parents' motivation to tackle other problems.

Home Visitors can provide some supportive counseling in the home, while parent groups offer increased social contact as well as group support. Parents have listened to and taught each other at these meetings, and with a few successes behind them are now beginning to adopt the "can-do" attitude the program wants to foster.

Nutrition

The program's goal in this area is to improve the nutritional balance of family meals without altering traditional food patterns. Visitors are learning how to assess family nutrition needs and recommended specific dietary supplements with the help of Head Start's Nutritionist. The program has collected literature from the city health department and from the Dairy and Rice Councils and distributed it to all families. In addition, all families have been enrolled in the USDA Smart Shopper program, in which groups of women go shopping at wholesale distributors and farmers markets where they can buy in bulk, and also have the opportunity to discuss benefits of comparative buying.

Since start-up, 20 Home Start families have been enrolled in the local food stamp program. This is virtually the only way to increase a family's food supply, since surplus goods are not available in Harris County. In addition,

Home Visitors work to show parents how meal-time can be a learning opportunity for thier children. At the same time, Visitors promote the use of salads and green vegetables as supplements to traditional diets.

PROBLEM ISSUES

Home Start in Houston is fortunate in having a truly dedicated, enthusiastic staff. The presence of Nurses and Social Service Coordinators has allowed Home Visitors to spend more time on education with their families, but it has not meant less work for each Visitor, since the time that would ordinarily be spent on those services now goes into improving the home visit and devising new teaching strategies and materials. Everyone in this program puts in overtime, and salaries have been only slightly above what most of the staff could get through welfare. Janetta Gilliam has recognized the problem and her 1973-74 budget reflects the need for higher salaries. Other problems identified by Ms. Gilliam:

- Transportation continues to be problem for families, who live in isolated communities out of the reach of the city's social service agencies. There is virtually no public transit, and many families have no car. Visitors and Social Service Coordinators have therefore found it necessary to spend a good deal of time transporting families around the county for services and meetings.
- There are very few county resources and facilities in Home Start's outlying districts, and the service problem is compounded when staff try to determine which agencies have jurisdiction and might be pressured to provide help to the program's families. Services which do exist are usually overburdened and get together to seek resources for their own neighborhoods.

VIEWS OF THE PROGRAM

Parents and staff of Houston Home Start talk about their program:

Staff: "We've done lots of good group things--gone to Sea-A-Rama, a rodeo, Disney on Parade, had a Christmas party. If we only had more time, I'd like to do more outdoor things, like taking long walks and nature hikes." "We treat every child individually and plan a program for each one's needs, but generally I think all children should learn about their environment, their community and the people in it, how to use money--real life things." "I think it would be useful to see how other staff arrangements might work--for example, I would have Home Visitors responsible for education activities, and have Nurses and Social Services staff responsible for other areas more than they are now." "Health is one of the most important services we provide--not

Staff: only examinations and immunizations, but also preventive health
(Continued) and helping families learn more about all areas of health, including mental health and safety."

Parents: "The most important thing the Home Visitor teaches are things she will use when she starts school: numbers, colors and letters."
"I have five children. Since Home Start, I work more with them. I also get the older children to help the younger ones." "My child had very little sense of balance but now she's just fine. Because I'm partially invalid, I can't play active games with her, but the Home Visitor takes special care to think up games for her." "If I have a personal problem that I can't correct, I generally talk with our Home Visitor." "I have a lot more interest in teaching her now. The Home Visitor made it easy for me to reach the child--I've been out of school 50 years."

PROJECT HOME START

Texas Migrant Council
Weslaco, Texas

SUMMARY CASE STUDY
Fall 1973

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Texas Migrant Council
Weslaco, Texas
Spring, 1973

PROGRAM: Rural Migrant

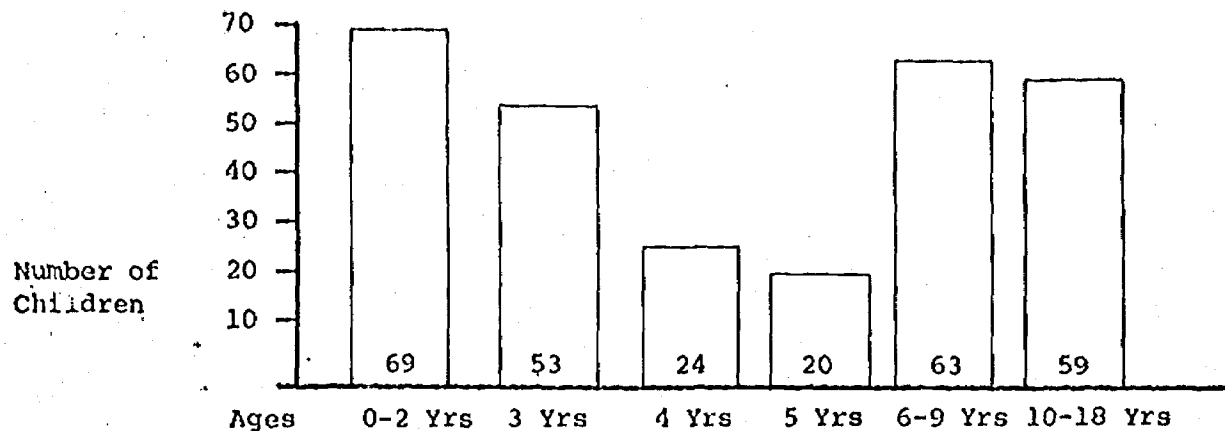
HOURS: Monday-Thursday
8:30 - 5:30
Fridays 8:00-5:00

START UP: April 1972

SPONSOR: Grantee-Texas Migrant Council

CHILDREN: 84 Focal Children
333 total Children ages 0-1

ENROLLMENT: 69 Families



STAFF

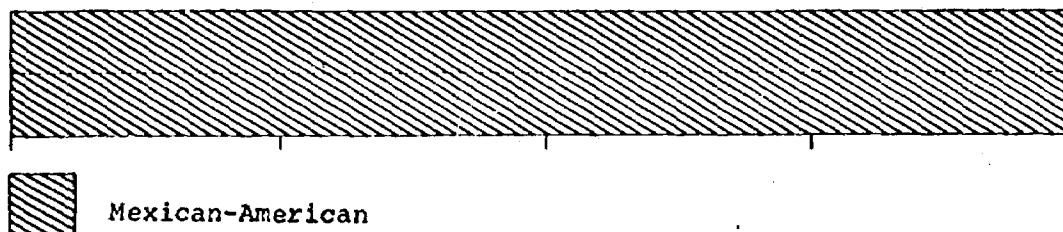
Paid Full Time 10
Paid Part Time 0

Donated Full Time
Donated Part Time

Ages: Under 20 0
21 - 30 6
31 - 40 3
41 - 50 0
50+ 1

Positions: Home Start Supervisor, (In-Kind); Trainer - Coordinator,
Home Visitor (10), Secretary, Director (In-Kind)

ETHNIC MATCH: Focal Children and Staff



¹The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents¹ 137

Female Focal Parents 69

Male Focal Parents 68

Ages: Under 20 years 2
 21 - 30 41
 31 - 40 65
 41 - 50 25
 50+ 4

Annual Income of Families: All farm families

Under \$2,000	58%	\$6,001 - \$8,000	0
\$2,001 - \$4,000	42%	\$8,001 - \$10,000	0
\$4,001 - \$6,000	0	\$10,001 - \$12,000	0

EMPLOYMENT OF FAMILIES: 100% Families in which one or more parents is employed

Regular Work: 0

Part Time Work: 0

Seasonal Work: 100%

EXPENDITURES²

3% Rentals and Purchase Supplies

3% Consultants

Staff
salaries
and fringe

78%

8% Travel

2% Space & Utilities

6% Consumable Supplies

TMC reported no non-federal expenditures.

TOTAL BUDGET: 100,000

ACTUAL EXPENDITURES: 46,564

Federal Share: 100,000

Federal: 46,564

Non-Federal Share: 0³

Non-Federal: 0

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

³ Indian and Migrant programs are currently exempt from Non-federal share requirements.

