

# Families as Primary Partners in their Child's Development & School Readiness

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Child and Human Development*

## **Prepared for:**

The Annie E. Casey Foundation



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**The Annie E. Casey Foundation** is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. It was established in 1948 by Jim Casey, one of the founders of United Parcel Service, and his siblings, who named the Foundation in honor of their mother. The primary mission of the Foundation is to foster public policies, human-service reforms, and community supports that more effectively meet the needs of today's vulnerable children and families. In pursuit of this goal, the Foundation makes grants that help states, cities, and neighborhoods fashion more innovative, cost-effective responses to these needs. For more information, visit the Foundation's website at [www.aecf.org](http://www.aecf.org)

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# About the Author

**Kathy Seitzinger Hepburn** has worked with and on behalf of children and families throughout her career. Her work has focused on early childhood, young children, and their families in settings that include mental health services, specialty health care, and early care and education. Following years of direct clinical work and support services to children and families, she became Project Coordinator for Health and Mental Health Services for the Region III Head Start Resource and Training Center (HSQIC) at the University of Maryland University College. In this capacity, she provided extensive training and technical assistance to the Head Start and early childhood community. Ms. Hepburn is currently a Research Instructor, Senior Policy Associate on faculty at the Georgetown University Center for Child and Human Development, and works from her home office in California. At Georgetown, she is involved in multiple projects—local, state, and national—that support the early childhood and mental health services communities.





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# Introduction: Purpose and Literature Review

## THE PURPOSE OF THIS TOOL KIT

This tool kit has been created for the Annie E. Casey Foundation to help promote early childhood development and school readiness. The purpose of this tool kit is to provide guidance, resource materials and references that will assist communities in working with families as primary partners in their child's development and school readiness. By recognizing and building the capacity of parents as their child's first educator and engaging parents as decision makers for their child and leaders in the agencies and organizations that serve them, communities can strengthen families and support young children being ready for school.

The complete tool kit—including, Introduction, Part I and Part II—focuses on parents as educators and parents as leaders with attention to:

### Part I

- Parent education and parents as a child's first teachers;
- Parent education models, including home-visiting and site-based programs;
- Professional and paraprofessional preparation to deliver parent education services; and
- Program outcomes and evaluation.

### Part II

- Parent involvement as decision makers and in leadership roles;
- Policies and standards that support parents as leaders;
- Parent and provider/professional preparation for and engagement in collaborative leadership; and
- Sustaining collaborative leadership.

The intent is to support a holistic approach and encourage parents as primary partners across **all systems** that serve young children and their families and help young children grow up healthy, develop well, and enter school ready to learn. Throughout the tool kit, effort has been made to be inclusive of health, mental health, early intervention, and other services systems. Although there may be extra emphasis on specific types of programs as illustrations, the concepts and practices relevant to parents as primary partners can be taken in by all those who serve children and their families in the communities where they live.

## HOW THE TOOL KIT IS ORGANIZED

The tool kit is organized into an *overall introduction*, *two parts* and *ten major* content sections.

### Introduction: Purpose and Literature Review

- A. Definitions

### Part I: Parents as Educators: Learning in the Context of Relationships and Child Development

- A. Parent Education and Parents as Educators
- B. Parent Education Models: Home Visiting and Site-Based Intervention
- C. Professional and Paraprofessional Competence
- D. Evaluating Parent Education Programs

### Part II: Parents as Leaders: Engaging Parents as Advisors, Advocates, and Decision-Makers

- A. Parent Involvement and Leadership Roles
- B. Policies and Standards—Infrastructure to Support Parent Involvement and Leadership Roles
- C. Engaging Families in Leadership Roles
- D. Parent Preparation for Parent Involvement in Leadership Roles
- E. Provider and Professional Preparation for Partnerships and Collaborative Leadership with Parents
- F. Sustaining Collaborative Leadership

Excluding the Introduction, each section includes an overview of the issue as well as the following text:

**Critical Questions for Communities** help to frame the work ahead for communities as they attempt to engage parents as primary partners in their child’s development and school readiness.

**Key Strategies for Families, Providers, and Administrators** offer some direction and steps that can be taken to involve parents as educators and as leaders and indicate policy issues for community decision makers.

**Guides, Tip Sheets and Checklists** provide tools for getting started and moving deeper into the work.

**Annotated Resources**, which may include books and print, on-line resources, websites, organizations, and training and technical assistance resources, offer tools that communities might use depending on their community-specific interests and action plan. These items have been carefully reviewed, but may need to be adapted to specific communities. Their inclusion does not imply endorsement of any particular product, provider, source or service.

**Promising Practices**, whenever relevant, will portray how some communities have approached achieving families as primary partners in their child’s development as examples and inspiration.

## HOW TO USE THE TOOL KIT

Parents as primary partners in their child’s development are critical to a child’s healthy development, early learning, and school readiness. Parents as decision makers and in leadership roles strengthen families, service systems, and communities that support children’s readiness for school. This tool kit will be useful for families, community leaders, providers, and administrators—particularly those in early care and education, health care, mental health care, and other service systems. Its use is encouraged for anyone interested in building on the strengths of families as primary partners in their child’s development and including families as leaders and decision-makers in the systems that serve them.

The tool kit has been organized so that it is easy to understand and easy to use. Part I and Part II present two major aspects of families as primary partners in their child’s development and school readiness. The sections within both Part I and Part II are arranged by content. It is best for interested users and communities to review and become familiar with the whole tool kit, as the concepts in each section are linked and intertwined. Depending on the unique needs of each user or community, certain sections may be more useful than others. Those who use this tool kit should also be aware of any local, state, or national laws, regulations or guidelines that might influence their approach to working with parents as partners and tailor their work accordingly. A brief description of each section follows.

## PARENTS AS PRIMARY PARTNERS IN THEIR CHILD’S DEVELOPMENT AND SCHOOL READINESS

### Introduction and Definitions

This section offers a brief conceptual and developmental framework for the important role of parents and their involvement in their child’s learning and development as well as their involvement as leaders and decision makers in services and systems that influence their lives. The definitions prepare readers for Parts I and II and assist with clarity and consistency of meaning.

### Part I: Parents as Educators: Learning in the Context of Relationships and Child Development

#### A. Parent Education and Parents as Educators

Parent education fosters the overall development of children by strengthening parent knowledge about child development, building parenting knowledge and skills, strengthening relationships between parent and child and promoting age appropriate care and activities that can promote a child’s development and school readiness. This section can be useful to community leaders, planners/developers, members of the community, families, providers, administrators, and facilitators in understanding the value of parent education, features of effective parent education programs, and considerations for selecting and implementing these programs.

#### B. Parent Education Models: Home Visiting and Site-Based Intervention

A more detailed look at the essential features of home visiting and site-based intervention models of parent education will connect program features to outcomes and results related to school readiness. Selected program models (three in each category) and descriptions of promising practices within real communities help illustrate program implementation and strategies for program success. The real-life

connection between the program, the evidence base, and a community will help community leaders, planners, families, providers, and administrators have clear expectations of certain parent education models and their influence on child development and school readiness.

### **C. Professional and Paraprofessional Competence**

The success of a parent education program relies heavily on those who provide the services and their preparation for the work of home visiting or site-based intervention. In relationship-based work, the ability to engage families and build trust is a critical skill. Home visitors and parent educators must also have an appropriate knowledge base, core competencies, preparation in the specific curriculum or program model, and the support of ongoing supervision. This section will help planners, providers, and administrators consider staffing requirements and staff competencies in parent education programs.

### **D. Evaluating Parent Education Programs**

Program evaluation is an essential aspect of home visiting and site-based parent education programs. Demonstrating change related to parenting, child development and school readiness requires an evaluation plan and process connected to specific program goals, data collection, and relevant outcomes. Family feedback and participation in program evaluation is critical to establishing a program's effectiveness and evidence base. This section will help providers, administrators, evaluators, and families consider ways to approach program evaluation.

## **Part II: Parents as Leaders: Engaging Parents as Advisors, Advocates, and Decision-Makers**

### **A. Parent Involvement and Leadership Roles**

Family-centered care or services are those designed to support the decision-making role of parents for their child and for their influence on the services and systems that affect their child and family. Parents who are advocates and decision-makers for their own child can become leaders beyond their own family; collaborating with other families, community members, providers, and policy makers to influence services and systems that impact school readiness in the whole community. The text, tools, and resources in this section offer guidance, self-assessment, and strategies for engaging parents as advisors, advocates, and decision-makers toward shared and collaborative leadership. Community leaders, administrators, all types of providers, and families will find this information useful.

### **B. Policies and Standards: Infrastructure to Support Parent Involvement and Leadership Roles**

National standards, local and program policies, administrative structures, and available resources can support parent involvement and leadership roles. This section describes examples of policies that mandate or guide this type of support, specific policy considerations for community-based services and support to families in leadership roles, and how families can be engaged in policy work. Families, community leaders, administrators, providers, and advocates will find this information useful.

### **C. Engaging Families in Leadership Roles**

Engaging families in leadership roles and building collaborative leadership relationships involves values clarification, understanding, and action on the parts of

families, providers, organizations, and communities. This section outlines some of those critical tasks and offers resources and strategies that can support inviting and engaging families to take leadership roles. Families, community leaders, administrators, providers, and advocates will find this information useful.

#### **D. Parent Preparation for Parent Involvement in Leadership Roles**

Everyone has leadership qualities and has the capacity to learn and develop leadership skills. Preparation for parent involvement in leadership roles can include training, parent-to-parent support, and other strategies to build partnership, decision-making, and advocacy skills. This section's text, guidance related to parent leadership training, and other resources will be useful to community leaders, parents, administrators, family organizations, advocates, and trainers

#### **E. Provider and Professional Preparation for Partnerships and Collaborative Leadership with Parents**

To engage in collaborative leadership with parents, providers must commit to the values and principles of family-centered care, collaborating with parents, and reflecting on their own practice of partnership and of leadership. This section's text, materials, and resources will help providers and professionals reflect on their own values and practices related to partnerships with parents and explore related training materials and opportunities. In addition to providers, this section will be useful to organizations, agencies, administrators, supervisors, and trainers.

#### **F. Sustaining Collaborative Leadership**

Collaborative leadership is both a desirable outcome and an ongoing process. This section explores the challenges to and strategies for sustaining collaborative leadership. There is special focus on tips and practical steps related to communication. The text, guidance, and resources in this section will be useful to community leaders, organizations, agencies, families, administrators, providers, and any groups working together in shared leadership and decision making.

## **TODAY'S FAMILIES**

The recent publication, *Child Rearing in America: Challenges Facing Parents with Young Children* (Halfon & McLearn, (2002), portrays the lives of parents with young children in the United States. Drawing from the Commonwealth Fund Survey of Parents with Young Children as a starting point, contributors provide an update on today's parents and policy and program implications to support them. Major themes throughout the book emphasize the ways that childhood and the context for rearing young children has changed.

- A majority of young children are being reared in families where both parents work, where income and earning potential are less than what is needed, and time demands undercut traditional supports.
- More young children are being raised in families where fathers have an important role, and where basic child-rearing responsibilities are increasingly shared by both parents.
- The cultural and ethnic diversity of families with young children has increased.
- The prominence of research on brain development has influenced how America thinks about the early years, impacted what it means to be a parent, and influenced how a parent should behave—especially focusing on skill development in young children.



- Emerging research on educational achievement point to the impact of early childhood programs and family-centered services on children’s school readiness and educational outcomes.
- Scientific revolutions in neurobiology, genetics, and developmental biology have transformed the understanding of early childhood and the long-term impact of childhood on adult health and social outcomes.
- Communities are making efforts to build community-based systems of early childhood services and supports.

Early childhood initiatives across the nation reflect these trends in their efforts to support young children, their families, and school readiness. Many communities strive to improve outcomes for children by offering family-focused interventions that improve parenting, promote parent involvement, and impact the ecological environment in which parenting takes place—the inter-related systems that influence child development: families, school, health care and child care (Halfon & McLearn, 2002). These interests set the stage for looking at the role of parents as primary partners in their child’s development and school readiness and the influence of parenting as well as parent involvement at the ecological or systems level.

## THE FOCUS ON SCHOOL READINESS

In 1997, the National Education Goals Panel (NEGP) set forth the educational goals for the year 2000 which have continued to guide the school readiness agenda for all young children along five dimensions:

- Physical well-being and motor development (good health, nutrition, and physical capabilities),
- Social and emotional development (a healthy sense of trust, self, and competence as well as the ability to cooperate, regulate emotions, and get along with others),
- Approaches to learning (curiosity, persistence, and problem solving),
- Language development (receptive and expressive communication skills), and
- Cognition and general knowledge.

The report emphasized that school readiness for young children depends on early supports and strong foundations to assure these five dimensions of readiness. Recognizing the early and important role of family and community supports, the NEGP recommended that **parents are recognized as a child’s first teacher and that parents receive the support that they need to fill that role**; that all children receive the health, mental health, and nutrition they need to be healthy and alert; and that all children have access to high-quality and developmentally appropriate early care and preschool programs. For schools, providing a “ready for children” environment and experience means serving children within their communities; facilitating a smooth transition between home and school; striving for continuity between early care and education programs and elementary school; and offering developmentally appropriate and effective learning experiences. In addition, ready schools have strong leadership in which faculty, staff, and **parents are involved in goal-setting and decision making** (Shore, 1998; Zaslow et al., 2000).



## TYPES AND LEVELS OF PARENT INVOLVEMENT

Parents as educators and parents as leaders involved in decision making describe types of parent involvement. Joyce Epstein, et al (2000) and her colleagues at the Center of Family, School, and Community Partnerships at Johns Hopkins University, have developed a useful framework of parent-school partnerships to describe parent involvement in the educational setting. The framework includes six types of parent involvement. The three types that are highlighted represent those most relevant to this tool kit.

<b>Parenting</b>	Assisting families with parenting skills and setting home conditions to support children as students, as well as, assisting schools to understand families.
<b>Communicating</b>	Conducting effective communication from school-to-home and from home-to-school about school programs and school success.
<b>Volunteering</b>	Organizing volunteers and audiences to support the school and students. Providing volunteer opportunities in various locations at various times.
<b>Learning At Home</b>	Involving families with their children on homework and other curriculum-related activities and decisions.
<b>Decision making</b>	Including families as participants in school decisions and developing parent leaders and representatives.
<b>Collaborating with the Community</b>	Coordinate resources and services from the community for families, students, and the school, and providing services to the community.

This framework is both useful and limited. Many education providers and practitioners, including the National Parent Teacher Association (National PTA, 1998) have adopted this frequently cited framework (Jordan et al., 2001). In fact, this framework echoes the Head Start and Early Head Start vision and performance standards for parent involvement. However, this framework still represents school-centered definitions. With some adjustments in descriptive language, this framework could be made more developmentally appropriate for younger children as well. Considerations for expanding these definitions and shifting to a more family-centered perspective and collaborative, partnership approach may also be useful—especially when involving parents of very young children in support of school readiness and the variety of systems that serve them.

## **PARENTS AS EDUCATORS—A CHILD DEVELOPMENT PERSPECTIVE**

Most of what children learn in their earliest years they learn in the context of their family. Parenting, as a term, captures the focused and differentiated relationship that the young child has with the adult (or adults) who is (are) most emotionally invested in and consistently available to the young child. It is the quality of the relationship between the caregiver and the child that makes all the difference. (National Research Council and Institute of Medicine, 2000). Family relationships and contextual factors that influence a child's early development and learning begin with parent and child bonding and attachment. Sustained, responsive, nurturing, and consistent parenting practices—including how parents organize their child's experiences, stimulation, routines, and basic health and daily care—influence the child's growth and development across all domains. The emotional attachment between parent and child is a foundation for curiosity, motivation, and the desire to learn. Parents build upon this foundation and provide an environment with appropriate stimulation while displaying confidence in the child's ability to try and master new situations. In this way, parents encourage early learning, school readiness, and success.