HOME VISITING FOR THE TEXAS MIGRANT COUNCIL

It's beautiful in the lower Rio Grande Valley, with acres of fruits and vegetables stretching off in the distance wherever you look. The paved roads take you to prosperous Anglo farms and the unpaved roads take you to Chicano homes. The contrast between them is stark. Chicanos harvest the crops, many of which they can't afford to buy, and may pay a \$25 fine for taking one unauthorized orange home to their families. Two-room wooden shacks may hold up to 10 people, with no running water, no toilet, no refrigerator, no insulation, and no heat except what's given off by the cooking stove. Malnutrition is common, as are impetigo and a variety of physical and dental ailments, while services for the poor are few and far between. Often it's a seven-mile walk to the nearest town for help or supplies, both of which cost too much for people who are seasonally employed at the lowest rates paid any workers in the country. Better jobs are seldom available to Chicanos, whose migrant life virtually guarantees that they'll drop out of school to follow the harvest and help their families. Anglo school is difficult when you speak Spanish, when you've had no toys to learn with at home, when you'll only be in the area for a short time.

The Texas Migrant Council's Home Start program serves rural Hidalgo County in the southernmost tip of Texas, working in and around the communities of Progreso, Santa Maria and Relampago. TMC operates Head Start and Home Start in this area from October to May. When families move north to follow the crops, Home Start staff join Head Start and go with them, returning in the fall to begin home visiting when families are settled again. It's a unique kind of Home Start/Head Start affiliation, a direct outgrowth of the needs of migrant workers.

Home Visitor Blanca Hinojosa is a young woman with a gravity and maturity beyond her years. Stable and understanding, she has a low-key approach to parents, who respect her teaching role and rely on her authority. Today, she's visiting Maria Martinez who looks after her daughter, Anita, and her son, Carlos, five and four respectively, while their father is north with the harvest. Maria has decided to stay home this year, and today is the last lesson before Blanca goes north too. The visit is primarily conducted in Spanish, with some English to get the children used to the cadences of this difficult language. As Maria and Blanca help the children with color identification, counting on a large peg board, and lacing yarn through various cardboard shapes, Blanca talks about

why these activities are important for their development. Next, they all play dog and bone, where one person pretends to be a sleepy dog while a child tries to steal an imaginary bone. The game gives children large-muscle exercise and stimulates young imaginations. Blanca suggests similar games for Maria to use during the summer and encourages her to continue her teaching by leaving a list of exercises and activities. Before she goes, Blanca also reviews with Maria the local agencies she can turn to for help and gives her a list of the services they can provide. After a warm farewell, Blanca's car jounces away down the rutted, dusty lane, heading for another visit 20 hard miles away.

The Texas Migrant Council offices are located in Laredo, 200 miles from Weslaco where Head and Home Start share office space. All staff are bilingual, and many grew up in this area, so familiar with Chicano problems they saw them as inevitable, part of normal life. Now, with experience in organizing parents, providing services and learning from other people, visitors are gaining confidence in their ability to begin improving things for their Chicano neighbors. Health care has been the priority so far, and the program has had a good deal of success in this area. Nutrition and social problems are now taking precedence, and once critical needs are met, parents will be able to spend more time and energy on education for themselves and their children.

HOW TEXAS MIGRANT COUNCIL'S HOME START BEGAN

In 1969, the Office of Economic Opportunity, through its Indian Migrant Division, funded the Texas Migrant Mobile Head Start Project through the Colorado Migrant Council to work with transient migrant children. Moving with the migrant stream proved impossible, so a network system was devised to provide education along the way stations in the stream. In 1971, the Project came under the direction of United Migrants for Opportunity, Inc., based in Michigan, and later that year, the Texas Migrant Council (TMC) was established to administer Head Start programs in Texas. TMC now operates 13 Head Start Centers in southern Texas from October to May, with families and staff spreading north into 10 states in summer to follow the crops.

In December 1971, TMC staff learned of the new Home Start program and drafted a preliminary proposal which they took to the Chicago Home Start meeting. After some revisions, the proposal was accepted and funded in March 1972.

Many staff were recruited from Head Start, and additional Home Visitors were found in the communities they would eventually serve. The program had help from the Community Action Program in Hidalgo County in locating eligible families, and Visitors canvassed their communities. Home Start operated for only a few weeks in spring of 1972 before closing for the summer. In fall, six Visitors opted to stay with Head Start and many families did not return, necessitating additional recruitment.

Today, Weslaco Home Start has 69 families enrolled with a total of 84 focal children. In all, the program estimates it reaches some 333 children in Home Start families. All 84 children are Chicano, and in all but one family both parents are considered focal. All fathers are employed, while mothers work occasionally in the fields. Incomes are extremely low, with 40 families earning less than \$2,000 a year and the remaining 29 between \$2,000 and \$4,000. Some 49 families receive food stamps, 5 participate in Aid for Dependent Children, and 12 children are in all-year or summer Head Start programs. None have Medicaid, job training, surplus foods or public housing assistance, a reflection of the scarcity of services in this region.

PROGRAM ORGANIZATION

Home Start in Weslaco is administered primarily by Estella Aguilar, whose title is Trainer/Coordinator. Estella was formerly a Head Start Teacher in that program's Weslaco Center, and she knows the area and its problems. She helped select her staff and has guided and shaped the program. Ms. Aguilar reports to TMC's Executive Director, Oscar Villareal, through Onesimo Castillo, Head Start/Home Start Field Supervisor. Both are based in Laredo, but the Supervisor spends a great deal of time traveling throughout the Rio Grande Valley checking on local operations.

Currently there are 10 Home Visitors, several of them with Head Start teaching experience. Women compose 98% of staff, all are bilingual, and all have had some college training. Many use their own cars to visit their widely scattered families, maneuvering along rutted roads that turn to bogs during rainy seasons. Each Visitor sees an average of eight families each week, for at least 1 1/2 to two hours apiece, depending on individual family needs. These women work at night or on weekends, whenever necessary, and help families with crisis situations as well as attending community meetings aimed

at improving social and physical conditions. Home Start's Trainer/Coordinator and secretary work in the Weslaco office where Home Visitors meet, have desk space and store their materials.

Pre-service training actually occurred once the program was underway with a week of introduction to the Home Start concept, family recruiting, and early childhood education. Speakers from local agencies such as welfare, community services, CAP, Associated City-County Economic Development Corporation, the Southwest Educational Laboratory, the Commission for the Blind, Manpower Training, and the TMC Nurse were brought in. When the program broke to go north in the summer, Visitors without child education experience were assigned to Head Start Centers where they could work with former Head Start teachers who had joined Home Start.

Regular in-service training sessions are held on Fridays, with Estella Aguilar and outside speakers covering topics Visitors feel they should know more about. Areas recently addressed include education for the preschool child; child psychology; music; homemade educational toys; language, motor, visual, auditory; introduction to health agencies and services; four basic food groups; food fallacies; home safety; consumer education.

Parent participation has been increasing steadily. In the beginning, activities were social in nature, with parents traveling long distances to get together, often with help from their Home Visitors. There were picnics with sack races, group outings, and workshops to make toys. Parents began to discuss their problems and Visitors encouraged them to petition county agencies in their areas to get action on local problems. In one area, all the roads to private ranches were paved, but no pavement came near Home Start's families. Elsewhere, water was so badly contaminated that several families became seriously ill. In this case, emergency measures were adopted, but response to Chicano problems is generally slow. Visitors have helped parents get information about local problems and issues and are working to impress upon parents, many of whom have little education and consequently feel they should not speak up, that they too have rights. Parent meetings feature demonstration lessons by the Southwest Educational Lab showing mothers how they could teach their children while doing their housework; films on the components of Home Start; and training for parents and teachers by educational consultants.

The Home Start Parent Advisory Council consists of all parents in the program. Parents elect officers, advise Home Start staff on their needs and wishes, and organize fund-raising projects. The Council chairman is the program's representative on the board of the Texas Migrant Council.