## **PARENTS AS DECISION MAKERS—A LEADERSHIP DEVELOPMENT PERSPECTIVE**

Across systems that serve young children and their families, there are inconsistent perceptions and practices related to parent involvement and engaging parents as decision makers and leaders. Most often, the concept of parents as decision makers is used to portray the perspective that parents are the true experts with respect to their own child and the decision makers for their own child and family. In some systems, the concept of engaging parents as decision makers has expanded to include a role in the governance or programmatic and policy decision making within a program, agency, or organization from which their young child and family receive services. In this tool kit, parents as decision makers represents a continuum of parent involvement and parents as partners. This continuum is inclusive of the above perspectives and expands to include engaging parents as advisors, advocates, and leaders—as change agents in efforts related to young children and school readiness. An evolutionary model of family-professional partnerships described by Turnbull et al (2000) portrays this movement toward “collective empowerment” that involves capacity building for all participants. Expanding the view of parent involvement represents a challenge to families with young children as well as those systems that serve them. Engaging parents as decision makers—at all levels—represents true partnership and leads to collaborative leadership that can support school readiness for children, families, schools, and communities.

# A Definitions

The following definitions will assist the reader in understanding and using this tool kit.

**Collaborative Leadership**—A democratic and constructive way of making decisions that engages community members or interested stakeholders; is asset oriented, strength based, and relationship driven; and uses strategies that include dialogue, interests based collaboration, agreement building, networking, shared decision making, and shared accountability. (PEW Partnership, 2002) See also Shared Leadership below.

**Cultural and Linguistic Competence**—A set of congruent behaviors, attitudes, policies, structures, and practices that come together in a system, agency, or among professionals and enable that system, agency or those professionals to work effectively in cross-cultural situations. This includes that capacity of an organization and its personnel to effectively communicate with persons of limited English proficiency, those who have low literacy skills or are not literate, and individuals with disabilities—in both word or written form. (Cross et al., 1989)

**Evidence Based Practice**—Those practices or interventions that have been empirically validated in control and comparison group studies using multiple methods and provide follow-up data.

**Family**—Primary caregiver(s) or adult(s) with substantial and ongoing involvement in the life and care of a child; interchangeable with “parents”. This can include anyone who functions in the role of a family member, including parents, aunts, uncles, grandparents, fictive kin, adoptive parents, etc.

**Family-Centered Care**—A system of care which supports all family members involved in the child’s care or involves all family members in all aspects of planning, implementing, and evaluating the service delivery system (including services for themselves and the services for their families).

**Home Visiting Program**—Activities that take place in the context of a family’s home (or location of their choice) that constitute an intervention, such as parent education and family support services.

**Individualized Services**—Those services that are planned in collaboration with the recipient of services and the setting of unique, individual goals; delivered in ways that are most useful and accessible to the recipient; and evaluated according to the individual goals or the recipient.

**Parent Education**—Activities that strengthen parent knowledge about child development build parent skills to strengthen relationships between parent and child, and promote age appropriate care and activities to promote a child’s health, development, and social emotional skills.

## A. Definitions

- Parent Leadership**—The capacity of parents to address the challenges of parenting, gain the knowledge and skills to represent a “parent voice”, to interact within society with purpose to shape the direction of their families, programs, and communities toward positive outcomes for children. (Parents Anonymous, 2003; State of Connecticut Commission on Children (no date))
- Parenting Supports**—Activities that strengthen parents’ capacity to draw upon available resources for their own well-being and the well-being of their children. These may include: helping parents 1) develop long-term supportive relationships; 2) access other community resources; and 3) strengthen the home-early care-education link. (Brown, 2000)
- Parents**—Throughout this text, “parents” and “family” refer to parents, foster parents, or extended family members who serve a caregiving role in a child’s life. See also Family above.
- Providers**—People who have had specific educational training concerning the delivery of services to young children in families in the area of a particular expertise. Throughout this text, “providers” is inclusive of health, education, or other human service personnel who provide services to young children and families, unless specified otherwise, such as education providers, or health care providers, etc.
- Shared Decision Making**—A process that includes the input of all stakeholders in decisions about policy, operations, and practice. In early care and education, stakeholders would include parents, teachers, administrators, and community members and decisions would relate to school management and education. (National PTA, 1998)
- Shared Leadership**—Shared leadership is successfully achieved when parents and professionals build effective partnerships and share responsibility, expertise, experience, and responsibility in decisions being made that affect families and communities. (Parents Anonymous, 2003) See also Collaborative Leadership above.
- Site-based Intervention Program**—Activities that take place in a location outside of a family’s home that constitute an intervention, such as parent education and family support services.
- System of Service Delivery (or Service System)**—For the purposes of this tool kit, this term is used to describe services within one aspect of care, such as the Early Intervention System, Mental Health System, Child Welfare System, or Health Care System. Within each system, a variety of services may be delivered. Linkages between or commonalities among systems may be described as reaching “across systems”.
- System of Care**—A comprehensive and broad array of services and supports which are organized into a coordinated network to meet the multiple and changing needs of young children and their families. These services involve families as full partners and are individualized to meet the unique needs of each child and family; delivered in ways that are accessible; and responsive to cultural, racial, and ethnic diversity. (Pires, 2003)

# Introduction

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# Parents As Educators

LEARNING IN THE  
CONTEXT OF RELATIONSHIPS  
AND CHILD DEVELOPMENT







# Parents As Educators

## LEARNING IN THE CONTEXT OF RELATIONSHIPS AND CHILD DEVELOPMENT

### A Parent Education and Parents as Educators

#### OVERVIEW OF THE ISSUE

All parents are eager to have their child be healthy, develop well, and succeed in school. For many parents, this means they are also eager for information about raising children and ways to strengthen their role in helping their children grow and learn. Parents are a child's first teacher and this perspective is reinforced by developmental research, school readiness initiatives, and parent education opportunities.

In a nationwide survey completed by ZERO TO THREE among 1,000 parents of children birth to three year olds, most parents realized they are an important influence over their child's development and know that babies are learning from the moment they are born. Parents also acknowledged the connection between a parent's emotional closeness with his or her baby and intellectual development and that experiences before age 3 influence a child's ability to do well in school. However, these understandings did not dampen their interest in learning more about child development and how to improve their parenting skills (ZERO TO THREE & Hart, 1997). For many parents, turning to friends and family for parenting and child rearing advice is useful. For others, instructive sessions or parent education through either home visiting or site-based programs can offer desirable features of in-depth information, a developmental perspective, skills development, and support for parents as teachers leading to children ready for school.

In general, the intent of parent education is to foster or improve the overall development of the child by strengthening parent knowledge about child development; building parenting knowledge and skills; strengthening relationships between parent and child; and promoting age appropriate care and activities that can promote a child's health, development, and social and emotional skills. Parenting education can be offered in various settings and formats—including home visiting and site-based intervention models. Despite

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the considerable diversity of designs, most parent education services are based on the common value and assumption that parents play a central role in their children's development and that interventions for children are most efficient when they target parents' behavior directly. This theory of change relies on the responsibility of parents to facilitate and support typical growth and development or to implement practices that may be intentional to divert or remedy difficulties.

Participation in parenting classes is associated with increased readiness for parenting, more consistent and predictable daily child care routines, and mediation of some of the negative effects of some parenting "risk factors" (Halfon & McLearn, 2002). Some of the strongest evidence available on the efficacy of parenting behavior in fostering positive developmental outcomes comes from evaluations of interventions focused on parenting (National Research Council and Institute of Medicine, 2000). Effective parent education programs can teach parents how to create a home environment for early learning and how to provide social-emotional support and encouragement for their children's success.

Communities can support young children, their families, and school readiness by offering parent education. In fact, opportunities for parent education within communities are often numerous, and these services can be administered and delivered by providers of social services, health care, early education, childcare, specialty health or disabilities services, university extension services, faith-based organizations, and others. It is important for communities to engage in a planning process when considering parent education services so that they are coordinated with other services and have their intended effect. The most important factors in selecting and delivering parent education services are: 1) matching program goals to the parenting or intervention goals to be addressed; 2) program or curriculum quality and effectiveness; and 3) preparation of program staff and personnel.

### **EFFECTIVE PARENT EDUCATION PROGRAMS: LINKING TO SCHOOL READINESS**

Citing numerous studies and a broad array of extant research related to multiple aspects of child development, family, nurturing relationships, community, and early care and learning environments, the National Research Council and Institute of Medicine in *From Neurons to Neighborhoods* asserted several important take home messages that link science to and establish the relevance of parent education programs. In particular the messages convey the influence of parents and the implications for parent education programs on families, all domains of child development, and dimensions of school readiness. Whether delivered in the home or on-site in the community, the location is not as important as the parent education program's effectiveness. The parent education literature, child development research, and parent education practice all suggest that effective parent education programs are:

#### **■ Grounded in developmental knowledge**

Effective parent education is based on the importance of child development knowledge and how parents and primary caregivers can support growth in all domains of child development. In the simplest terms, knowing: 1) what to expect and when to expect it according to ages and stages of development; 2) what to do now and what to do next when providing growth promoting experiences for the infant and young child; and 3) how to interact and build confidence that allows self-discovery and healthy relationships

when children play, explore or take on new tasks are lessons in parenting as well as child development. The capacity of the young child to learn, explore, and develop as well as the parents' knowledge of what is typical and what is atypical for young children provide the ground for the emerging individual developmental path for the child. In addition, understanding the adult and family development process, including adult learning, are important to this theory of change. Understanding how adults learn and change behaviors is critical to an adult education approach to change parenting behaviors.

**Support from research:**

- All strategies of intervention, regardless of the target group or desired outcomes, can be derived from normative theories of child development.
- Children are active participants in their own development, reflecting the intrinsic human drive to explore and master one's environment; facilitated by the extent to which the environment opportunities and supports for growth.
- Early learning environments that offer developmentally appropriate stimulation and interaction will support and motivate children in their tasks of developing cognitive, communicative, and social emotional competence.

(National Research Council and Institute of Medicine, 2000)

■ **Relationship-based**

Parent/child relationships and interaction between parent and child form the earliest learning environment. Parental love and attachment and responsive and sensitive caregiver/child interactions are the foundation for safety, trust, and overall development. Parent education programs that include information and interaction-based practice can help parents “connect” with their young child and read and respond to their child's needs. The parent/child relationship forms the core of healthy emotional development that is crucial for early learning and school readiness (Knitzer, 2001).

**Support from research:**

- “Attachment security” is a central feature of early relationships that usually occurs between an infant or young child and their parents or primary caregivers. In addition to reducing fear in novel or challenging situations and enabling the child to explore with confidence and to manage stress so vital to early learning, early attachments appear to have their most consistent and enduring influence on young children's social and emotional development.
- Young children's relationships with their primary caregivers have a major impact on their cognitive, linguistic, emotional, social, and moral development. These relationships are most growth-promoting when they are warm, nurturing, individualized, responsive in a contingent and reciprocal manner, and characterized by a high level of “goodness of fit”.
- Healthy, growth-promoting relationships in early childhood are best embodied in the concept of contingency and reciprocity; when young children and their caregivers are tuned in to each other, and when the caregivers can read and respond to the child's needs in an appropriate and timely fashion.
- Successful parent/child interactions support healthy development in multiple domains, including communication, cognition, social-emotional competence and moral understanding.

(National Research Council and Institute of Medicine, 2000)

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### ■ Family supportive

With some exceptions, the primary way to help young children is to strengthen their families' abilities to meet their developmental needs (Knitzer, 2001). In addition to focusing on supporting the child's development, it is useful to also focus on the needs of the parents and family. By taking this larger view, parent education programs can more holistically support the child, engage the family through family-centered relationships, and link to and build in longer-term services to address family concerns that distract or limit parents from focusing more fully on parenting or their child's development.

#### Support from research:

- Parenting sensitivity is tied to the extent of marital support, socioeconomic stress, demands in the neighborhood, and other life circumstances that can compete for the adult's energy and attention to a young child's needs.
- The most effective parenting education interventions strive to improve a caregiver's sensitivity through sustained, individualized sessions that take into account the mother's broader life circumstances and needs.
- The circumstances that surround parents and other caregivers, as well as their own mental health, exert a powerful influence on their capacity to fulfill the responsibilities that are entailed in raising children.
- Because the quality of an adult's caregiving has diverse roots in the family ecology, marital relationship and the adults' individual past, improving the quality of care requires carefully designed interventions that take these contextual features of families into consideration.

(National Research Council and Institute of Medicine, 2000)

### ■ Infused into or linked to existing early childhood networks and other services

Communities share responsibilities with parents for the development of young children and youth. Parenting education should be thought of as one of a set of community strategies that assess and address the overall social, economic, and informational needs of families. Effective parent education programs have specific goals, approaches, and curricula that lead to expected outcomes in parenting practices that influence child development. By combining parent education with early care and education services, for example, parent education programs can link to existing early childhood networks and can offer easy access to services, a continuum of care, and extended supports to the family. Likewise, those parenting education programs that link to other services, through a family-centered, case management, or system of care approach, can support the child and family in complementary and more comprehensive ways.

#### Support from research:

- Programs that offer both a parent and a child component appear to be the most successful in promoting long-term development.
- The programs that produced the most substantial long-term outcomes for children combined center-based early education services for children with significant parent involvement through high quality home visiting, joint parent-child activities, parent groups or some other means.

(National Research Council and Institute of Medicine, 2000)

### ■ Responsive to the community and cultural context

The cultural and linguistic diversity of families with young children is continuing to grow. Parenting practices and child rearing are heavily influenced by culture and represent a critical issue for home visiting and site-based parent education programs. Effective programs offer culturally and linguistically competent services and are responsive to ethnic and cultural strengths and differences (Hepburn, 2004).

#### Support from research:

- Parent belief systems and modes of parent child interaction provide some of the most important ways in which culture is embedded in the process of child rearing during the early years of life.
- Cultural practices related to early childrearing (e.g., feeding, sleeping, communication, discipline, exploring and learning, fostering independence) are highly variable and lead to different developmental outcomes.
- The design and implementation of early childhood policies and practices must be examined through a cultural lens in order to avoid biased ethnocentric value judgments on the part of providers, avoid inappropriate or intrusive interventions, and guide state-of-the-art practices.

(National Research Council and Institute of Medicine, 2000)

### ■ Focused on outcomes

Investing community efforts and resources in services that do not achieve the desired outcomes is a poor investment. Effective home visiting and site-based parent education programs are those that have established an evidence base and can demonstrate outcomes that impact parenting practices, support child development, and facilitate early learning and school readiness.

#### Support from research:

- Model programs with explicitly defined goals and painstaking attention to implementation and service quality can be effective in changing parenting practices and affecting targeted child outcomes.
- Determination of appropriate child and family outcomes, and their assessment, require an appreciation of the importance of individual differences among children, an understanding of the extent to which the caregiving environment is changeable, and a realistic appraisal of the match between the resources of the service program and the goals of the intervention.
- Evaluation of the next generation of parenting interventions face a new set of challenges: 1) the importance of subjecting to direct assessment the underlying assumption that improving parenting will produce meaningful changes in children's functioning, 2) the need to thoroughly document program implementation and, in particular to study the interactions between program staff and participating families, and 3) the need to distinguish children and families for whom parenting interventions are effective from those for whom an alternative intervention strategy holds more promise.

(National Research Council and Institute of Medicine, 2000)

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### PARENT EDUCATION AS AN INTERVENTION

The course of development can be altered in early childhood by effective intervention (National Research Council and Institute of Medicine, 2000). Parent education is one model of intervention, within which varying strategies can be employed. In general, these strategies are less likely to focus on providing direct experiences for the child than on influencing the behaviors of the child's primary care givers and/or working directly on the child-caregiver relationship. At times, parenting education is part of a more focused or therapeutic effort intervening with young children and their families who are considered to be at risk or with those young children and their families who have been clearly identified as having developmental difficulties or disabilities. To distinguish among types of parent education as interventions, the terminology defined below can be useful.

- **Universal Interventions** are those interventions that are more preventive in nature, appropriate for all young children and families in a geographic area without selective criteria.
- **Selective Interventions** are those interventions that are designed to help children and families experiencing greater risks for developmental, health, mental health, or achievement difficulties due to socio-familial and environmental factors, for example.
- **Indicated Interventions** are those interventions that are designed to meet the needs of young children and families who require special support services or therapeutic intervention beyond the usual early care, education, or social services support services. (Mrazek & Haggerty, 1994; Raver & Knitzer, 2002; Webster-Stratton & Taylor, 2001)

All of the home visiting and site-based parent education models described in this tool kit represent at least one of the levels of intervention described above. For example, Parents as Teachers is considered a universal intervention; Nurse-Family Partnership is a selective intervention, and the Regional Intervention Program is an indicated intervention. Some parent education programs can fall into more than one category depending on the way the program is adapted and delivered. These are important considerations for communities deciding which home-visiting or site-based parent education models and interventions are most appropriate to meet their community's identified needs.