PROGRAM SERVICES

Education

Home Visitors in this program find that they must provide not only educational materials, but also the motivation to use them, since their families are often more preoccupied with critical problems of shelter, employment and food. Moreover, when a crisis situation exists in the home, children often adopt adult behavior and become withdrawn and depressed. Getting through these barriers is a challenge the program has taken up. Each visitor has a carton filled with school materials and other items she has collected or made, and she uses these materials in conjunction with the Southwest Educational Laboratory's bilingual curriculum, Sesame Street and activities designed by Home Start staff. Lesson plans and other activities are structured and reviewed prior to the home visit, but Visitors are expected to slant their activities to the emotional and educational needs of the focal child. Planning is recorded on a sheet listing objective, procedure and result for each exercise. Progress is recorded on daily reports by Home Visitors. Until good rapport is established with the family, all teaching is done in Spanish. Songs include stories about the culture and social situations of the Chicano, religious tales, and some are direct translations from English. Activities include making pinatas, zarapes and other culturally relevant items. Staff choose poems, rhymes and stories which reflect the children's Spanish heritage.

General educational goals include small and large-motor development; self-image, body movement and motion; practical knowledge of the seasons, colors, money, days of the week, etc.; and the creation of toys, games, and educational activities from home-made materials. Parents each week receive a lesson plan which outlines additional activities to be undertaken and concepts or words to be stressed.

Most of the program's parents need education: 17 had no schooling and 114 had less than 8 years of school. Unfortunately, most Home Start parents were not

accepted by the local CAP-sponsored education program, which required a sixth-grade education for admission. Those who were accepted have difficulties with transportation.

Health

Malnutrition, anemia, and minor infections such as impetigo and colds were common among Home Start's children, and dental problems existed in almost every household. Dental care for the poor is completely lacking in the Weslaco area, and parents have difficulty keeping any kind of appointment when they have no transportation. Living conditions among the program's families are in many cases hazardous in terms of fire and sanitation, and in addition, dental and medical problems are usually not identified as needs until they reach the crisis stage because preventive dental care is not available to migrant families in Hidalgo County. Visitors try to make a start by learning to assess family health needs, making arrangements for service, transporting families, identifying immunizations that need to be given, and providing health education materials. Each child is given a packet containing baby aspirin, vitamins, toothpaste and a toothbrush and mothers are instructed in the use of each item.

Health has been a priority for Home Start, and it has had major success here. Although Home Start does not have its own nurse, it does get assistance from the Head Start nurse and often times receives help as well from the county nurses. Through the public health clinic in Weslaco, 105 children have had physical exams; their parents--43 so far--have had physicals from a private physician, although many fathers will not take time from work to do so. Some 105 children and 20 parents have had dental examinations and follow-up treatment thanks to the Baptist Church, which has sponsored this work with private dentists. Home Start staff were given instruments by the public health clinic to conduct hearing examinations for 43 parents, and the clinic performed TB tests and follow-up X-rays for 43 parents. Home Start has had good cooperation from local health clinics and private professionals.

Social/Psychological Services

Although Visitors may act as job counselors, marriage counselors and child

psychologists, their primary role in the social services area is to identify problems and make appropriate referrals. Each parent is given a list of regional services and told how each agency functions and what help it provides. In some cases, Visitors take parents to these agencies to see for themselves. Cooperating agencies include Planned Parenthood, legal aid, the food stamp office, the welfare department, Social Security, Associated City-County Development Corporation, the Hidalgo CAP agency, and the Texas Migrant Council, among others. Problems are often severe and interrelated, ranging from unemployment and low wages to racial discrimination and the apathy it breeds. Nearly 70% of the families Home Visitors see live in unsafe or generally inadequate housing. Poor political representation has resulted in bad roads and unsanitary neighborhood conditions. Visitors often take part in social action activities aimed at improving these conditions, and have come to realize that such problems are not inevitable. Progress is slow when the needs are massive, but Home Start and the Texas Migrant Council are chipping away at problems. An overriding concern is to preserve the culture, language, pride and dignity of migrant families while providing help.

Nutrition

Visitors have acquired a thorough knowledge of how the food stamp agency works and can answer parent questions about eligibility and applications. Visitors also provide transportation to and from the agency for the 49 participating families. They have had extensive training in nutrition to help families make the best of their limited food supplies, much of it focused on Mexican food and the food values of tortillas, burritos, tacos, enchiladas and other Mexican specialties. Recently, personnel from the Hidalgo Extension Service and the Dallas Food and Drug Administration have trained Visitors on food safety, the use of basic foods, general consumer education, budgeting, and meal planning. Estella Aguilar reports that the FDA training was not completed as originally planned.

PROBLEM ISSUES

Estella Aguilar, Trainer/Coordinator, sees the program's major success so far as the provision of health services to Home Start's families, including physical examinations, hearing, blood and TB tests. The program uses migrant and public health clinics and volunteer services provided by doctors and area

nurses. Problems encountered by the program:

- A large number of parents were ambivalent about having physical examinations, particularly fathers, who were reluctant to take time from their work to show up for appointments set up for them. Dental examinations for children and parents were hampered by bad weather: rains turned area roads to mud and appointments were missed. In addition, hearing tests were performed only for parents because staff encountered difficulties testing children.
- Many parents who wanted to enroll in education classes sponsored by the local CAP manpower program were turned away because they lacked the sixth-grade entrance requirements. The CAP agency was inundated with applications and could afford to be selective in its admission policies. Another problem was transportation for parents who were accepted. Home Start families are widely scattered and often have no car. Visitors spend a good deal of their time driving people to and from appointments.

VIEWS OF THE PROGRAM

Parents and staff of TMC Home Start talk about their program:

Staff: "Health is our most important service to most families right now. To begin with, we provide health checks for as many of the family members as we can pay for. Long-range, we have improved general health as our goal." "In all things we do as a program, we try to stress activities that parents and children can share." "We want to help parents understand and relate to their children." "It would be nice to be able to take more library books in Spanish to parents. We need more toys too, but we're working on a Toy Lending Library that will fill this need." "I think parents are really beginning to feel a sense of community with each other--even those that live some distance from each other."

Parents: "The Home Visitor has helped the boys learn many things that I felt were unimportant until she brought them to my attention--like numbers, colors, new games." "I'm more careful now in preparing food for my children and maybe a little wiser in buying food." "I make better use of the health clinic now." "She helped us get food stamps and gives me someone to talk and share things with." "Now I help my children more in their education." "The Home Visitor has helped both me and my child in the area of education. My son is able to speak the English language much better now." "She was very helpful during my pregnancy: she arranged medical visits which I normally would have neglected without her help. I appreciate her help and friendship very much."

PROJECT HOME START

Millville, Utah

SUMMARY CASE STUDY

Fall 1973

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IN BRIEF

Millville, Utah

Spring, 1973

PROGRAM: Rural

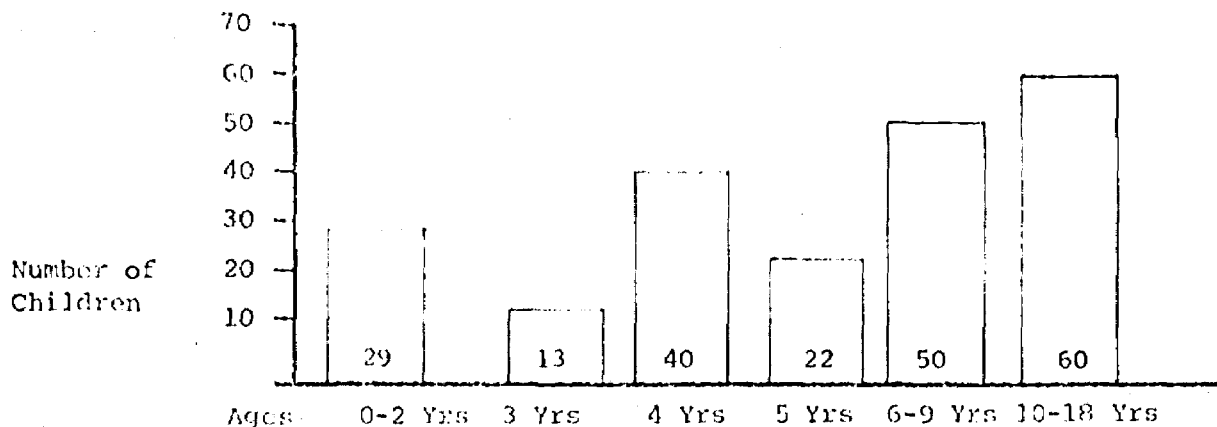
HOURS: Monday - Friday, 8:30-5:30
Family Educators available at
all hours

START UP: April 1972

SPONSOR: Northern Utah Community Action Program, Logan, Utah

CHILDREN: 75 focal children ages 3-5
214 total children ages 0-18

ENROLLMENT: 67 families



STAFF

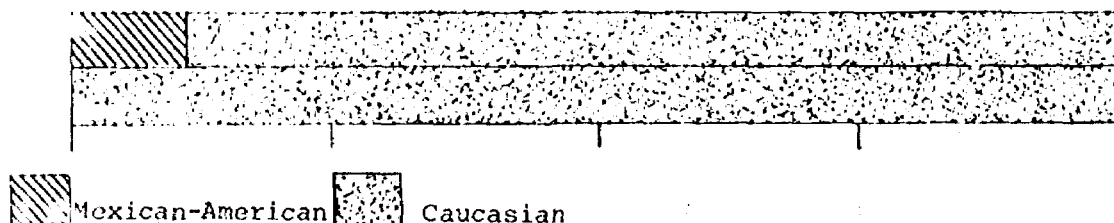
Paid Full Time 15
Paid Part Time 2

Donated Full Time
Donated Part Time

Ages: Under 20 1
21 - 30 10
31 - 40 1
41 - 50 4
50+ 1

Positions: Head Start/Home Start Director, Head Start/Home Start Education Coordinator, Head Start/Home Start Nutritionist, Home Start Coordinator, Family Educators (8), Parent/Social Service Aides (6), Health Services Aide, Home Start Secretary.

ETHNIC MATCH: Focal Children and Staff



¹The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities. Some or all children of this age may be identified as Focal Children, depending upon the interpretation of the program.

FAMILIES

Total Focal Parents¹ 70

Female Focal Parents 68

Male Focal Parents 2

Ages:	Under 20 years	0
	21 - 30	40
	31 - 40	22
	41 - 50	3
	50+	1

Annual Income of Families: All but 6 non-farm families.²

Under \$2,000	7	\$6,001 - \$8,000	16%
\$2,001 - \$4,000	37%	\$8,001 - \$10,000	3%
\$4,001 - \$6,000	34%	\$10,001 - \$12,000	2%

EMPLOYMENT OF FAMILIES: 84% Families in which one or more parents is employed

Regular Work: 82%

Part Time Work: 1%

Seasonal Work: -

EXPENDITURES³

4% Rentals and Purchase Supplies

1% Other

Staff salaries and fringe

69%

3% Consultants

7% Travel

13% Space & Utilities

3% Consumable Supplies

TOTAL BUDGET: 121,400

Federal Share: 100,000

Non-Federal Share: 21,400

Utah reported \$11,701 in in-kind funding. Almost all of this was for donated space and utilities.

ACTUAL EXPENDITURES: 92,703

Federal: 81,002

Non-Federal: 11,701

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

³ Of farm families 2 had incomes of \$2001-4000, 2 of \$4001-6000 and 2 had income of \$6001-8000.

HOME VISITING IN NORTHERN UTAH

Springtime in the northeastern corner of Utah, just south of the Idaho border, is a beautiful time. Elders and cottonwoods are budding and wildflowers like lupines, Indian paintbrush and sego lilies dot the meadows. To the west of Home Start's headquarters in Millville, five miles from Logan, stretches Box Elder County, Utah's largest county, for the most part the arid wasteland of the north end of the Great Salt Lake. Millville is in Cache County, with a view of the Bear River Range, where Logan Canyon's 40 miles of mountain brooks, rocks and wildflowers twist up to the ranch land of Rich County and Bear Lake. This is flat, high country not unlike western Wyoming, with snows that linger for seven months of the year, sharp air and stunning vistas.

It takes Lorie Roggman two hours to maneuver her Volkswagen up the canyon to her visit with the Simms family. Lori's in her twenties, a pleasant, low-key woman with a B.A. in psychology and an M.A. in psychology and child development. She feels her behavior modification training has been very useful to her, but would prefer five years of on-the-job experience to more formal training right now. The Simms family lives on the dairy farm where Mr. Simms works. Bessie is in her late twenties and has three children, Allen, 5, Judy, 4, and Amy, 2. She has recently become a member of the Church of the Latter Day Saints and is very enthusiastic about the new turn her life has taken. In addition, she is interested in becoming a vegetarian, and Lori will soon be bringing her seeds and a book on gardening. The visit begins with Bessie bringing out the sewing she's been working on to show Lori, and the two talk about clothing costs and budgeting. The talk turns to health foods and Bessie's interest in Weight Watchers while the children assemble. The whole family is interested in the projected garden, and Allen brings out a book on plants and talks about the kinds of things they'll grow. Why couldn't they plant their seeds right now? Bessie explains that their Daddy first has to plow up the ground and he hasn't had time yet. Bessie and Lori tell the children about seedbeds and weeds and grass, and Lorie leads the discussion to bees. She gets her bag out of the car and produces a model of a honey-bee which everyone examines. The children identify the colors, the parts of the body, number of legs, and so on, and Lori shows them a book about bees and how to care for them. For a snack, Lori's:

brought crackers and honey, and Bessie helps them learn how to get the honey out of the jar without coating the table and themselves. As she's leaving, Lori discusses Bessie's application for food supplements with her and reminds her of the field trip several families will be taking next Friday. Stowing her canvas bag in the back seat, Lori waves to the children and begins the slow drive down the canyon to her next family.

Home Visitors in this program are called Family Educators. Two are located in Rich County, three in Cache, and three in Box Elder County. Although Northern Utah Home Start was one of the last programs to be funded and put into operation, it quickly began delivering services and has been a stable, effective force in the lives of its families. In part, this is due to the structure of the program, a joining Head Start/Home Start project which provides already-established expertise in many areas and sharing of critical staff and resources. This program also conducts conscientious self-evaluation to improve its services, and has made a real effort to educate the community to its work. This is important in Utah, where essentially conservative Mormon traditions encourage thrift and hard work and regard poverty-level people as lazy and undeserving of assistance. Northern Utah Home Start feels it is changing the lives of its families for the better by caring and showing parents how to help themselves and their children.

HOW HOME START BEGAN IN NORTHERN UTAH

Home Start is sponsored by the Northern Utah Community Action Progra, based in Logan. Serving about 60 children and their families in three classrooms (two in Cache County and one in Box Elder), Head Start has been a popular program, in part because Morman philosophy emphasizes the importance of education, and so an educational program can win community support. In September 1971, Head Start Director Sheri Noble was contacted by the Office of Child Development's Regional Representative and told about Home Start. Sheri and her staff drafted a proposal which was revised twice before being accepted in February 1972.

Head Start used radio advertisements and the State Unemployment Office to recruit staff, who were screened by representatives of the Head Start Policy Council, CAP Board, the low-income community, Head Start Career Development Committee, the Associate Director of CAP and Sheri Noble. The recommendations of this group

were approved by the Head Start Policy Council, and the program set out to recruit its families. Referrals came from the welfare office, public health departments, the supplementary food list and the emergency food and medical program, and Parent/Social Services Aides roamed neighborhoods in search of potential families. "Judy drives through towns looking for diapers on the line and tricycles in the yard," a staff member reported. By the end of September, Home Start was fully operational.

Currently, the program serves 67 families with a total of 75 focal children, of whom 68 are Anglo and seven Chicano. Of 70 focal parents, 68 are women and two are men. In two families, both parents are focal parents, and 23 families are single-parent-headed. Of the program's farm families, two earn less than \$4,000 a year, two earn less than \$6,000, and two earn less than \$8,000. There are 61 non-farm families, with five earning less than \$2,000 and 44 less than \$6,000. Nine earn less than \$8,000, two less than \$10,000 and one less than \$12,000. Seventeen families have eight or more members. Participation in other federally-sponsored programs includes 29 families using food stamps; 28 receiving Aid for Dependent Children; 21 using surplus foods; four with Medicaid; one with the Work Incentive Program.