### CONSIDERATIONS FOR SELECTING AND IMPLEMENTING PARENT EDUCATION PROGRAMS

**Planning:** Planning for home visiting or site-based parent education programs within communities is similar to other planning processes. Bringing community members together as a planning group; completing a needs assessment; scanning the current community resources; and identifying the goals for the community that relate to parenting, parent education, child development, and school readiness are all part of the process. A number of the well known national programs included in this tool kit offer planning guides that would be useful to communities in the planning and pre-implementation stages. These guides, or one that is more generic, can walk communities through steps in the planning process as well as issues related to program selection and service providers.



**Selection:** Criteria for selection of a home-visiting or site-based parent education program can be captured in one simple, yet not so simple statement. Communities should select programs that clearly have the goals they are seeking to address, that have been demonstrated to work well with families they are seeking to serve, and that employ staff trained to serve the families they are seeking to serve (Gomby, 2003). Once a community is clear about the goals they are seeking to address and additional criteria most relevant to their community, the planning group should review information available on a variety of home-visiting or site-based parent education programs. There are many from which to choose, and no central clearinghouse that includes all of the options. There are, however, a greater number of efforts to identify evidence-based practices and to create easy access lists and indices where communities can search specifically for research-based programs. (Gomby et al., 1999; National Research Council and Institute of Medicine, 1999; Rapoport & O' Brien-Strain, 2001; Substance Abuse and Mental Health Services Administration, 2002). Other criteria might include specific caregiver types (fathers, grandparents, etc.), cultural and linguistic appropriateness, staffing requirements, administrative agency or structure, cost/funding resources, evaluation and reporting requirements, and staff development or continuous improvement opportunities.

**Preparing providers:** Hiring, training, and retaining staff are large investments in home visiting or site-based parent education programs. They are the lynchpin upon which the whole program depends. Monitoring performance, supervision, providing feedback, and offering staff development and continuous improvement opportunities are essential to the quality of the providers and the quality of home visiting or site-based parent education services.

**Engaging families:** Identifying, recruiting, enrolling, and retaining families in home visiting or site-based parent education programs are essential to maximizing parent, child, and family benefits from this intervention. While there may be common approaches across parent education programs, these approaches should be individualized to match the unique features of the program, community, culture, language and unique interests of potential or engaged family participants. In addition, engaging families in relationship-based parent education programs relies heavily on the capacity of providers to build relationships with participants and offer responsive services (Gomby, 2003; Klass, 2000; Zero to Three, 1998).

## A. Parent Education & Parents as Educators

### Critical Questions for Communities

- *What are our community's specific goals and desirable outcomes for young children and families related to school readiness?*
- *What is our perspective (philosophy and values) related to parent education as a strategy to support early learning and school readiness?*
- *What community planning process is in place to assist in information gathering, resource identification, and decision making about parent education services?*
- *Who are the important partners to include?*
- *By what criteria will we select a parent education program?*
- *How might we select the community agency or organization to administer or deliver these services?*
- *What considerations will influence staff qualifications, hiring, and preparation?*
- *How can we best engage families in every aspect of planning, delivery, utilization, and evaluation of services?*

### Key Strategies for Families, Providers, and Administrators

#### What Families Can Do:

- Participate in community planning related to parent education services.
- Learn about parent education opportunities that might interest you and benefit your child.
- Provide input and feedback to assist in program evaluation and future community planning.

#### What Providers Can Do:

- Participate in community planning related to parent education services.
- Offer a provider/professional perspective to the potential value and impact of parent education services on families in the community.

- Encourage parents and families to participate in the planning process.

#### What Administrators Can Do:

- Participate in community planning related to parent education services.
- Assist in identifying the most appropriate provider of services.
- Offer resources that can support community partnerships in parent education services.



## Selection and Planning Checklist

Each community will have unique goals and community features to consider when reviewing and selecting a home-visiting or site-based parent education program. In addition to considering the population to serve and desired outcomes, communities must review funding, and implementation requirements for a particular program. Communities must also plan community resources, agency or organization, and administrative readiness to take on service delivery. The following checklist identifies some key areas of inquiry and discussion in the process of selecting and planning a parent education program.

### Community and Service Population

- A community assessment related to young children and parenting education has been completed.
- Specific community concerns, goals, and desired outcomes related to young children and parenting education have been determined.
- A service population has been identified.
  - Parents, children, teachers, etc.
  - Age range of children (Prenatal-3, 3-5, 5-8, all ages)
  - Specific characteristics (low income, single parents, foster parents, children with disabilities, children demonstrating aggressive behavior, etc.)
  - Community demographics (urban, suburban, rural, small town, etc.)
- The level(s) of intervention: Universal, Selected, or Indicated has/have been determined.
- Existing community parent education programs have been identified and reviewed to avoid duplication of services or to identify potential service providers.
- The program goals match the goals identified for the service population and community.
- The program has been designed for or can be adapted for the populations to be served.
- The program meets the criteria of effective programs including:
  - Grounded in developmental knowledge
  - Relationship-based
  - Family supportive
  - Responsive to community and cultural context
  - Focused on outcomes
  - Can be infused into or linked to exiting early childhood services
- The program uses multiple training strategies for adult and child learning.
- The program staffing requirements are clear and training is available.
- The program has an evidence base and has been replicated with consistent outcomes.
- The outcomes match those identified as desirable for our community and population to be served.

### Parent Education Program Review Information

- The program goals are:
  - Parent education/support
  - School readiness
  - Prenatal support
  - Child development
  - Prevent child abuse
  - Early intervention
  - \_\_\_\_\_
  - \_\_\_\_\_
- An evaluation plan is realistic, practical, and appropriate and evaluation support is available.

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## A. Parent Education & Parents as Educators

### Selection and Planning Checklist Continued

#### Lead Agency Selection Information

- A criteria for selecting which community agency(ies) or organization(s) is/are most appropriate to deliver a parent education program has been established.
- The agency or organization philosophy and service approach is compatible with the selected parent education program or model.
- The agency or organization has administrative commitment and the infrastructure in place to deliver and evaluate the parent education program.
- The agency or organization can provide the preparation (training) and supervision for providers to deliver the parent education program.

#### Program Management

- Program management includes administrative support from the lead agency.
- Program management includes input and oversight by a community council or advisory group from the community.
- The roles and responsibilities in program management have been determined and designated appropriately.
- Funding resources have been identified, secured, and allocated to support the program budgetary requirements.
- Record keeping systems are in place to gather and maintain information.
- A program evaluation plan has been designed and established.

#### Program Service Delivery

- The number of families to be served has been determined.
- The number of months per year the program will be offered has been determined.
- The number of family visits or sessions is set or flexible depending on family needs.

- There are group meetings for parents.
- The frequency of group meetings has been determined.
- Specific instruments will be used for:
  - Screening
  - Assessment
  - Evaluation
  - Program evaluation
- Resources in the community to support the program or families who participate would include:
  - Hospitals and health clinics
  - Department of social services
  - Schools
  - Early Head Start/Head Start
  - Even Start
  - Mental health services
  - \_\_\_\_\_
  - \_\_\_\_\_
- A plan for recruiting perspective families/participants in the community has been developed.
- Resources (money, personnel, materials, etc.) have been allocated for the recruitment and advertisement effort.
- A public awareness and marketing plan has been developed.
- The evaluation plan includes service delivery data and regular intervals of services delivery review.

#### Adapted from:

Brown, M. (2000). *Measuring the fit with best practices: A guide for program planners, program implementers, and proposal writers*. University of Delaware, Parent Education Cooperative Extension. Retrieved December 16, 2003, from <http://ag.udel.edu/extension/fam/recprac/tablecon.html>

Incredible Years. (2003). *Launching Incredible Years programs in your organization*. Retrieved December 10, 2003, from the Incredible Years Web site: [www.incredibleyears.com/agencies/incredible-years-launching-programs-in-your-org.pdf](http://www.incredibleyears.com/agencies/incredible-years-launching-programs-in-your-org.pdf)

Parents As Teachers National Center, Inc. (2002). *Preliminary Born to Learn™ prenatal to 3 years implementation plan*. Retrieved October 30, 2003, from the Parents As Teachers National Center, Inc. Web site: [www.patnc.org](http://www.patnc.org)

## Strategies for Engaging Families

Engaging families in home visitation or site-based parent education includes the combined challenges of getting families to enroll, keeping them in the program, and sustaining their interest and commitment during and between visits or sessions (National Research Council and Institute of Medicine, 1999). Several strategies may increase the likelihood of successfully engaging families. These include

1. Reaching parents when they are highly motivated to learn about effective parenting strategies (like at birth or when parents have their own concern about their children);
2. Trying to match a “good fit” between the home visitor or parent educator and the family;
3. Making parents part of the program planning process; and
4. Having parents who believe that the home visiting or site-based parent education services will help them accomplish goals that they have for themselves and their child (National Research Council and Institute of Medicine, 1999).

Many of the strategies listed below focus on the process of engaging families and the interactive, relationship-based nature of working with families.

### Identification

As a result of the planning process:

- Know the community and community partners, including cultural and linguistic diversity.
- Engage in a collaborative planning process that includes parents.
- Identify a population to serve and consider cultural and linguistic diversity.
- Decide upon a program to meet the identified issues, concerns, and population.
- Determine criteria for recruitment and enrollment.

### Recruitment

After identifying the families to be served:

- Develop a relevant strategy for recruitment.
- Create and implement a culturally and linguistically appropriate public information or advertisement campaign.
- Enlist the help and support of community partners.
- Meet with families where they are—home, hospital, clinics, preschools, child care, community or faith-based organizations, cultural events, etc.
- Involve family or parent organizations and former participants to encourage others to enroll.

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## A. Parent Education & Parents as Educators

### *Strategies for Engaging Families Continued*

#### **Enrollment**

To facilitate and encourage family participation:

- Keep the enrollment process simple and adapt to cultural and linguistic diversity.
- Make services easily accessible—place, time, etc.
- Clearly describe the specific goals of the program.
- Listen to families and set individualized goals.
- Offer incentives related to the program and individualized goals.
- Offer logistical support—meals, child care, etc.

#### **Engagement**

From the first point of contact:

- Form a personal relationship with each family.
- Express empathy and genuine caring.
- Use active listening and effective communication.
- View parents as decision makers.
- Revisit and review individualized goals.
- Adjust intervention or link to services as appropriate to meet personal goals.
- Learn about and share delight in the child.
- Use every opportunity to build the relationship.

#### **Retaining**

In order to keep parents involved:

- Carry out consistent and predictable positive interactions.
- Support individual effort, recognize progress and celebrate success.
- Review and assess progress or accomplishment of individualized goals.
- Demonstrate consistency in terms of the home visit or session schedule and fulfilling promises.
- Offer tangible evidence of trustworthiness and caring in the form of concrete items or services such connection to services, meals, child care, etc.

#### **Adapted from:**

Klass, C. (2003). *The home visitor's guidebook: Promoting optimal parent and child development, Second edition*. Baltimore, MD: Paul H. Brookes Publishing Co.

ZERO TO THREE: National Center for Infants, Toddlers, and Families. (1998, February/March). Opening the black box: What makes early child and family development work? *Bulletin of ZERO TO THREE*, 18(4).

# ANNOTATED RESOURCES

## BOOKS AND PRINT

### Home Visiting with Families with Infants and Toddlers

(1997) ZERO TO THREE NATIONAL CENTER FOR INFANTS AND TODDLERS

This issue of the Bulletin of ZERO TO THREE focuses on multiple issues related to home visiting as a method of service delivery, parent education, and family support. This issue is particularly useful to providers, administrators, community planners (including families), and evaluators.

*Bulletin of ZERO TO THREE: National Center for Infants and Toddlers, February/March 1997 17(4). Washington, DC: ZERO TO THREE. Order from ZERO TO THREE, P.O. Box 960, Herndon, VA, 1-800-899-4301, 703-661-1577 (fax), or at [www.zerotothree.org](http://www.zerotothree.org). (\$10.00 for full issue).*

### Opening the Black Box: What Makes Early Child and Family Development Work?

(1998) ZERO TO THREE NATIONAL CENTER FOR INFANTS AND TODDLERS

This issue includes articles and resource information that focus on what makes the difference between a program that succeeds in helping participants achieve their goals and those that do not. As a whole, it offers clear analysis, practical guidance, and considerations for promising approaches to early intervention—including home visiting and parent education programs and services. This issue is particularly useful to providers, administrators, evaluators, and researchers.

*Bulletin of ZERO TO THREE: National Center for Infants and Toddlers, February/March 1998 18(4). Washington, DC: ZERO TO THREE. Order from ZERO TO THREE, P.O. Box 960, Herndon, VA, 1-800-899-4301, 703-661-1577 (fax), or at [www.zerotothree.org](http://www.zerotothree.org). (\$10.00 for full issue).*

## ON-LINE RESOURCES

### Building School Readiness Through Home Visitation

(2003) GOMBY, D. OF DEANNA GOMBY CONSULTING

This report and its appendices explore the extent to which research indicates that home visitation can be used as a school readiness strategy. It focuses on a subset of home visiting programs—those that serve young children and their families and seek to improve the lives of children by encouraging change in the attitudes, knowledge,

and/or beliefs of the parents. The report offers guidance, resources, and recommendations to communities and program planners. Full text available at [www.cfc.ca.gov/SchoolReady.htm](http://www.cfc.ca.gov/SchoolReady.htm)

*Produced for the First 5 California Children and Families Commission, 501 J. Street, Suite 530, Sacramento, CA 95814.*

### Components of Successful Parent Education Programs

(1998) LOVEJOY, A.

This brief summary of an earlier report titled *The Role of Parent Education in Achieving School Readiness*, highlights features of parent education programs that are most effective and provides resource information for the full report by Elizabeth Steif. The text is useful to community planners, administrators, providers, and evaluators. Full text available at [www.nga.org/center/divisions/1,1188,C\\_ISSUE\\_BRIEF^D\\_1833,00.html](http://www.nga.org/center/divisions/1,1188,C_ISSUE_BRIEF^D_1833,00.html)

*National Governors Association Center for Best Practices, Education Division.*

### Measuring the Fit with Best Practices: A Guide for Program Planners, Program Implementers, and Proposal Writers

(2000) BROWN, M.

This instrument offers a brief review guide for planning, implementing, and evaluating parent education and support programs according to criteria linked to parent education literature reviewed in a companion document, *Recommended Practices in Parent Education and Support—A Literature Review* by the same author. The text can be used by community planners, administrators, providers, and evaluators. Full text available at <http://ag.udel.edu/extension/fam/best/criter-com.html>

*University of Delaware, University of Delaware Cooperative Extension.*

### Recommended Practices in Parent Education and Support—A Literature Review

(2000) BROWN, M.

This literature review on parent education and support discusses the importance of parenting, foundations of parent education, features of effective programs, and programs that focus on particular parenting issues, developmental stages, and groups of parents. The text can be useful to



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community planners, administrators, providers, and families involved in program decision making. Full text available at <http://ag.udel.edu/extension/fam/best/contents.htm>

*University of Delaware, University of Delaware Cooperative Extension.*

### WEBSITES

#### Children, Youth, and Family Consortium

[www.cyfc.umdn.edu](http://www.cyfc.umdn.edu)

The Children, Youth and Family Consortium's web site is a bridge to a wide range of information and resources about children and families. It connects research, teaching, policy, and community practice, and it seeks to advance greater understanding, shared knowledge, and action that is informed and deliberate. The button for Family Relationships and Parenting will connect to a section that includes research, programs, publications, general information and links on parenting (including fathering, single parenting step-parenting, and more), marriage and couple relationships, work/life integration, divorce, family stress and other related topics.

#### Children, Youth, and Families Education and Research Networks (CYFERnet)

[www.cyfernet.org](http://www.cyfernet.org)

CYFERnet is a national network of Land Grant university faculty and county Extension educators working to support community-based educational programs for children, youth, parents and families. This site offers links to a variety of resources related to parent education, parent educators, Cooperative Extension parenting sites, and parenting organizations.

#### Incredible Years

[www.incredibleyears.com](http://www.incredibleyears.com)

The main website for the Incredible Years program offers background information, resources for program development, research and evaluation information and support, and training information related to the program

#### Parents As Teachers National Center

[www.patnc.org](http://www.patnc.org)

Parents as Teachers (PAT) is an international early childhood parent education and family support program serving families throughout pregnancy until their child enters kindergarten, usually age 5. This main website describes the PAT program and offers selected readings, publications, training schedules, and program support to those

interested in delivering PAT services. In addition, the site provides links to other relevant organization and resources.

#### SAMHSA Model Programs: Effective Substance Abuse and Mental Health Programs for Every Community

[www.modelprograms.samhsa.gov](http://www.modelprograms.samhsa.gov)

This site features programs that have been tested in communities, schools, social service organizations, and workplaces across America, and have provided solid proof that they have prevented or reduced substance abuse and other related high-risk behaviors. This Web site serves as a comprehensive resource for anyone interested in learning about and/or implementing these programs, including those serving young children and their families.

#### Strengthening America's Families

[www.strengtheningfamilies.org](http://www.strengtheningfamilies.org)

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) in collaboration with the Substance Abuse and Mental Health Service's Center for Substance Abuse Prevention (CSAP) is pleased to provide the results of the 1999 search for "best practice" family strengthening programs. The site provides information about family-focused programs which have been proven to be effective for the prevention of juvenile delinquency and substance abuse in your community, including parenting education and family programs focused on young children.

#### University of Delaware Cooperative Extension

<http://ag.udel.edu/extension/fam/>

The Family and Consumer Resources division of the Cooperative Extension focuses on strengthening children, youth, and families through community supports, including parent education and programs for children and youth. This site provides resources and links specific to parent education and parent educators.

#### ZERO TO THREE

[www.zerotothree.org](http://www.zerotothree.org)

ZERO TO THREE brings together infant and family professionals uniting the fields of medicine, mental health, research, science, child development, and education to focus exclusively on the first three years of life. The organization promotes new knowledge, stimulates effective services and policies, increases public awareness, and fosters professional excellence.

# B Parent Education Models: Home Visiting and Site-Based Intervention

## ■ HOME VISITING

### OVERVIEW OF THE ISSUE

For more than a century, home visiting has been used to offer services and supports to families in this country. During the past 25 years, this service delivery strategy has increased in popularity, practice, political interest, and policy influence. Within the last 10 years—and especially the last 5 years—communities, counties, and entire states are considering programs that use home visiting as a primary method of service delivery to support expectant parents, young children, and their families. Most often, the programs under consideration are those aimed at serving those young children and families who are stressed, vulnerable or at risk, and underserved. However, some communities are also considering a more universal approach—expanding access to these programs and home visiting services to all expectant families or those with young children. Communities are also interested in identifying ways to support families, healthy child development, and school readiness, which has stimulated a new look at home visiting programs as one strategy for promoting school readiness.

According to a 2001 report by Rapoport and O’Brien-Strain of The SPHERE Institute, at least 500,000 U.S. children were enrolled in home visitation programs that service pregnant women and families with young children. With so many children and families already receiving services through a home visiting approach, and so many more who may benefit, a review and evaluation of home visiting programs seems worthwhile. A number of major reports and publications have reviewed home visiting programs with an eye to identifying those programs evaluated to be most effective; helping communities determine which of these programs might best meet their community needs and goals; and recommending further research, evaluation, and policy considerations. Across all three of these reviews, home visiting was seen to have a niche within the array of interventions designed to help families promote healthy child development (Gomby et al., 1999; Gomby, 2003; Rapoport & O’Brien-Strain, 2001). The literature also distinguishes home visiting as follows:

*“Home visiting is neither a program nor an intervention. It is the activities that occur within the context of home visiting that constitutes the intervention”* (National Research Council and Institute of Medicine, 1999)

In other words, home visiting is a “community- and place-based” strategy for engaging families (primarily parents or primary caregivers); using curriculum and activities to facilitate learning and change; focusing on family and child development (often in

## B. Parent Education Models: Home Visiting

parallel); and leading to outcomes that can include improved child and family health, decreased child abuse and neglect, improved parent child interactions, and increased sense of support and reduced stress for parents.

Home visiting services are offered within a variety of structures, agencies, and organizations and supported through a variety of funding streams. For example, home visiting is an essential feature of Head Start and Early Head Start whose grantee agencies may be school districts, community action agencies, or private non-profit organizations and who's funding is federal. Other home visiting programs may be "home grown" by local organizations within a community such as a faith-based organization or specialty care health or mental health agency and funded through local grants. The diversity of home visiting programs and the opportunity to tailor and individualize implementation and services to a community and a family, are both a positive and cautionary feature of home visiting. Likewise, the variety of staffing patterns—professional, paraprofessional, volunteer—and personnel preparation and training raise questions about how to best meet the needs and service capacity of communities, assure program quality, and achieve desired outcomes.

The evaluations of programs that rely on home visiting reflect these cautionary concerns. Evaluation research has revealed mixed results with limited consistency. A few of the challenges include:

- Diversity of programs and inability to compare across programs or generalize findings,
- Variability within programs, which may reflect implementation differences among home visitors as well as the factors related to an individualized approach to serving families, and
- Challenges to research design with an intervention program—where some families do and other families do not receive services from which they may benefit. (National Research Council and Institute of Medicine, 1999)

In a report prepared for First 5 California Children and Families Commission, Gomby (2003) concluded that, based on the Commission's specified school readiness goals:

- Home visiting programs can produce benefits associated with school readiness for children and parents, but such benefits are often modest in magnitude, and more often observed among parents and in parent behavior than among children.
- Home visiting programs are most effective in promoting school readiness outcomes when they maintain a clear focus on their goals; are linked with other services, especially those that offer services directly focused on the child; and when the home visiting and associated services are of the highest quality.

### First 5 California Children and Families Commission School Readiness Goals

Children's readiness for school:

- Physical well-being and motor development
- Social and emotional development
- Approaches to learning
- Language development
- Cognition and general knowledge



The major implications of these conclusions are that communities planning to utilize home visiting programs to support school readiness must 1) specify desired outcomes related to school readiness; 2) review and select a home visiting approach or intervention program that matches these desired outcomes; 3) prepare providers adequately and implement the program with fidelity to the intervention model; and 4) complete useful and rigorous evaluation methods. An overarching implication of these conclusions is echoed in most reports and reviews of home visiting programs. There is clearly a need for further research to measure and understand how to increase the effectiveness of home visiting programs; however communities, administrators, and providers must consider that “small initial differences can set parents and children on a different course, that only becomes more evident later in development” (National Research Council and Institute of Medicine, 1999)—including the developmental trajectory that influences school readiness.

## FEATURES OF HOME VISITING AND SELECTED PROGRAM MODELS

This section of the tool kit will review common and unique features of home visiting programs in general with particular focus on three national models.

### ■ Features of Home Visiting Programs

Many home visiting programs share common values and principles relevant to child development, early learning, and school readiness. They may also have differences that influence their delivery and impact on school readiness.

#### Common values and principles

- The early years of a child’s life are critical for optimal development and provide the foundation for success in school and in life.
- Parents are effective mediators of change in their children, therefore services target the parents directly as their “child’s first teacher”.
- A focus on the parent-child relationship undergirds the home visiting goals, activities, and strategies for change.
- Interactive sessions build on the relationship between the child and parent and offer meaningful lessons regarding parent and child development.
- A family-centered approach involves families in decision-making in all aspects of the intervention.
- Home visiting programs are relationship-based; depending on the alliance between home visitor and the family and the context of trust to engage families and for the intervention to be effective and learning to take place.
- Flexibility, within the integrity of the curriculum, allows for individualization of the program to best meet the needs of each family and child.
- A comprehensive approach—linking families to resources in the community can help meet the families identified goals.
- Cultural awareness—and preferable cultural and linguistic competence—enables home visitors to connect with diverse families, understand their goals for their children, and deliver culturally appropriate services.

## B. Parent Education Models: Home Visiting

### Differences among programs

- **Program goals.** Although most home visiting programs focus on improving parenting skills to promote health child development, others place significant emphasis on parent development or family self-sufficiency. Some explicitly focus on preparing children for success in school and others do not.
- **Intensity of services.** Most home visiting programs offer regular home visits, however the period of time (e.g., birth to three, prenatal to five), frequency, and duration of visits vary.
- **Staffing.** Home visiting programs may use professional paraprofessional or volunteer staff. Most require pre-service training, supervision, and in-service training or continuing education.
- **Whom they serve.** Many home visiting programs are designed for those families who are described as at-risk, low-income, or vulnerable in other ways. Others are universal in nature and are intended for all families. Enrollment and service eligibility criteria may vary.

(Gomby, 2003; Gomby et al., 1999; Goodban, 2001; Rapoport & O'Brien-Strain, 2001)

### Critical observations and mixed results on school readiness

As previously stated, it is difficult to generalize findings across programs that use home visiting as a primary mode of service delivery. In her report to First 5 California Children and Families Commission, Gomby (2003) addressed the question: "Do Home Visitation Programs Build School Readiness?" When comparing the Commission's definition of children's readiness for school with the literature and meta-analysis of the research on *specific* family support programs where the primary service is home visiting, the results suggested the following:

- **Ready Families, Communities, Schools**
  - Many home visiting programs show consistent, though small, benefits in outcomes associated with parenting.
  - Few home visiting programs have resulted in benefits in self-sufficiency for parents
  - Home visiting programs linked with schools may result in parents becoming more involved in their children's schools.
- **Ready Children**
  - Home visiting programs do not lead to increased use of preventive health services or in broad measures of child health status.
  - The strongest evidence for the benefits of home visiting programs is in the domains of parenting behaviors, child safety, and the prevention of abuse and neglect.
  - Home visiting and family support programs can improve children's social and emotional development.
  - Home visiting programs can improve language skills.
  - Benefits in cognitive development are more evident in children where a clearly identified need (disability and developmental delay) has been identified.

- The greatest benefits in cognitive development are most likely when services focus directly on the child, rather than rely upon parents to intervene with the child.
- The child-focused programs that produced the most substantial long-term outcomes for children combined center-based early education services for children with significant parent involvement through high quality home visiting, joint parent-child activities, parent groups or some other means.

(Gomby 2003, National Research Council and Institute of Medicine, 2000)

## ■ Selected Program Models

Because broad statements about program impact and effectiveness are difficult to make, it is important to examine home visiting programs individually when considering which program will meet any community's specific goals for young children and families related to school readiness. The following text provides a description, the evidence base and a snapshot of a community promising practice for three national home visiting program models. More detailed descriptions are available from resources listed for this section.

### **NURSE-FAMILY PARTNERSHIP (NFP)**

NFP employs nurses who visit first-time, low-income mothers and their families in their homes during pregnancy and the first two years of the child's life to: 1) improve pregnancy outcomes by helping women practice positive health behaviors; 2) improve child health and development by promoting responsible and competent care for their children; and 3) improve families' economic self-sufficiency by helping parents develop a vision for their future, plan future pregnancies, continue their education and find work. The frequency of home visits varies, depending on the stage of pregnancy and needs of the mother. The intent is to complete a visit every week to two weeks. Nurse visits are 60-90 minutes in length and follow visit-by-visit program guidelines organized around six domains: 1) personal health; 2) environmental health; 3) life-course development; 4) maternal role; 5) family and friends; and 6) health and human services. In addition to requiring a minimum bachelor's degree, nurses receive a two-week initial training in the program model and then 45 hours of continuing education.

### **Research Evidence and School Readiness**

*Outcomes measure areas*—Child: Development and behavior, Health, Abuse and neglect. Maternal: Home environment, Life course

- NFP children were born healthy (normal birth weight) and had fewer injuries.
- NFP parents increased health-promoting behaviors.
- NFP parents were less likely to engage in child maltreatment, abuse, and neglect.
- NFP parents are more likely to pursue training, education, and employment.

(Gomby, 1999; National Center for Children, Families, and Communities, 2003; Rapoport and O'Brien-Strain, 2001)

## B. Parent Education Models: Home Visiting

### PROMISING PRACTICE

### Nurse-Family Partnership Program Los Angeles *Building and sustaining county wide, community linked, and neighborhood specific partnerships to support home-based intervention*

Nurse-Family Partnership (NFP) Program in Los Angeles (L.A.) began as a collaborative pilot project between the County Department of Health Services (DHS), University of California, Los Angeles (UCLA), and California Hospital and Medical Center in the Pico-Union community of central Los Angeles. Initial seed funding came from the U.S. Department of Justice in 1997 when DHS was selected as one of six sites to use this model program to begin a pilot program to address the over 19,000 live births to teenagers under the age of 19 within the County jurisdiction of over 10 million residents. Because of the impressive outcomes of the NFP nationally, this model was selected in hopes to alleviate L.A. of having the dubious distinction as the County that leads the nation in teen pregnancies and low birth weight babies. Community support and political awareness for this highly-successful program has enabled it to be sustained within DHS and efforts are ongoing to find an alternate, sustainable funding source(s) to maintain services indefinitely through and beyond any budgetary crises ahead. Currently NFP L.A. has 19 public health nurses (PHNs) within L.A. County and the incorporated City of Long Beach, and is providing home-based intervention to 472 low-income, socially disadvantaged, first-time mothers (median age 17 years old) and their children

NFP L.A. has been highly successful in partnering with community, and was selected by the DHS Chief Administrative Office as one of the select “Principles for Partnering” programs that best exemplifies family support and community empowerment principles. The following demonstrates why the NFP was selected:

- NFP L.A. invited representatives from over 196 home visiting programs (within 90 agencies) to convene the first Home Visitation Network (HVN). The purpose of the HVN was to coordinate existing public/private sector home visitation services and referrals, identify service gaps and explore opportunities for collaboration on future home visitation activities - including training.
- NFP has also entered into relationships with local school districts to support their students who become pregnant while in school. The programs involve the Los Angeles Unified School District’s, “Ready for School” project, and the City of Torrance’s, Project Touch Even Start Program. Cross referral mechanisms have been put into place so that either program can refer these young women for appropriate services.

CONTINUED

## NURSE-FAMILY PARTNERSHIP PROGRAM LOS ANGELES CONTINUED

- Other unique partnerships, such as one formed with a group of local artists to raise funds for the NFP Incentive Fund, allows the NFP nurses to purchase special items for the family that cannot be purchased using County dollars, such as baby thermometers, cribs, highchairs, maternity clothes and age-appropriate toys for the children.
- NFP L.A. has also hosted several picnics for clients, their babies and families at various community and neighborhood sites within the County. These picnics serve to introduce the young mothers to each other, and allow them to swap baby clothes, practical advice and develop relationships with others in their communities who share similar life paths.

In a lasting example of community partnerships, NFP L.A. still houses nurses at the original California Hospital site within the Pico-Union neighborhood in central Los Angeles. Within the Pico-Union neighborhood, NFP L.A. continues to be an active community partner with local agencies, clinics, hospital services, and the family resource center, the Hope Street Family Center. These strong local partnerships at the community level support effective parent education and family support within this culturally and linguistically diverse community.

Many of the Pico-Union residents eligible for NFP services are Spanish speaking only, immigrant young women who may be alone, facing difficult circumstances such as family violence, and in need of multiple support services. Bi-lingual nurses from or familiar with the community, co-location of services in the Hope Street Family Center, strong interagency linkages, and close working relationships with local providers help to tailor the NFP services and related supports. Within the integrity of the NFP model, the nurses have had success across cultural and racial groups by building on the trust of community based organizations already working within the community; engaging other family members (mothers, grandmothers, fathers, etc.) to fit with family and cultural values; translating materials as necessary; using the PIPE curriculum to address cultural influences on beliefs and behaviors related to child development; and linking families to services that might include basic needs - such as documentation, food, housing, and health care. By working closely with the California Medical Center, Pico Union Family Preservation, and other services co-located at the Hope Street Family Center, NFP L.A. has continued to delivery valuable family support services and plans to expand these services in the Pico Union neighborhood.