PROGRAM ORGANIZATION

Sheri Noble is Head Start/Home Start Director, devoting 60% of her time to Home Start and 40% to Head Start. Through Acting CAP Director Mel Foster, she is responsible to the Cache County Commissioners who have taken over operation of the Northern Utah Community Action Program with the defunding of OEO. Other Head Start staff share their time on the same basis. They are: Education Coordinator Glenna Markey; Parent/Social Services Coordinator Pearl Thomas; Nutrition Coordinator Karen Runner; and Health Coordinator Helen Olsen. Part-time psychologist Skip Winger is also helping both programs while working on his degree. Jane Harston is the Health Services Aide, who helps Helen Olsen and is also receptionist for the program. Jan Boyce is secretary for Home Start. Joan Miller and Kathy Larsen are Social Services Aides for Box Elder and Cache Counties respectively.

Visiting staff in this program are called Family Educators. There are eight of them, all women, with diverse backgrounds and experience. Two are high school graduates, three have some college, and three have degrees. All staff are Anglo. Family Educators visit between seven and ten families each, covering as much as

100 miles daily in their own cars. They are the heart of the program, and several have Head Start backgrounds. Staff are proud that Educators are cooperative, rather than competitive, with each other, and their pooled ideas and solutions have proved invaluable to the program.

Pre-service training was held in March of 1972, with Dr. Jim Gage, OCD Child Development Specialist, Drs. Carol Lambert and Don Carter from Utah State University's Home Economics Department, and Sally Miner, Head Start Regional Training Officer discussing with staff the potentials and problems of serving families through a home-based program. Head Start Coordinators held workshops on their specialties. In-service training takes place at Friday staff meetings and training workshops. Consultants have covered topics such as identifying family needs and defining goals; using materials found in the home; preparing lesson plans; changing the role of Educator as parents develop self-sufficiency; recognizing and dealing with learning disabilities; and encouraging language development. Educators are encouraged to attend local conferences, and some are taking child development courses at the University of Utah's Extension Office in Brigham City. In practice, Educators bring their problems to Friday staff meetings. If more training is indicated, Sheri Noble or one of the Coordinators will arrange for that assistance. In March of 1973, the entire staff took a three-day retreat to identify program weaknesses and evaluate their performance.

Parents in each county elect four representatives to the Home Start Policy Committee which in turn elects members to the joint Head Start/Home Start Policy Council. Parent groups also meet twice a month with their Family Educators, and while this meeting is taking place, children are supervised and given opportunities for group play. The program has offered Parent Effectiveness Training and a Pounds Thinner class, but response has recently dropped off. The Head of the Utah State University Extension Service talked to parents about nutrition and the Nutrition Aide service, and staff have decided to let parents indicate what they want to learn and respond accordingly. Sheri Noble reports that parents are participating more at meetings now and are also getting more involved in home visits.

PROGRAM SERVICES

Education

Education Coordinator Glenna Markey supervises Family Educators and helps them develop educational plans for specific families. Educators have a list of pre-school skills for focal children to develop, and Glenna works to find different

ways to present these skills, determine a child's developmental level, and evaluate his progress. Educators, however, are the primary architects of Home Start's curriculum and generally develop their own lesson plans, using Glenna as a resource.

Shortly after a child is enrolled in the program, the Educator fills out an evaluation form assessing the child's developmental status. This form is updated at the end of the year to show progress. Health Coordinator Helen Olsen has been trained in administering the Denver Developmental Screening Test and is teaching Educators how to use it. Each child will be tested for muscle coordination, balance, language use, hand-eye coordination and other skills, and Educators will be able to tailor their lesson plans more closely to individual child needs.

Home Start maintains an Activity File containing lists and descriptions of useful family activities for all four components. There's also an Idea File with suggestions for home visits, field trips, and so on. Anyone who has had a successful experience with families is encouraged to share it with other staff through these files. Glenna Markey is now developing a resource center where parents and staff will be able to find new games and activities to foster their educational growth. Parents are building partitions and shelves in the center, which is located in Head Start's building. Some 16 parents have received educational services through referral, and the program has offered child guidance classes to supplement the child development information passed along in the course of home visits. Twice each month, parents get together and their children are given a chance to learn through group play. The program's close connection with Head Start means Educators can share and adapt Head Start educational resources for their own needs.

Health

Health Coordinator Helen Olsen and her Aide, Jane Harston, do much of their work in Home Start headquarters at Millville, but they also visit new families to acquaint them with the program's health focus. They feel their screening efforts have caught some disorders which would otherwise have gone unnoticed--amblyopia, for instance, a vision problem which cannot be corrected after the age of five. All children have physical and dental examinations from their own private doctors.

and dentists, but the program maintains health records as well. The program tests children for hearing and speech disorders, and the Denver Developmental Test is done while parents are in attendance so they can see for themselves which areas need extra help. Children are also tested for TB and vitamin/mineral deficiencies. Two families have been referred to the Crippled Children Health Service for complete diagnostic workup and treatment.

Home Start has a health advisory board consisting of area professionals--doctors, a dentist, psychologist, nutritionist, parents, and health agency personnel--who consult with staff. Helen Olsen is working on a training session for Educators in first aid and recognizing signs of health problems. She points out that dental health is the most critical need for children in the program, and each child is given a dental health kit when he or she enters the program. Developed for Head Start by the Procter & Gamble Company, the kit contains a guide for parents on dental care, stickers for parents to give children as a reward for brushing teeth, records, books, and slides for use at parent meetings. Home Start and Head Start have jointly bought toothbrushes and toothpaste for all their children.

Parent meetings are used for health education purposes, and Home Start distributes Head Start's health education curriculum, "Healthy, That's Me," a series of booklets designed to show low-income parents good health practices.

Social/Psychological Services

Northern Utah Home Start has three part-time staff in addition to Family Educators to administer the Parent/Social Services component of its program. This is necessary because the three counties served cover a substantial area and activities such as recruiting, getting families to appointments, and arranging group meetings require a great deal of coordination. Pearl Thomas is Coordinator, with two Aides, Joan Miller and Kathy Larsen. Skip Winger is a psychologist who is helping both Head and Home Start while finishing his doctorate. Skip has organized a parent study group to discuss child development concerns in response to parent requests. He consults with staff on child behavior and psychological problems, counsels parents, and works with staff at Friday meetings.

Parents work on projects to help the program--dances, various kinds of fund-raising, graduation ceremonies, bake sales, bazaars and raffles. The program

has gone out into the community and received support: local businesses provide a free airplane ride each year for children, and the Elks Lodge sponsored a benefit dance for Home Start. Ms. Thomas keeps parents informed about food supplement issue dates, food stamp information, adult education classes and other services. She maintains a file of all service agencies in the region which can assist her families. Twenty families have been referred for various services, although Educators provide the bulk of services in the home. The program uses Family Services in Box Elder and Cache Counties as well as public health nurses where indicated. Staff indicate they would like more training in this area.

Nutrition

Nutrition Coordinator Karen Runner works with Family Educators in small groups to provide advice and materials for use with families. She also makes home visits to help Educators determine individual family nutrition needs. Karen organized a Pounds Thinner class for mothers to attend while their children were taking ballet and body movement one afternoon a week. Attendance has dropped off, but staff point out that this is partly because for some mothers, the need has been met. Karen provides information about low-budget diets which are also low in calories and properly balanced, explaining that good nutrition depends a lot more on food habits than on income. Families are referred to the Nutrition Aide program and County Extension services where needed. Some 29 families receive food stamps and 21 use surplus foods. Karen has given Educators snack ideas to take into homes, and this has sparked interest in nutrition. Head Start Supplementary Training funds have been used to give six Educators a nutrition course (with college credit) at Utah State University at Logan.

PROBLEM ISSUES

Director Sheri Noble is pleased with parent involvement, good community relations, improved staff communication through Coordinator as well as Family Educator meetings, and the success of the program's self-evaluation retreat. Problems are:

The isolation of Rich County, which is often snowbound. Coordinators can't get there as often as they would like, and Educators often can't reach headquarters for staff meetings and training. Sheri feels these staff members need more understanding of the program and more motivation, both of which could be accomplished with better communication.