NFP L.A. continues to explore partnerships within neighborhoods, communities, and across the county and seek funding to allow expansion of services. If you would like more information about L.A. County, please contact Jeanne Smart at 213-639-6461 or [jsmart@dhs.co.la.ca.us](mailto:jsmart@dhs.co.la.ca.us), and for more information about the Pico-Union community, please contact Renee Rothrock at 213-321-9537 or [rrothrock@dhs.co.la.ca.us](mailto:rrothrock@dhs.co.la.ca.us)

## B. Parent Education Models: Home Visiting

### **PARENTS AS TEACHERS (PAT)**

PAT is a parent education program designed to run prenatally through age five. Home visitors help the parent understand parenting skills, child development, and school readiness with a goal to reduce the number of children entering school in need of special help. PAT is based on two simple truths: babies are born learners, and parents play a crucial role in their child's growth and development. This program is designed as a universal support for *all* parents as their child's first teacher and can be adapted to the needs of diverse cultures and special populations. The major goals of the program are to 1) empower parents to give their children the best possible start in life through knowledge of child development and ways to foster growth and learning; 2) give children a solid foundation for school success; 3) prevent and reduce child abuse; 4) increase parents' feelings of competence and confidence; and 5) develop true home-school-community partnerships on behalf of children. The program includes regular (monthly, weekly, or bi-weekly) one-hour visits by home visitors who are recommended to have professional education and experience in the fields of education, health care, or social work related to young children and families. All parent educators receive one week of preservice training by certified PAT trainers and are credentialed as parent educators annually contingent upon job performance and completion of annual in-service training. The curriculum Born to Learn™ is based on current brain research. The curriculum is delivered through four components: 1) home visits from parent educators who provide information about child development and engage parents in age-appropriate activities with the child and respond to parents' questions and concerns; 2) group meetings where parents share insights and build informal support networks; 3) health and developmental screening to identify any emerging problems and refer for care; and 4) linking of families with community services where the needs are beyond the scope of the program.

### **Research Evidence and School Readiness**

*Outcome measure areas:* Child: Development and behaviors, Health. Maternal: Home environment, Life course.

- PAT children at age 3 are more advanced in language, social development, problem solving and other cognitive abilities than comparison children.
- PAT children score higher on kindergarten readiness tests and on standardized measures of achievement in early grades.
- PAT parents are more involved in their child's schooling.
- PAT parents are more confident in their parenting role and read more to their children (self-report).

(Gomby, 1999; Parents As Teachers National Center, 2003; Rapoport and O'Brien-Strain, 2001)



## Tulsa Public Schools

### *Parents as Teachers: Taking the meaning of “community support and engagement” to a new level.*

Since its inception 13 years ago, the Tulsa Public Schools Parents as Teachers (TPS PAT) program has successfully engaged and retained families, serving 738 children last year, up 465 % from the first program year. Tulsa credits its continued expansion and success to staffing practices, a creative menu of services, and broad community support and partnerships.

Engaging and retaining families is critical to program impact and continued support. TPS PAT’s hiring practices contribute to success at maintaining a committed and effective staff that excels at building relationships, love their work, and deliver high quality services. Looking beyond an applicant’s resume to how they think about families, take a non-judgmental approach, and accept diversity is key. To retain staff, TPS PAT offers flexible hours, individualized work loads, and strong administrative support. The resulting low staff turnover builds continuity in relationships with the families they serve and contributes to the 90% program completion rate.

TPS PAT has extended its program through a creative menu and individualized delivery of services. This “menu” features components and costs that can be tailored to fit an individual school’s need. The creation of a “menu of services” led to several sources of additional funding. For example, using this menu and a presentation to 55 district elementary principals led to an additional 14 parent educator positions, with funding coming from a variety of sources.

TPS PAT has achieved broad community support and partnerships that provide funding and unique venues for delivering services. Originally, the Oklahoma State Department of Education provided the initial grant for PAT and that funding has remained consistent but unchanged. The growth of the program relies on seeking multiple funding avenues, some of which have been secured in a variety of innovative ways.

- Positions were written into a variety of successful grant applications including Reading Excellence Act and Schools of the 21st Century.
- Several Title I designated elementary schools chose to implement a PAT program at their site using funds designated for parent involvement.
- When TPS applied for an Even Start grant, PAT was included as the parent education piece.
- A relationship with the Community Action Project, the local Head Start grantee, produced a partnership that resulted in a United Way Venture Grant which provides PAT services to a bilingual population and a yet to be announced home-based Early Head Start grant.
- A high school used discretionary revenue from their soda machines to pay for a parent educator to serve their pregnant and parenting teens.

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## B. Parent Education Models: Home Visiting

### PROMISING PRACTICE

#### PARENTS AS TEACHERS CONTINUED

- The Junior League of Tulsa recently chose the TPS PAT program to play a major role in their Women in Transition focus. The project will eventually place engaged and committed volunteers in the role of parent educators and mentors serving pregnant and parenting teens in nine high schools and three alternative high schools in the Tulsa District.

New pursuits include expanding work force development in partnership with the Tulsa Technology Center to provide *Parents as Teacher in the Childcare Setting* training for Child Development Associate Degree students. In addition, TPS PAT has initiated contact with a family day care home to explore the opportunity to work with providers using the specialized PAT curriculum, *Supporting Care Providers through Personal Visits*. Working with local major employers also shows promise as TPS PAT negotiates corporate incentives to offer employees time off to participate in PAT, provide PAT and other parent-child activities as part of their employee benefit package, and to fund a Parent Care Center at their adopted school through the adopt-a-school partner program. Finally, TPS PAT is exploring opportunities to work with physicians and pediatric clinics and offer on-site parent education to enhance primary care visits. For more information contact Jan Miller at 918-925-1403 or [Milleja@tulaschools.org](mailto:Milleja@tulaschools.org)

#### **THE HOME INSTRUCTION PROGRAM FOR PRESCHOOL YOUNGSTERS (HIPPIY)**

HIPPY is a two or three-year program for children ages 3-5 years that provides home visiting and parent group meetings to help less-educated parents prepare their children for school. The program aims to maximize children's chances for successful early school experiences by empowering parents as primary educators of their children and fostering parent involvement in school and community life. The curriculum, available in English and Spanish, contains 30 weekly activity packets, nine storybooks, and a set of 20 manipulative shapes for each year. Parents are trained to use the curriculum through weekly 30-minute visits with paraprofessionals who are also parents in the program. On alternate weeks, all of the parents and home visitors meet at the HIPPY site or a community location to role-play the activities as a group. A professional coordinator supervises the home visitors and meets with them weekly to review materials and provide supervision. Preservice training for the coordinator and the home visitors is provided by HIPPY USA®.

#### **Research Evidence and School Readiness**

*Outcome measure areas:* Child: Development and behavior. Maternal: Home environment

- HIPPY children performed better on cognitive skills, reading, and classroom functioning.
- HIPPY children are less likely to repeat grades and have higher rates of school completion.
- HIPPY parents are more likely to read to their children and be involved in their children's education.
- HIPPY parents have higher self-esteem.
- HIPPY parents are more likely to pursue training and education for themselves.

(Gomby, 1999; HIPPYUSA®, 2003; Rapoport & O'Brien-Strain, 2001)



## Washington, DC

### *University and community collaboration for program success*

Georgetown University Center for Child and Human Development's (GUCCHD), Home Instruction for Parents of Preschool Youngsters (HIPPY) Program is in its third year of operation with funding from the District of Columbia Department of Human Services, Office of Early Childhood Development. It currently serves low-income families on TANF and SSI in Wards 7 and 8 in the District of Columbia, which is home for some of the city's most vulnerable children and families. Long standing collaboration between GUCCHD and other community agencies and organizations—Far Southeast Family Strengthening Collaborative, East River Family Strengthening Collaborative, Head Start, The Children's Law Center, Grant-Grayson Urban Supports, Inc., Redemption Ministries—Inner Thoughts, Inc., and D.C. Healthy Start Project—has strengthened and supported the HIPPY program through promotion of the program, referral of families, and other resources. The HIPPY Coordinator, based at GUCCHD, is a Pediatric Clinical Nurse Specialist and the Family Partners (home visitors) are community residents in Wards 7 & 8. The Coordinator brings unique qualifications and experience to the project. Adding the health perspective to the program focused on parent/child interaction, literacy, and school readiness contributes additional services and community links related to well-child visits, immunizations, health care consultation, developmental screening, and wellness and prevention education. The Coordinator also trains and supervises the Family Partners who bring community culture and knowledge to the project. The Family Partners have received preparation through the HIPPY program training as well as formal advocacy training sponsored by the GUCCHD and the Kennedy Institute, a local specialty health care and developmental services provider. Expanding the training of the Family Partners to include formal advocacy training and providing close supervision has resulted in significant skill development, utilization of community resources, and effective delivery of HIPPY services. For more information contact Donna Shelly at 202-687-2095 or [shellydm@georgetown.edu](mailto:shellydm@georgetown.edu)

## B. Parent Education Models: Home Visiting

### Critical Questions for Communities

- *What are our community's specific goals and desirable outcomes for young children and families related to school readiness?*
- *What is our perspective (philosophy and values) related to home visiting as a strategy for delivering early intervention in support of these goals and desirable outcomes?*
- *What information do we need to understand home visiting program models and approaches?*
- *By what criteria will we select a home visiting program model?*
- *What options exist to tailor the home visiting program model to our community in terms of cultural and linguistic diversity?*
- *What home visiting programs already exist and operate within our community?*
- *How might these home visiting programs be coordinated, linked or supplement one another?*
- *How can we make sure that home visiting is one feature of a connected or comprehensive system of supports to young children and families?*

### Key Strategies for Families, Providers, and Administrators

#### What Families Can Do:

- Participate in community planning related to home visiting services.
- Learn about opportunities for home visiting services that might interest you and benefit your child.
- When enrolled, participate fully in the home visiting program to assure full potential benefit.
- Provide input and feedback to help the home visitor tailor the program to your family interests.

#### What Providers Can Do:

- Commit to quality and full preparation for delivering the home visiting program.
- Understand the importance of engaging families and develop skills to

create the relationship-based context for effective home visiting services.

- Take a family-centered, and child-focused approach to individualizing the home visiting program.

#### What Administrators Can Do:

- Participate in community driven efforts to identify interest in and selection of home visiting models.
- Determine organizational capacity and create internal structures appropriate for implementation, including supervision of providers.
- Implement evaluation processes that will rigorously determine impact of the home visiting program and use this information for program improvement and cost-benefit analysis.

## Tips for Parents: What to Expect from Your Home Visiting Program

Parents are partners in a home visiting parent education program. It is essential that in all stages of the working relationship with the home visitor/parent educator that parents understand the program design; determine personal goals for themselves and their child; link these goals to family strengthening, child development and school readiness; utilize services to meet individual needs; and rely upon the relationship as a vehicle for support, learning, and development.

### My Home Visiting Program:

- Involves the perspective of the whole family and my personal and family goals.
- Focuses on my child and his/her growth and development—including health, social emotional, and cognitive development.
- Emphasizes parenting skills for making sure children are healthy, develop well, and learn so they are ready for school.
- Includes links to services and supports that I may need to make my child, and my family, and me strong and healthy.

### My Home Visitor/Parent Educator:

- Is warm, friendly, and respectful towards me.
- Communicates with me in my language or through an interpreter.
- Really cares about my child, my family, and me.
- Listens carefully and is responsive to my ideas, concerns, and questions.
- Communicates clearly about our time together, how we will interact, when we will meet, and our agreements to work together.
- Is flexible and available to me—in my own home or location of my choice.
- Is knowledgeable about child development, parenting, services, supports, and my community.
- Encourages and helps me to set my own goals and make my own decisions.
- Enjoys my child and gives me valuable information about my child's development.
- Offers praise and support for my efforts and progress.

### Our Work Together:

- Helps me to understand and improve my being a parent to my child.
- Teaches me ways to help my child grow and develop so that he/she is ready for school.
- Connects me to services that are important for my child, my family, and me.
- Helps me to reach my personal goals and those for my child and my family.
- Makes me feel good about my child, my family, and myself.

### Adapted from:

Jones Harden, B. (undated, limited distribution). *Early Head Start home visitation training manual and tool kit*. Adelphia, MD: Region III Head Start Resource and Training Center.

## B. Parent Education Models: Home Visiting

### ANNOTATED RESOURCES

#### BOOKS AND PRINT

##### Home Visiting: Recent Program Evaluations

(1999, SPRING/SUMMER) BEHRMAN, R. (ED.)

The purpose of this issue of *The Future of Children* is to examine the practice, policy and research underlying home visiting programs for families with young children. The report highlights a number of national models and provides analysis and recommendations for policy, practice, and research. The text is most useful to community planners, administrators, providers, evaluators, and researchers.

*The Future of Children*, 9(1). *The Future of Children*, 300 Second Street, Suite 200, Los Altos, CA 94022, 425-948-6498 (fax) or e-mail [circulation@futureofchildren.org](mailto:circulation@futureofchildren.org). (No Cost). Also available online at [www.futureofchildren.org](http://www.futureofchildren.org).

##### Home Visiting with Families with Infants and Toddlers

(1997, FEBRUARY/MARCH) ZERO TO THREE NATIONAL CENTER FOR INFANTS AND TODDLERS

This issue of the *Bulletin of ZERO TO THREE* focuses on multiple issues related to home visiting as a method of service delivery, parent education, and family support. This issue is particularly useful to providers, administrators, community planners (including families), and evaluators.

*Bulletin of ZERO TO THREE: National Center for Infants and Toddlers*, 17(4). Washington, DC: ZERO TO THREE. Order from ZERO TO THREE, P.O. Box 960, Herndon, VA, 1-800-899-4301, 703-661-1577 (fax), or at [www.zerotothree.org](http://www.zerotothree.org). (\$10.00 for full issue).

##### The Home Visitor's Guidebook

(2003) KLASS, C.

In its second edition, this book offers practical strategies, based on research and the author's continuing field work, to guide early care providers, educators, and home visitors in working with young children and their families. The content includes focus on the parent-home visitor relationships, working with diverse families, professional development, and child and family development.

*Paul H. Brookes Publishing Co.*, P.O. Box 10624, Baltimore, MD 21285-0624, 1-800-638-3775, 410-337-8539 (fax), or [www.brookespublishing.com](http://www.brookespublishing.com). (\$39.95)

#### ON-LINE RESOURCES

##### Building School Readiness Through Home Visitation

(2003) GOMBY, D. OF DEANNA GOMBY CONSULTING

This report and its appendices explore the extent to which research indicates that home visitation can be used as a school readiness strategy. It focuses on a subset of home visiting programs—those that serve young children and their families and seek to improve the lives of children by encouraging change in the attitudes, knowledge, and/or beliefs of the parents. The report offers guidance, resources, and recommendations to communities and program planners. Full text available at [www.cfc.ca.gov/SchoolReady.htm](http://www.cfc.ca.gov/SchoolReady.htm)  
Produced for the First 5 California Children and Families Commission, 501 J. Street, Suite 530, Sacramento, CA 95814

##### No Place Like Home: State Home Visiting Policies and Programs

(2001) JOHNSON, K.

This study describes a variety of approaches to home visiting services and the common challenges setting realistic program expectations, coordinating efforts of multiple agencies, and assuring the quality of services. The survey summary assesses the direction of state policies and programs and makes recommendations related to policy, program development, and a continuum of early childhood services. The text is useful to community planners, administrators, providers, fiscal planners, and policy makers. Full text available at [www.cmwf.org](http://www.cmwf.org)

*Johnson Group Consulting, Inc. The Commonwealth Fund*, 1-888-777-2744, publication number 452.

##### Revisiting Home Visiting: Summary of a Workshop

(1999) GEYELIN, N. AND PHILLIPS, D. (EDS.)

This summary of a workshop for practitioners, policymakers, and researchers discusses recent evaluation evidence on the effectiveness of home visitation programs. The intent of the workshop was to broaden the discussion about home visiting from one focused on specific programs to one focused on the basic goal of all home visiting programs—to improve the lives of children and families. The text provides information useful to community planners, administrators, providers,

and evaluators. Full text available at <http://books.nap.edu/catalog/9712.html>  
*National Research Council and Institute of Medicine, Commission on Behavioral and Social Sciences and Education National Research Council.*

### **The Benefits and Financing of Home Visiting Programs**

(2002) CORNELL, E.

This issue brief highlights key features of effective home visiting efforts and offers ideas to maximize funding opportunities and community examples. The text is useful to community planners, administrators, providers, and evaluators. Full text available at [www.nga.org/center/divisions/1,1188,C\\_ISSUE\\_BRIEF^D\\_3927,00.html](http://www.nga.org/center/divisions/1,1188,C_ISSUE_BRIEF^D_3927,00.html)  
*National Governor's Association Center for Best Practices*

## **WEBSITES**

### **Head Start Information and Publications Center**

[www.headstartinfo.org](http://www.headstartinfo.org)

The Head Start Information and Publication Center (HSIPC), a service of the Head Start Bureau, supports the Head Start community and other organizations working in the interest of children and families by providing information products and services; conference and meeting support; publication distribution; and marketing and outreach efforts.

### **HIPPYUSA®: Home Instruction for Parents of Preschool Youngsters**

[www.hippyusa.org](http://www.hippyusa.org)

HIPPY is a parent involvement, school readiness program that helps parents prepare their three, four, and five year old children for success in school and beyond. This website describes the HIPPY program model, its international roots and presence, research, and how communities and providers can become involved in delivering HIPPY services.

### **National Center for Children, Families, and Communities**

[www.nccfc.org](http://www.nccfc.org)

The National Center for Children, Families, and Communities is an interdisciplinary center based at the University of Colorado Health Sciences Center. The Center is devoted to research, development, and replication of effective

programs that improve the lives of children and families in the context of the communities where they live. The Center is home to the Nurse-Family Partnership and provides information about the program model, research, training services, current sites, and publications.

### **Parents As Teachers National Center**

[www.patnc.org](http://www.patnc.org)

Parents as Teachers (PAT) is an international early childhood parent education and family support program serving families throughout pregnancy until their child enters kindergarten, usually age 5. This main website describes the PAT program and offers selected readings, publications, training schedules, and program support to those interested in delivering PAT services. In addition, the site provides links to other relevant organization and resources.

### **The Center for Home Visiting**

[www.unc.edu/~uncchlvr](http://www.unc.edu/~uncchlvr)

The Center for Home Visiting at the University of North Carolina supports research, program evaluation, professional training, and staff development related to home visiting through collaborative efforts with researchers, educators, evaluators, trainers, practitioners, and policy makers. The mission of the center is to promote interdisciplinary research and evaluation, training at the college and university levels, professional development for providers, knowledge development concerning practice and training. The site serves as a national resource for information on home visiting including guides to written and audio-visual training materials for home visitors and links to other organizations.

### **ZERO TO THREE**

[www.zerotothree.org](http://www.zerotothree.org)

ZERO TO THREE's mission is to promote the healthy development of our nation's infants and toddlers by supporting and strengthening families, communities, and those who work on their behalf. This site includes a variety of resources, publications and links related to advancing the current knowledge; promoting beneficial policies and practices; communicating research and best practices to a wide variety of audiences; and providing training and technical assistance and leadership development.



## ■ SITE-BASED INTERVENTION

### OVERVIEW OF THE ISSUE

Parents have always been eager for information about raising their child, what to expect as their child develops, and how to improve their own parenting skills. The old view of site-based, or center-based parent education conjures images of didactic lessons to a group of parents in a classroom style arrangement. Today, parenting education is offered in many venues, to a broad array of families, and in an active learning process format. Many of the families who participate include parents who are new to parenting; parents who are under stress, in conflict, or at risk; parents with children who have special health or developmental issues; parents who are required or court ordered for services and all those in-between. Regardless of the extenuating circumstances—the overarching goal of parent education is to enhance parent-child relationships by developing parenting skills, helping families understand child and family development, promoting positive relationships between parent and child, and supporting children’s growth and development—and as a result school readiness. (Brown, 2000; Lovejoy, 1998; Schorr, 1999; ZERO TO THREE, 1997).

There are numerous types of parent education programs, including self-help or self-study books and guides, Internet websites, parent-tip lines, programs and discussion groups. The site-based parent education programs in this tool kit represent a more formal approach and include a trained parent educator, a structured curriculum, interactive learning, evaluation, and an evidence base. Within those boundaries of defining parent education, this section of the tool kit will focus specifically on site-based parent education programs that are relevant to early social-emotional development, parent-child relationships, parenting skills, and school readiness related to social and emotional competence.

### FOCUS ON SOCIAL AND EMOTIONAL COMPETENCE

Throughout the country, long overdue and new interest is focused on the social emotional foundations for child development and school readiness. Recent research has enhanced understanding of early experiences and their relationship to how children feel about themselves, relate to others, and manage emotions and self-control (Thompson, 2001). In addition, new insights into the importance of social-emotional competence in school success has led some to describe social-emotional development as the core or foundation of school readiness (Espinosa, 2002; Thompson, 2002). The National Research Council and Institute of Medicine (2000) emphasized this aspect of development and made the following research-based observations and recommendations:

- From birth to age 5, children rapidly develop foundational capabilities on which subsequent development builds—including linguistic, cognitive, emotional, social, regulatory, and moral capacities.
- Nurturing, stable, and consistent relationships are the key to healthy growth, development, and learning.
- Early child development can be seriously compromised by social, regulatory, and emotional impairments.
- Some of the strongest long term impacts of successful intervention have been documented in the domains of social adjustment.

- Resources on par with those focused on literacy and numerical skills should be devoted to translating the knowledge base on young children’s emotional, regulatory, and social development into effective strategies for fostering those developmental skills to assure school readiness.

For parents and families, the research implies the importance of caregivers who understand the developmental aspects of social-emotional development, the learning process of self-regulation, and their role and responsibility in providing appropriate support and experience to achieving self-regulation (Blair, 2003). Highly nurturing parents who provide structure and lessons in self-control prepare young children for peer interactions, cognitive tasks, and success in school (Raver, 2003).

Many young children, who face multiple risk factors or stressors, demonstrate early struggles in this area of development, including behavior problems visible in the early care and education settings (U.S. Department of Health and Human Services, 2001). In recognition of the critical nature of social-emotional development and to address this aspect of school readiness, families, schools, and communities are seeking approaches and evidence-based strategies to improve outcomes for young children (Kaufmann & Perry, 2002). These strategies include parent education focused on social-emotional development that can be offered as universal, selective, or indicated levels of intervention.

## FEATURES OF SITE-BASED INTERVENTIONS AND SELECTED PROGRAM MODELS:

This section of the tool kit will review common and unique features of site-based parent education and intervention programs that support social-emotional foundations of school readiness with particular focus on three evidence-based models.

### ■ Features of Site-Based Intervention Models focused on Social-Emotional Development

Many site-based parent education programs focused on social-emotional development share common values and principles relevant to child development, early learning, and school readiness. They may also have differences that influence their delivery and impact on school readiness.

#### Common Values and Principles

- The early years of a child’s life are critical for optimal development and provide the foundation for success in school and in life.
- Parents are effective mediators of change in their children, therefore services target the parent directly as their “child’s first teacher”.
- A focus on the parent-child relationship undergirds the parent education goals, activities, and strategies for change.
- Interactive sessions build on the relationship between the child and parent, offer meaningful lessons regarding parent and child development, and provide opportunities to learn and practice new skills.
- At home practice and homework reinforce learning in the group setting and support transfer of learning to the home environment.

## B. Parent Education Models: Site-Based Intervention

- The leader is a collaborator rather than an “expert” and the relationship is reciprocal based on respect, compassion, empathy, and humor.
- Parent groups and parent-to-parent support foster a sense of community support, reduce isolation, and offer role models for learning.

### Difference Among Programs

- **Program goals.** Although most site-based parent education programs focus on improving parenting skills to promote healthy child development, others place greater emphasis on a particular aspect of child development or dealing with children who have special needs.
- **Intensity of services.** Most site-based parent education programs offer regular meetings for instruction or discussion, however the frequency and duration may vary. Others require more active intervention activities, including in-home, in-classroom activities for parents and their children, and peer or provider feedback.
- **Staffing.** Site-based activities may use professionals, paraprofessionals, or parents themselves as leaders and co-leaders. Depending on the nature of the intervention program, advanced degrees and certification may be required. All require some training or advanced preparation through personal experience.
- **Whom they serve.** Site-based parent education with a social-emotional development focus may be universal, selective, or indicated in nature. A program may serve families at-risk or low income or those dealing with children with significant health, mental health, or disability concerns. Others are intended for all families. Enrollment and service eligibility criteria may vary.

(Incredible Years, 2003; Partners in Parenting Education, 2002; Regional Intervention Program, 2003)

### Critical Observations and Mixed Results on School Readiness

Comparing findings across parent education programs, including those focused on social-emotional development and behavioral concerns can be difficult. In an effort to compare interventions for young children ages birth to eight, Webster-Stratton and Taylor (2001) reviewed empirically supported programs that intervene in these early years to promote parent and teacher competencies and to prevent conduct problems. The review included programs provided at the universal, selected and indicated levels of intervention. Several focused on parent education and skills training as a primary service. In the summary of parent-focused interventions, the results suggested the following:

- **Ready Families, Communities, Schools**
  - A parent component is critical to problems focused on preventing conduct problems and promoting social competence in children.
  - For families with children age 2 years old and above, behavioral parent training—either individual family based, group based or self-administered—has been consistently shown to improve parenting practices.
  - Broader-based parent training approaches that include attention to interpersonal parent issues and family stressors, have demonstrated modest but significant improvements over and above what can be gained from parent training that strictly focuses on parent skills.
- **Ready Children**
  - For children age 2 years and above, behavioral parent training has been shown to consistently reduce conduct problems in children.



- Generalization of behavior improvements from the learning site to the home and to un-treated child behaviors has also been demonstrated.
- There is mixed evidence on generalization of improvements from home to school; particularly if teachers are not involved in the intervention.
- Central to any of these program's success is the parent-teacher-school counselor partnership model, a supportive network, that leads to parents and teachers feeling more supported in their efforts and results in more success than those that target either teachers or parents or children alone.

(Webster-Stratton and Taylor, 2001)

## ■ Selected Program Models

Selection of any program model or parent education tool should be based primarily on the match between community specific goals for young children and families and program goals and effectiveness. By definition, site-based interventions take place at a location other than the parents' home. Although site-based interventions may have activities to practice at home, a home visit component, or an adaptation for inclusion in a home visiting model, the programs generally occur elsewhere. The following text provides a description, the evidence base and a snapshot of a community promising practice for three national site-based parent education program models. Those models include either role-playing, or interactive parent-child learning as training strategies that allow for direct guidance, immediate feedback, and as reported—more effective training and longer term impact. They also focus on the social-emotional and behavioral aspects of parent-child relationships, peer relationships, discipline, and those children who may have special social-emotional and mental health needs. More detailed descriptions are available from resources listed for this section.

### **PARTNERSHIP IN PARENTING EDUCATION (PIPE)**

The goal of PIPE is to promote health family relationships by strengthening the attachment, emotional availability, and relationship skills between the primary caregiver and the child, thus improving the confidence and resiliency of the child. PIPE is a preventive intervention curriculum intended for use with parents of infants and toddlers. PIPE was first developed as a site-based parenting education program for teen-parents in a school-based setting. Since then, the curriculum as a tool has been adapted and expanded to include other at-risk populations in a variety of intervention programs—including home visiting. PIPE is an interactive curriculum that focuses on eight core concepts of emotional connectedness where parents and baby are learning together in a four step instructional process—1) Presentation of concepts, 2) demonstration by the parent educator, 3) supervised practice between parent and child, 4) evaluation and feedback. The curriculum is available in English and the parent handouts are available in English and Spanish. Parent educators must attend a two-day training provided by How to Read Your Baby. To become a certified PIPE trainer, candidates must have a minimum of an Associates of Arts degree, attend a two-day PIPE training, experience using the PIPE curriculum and facilitating parent-child interactions with at least eight of the PIPE topics, have strong organizational and communication skills, and have an ability to work effectively as a team member. A second curriculum, *Emotional Beginnings*, based on the PIPE curriculum is available for use with childcare providers. In addition to a similar goal of building relationship skills between the childcare provider and the child, this training is intended to build relationships between parents and child care providers and improve the quality of childcare.

## B. Parent Education Models: Site-Based Intervention

### Research Evidence and School Readiness

*Outcome measure areas:* Child: Child behavior, Social and language skills; Parental: Parent self-esteem, Parent and child interaction

- PIPE parents were more able to define emotionality in infant faces.
- PIPE parents perceived their babies as more fun and interesting.
- PIPE parents felt their infant preferred them to others.
- PIPE parents felt good about their parenting skills.
- PIPE parents expressed greater confidence, contentment, interest, happiness and less anger and guilt than before the intervention.
- PIPE parents expressed higher aspirations for themselves.
- PIPE children demonstrated greater emotional expressiveness.
- PIPE children showed less fear during emotional challenges.
- PIPE children demonstrated greater language skills.

(Partners in Parenting Education, 2002; Robinson et al., in review; ZERO TO THREE, 1996)

### PROMISING PRACTICE

## Healthy Families Indiana

*State-wide policy, training for home visitors.*

Healthy Families Indiana (HFI) is a statewide system of 56 nationally credentialed home visiting programs, funded through the Indiana Family and Social Services Agency, that serve at-risk families in all 92 Indiana counties. The HFI Training and Technical Assistance Project (HFIT&TAP), contracted to the Indiana University School of Nursing, offers training, technical assistance, quality assurance, data monitoring and evaluation support to the statewide program. An HFI advisory workgroup decided the PIPE curriculum could be embedded into the home visiting program and HFIT&TAP should offer PIPE training. In the initial effort 2 staff from each HFI site were trained in the curriculum. In anticipation of going state-wide and training 800 HFI staff, the HFIT&TAP developed their own certified training team to have flexibility, deliver regular training events, and expand training to meet local needs. The PIPE training is now required by state policy for HFI home visitors. The training is incorporated into HFIT&TAP's centralized training schedule, which allows for ease of scheduling, registration, tracking staff participation, materials purchase and supply, and evaluation. Local sites host PIPE trainings and all other training expenses are funded by HFIT&TAP. Since January 2000, 44 PIPE trainings have been offered resulting in 1051 trained HFI home visitors. For more information contact Joanne Martin at 317-274-4419 or [jbmartin@iupui.edu](mailto:jbmartin@iupui.edu)

## Grant County, IN

### *Healthy Families Program: Implementing PIPE in the context of home visiting and site-based parent education services.*

Grant County has a population of 72,000 with the largest city being Marion (population—37,000). Grant County exceeds the state average in various family and community risk factors including poverty, teen pregnancies, single parents, low literacy, low education level, and unemployment.

Through the Healthy Families Indiana initiative and under the umbrella of Family Service Society, Inc., Healthy Families of Grant County (HFGC) opened its doors for services in 1995 to serve 30 families that year. In 2003, HFGC enrolled 277 families and provided parent education and support in a home visitation format to optimize child growth and development and encourage resilient, healthy families. Like all the Healthy Families grantees, all staff are required to participate in PIPE training and encouraged to use the PIPE curriculum during home visiting services. The HFGC program manager is a certified trainer for the PIPE program and oversees its implementation within the program

In addition to using the PIPE curriculum within the context of home visiting services, HFGC uses the curriculum in a site-based program called Cradle School. In 1996, a partnership between Healthy Families and Marion Community Schools resulted in the creation of Cradle School. The program provides a weekly 90 minute session for parents and their children ages 0-4. The first half-hour provides a support group for parents with a parent educator. The children remain with child instructors and participate in learning activities. The remaining hour is time for parents to interact with their children while enjoying a healthy snack, completing a fun craft, or experimenting with a learning activity. Field trips and guest speakers are also on the schedule. Cradle School curriculum draws from several sources, including PIPE and the Kindergarten Readiness Checklist from Marion Community Schools. What began as a twelve-week session at a neighborhood school and has grown to a year-round schedule with five sessions weekly at local sites. Due to a growing Hispanic population, Healthy Families of Grant County has employed two bilingual staff, who are also translate information for the non-English speaking parents and children attending Cradle School sessions. Keys to success have been:

- Offering parent education in a variety of ways to reach parents throughout the community.