Family Educators have logistical problems in storing and transporting supplies and materials around the large areas they serve. The great distances between some homes also makes it difficult to get parents together, and involving fathers during the week has not been possible. In addition, some Family Educators work in bi-lingual homes and find communication difficult when they do not have the family's language, generally Spanish.

VIEWS OF THE PROGRAM

Parents and staff of Northern Utah Home Start talk about their program:

Staff: "A child who goes to school and is ready to learn is better off than a child who can count to 10 but isn't really ready to learn. There are lots of things involved in a child's readiness to learn." "Our big goal is to help parents help themselves and to become independent so they can help their children too." "Everything we do is educational, whether it's meal planning with parents or health for children." "We have some Family Educators with degrees in child development and some without. The degree doesn't seem to make much difference, except in providing a little more confidence at first." "Sharing information with other Family Educators is important to me in my work with families."

Parents: "My child gets lots more attention with the Educator coming every week, and he needs that." "She's made me realize I've got to spend some time with my kids." "The Educator is able to bring in things to talk about during the visit with Randy that aren't just lessons. She really seems tuned in to his ways and what he likes to do. She lets him have his own pace." "I wouldn't like to have Home Start turned over entirely to parents: we like to have the visits and have new ideas coming in." "The Educator has helped my little girl overcome some of her shyness." "I've gained a good friend, and she's really opened my eyes about what Debbie can learn." "Now I can begin to think of things during the day that my child and I can do together. I say, 'Please give me two eggs,' and Robbie seems pleased that she can participate. It's more fun." "I sure am going to be sorry to leave the program when Annie goes to school this fall, but she's gained so much in independence and confidence."

PROJECT HOME START
Parkersburg, West Virginia

SUMMARY CASE STUDY
Fall 1973

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IN BRIEF

Parkersburg, West Virginia
Spring, 1973

PROGRAM: Rural, Serving 10 counties

HOURS: Monday-Friday

8:30a.m.-5:00p.m.

START UP: February 1971

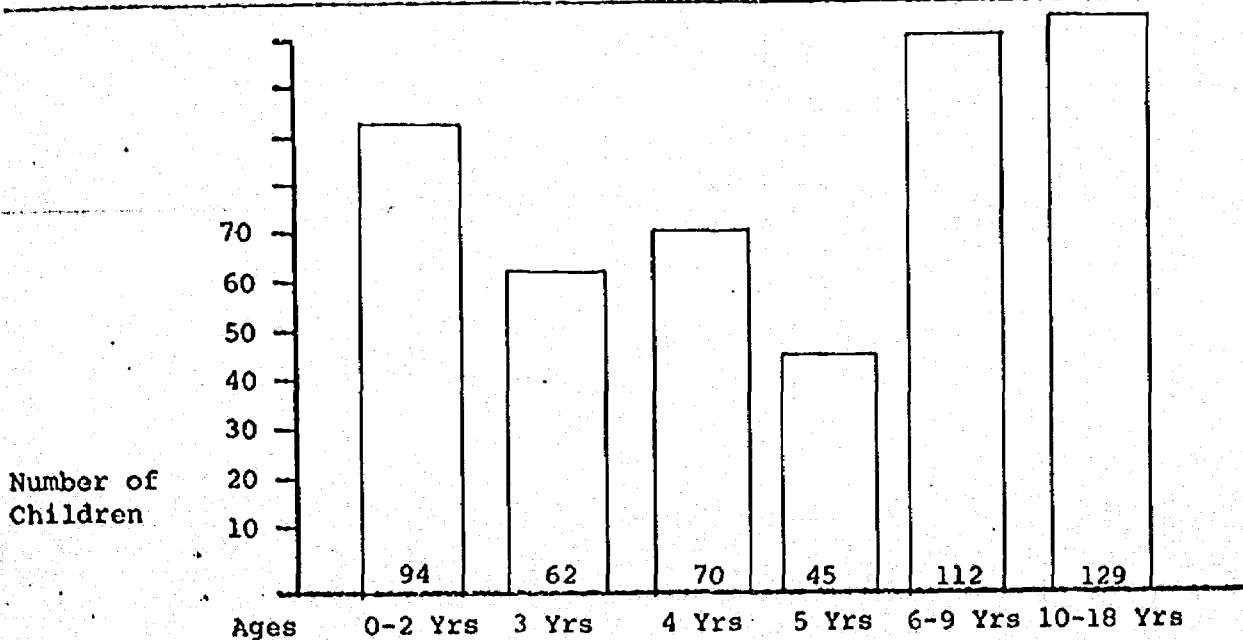
Staff on call evenings and weeks

SPONSOR: West Central West Virginia
(Community Action Association)

CHILDREN: 171 Focal Children ¹

512 Total Children ages 0-18

ENROLLMENT: 120 Families ²



STAFF

Paid Full Time 13
Paid Part Time 0

Ages: Under 20 0
21 - 30 5
31 - 40 3
41 - 50 4
50+ 1

Donated Full Time
Donated Part Time

Positions: Project Coordinator; Assistant Project Coordinator
Home Health Coordinator; 22 Home Visitors+ 1 West
Virginia University School of Social Work Student

ETHNIC MATCH: Focal Children and Staff



¹ The Focal Child in each family is between the ages of 3 through 5 and is the focus, along with the Focal Parent, of home visit activities.

² In Spring 1973 the program has less than full enrollment (160) due to changes of participating families. Changes in OEO funding also resulted in decrease of staff.

FAMILIES

Total Focal Parents¹ 132

Female Focal Parents 111
Male Focal Parents 21

Ages: Under 20 years 3
21 - 30 69
31 - 40 44
41 - 50 14
50+ 2

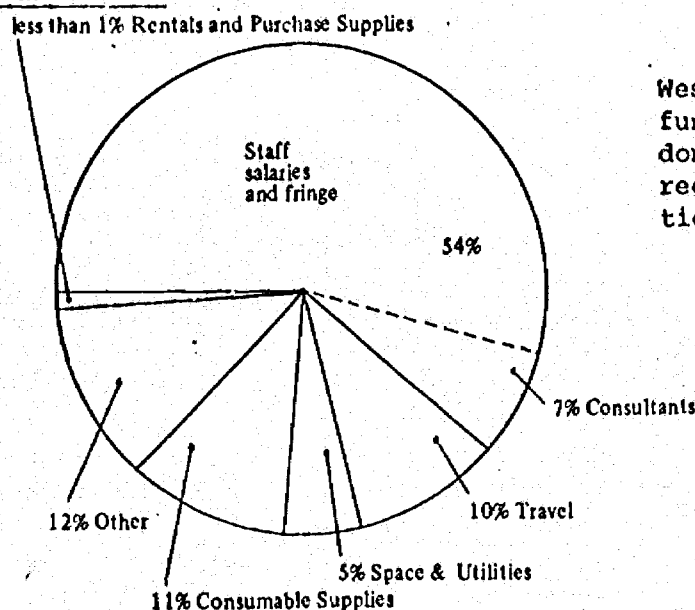
Annual Income of Families: All non-farm families

Under \$2,000	33%	\$6,001 - \$8,000	2%
\$2,001 - \$4,000	56%	\$8,001 - \$10,000	0%
\$4,001 - \$6,000	10%	\$10,001 - \$12,000	0%

EMPLOYMENT OF FAMILIES: 60% Families in which one or more parents is employed

Regular Work: 34%
Part Time Work: 19%
Seasonal Work: 7%

EXPENDITURES²



West Virginia reported \$15,698 in non-federal funding. A large portion of this was for donated space and utilities. The project also received donated health, social work and educational services.

TOTAL BUDGET:	111,000	ACTUAL EXPENDITURES:	112,329
Federal Share:	100,000	Federal:	96,631
Non-Federal Share:	11,000	Non-Federal:	15,698

¹ The Focal Parent in each family is the one who is, along with the Focal Child, the focus of the home visit activities.

² Both budget and expenditure figures are for the period between March 1, 1972 and March 1, 1973.

HOME VISITING IN WEST VIRGINIA

It's been raining in West Virginia; the road to the Bissionette house is rutted and rough, even though it had a load of gravel spread over the dirt a couple of years ago. For Home Visitor Maxine Abner, this twisting drive along the sides of the "hollow" usually takes 45 minutes. The rugged Appalachian country is plush and overgrown. Although the spring rains are beautiful here, they help turn the country itself into a tangle of obstacles, keeping families from jobs, schools, doctors, and other families.

There are ten counties in this country served by the West Central West Virginia Community Action Association with central offices in Parkersburg. The CAA has offices in each of the counties, supervised by a Delegate Agency Director who is responsible for local programs for Manpower, Rural Arts and Crafts and other projects. As a part of this decentralized Agency, Home Start here has an administrative set-up different from most other Home Start programs. Its Home Visitors, like Maxine Abner, are part of the central Home Start office in Parkersburg, but have offices in the counties and are also responsible to the Delegate Director in the agency where they are located. Roane County is one of the ten served by Home Start. Maxine is at home here too. She was born here and like many of her long time neighbors, she is quiet, reserved, but friendly. Today, Maxine has started earlier than usual from her small office in the Delegate Agency. She soon pulls her car to the side of the road, though no house is in sight, and begins a long muddy climb up the hill. The Bissionettes live close, but Maxine visits some families that live nearly two miles from the nearest road. As she nears the house, there is a rustle in the underbrush. "Look Mrs. Abner ... we got a package!" The voice is soft, a little shy, and belongs to 5-year old Cindy, who always meets Maxine before she reaches the house. Packages and visitors are precious; the family has no car and usually gets into town once a month.

Mrs. Bissionette is happy to see Maxine, too. A heavy-set, red-haired woman in her early thirties, she and her husband have seven children. Mr. Bissionette

is often nearby when Maxine visits, but he is "people-shy", as they say in West Virginia, and only rarely comes into the house where he will watch but not take part in the activities.

They open the package in the yard, to find that it contains books ordered by an older sister. For a while they talk about books; Mrs. Bissionette wants to make sure the children understand how important books are, Maxine encourages such conversations. Cindy had a speech problem when the family joined the program. With the help of other Home Start staff, Maxine has identified activities which will help Cindy practice clearer speaking. She makes a special point of talking with both children so that Claude will hear the speech patterns he, too, has trouble imitating.

Inside the house, Claude, Cindy, Mrs. Bissionette, Maxine and a baby in a high-chair fill up the small kitchen. A pump for water in the kitchen is the only convenience of indoor plumbing. While she and the children talk, Maxine pulls stencils, drawing pencils, paper and crayons from her bag and Cindy and Claude set to work eagerly tracing coloring and cutting out animals and flowers. Their activity reminds Mrs. Bissionette that she has seen some paint-by-numbers projects that she likes; it would be fun, she thinks, if several Home Start mothers could get together to do some painting. She would enjoy sharing ideas about planning meals, too. Maxine has encouraged parents to think of useful projects that don't require much cash, but which provide opportunities for parents to get together, share thoughts and have a good time. They have a little money, allotted from their parent activity fund for Roane County which they have decided to put toward the purchase of a used sewing machine, some materials and thread so they can take turns making clothes for their families.

In other counties this cooperative activity has focused on home repairs such as painting, putting on siding, fixing porches, and improving heating and wiring in various homes. Money is scarce and transportation is always a problem, but with the families in each area sharing some things, they're beginning to build cooperative relationships to help each other with mutual concerns.

HOW HOME START BEGAN IN WEST VIRGINIA

The Appalachian Educational Laboratory's curriculum model was the inspiration for Home Start's forerunner in West Virginia, a program called Preschool-at-Home. But because the television component of the program would have had to originate in Charleston, programs could not be received in much of the 10-county area served by West Central, so staff decided to develop their own Early Education Program. Margery Morehardt, Chief of West Central's Office of Planning, Program Support, Research and Development, had spent five years as Director of Head Start in the region and knew the scope of local problems. Preschool-at-Home was funded by OEO and operated from March 1971 to February 1972 with 11 aides who made home visits to about 120 families, most of them truly isolated and out of reach even of Head Start's Rural Transportation System.

When OEO's future became doubtful, the program had to look elsewhere for funding. Using their combined Preschool-at-Home and Head Start experience, staff of West Central applied for Home Start funding, were accepted, and began operation as a Home Start program in March 1972. New Home Visitors, to bring the total to 22, were hired by Delegate Agency Directors and Susie Pahl, who had been a former Head Start supervisor and a member of the Preschool staff, became Project Coordinator; additional staff were found. Some 43 Preschool-at-Home families were eligible for the new program, and Visitors began with welfare lists and canvassed door-to-door to bring Home Start up to full strength. Families were selected on the basis of greatest need but to be eligible they could not have other children in Head Start. Some of the most needy, by outside standards, were unwilling to participate or allow outsiders in their homes.

The possible dismantling of OEO in 1972 was unsettling for the program. Some reorganization did take place, but the Executive Director of the CAA in Parkersburg allocated extra funds for the Home Start program to insure that families would continue to be served. The establishment of a day care program in one of the ten counties provided alternatives for some families, and

plans were to limit Home Start to the nine remaining counties once the day care program was available. Some funding from the Department of Mental Health was lost during the reorganization; consequently, four Home Visitor positions funded by that Department were dropped. The program has retained 18 Home Visitors, however, with 11 paid by the Home Start budget and the other seven covered by OEO allocations.

Today, Home Start serves 120 families with a total of 171 focal children, all of whom are white. Of 132 focal parents, 111 are women and 21 are men; in at least 20 families, both parents are considered focal parents. Some 39 families have incomes of less than \$2,000 annually; 67 earn between \$2,000 and \$4,000; 12 between \$4,000 and \$6,000, and two earn between \$6,000 and \$8,000. Participation in other federal programs includes 47 families receiving Aid for Dependent Children, 65 enrolled in Food Stamps, 47 with Medicaid, 15 family members in the Work Incentive Program, and 18 families living in public housing. Others work with the Job Corps or Neighborhood Youth Corps.

PROGRAM ORGANIZATION

Susie Pahl, Project Coordinator, is a tireless, immensely competent woman with the ability to communicate her enthusiasm and concern to all her staff. She is responsible for day-to-day operations, reporting to West Central's Executive Director. Susie works closely with her Assistant Coordinator, Helen Hupp, who is primarily responsible for all record-keeping; the two of them accompany and supervise Home Visitors, attend parent meetings, train staff and monitor the program. Both travel to local county offices rather than rely on impersonal communication, and they're often accompanied by Virginia Foreman¹, the program's Health Coordinator, who is responsible for the health and some aspects of nutrition training.

¹ Ms. Foreman left in Fall 1972 and was replaced by Dorothy Morrison, R.N. Since her arrival, Ms. Morrison has visited nearly all the program's 120 families and completed medical records for children in the families.

The 18 Home Visitors are divided among the nine counties according to the number of families in each county. One county's families are shared by four Home Visitors; in other counties, only one Home Visitor is utilized. Each Home Visitor visits an average of nine families every week. All Home visitors are natives of the areas they serve and were recruited by local Delegate Agency Directors who usually know them personally. Of Home Start's total staff all are women and all are white.

In addition, Home Start is an approved field work placement for the University of West Virginia's School of Social Work. Students from the school have been useful, if temporary, staff for the central office during their full-time four-month placements.

Pre-service training was intensive and solidly practical. All Visitors met in Parkersburg for a two-week course taught by the Home Health Coordinator and personnel from a local community college, Planned Parenthood and the Wood County Health Department. Topics included health care (first aid; personal hygiene; recognizing and treating unhealthy animals; treating lice, ringworm, poison ivy), preventive oral hygiene, and environmental health (protection of private water sources; how to correct unsafe water; proper sewage disposal; sanitary food handling and storage). Nutrition and education have been addressed from the beginning in weekly in-service training sessions. Visitors have chosen the Far West Lab and Hap Palmer education materials and are being trained in their use. A number of Visitors have taken a child development course offered by a local community college, and more will be attending the next session.

Home Visitors are now planning and conducting training meetings themselves. The entire staff meets weekly, often in a different county to spread the burden of travel equally. Each week different members of the staff develop educational activities emphasizing home made materials. Each training meeting incorporates nutrition activities into the schedule, with the assembled staff acting as a parent group so that Home Visitors have additional practice in developing group activities.