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## B. Parent Education Models: Site-Based Intervention

### PROMISING PRACTICE

GRANT COUNTY, IN CONTINUED

- Believing that cognitive development hinges on emotional development and using vital tools such as PIPE to educate parents about the emotional development of their infants and toddlers.
- Offering the Healthy Families Program and Cradle School until age 5 to provide preschool type activities for children who would not have otherwise had a preschool experience.
- Regular meetings of partners to oversee and evaluate activities.
- Frequent exchange of information among partners concerning community resources and educational opportunities.

For additional information contact Lisa Cart at 765-662-9971 or [lcart@famservices.com](mailto:lcart@famservices.com)

### THE INCREDIBLE YEARS PARENTS, TEACHERS AND CHILDREN TRAINING SERIES

The Incredible Years program goals are to: 1) Reduce conduct problems in children; 2) Promote social, emotional, and academic competence in children; 3) Promote parental competence and strengthen families; and 4) Promote teacher competence and strengthen school-home connections. Each of these goals has specific indicators. The Incredible Years is a practical and versatile set of programs used to teach effective child management skills to different types of participants—including parents and young children ages 2-10 with or without conduct problems; parents at risk for abusing or neglecting their children; early care and education providers; and classroom teachers. A treatment version is available for use by child therapists and mental health providers. *The Early Childhood BASIC Parent Training Programs (Ages 2-7)* include 4 parent-training programs (Play, Praise and Rewards; Effective Limit Setting; and Handling Misbehavior) employ a leader's manual, participants' books, and 10 videotapes. These materials are available in English and Spanish, and some materials are available in Vietnamese. Group leaders facilitate group discussion and problem solving. Participants engage in group discussion, practice skills through role-play and home practice activities. The BASIC programs can be offered to groups of 10-14 participants and can be completed in twelve to fourteen 2-hour sessions. Group leaders should have university level training in child development and behavior management principles and may come from a number of disciplines, including nursing, psychology, counseling, social work, education, and psychiatry. Group leader certification is highly recommended and is required if the program is to be evaluated as part of a research program. Group leaders receive three-days of training from a certified trainer; complete two parent groups (12 sessions each); participates in peer review groups by a co-leader; receive a satisfactory evaluations; and is observed on-site. Parents can also receive training as a co-leader through a similar process. The other programs in the series are:

- *Incredible Years ADVANCED Parent Training Program*—a broader-based family intervention, for parents that supplements the BASIC program by focusing on applying the principles of communication and problem solving to other relationships.

- *Incredible Years EDUCATION Parent Training Program*—for parents of children ages 5-10, supplements the BASIC program by focusing on ways to support the child’s education and foster children’s academic competence.
- *School-Age BASIC Parent Training Program*—for parents of children ages 5-12, gives greater emphasis to strategies for older children and takes a multicultural approach.
- *Teacher Training Programs*—for those work with children ages 4-10.
- *Incredible Years CHILD Training Program*—“Dina Dinosaur Social Skills and Problem Solving Curriculum”—for preschool and early grades children ages 4-8 to facilitate social competence.

### Research Evidence and School Readiness

*Outcome measure areas:* Child: Child behavior, Social skills; Parental: Parenting skills, Parent-Teacher involvement; Teacher: Teacher classroom management, Classroom atmosphere (Depending on which one or what combination of training modules were implemented)

- Incredible Years parents were less critical, meted out less harsh discipline, were more nurturing, reinforcing, and competent in their parenting.
- Incredible Years parents had increased bonding and involvement with teachers and classrooms.
- Incredible Years children exhibited significantly fewer negative behaviors and conduct problems, less non-compliance, less negative affect and more positive affect, and more pro-social behaviors both at home and at school.
- Incredible Years children were significantly improved in peer interactions, more positive in their social skills, and conflict management with peers.
- Incredible Years children were more engaged or on-task in classroom activities and had higher school readiness scores.
- Incredible Years teachers use fewer negative management strategies and increased use of praise and encouragement.

(Incredible Years, 2003; Webster-Stratton, 2000; Webster-Stratton, 2001; Webster-Stratton and Taylor, 2001)

## B. Parent Education Models: Site-Based Intervention

### PROMISING PRACTICE

### Olmsted County, MN

#### *Collaboration and collocation supports parent education.*

Olmsted County has a population of 150,000 with the largest city being Rochester, home of the Mayo Clinic. Rochester is fairly diverse for a Minnesota community with the public school system serving students representing over 80 languages in the student population. The Somali and Southeast Asian communities are two of the largest immigrant populations in Rochester. The Children's Mental Health Collaborative was developed in Olmsted County in 1990 and has been a unifying force for children's mental health services. The membership includes parents, professional providers, school and county personnel. The Collaborative identified a need for preventative parent education in 1998, determined that action was crucial, and sought grant funding to support the effort. After a curriculum search, the *Incredible Years Basic Parenting* curriculum was identified as matching the goals established by the Collaborative. The Collaborative provided dollars to support the Basic Parent Group and membership agencies provided personnel for training and implementation. In 2001, twenty-five individuals from diverse agencies attended training to facilitate parent groups. Trained personnel and family advocates and administration from Olmsted County Community Services planned implementation of the first Basic Parenting Group. The planners established three operational goals: 1) the group would be universally open to any parent with a child between the ages of 3-12 years; 2) There would be no financial or mental health related criteria for selection; and 3) meals and child care would be provided at no expense to participating parents. In addition, a Fidelity Group was established to assist in assuring implementation of the curriculum, improve practice, and expand the pool of certified trainers. Eight Basic Parent Groups for over 75 families have been hosted in the past 2½ years. Keys to success have been:

- Offering parent education in a family friendly site, typically a church or donated space that allows for children to be engaged in a separate activity.
- Day care and meals provided to all group participants and staff and funded by the Collaborative.
- Dedicated professionals and community members (including parents) who see the merit in preventative intervention.
- An administrative champion who focuses on the administrative challenges and funding of the groups.
- When possible the Dina Dinosaur curriculum is embedded in the Parent Group so that children receive curriculum that dovetails effectively with Parent Group content.
- Development of outcomes and perseverance in gathering data to give credibility to the outcomes.

For more information, contact Patrick McEvoy, 507-287-1564 or [mcevoy.patrick@co.olmsted.mn.us](mailto:mcevoy.patrick@co.olmsted.mn.us)



## Colorado and Invest in Kids®

### *Facilitated planning and implementation for communities.*

Invest in Kids® (IIK), a private, non-profit organization whose mission is to partner with Colorado communities to improve the health and well-being of young children, particularly those of low-income families, through effective, research-based programs. IIK uses a three-pronged approach by:

- Identifying evidence-based programs that have been proven through rigorous research to improve child health, development, school readiness, and academic success;
- Facilitating program implementation through an individualized approach at the community level with local stakeholders; and
- Helping communities develop and maintain strategies to sustain programs and long term success.

The Incredible Years program is one of the programs that IIK has identified as an evidence-based program.

In Pagosa Springs, the county seat of Archuleta County (population 11,000) Invest in Kids convened group of local leaders and stakeholders who were committed to establishing a program to promote social-emotional development with a strong parent component that would support children's mental health, school readiness, and comprehensive services for parents. The local leaders and interested parties in this effort included the Superintendent of schools, a leader in the county health department, private counselors, representatives from the city of Pagosa Springs, the Director of the Department of Social Services, representatives of early childhood programs, educators, and other community volunteers. The coalition of local leaders agreed to implement The Incredible Years program and began comprehensive planning to guide the process. In the pre-implementation work the local leaders decided the population to be served, the lead agency for service delivery, and the ongoing coordination role of the coalition. The coalition then agreed to offer services through the existing Head Start program and a private child care center and identified strategies for staffing, staff training, and staff retention, parent recruitment, and program evaluation. Sustainability and continued funding support is a task assigned primarily to the local coalition agencies with supplemental support from IIK. Initial costs require an up-front investment, and community resources offer support through donated space, meals, and child care costs. Pagosa Springs has implemented the program in four classrooms, serving over 50 children and hosted 3 parent groups, serving 33 parents. Expansion is planned for the coming year. Across Colorado, thirteen communities have implemented The Incredible Years program in a variety of settings and diverse staffing. For more information, contact Jennifer V. Atler, 303-839-1808 ext. 104 or [jatler@iik.org](mailto:jatler@iik.org).

## B. Parent Education Models: Site-Based Intervention

### REGIONAL INTERVENTION PROGRAM (RIP)

Parent implementation is the cornerstone of this parent education model whose primary goal is to teach parents methods for interacting with children that will maximize positive, developmentally appropriate behavior, while minimizing noncompliant and negative behaviors. In the Regional Intervention Program, families, assisted by a small professional and paraprofessional staff, work as primary therapists with their own children and serve as primary sources of support and assistance for each other. Criteria for services are that the family has serious concerns regarding the behavior of the preschool child, that at least one adult family member agrees to work at the RIP center a minimum of two mornings or two evenings per week for 2 hours each visit, and that the family agrees to fulfill a “payback” obligation or providing assistance to other families after they themselves have completed the intervention phase. The parent training has three modules, which are managed by a professional staff member and coordinated by a member of the parent staff. The three modules are: 1) Behavioral Skills Training; 2) Social Skills Training; and 3) Preschool Classroom. Each segment of the training takes place in the context of a variety of structured adult-child interaction sessions on-site as well as daily-living programs at home. Two additional modules, the Child Care/School Intervention module, focused on collaborating with a community-based program where the child is experiencing significant difficulties, and the Liaison Module, offering continued peer support and consultation to those families who have completed the active treatment phase of the RIP program, support the three core modules.

#### Research Evidence and School Readiness

*Outcome measure areas:* Child: Child behavior, Social interaction; Parental: Parenting skills, Behavior management

- RIP parents demonstrated improved child behavior management skills.
- RIP children demonstrated increased compliant behavior in the school setting and at home.
- RIP children demonstrated more appropriate and positive social interaction.
- RIP children had reduced frequency of referral for additional evaluation or treatment intervention related to behavioral difficulties.

(Regional Intervention Program, 2003; Strain & Timm, 2001; Timm 2001)

### PROMISING PRACTICE

## Yakima, Washington

Yakima, Washington is located in South Central Washington, East of the Cascade Mountain Range, an imposing geographical barrier that symbolizes an economic, educational, and cultural chasm that divides Washington State. The Yakima Valley is known for production of forest products, light manufacturing, and agriculture. The city of Yakima is the 8th largest city in Washington and the county seat. The population of Yakima is primarily Caucasian with 20% Hispanic, 15% Native American, and a small Asian community.

More than 10 years ago, The Greater Yakima Partnership, an interagency group interested in making service systems better for children, identified children with behavioral concerns and juvenile justice involvement as a priority focus. The group included representatives from various agencies,

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## REGIONAL INTERVENTION PROGRAM CONTINUED

social services, mental health, and school personnel. After exploring programs in other communities where education and mental health services worked together, the collaborative group focused on replicating the Regional Intervention Program as a prevention and early intervention program. Initially funded by a Ready to Learn grant from the Washington State Office of Public Instruction in 1994, Catholic Family & Child Service (CFCS), a non-profit administered by the Diocese of Yakima, was chosen as the lead agency. Since the initial grant, the program has been sustained and expanded through United Way and mental health funding.

The Valley Intervention Program (VIP) uses hands on parent training to build on individual and family strengths and teach and improve positive parenting skills to address emotional, behavioral, and social concerns that are critical to many children's school readiness. VIP serves low-income families with children who 1) have been exposed to parental depression, other mental illness substance abuse, and violence; 2) have been abused, maltreated, neglected, or homeless; 3) demonstrate challenging behaviors and difficulty relating to peers; 4) have cognitive and developmental disabilities; and 5) have been removed from childcare or Head Start due to behavior. Families receiving services at VIP represent the culturally diverse population of Yakima. VIP's parent agency, Catholic Family & Social Services, has a longstanding presence of in the community and a well established trust of culturally and linguistically diverse families, including those in the Native American community. VIP has adapted its approach to serve families with limited reading proficiency; those with extended work schedules; and those from the Native American, Hispanic, and other immigrant communities to encourage participation. Other innovations include informal parent meetings to build trust and parent-to-parent support, homework for parents to practice at home, and full-day preschool program as part of its intervention and school readiness for young children.

Keys to success include:

- Commitment from the lead and partner agencies.
- Knowledge and expertise in early childhood mental health issues.
- Neighborhood resources and interagency referral sources.
- A well established presence of parent organization, including within the Native American community.
- Adapting the program for educationally, culturally and linguistically diverse communities.
- Responding to the immediate needs of families and pacing the curriculum accordingly.
- Flexibility in offering the program at convenient times and locations.
- Strong focus on outcomes.

For more information contact Lisa Souers at 509-965-7100 or [lsouers@cfcsyakima.org](mailto:lsouers@cfcsyakima.org)

## B. Parent Education Models: Site-Based Intervention

### Critical Questions for Communities

- *What are our community's specific goals and desirable outcomes for young children and families related to school readiness?*
- *What is our perspective (philosophy and values) related to site-based or community-based parent education as a strategy for delivering early intervention in support of these goals and desirable outcomes?*
- *What information do we need to understand parent education and training program models, curriculum, and approaches?*
- *By what criteria will we select a parent education and training program model or curriculum?*
- *What level or type of parent education intervention is right for our community? Are there special needs to address through parent education?*
- *What options exist to tailor the parent education model or curriculum to our community in terms of cultural and linguistic diversity?*
- *What parent education programs already exist and operate within our community?*
- *How might these parent education programs be coordinated, linked or supplement one another?*
- *How can we make sure that parent education is one feature of a connected or comprehensive system of supports to young children and families?*

# Key Strategies for Families, Providers, and Administrators

## What Families Can Do:

- Participate in community planning related to site-based parent education.
- Learn about opportunities for site-based parent education services that might interest you and benefit your child.
- When enrolled, participate fully in the site-based parent education program to assure full potential benefit.
- Provide input and feedback to help the parent educator tailor the program to your family interests.

## What Providers Can Do:

- Commit to quality and full preparation for delivering the site-based parent education program.
- Understand the importance of engaging families and develop skills to create the relationship-based context for effective site-based parent education services.

- Take a family-centered, and child-focused approach to individualizing the site-based parent education program.

## What Administrators Can Do:

- Participate in community driven efforts to identify interest in and selection of site-based parent education program.
- Determine organizational capacity and create internal structures appropriate for implementation, including supervision of providers.
- Implement evaluation processes that will rigorously determine impact of the site-based parent education program and use this information for program improvement and cost-benefit analysis.

## B. Parent Education Models: Site-Based Intervention

### Tips for Parents: What to Expect from Your Site-Based Parent Education Program focused on Social and Emotional Competence

Parents are active learners in a site-based parent education program focused on social and emotional competence. It is essential that in all stages of the learning experience that parents view themselves as effective mediators of change for their child and recognize that the parent-child relationship is the foundation for the parent education goals, activities, and efforts to achieve change.

#### **My Parent Education Program:**

- Involves the perspective of the whole family and the relationships and interaction between family members.
- Focuses on my child and his/her growth and development—especially social emotional development.
- Emphasizes parenting skills and activities to encourage appropriate behavior and discourage inappropriate behavior in my child.
- Links home, school, and other settings so that my child's social and behavioral skills improve in all of these places where he or she grows, develops, and interacts with others.
- Supports individualized goals that will help my child develop and prepare my child to be ready for school.
- Utilizes interactive learning strategies, including observation, practice, homework, and feedback.
- Includes parent-to-parent support for learning together and from one another.

#### **My Parent Educator:**

- Is warm, friendly, and respectful towards me.
- Communicates with me in my language or through an interpreter.
- Really cares about my child, my family, and me.
- Listens carefully and is responsive to my ideas, concerns, and questions.
- Communicates clearly about our time together, how we will interact, when we will meet, and our agreements to work together.
- Is knowledgeable about child development, parenting, services, supports, and my community.
- Uses teaching methods that relay the information in ways that I can understand.
- Encourages and helps me to set my own goals and make my own decisions.
- Enjoys my child and gives me valuable information about my child's development.
- Offers praise and support for my efforts and progress.