All parents in each county get together for monthly group meetings. Parents have now passed the getting-acquainted stage of social gatherings and are beginning to discuss issues of common concern -- condition of local roads (which can determine whether a child gets schooling or not), school textbooks, local services, and so on. Some groups have invited nutritionists to speak about improving nutrition, and home safety and sanitation projects undertaken by groups have improved basic living conditions for families in need. Logistics problems (transportation, meeting places, babysitting) and some hesitance by parents have slowed parent takeover of their own meetings.

But progress was visible by the Spring of 1973; two counties have found permanent meeting places for parents. In one, where nearly 30 Home Start families are located, the meeting space is located in an old school building. The space was set up by the local Agency Director and provides opportunities for parents to have regular workshops and meetings. Social groups for children are always part of parent meetings and special space is devoted to those play groups.

Each county has a Home Start Parent Committee comprised only of parents, and a Home Start Policy Committee made up of members of the Parent Committee plus representatives to the Home Start Policy Council, a third body composed of one parent and one community representative from each county. The Policy Council is a project-wide body which helps set guidelines and advises West Central Home Start staff. The program is putting together a parent manual to help its parents understand Home Start, how it functions, what its aims are, how its funds are spent. At first, staff had difficulty finding motivated, committed members for its councils, but participation has improved in the past few months.

PROGRAM SERVICES

Education

sample time records indicate that Visitors spend as much as 70% of their time in the home on educational activities, although there appears to be some overlap with the psychological and social services component. Visitors

work for parent involvement in child education through the following five guidelines:

- Gain parents' respect.
- Leave things in the home.
- Give assignments for the following week.
- Praise parents' efforts to help children.
- Get the child to seek help from parents.

While the program believes in basing activities on materials found in the home, it has also bought new materials, including the New Nursery School Books, designed to help Visitors combine child education with parent understanding of child development. Some manufacturers demonstrated their products at staff meetings to ensure proper use. The toys are designed for various developmental levels and have specific learning objectives. In introducing new materials, Visitors make sure parents understand the purpose of the activity and what is expected of the child.

Home Visitors have identified many useful books for parents and children working together. One is the "Creative Moments" series which utilizes very small learning exercises as ideas for parents. In addition, parents have put together a 25-page booklet of activities and recipes called "Ideas for Home Start Parents" used by present and future Home Start parents.

Some parents have been referred to Vocational Rehabilitation, Job Corps and Community Action Agency programs, and others have been referred to local adult education and G.E.D. classes.

Health

Health has been a real priority for Home Start. Dorothy Morrison, Health Coordinator, has worked with Visitors to see that all parents who would allow their children to be examined have now been seen and follow-up treatment where necessary is being provided. Some 123 children have had vision examinations, 132 dental checkups, and 149 general examinations and lab tests (urinalysis). There have been 200 immunizations. Screenings are first conducted by Dorothy; they consist of a hemaglobin count, urinalysis, measures of height and weight, and a dental check by a hygienist who donates her time.

Ms. Morrison has also made arrangements with drug stores in many counties so Home Start parents who are not on welfare can charge prescriptions to the program, the object being to encourage parents to use preventive medicine. Home Start continues to provide all its preschool children with vitamins. Where possible, the program also provides physical, vision, hearing and dental examinations for other family members, working through private physicians and dentists, county health departments and pediatricians.

Home Visitors estimate they spend about 10% of their time in the home on health-related subjects, and they will be receiving ongoing training in regular staff sessions. Coordinator Susie Pahl comments, "Much progress has been made in the medical component, getting Visitors to recognize medical problems on their own and take appropriate referral or corrective action." In addition, parent groups are attacking the home safety and sanitation problems they experience, helping each other maintain outdoor privies with lime, put up screening, buy the proper kinds of paint and safe floor coverings for homes.

Social/Psychological Services

For many of Home Start's families, who live far back in "hollows" separated by tangled ravines and low ridges, involvement in group meetings and the Visitor's weekly calls are badly needed social opportunities. Some family needs in the social area are stark and basic: "They need a bridge so they can get to the road in wet weather," says one Visitor; "The greatest need is a good washing machine to keep up with wash for eleven people -- it's now done by hand." Unemployment and housing repair were also identified as needs for families, and some have been referred to Delegate Agency programs such as Mainstream, Job Corps and Neighborhood Youth Corps as well as Work Incentive programs for employment. Parents are also trying to help themselves with housing problems; the program is currently looking into sources of funds so groups of parents can do their own work. Arts and crafts sales and bake sales run by parents and Visitors have netted up to \$70 a piece, and although the welfare department won't release money for this purpose, Visitors are pressing for FHA home repair loans for their families.

According to Susie Pahl, "The doors are starting to be opened to many additional services: free legal help has been used to force local school systems to provide free textbooks to poor children as required by West Virginia law; Home Visitors are bringing children to the county nurses for immunizations so they will not be prevented from entering school, as often happens; some families have been helped to move into housing projects; the state road commission is being prodded into getting many of the families' roads repaired; a number of job referrals have been successfully made,"

In addition, a variety of referrals are made to Delegate Agencies, to welfare, and to other community resources, which vary considerably from county to county.

Nutrition

Improved nutrition is seen as a common need among Home Start families, and often appears to be critical. In one or two counties Home Visitors note, "Sometimes they have nothing to eat." Dorothy Morrison and an outside consultant provided Visitors with nutrition education during both pre- and in-service training sessions, and Visitors are passing this knowledge along to their families. Parent groups have brought in nutritionists to talk about the four basic food groups and economical but balanced diets. Parents in one county have begun going to the grocery store together, to shop for best buys and proper foods and simplify their transportation problems. Says Project Coordinator Pahl, "This plan seems so promising that an effort is being made to encourage families and Visitors in other counties to do the same thing." Visitors estimate they spend an average of 11% of their time on nutrition. Three families have been referred to food stamp programs, and several counties have Agricultural Extension offices which, sometimes, will send a nutritionist to the home with food planning information. Home Start still provides vitamin supplements to preschool children in its program.

PROBLEM ISSUES

West Virginia Home Start faces a critical problem because of its close ties with OEO. With the dismantling of this program, the 10 Community Action Agencies through which Home Start works are in limbo, many staff have left, remaining staff are overburdened and morale is very low for those who remain. Of an original 22 Home Visitors, many directly salaried by OEO were cut, leaving only 10. West Virginia Home Start has been undergoing drastic revision since many staff, supervisory as well as direct, are OEO employees. On a more specific level, Susie Pahl indicated the following problems:

Too many demands on the Project Coordinator's time because of outside visitors, monitors and evaluators, conferences and other events. These functions are cutting into the time Ms. Pahl would prefer to spend accompanying Visitors and monitoring their work.

Visitors have a resistance to accounting for their time by keeping accurate daily summaries, and this has meant a lack of information in the central office about referrals, calls to state agencies to prod local agencies into action, and so on.

Parent groups and policymaking bodies have been slow to get off the ground because of logistical problems for parents and a certain amount of parent resistance to participation. Delays in getting the Parent Manual printed and difficulty in finding people who will serve have hampered formation of an effective parent advisory group.

VIEWS OF THE PROGRAM

Parents and staff of West Virginia Home Start talk about their program;

Staff: "Home Visitors have to be flexible -- to be accepting of different standards for child rearing, and housekeeping; to be able to recognize common diseases and bugs; to accept wear and tear on cars; to walk through mud and brush to reach families.

"As a Home Visitor, my experience being in homes has taught me many things... how people need to be praised and liked ... how we all have problems with everyday things.

"It would be good to have a small emergency fund for families so we could buy soap for them without going through the agency bookkeeping department.

"Support and encouragement from the central staff has really saved me ... although sometimes it was only by telephone. I couldn't have done without it."

Parents: "My daughter helps me more around the house and can do many more things by herself now." "The Home visitor has helped both my kids talk better: my daughter takes better care of things now, hers and other peoples'." "She arranged to get free glasses for the twins. She provides transportation when I need it." "I like all the things she does with my child." "I watch the kids better now and help them learn to eat right." "She brought clothes and medicine for us. Just knowing she's available to help makes a difference."