#### **Our Work Together:**

- Helps me to understand and improve my being a parent to my child.
- Teaches me ways to help my child control his or her own behavior, participate in everyday activities, and develop emotionally so that he or she is ready for school.
- Helps me to reach my personal goals and those for my child and my family.
- Makes me feel good about my child, my family, and myself.

# ANNOTATED RESOURCES

## BOOKS AND PRINT

### **Building Services and Systems to Support the Healthy Emotional Development of Young Children: An Action Guide for Policymakers**

(2001) KNITZER, J.

This guide is for policymakers and community leaders who want to craft policies and improve practices that promote healthy emotional development in young children at risk for poor cognitive, social, and behavioral outcomes. It highlights why it is important to invest in such services; describes emerging principles and strategies for early childhood mental health services; and offers concrete tips for leaders in these efforts.

*National Center for Children in Poverty, 154 Haven Avenue, New York, NY. 212-304-7100, 212-304-4200 (fax), or [www.nccp.org](http://www.nccp.org). (\$5.00)*

### **Funding Early Childhood Mental Health Services & Supports**

(2001) WISHMANN, A., KATES, D. AND KAUFMANN, R.

This document is a workbook that helps states, communities and programs navigate some of the more than 140 federal programs and tax provisions that are directed at or provide benefit to children and their families. Recognizing that the need for a systemic approach to financing early childhood mental health services and supports, GUCCHD, with funding from the Center for Mental Health Services, convened a meeting of stakeholders and experts to help design a matrix listing a range of early childhood mental health services and supports and a list of potential financing resources. This matrix can be used by teams to inventory existing services and resources, identify gaps, duplication, or other relevant issues.

*Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children's Mental Health. To order call the Publications Manager at 202-687-5000 or [deaconm@georgetown.edu](mailto:deaconm@georgetown.edu). (\$8.00) Also available online at <http://gucchd.georgetown.edu/fundingpub.html>.*

### **Ready to Enter: What Research Tells Policymakers About Strategies to Promote Social and Emotional School Readiness Among Three- and Four-Year Old Children.**

(2002) RAVER, C. AND KNITZER, J.

This policy paper focuses on what the emerging research tells policymakers about why it is so important to intervene to help young children at risk of poor social, emotional, and behavioral development and what kinds of research-based interventions seem most effective. This text is useful to community planners, families, administrators, advocates, and policy makers.

*National Center for Children in Poverty, 154 Haven Avenue, New York, NY. 212-304-7100, 212-304-4200 (fax), or [www.nccp.org](http://www.nccp.org). (\$5.00)*

## ON-LINE RESOURCES

### **Set for Success: Building a Strong Foundation for School Readiness Based on the Social Emotional Development of Young Children**

(2002) THE KAUFFMAN EARLY EDUCATION EXCHANGE

This collection of papers from the Kauffman Early Education Exchange conference presents some of the latest scientific research and compelling evidence about the social and emotional foundations of school readiness. The papers provide information and practical lessons from the perspective of research, the field, and policy and practice. Full text available at [www.emkf.org/pages/12.cfm](http://www.emkf.org/pages/12.cfm)

*The Ewing Marion Kauffman Foundation, Kansas City, MO.*

## WEBSITES

### **How to Read Your Baby: Partners in Parenting Education (PIPE)**

[www.howtoreadyourbaby.com](http://www.howtoreadyourbaby.com)

How to Read Your Baby promotes positive family relationships which enhance the quality of attachment between the primary caregiver and the child and improve the confidence and resiliency of the child. The site offers information on the PIPE program, including a description of the training model, curriculum materials, and training resources.

## B. Parent Education Models: Site-Based Intervention

### **Incredible Years**

*www.incredibleyears.com*

The main website for the Incredible Years program offers background information, resources for program development, research and evaluation information and support, and training information related to the program.

### **National Center for Children In Poverty**

*www.nccp.org*

The National Center for Children in Poverty (NCCP) is a nonprofit, nonpartisan research and policy organization at Columbia University whose mission is to identify and promote strategies that prevent child poverty in the United States and that improve the lives of low-income children and families. NCCP concentrates on the links between family economic security and child development and researches policies that promote three goals: economically secure families, children entering school ready to succeed, and stable, nurturing families.

### **National Technical Assistance Center for Children's Mental Health**

*Georgetown University Center for Child and Human Development*

*http://gucchd.georgetown.edu/cassp.html*

The National Technical Assistance Center for Children's Mental Health (TA Center) is an integral part of the Georgetown University Center for Child and Human Development at the Georgetown University Medical Center. The TA Center has been dedicated to working in partnership with families and many other leaders across this country to reform services for children and adolescents who have, or are at risk for, mental health problems and their families. This site offers resources, publications, and links to other organizations.

### **SAMHSA Model Programs: Effective Substance Abuse and Mental Health Programs for Every Community**

*www.modelprograms.samhsa.gov*

This site features programs that have been tested in communities, schools, social service organizations, and workplaces across America, and have provided solid proof that they have prevented or reduced substance abuse and other related high-risk behaviors. This Web site serves as a comprehensive resource for anyone interested in learning about and/or implementing these programs, including those serving young children and their families.

### **The Center on the Social and Emotional Foundations for Early Learning**

*www.csefel.uiuc.edu*

The Center is a national center focused on strengthening the capacity of child care and Head Start programs to improve the social and emotional outcomes of young children.

The Center will develop and disseminate evidence-based, user-friendly information to help early childhood educators meet the needs of the growing number of children with challenging behaviors and mental health challenges in child care and Head Start programs.

### **The Rip Network: Regional Intervention Program (RIP)**

*www.ripnetwork.org*

This main website for the RIP provides information about the program, identifies operational sites in other communities, offers research information, and links to the central coordinating office.

### **ZERO TO THREE**

*www.zerotothree.org*

ZERO TO THREE brings together infant and family professionals uniting the fields of medicine, mental health, research, science, child development, and education to focus exclusively on the first three years of life. The organization promotes new knowledge, stimulates effective services and policies, increases public awareness, and fosters professional excellence.



# Professional and Paraprofessional Competence

## OVERVIEW OF THE ISSUE

Intuition, logic, and research all lead to the conclusion that any intervention program for young children and families is only as good as those who guide and provide the intervention. According to Gomby (2003), “the success of a home visiting program rides on the shoulders of its home visitors, (because) from the point of view of families, home visitors are the program” (p.17). Likewise, in site-based parent education models, those who deliver the curriculum are responsible for the quality of the experience of the participants and the outcomes of the program. Both these statements are true—whether the providers are professionals, paraprofessionals, or parents themselves. It is not enough to have the right curriculum that can support school readiness—even one that is tried, true, and evidence based. It is essential to have the “right staff” who can engage and build relationships with families; have an adequate knowledge base; have experience in delivering the curriculum; and can access continuous support through supervision and staff development activities.

## ABILITY TO ENGAGE AND BUILD RELATIONSHIPS

Working with young children and their families is relationship-based work. The child is growing and developing in the context of the relationship with the parents or primary caregivers; the home visiting program is built upon the establishment of the relationship between the caregiver and the home visitor; and on-site parent education is delivered in the context of relationships between the parent educator and the parent and the parent’s peers participating in the program. In addition, the fundamental role of parenting, expectation for any change, and foundation for school readiness is embedded in the relationship between the parent and the young child. It is essential that the home visitors and parent educators have the ability to engage with parents, build relationships, establish trust, sustain continuity in the relationship, utilize the relationship as a vehicle for change, and yet maintain appropriate personal/professional boundaries.

## KNOWLEDGE BASE AND SKILLS

It is most useful for those who work as home visitors or parent educators with families of young children to have knowledge about child development and early parent-child relationships as a core competency. An orientation to family-centered care, individualized services, cultural and linguistic competence, and utilization of community resources when appropriate is also important. Depending on the focus of the planned intervention, providers may need more specialized or advanced knowledge in areas such as education, health, disability, mental health, or substance abuse.

## C. Professional and Paraprofessional Competence

However, there are specific basic skills that cross both interventions and all curricula, such as skills including listening, observing, communicating, facilitating, problem solving, planning, implementing, reflecting, and evaluating. Home visiting and parent educator roles require these multiple skills for the diverse activities that are part of working with families and young children in these service delivery models.

### **EXPERIENCE WITH THE CURRICULUM**

It is good advice to consider the program goals, population being served, and the requirements of the curriculum when making staffing decisions. The curriculum chosen for the home visiting or parent education program may have specific educational, training or certification requirements for the home visitor or parent educator. Many curricula—including those highlighted in this tool kit—have training materials and services to orient providers who are new to the curriculum. Others provide follow-up technical assistance and continuing education opportunities. These attempts to assure provider preparation are efforts to assure fidelity of curriculum delivery and the intended outcomes of the intervention. Of course, “learning by doing” is an expected learning process for home visitors and parent educators. Making the most of preparation, practice, feedback from participants, supervision, peer support, and continuing education can bolster experience and success with the curriculum.

### **PREPARATION, SUPERVISION AND STAFF DEVELOPMENT**

Delivering home visiting and on-site parent education programs is difficult work. These services often involve multiple activities and a host of skills that can most effectively be delivered with appropriate preparation, supervision, and continuing staff development. A foundation of training in skills such as communication, adult learning, and facilitating groups is useful. In addition to training and experience with the chosen intervention curriculum, providers should understand the program’s mission, philosophy, principles, and intervention model. Providers should also understand these features of the organization administering the program and the structure and context in which home visitors and parent educators can carry out their work. This structure must also include adequate and appropriate supervision to guide, monitor, and evaluate performance, but as importantly, offer support, engage in reflective learning, and facilitate staff development. Reflective supervision through a collaborative relationship promotes self-knowledge—an essential competence and a core feature of staff development when engaged in the relationship-based work, of home visiting or parent education. (Klass, 1996; ZERO TO THREE, 2003).



## PROFESSIONAL OR PARAPROFESSIONAL

The debate of the role of professional, paraprofessional, or parents in delivering home visiting or site-based parent education services remains unclear (Gomby, 2003). The commonly used terms can be captured as:

- **Professional** is a term to describe an educated specialist who has education beyond high school in a specific discipline, such as nursing, education, or social work; and has personal experience, personal qualities, and interpersonal skills that are desirable for a work position.
- **Paraprofessional** is a term to describe an individual who has no academic credentials in a relevant field; but has personal experience, personal qualities, and interpersonal skills that are desirable. These individuals may include those known as “natural helpers” who are members of the community where services are delivered. Paraprofessionals may work under the supervision of a professional. (Pickett, 1999; Rapoport & O’Brien-Strain, 2001)

The models described in this tool kit offer examples of all three types of providers, as well as a team approach mix of professionals with both paraprofessionals and parents. Other systems, such as child welfare (Kinney et al., undated), disabilities, and mental health (Lazear & Pires, 2002) have highlighted the use of natural helpers for family-to-family support. There are important considerations as well as practice and policy implications on either side of the debate (Brown, 2000; Pickett, 1999). However, in the parallel fields of early child care and early education, training in child development and higher educational levels have been linked to better-quality care and better outcomes for children. In any case, provider preparation, training, and supervision are essential.

## PROFESSIONALIZATION OF HOME VISITORS AND PARENT EDUCATORS

There is a move toward greater use of professionals in home visiting programs and those with advanced degrees in child development, social work, nursing or education (Gomby, 2003, Rapoport & O’Brien-Strain, 2001). The field of Parent Educators is also pushing toward identifying core competencies, designing professional development systems, establishing credentialing programs, and forming professional associations (Brown, 2000; DeBord & Matta, 2002). Likewise, efforts to organize supports for paraprofessionals are also under way, arguing for robust paraprofessional models that can maximize this resource within communities (National Research Council and Institute of Medicine, 1999; Pickett, 1999).

## C. Professional and Paraprofessional Competence

### Critical Questions for Communities

- *What are our goals and who do we want to serve through a home visiting or parent education program?*
- *What are the staffing issues we might need to consider?*
- *From whom do our community members seek help and support? What is the culture of help seeking behavior in our community?*
- *What are the staffing requirements of our selected curriculum or program?*
- *What are the staff qualification requirements?*
- *What community resources can we draw on for staff—including professionals, paraprofessionals, natural helpers, and parents?*
- *Can we consider a more flexible staffing structure or a team approach?*
- *What are the curriculum or program training requirements?*
- *What training opportunities exist within the community?*
- *What continuous improvement or staff development opportunities are needed or available?*
- *Who will provide administrative oversight and supervision?*
- *Can we build in a paraprofessional development program?*
- *What professional and paraprofessional competencies do we expect?*

### Key Strategies for Families, Providers, and Administrators

#### What Families Can Do

- Offer a family and cultural perspective on the issue of professionals, paraprofessionals, and natural helpers and staffing considerations.
- Become a paraprofessional and participate as a provider in the program.
- Participate in training and a paraprofessional development program.

#### What Providers Can Do

- Assist in identifying what community concerns or population might be most amenable to home visiting or parent education.
- Participate in training and apply skills and expertise to implement the curriculum or program with fidelity.

- Partner with paraprofessionals, and develop peer or team support as a staff development and continuous improvement strategy.

#### What Administrators Can Do

- Create an administrative structure that supports adequate and appropriate supervision.
- Include a paraprofessional development program with the program plan and administration.
- Support staff opportunities for training and development by allowing time away and funding for these activities.

## Professional and Paraprofessional Providers: Some Considerations

Parent education programs in home-visiting and site-based models have various staffing requirements. Some specifically require individuals with advance training or professional experience. Others may use a combination of professional and paraprofessional staff, with supervisory roles and responsibilities designated for the professional staff. Communities planning for parent education services should consider the staffing pattern and service delivery model that will work best for their unique neighborhoods and families within them. Some considerations for professional and paraprofessional providers are described below.

### Professional providers may:

- ✓ Have specific, in-depth knowledge and experience in their area of expertise.
- ✓ Have administrative and program management experience.
- ✓ Be better prepared to recognize special needs of young children and families.
- ✓ Have had preparation for dealing with families who are experiencing multiple, complex issues.
- ✓ Require higher salaries.
- ✓ Offer supervision to other staff, including paraprofessionals.
- ✓ Live outside of and be less familiar with the community or neighborhood.
- ✓ Be seen and respected by participants as experts.
- ✓ Have broad knowledge of resources and avenues for linking to other service systems.
- ✓ Have experience influencing policy and developing programs.

### Paraprofessionals or natural helpers may:

- ✓ Have specific knowledge and intimate connections within the community.
- ✓ Be seen as more approachable by program participants and have less social distance from the families they serve.
- ✓ Have less training and related work experience.
- ✓ Draw on personal experiences and skills that strengthen their connections to participants.
- ✓ Offer a powerful resource for culturally and linguistically competent services.
- ✓ Be cost effective.
- ✓ Need additional training and supervision.
- ✓ Be less prepared to observe and evaluate special needs or conditions of young children and families.
- ✓ Facilitate essential linkages to community-based, informal systems of support within a community.

### Adapted from:

Gomby, D. (2003). *Building school readiness through home visitation: Report for the first 5 California children and families commission*. Retrieved February 17, 2004, from the California Children and Families Commission Web site: [www.cffc.ca.gov/PDF/SRI/Main%20document%20final.pdf](http://www.cffc.ca.gov/PDF/SRI/Main%20document%20final.pdf)

Kinney, J., Trent, J., Price, D., Smith, R., & Johnson, E. (undated). *Walking our talk in the neighborhoods: Partnerships between professionals and natural helpers in building community partnerships in child welfare, Part Three*. Part of Family to family: Tools for rebuilding foster care. Baltimore, MD: Annie E. Casey Foundation. Retrieved February 26, 2004, from the Annie E. Casey Foundation Web site: [www.aecf.org/initiatives/familytofamily/tools.htm](http://www.aecf.org/initiatives/familytofamily/tools.htm)

## C. Professional and Paraprofessional Competence

### Reflective Supervision: Key Elements and Program Practices

One strategy for preparing and retaining staff that work with young children and families is the opportunity for learning and support through supervision. Staff can best engage in their relationship-based work to support families when they benefit from effective supervision that is also relationship-based and includes key elements of: Reflection, Collaboration, and Regularity. An early qualitative study by ZERO TO THREE and EDK Associates (1992) and follow-up observation of promising practices emphasize the essential contribution of reflective supervision to quality services to infants, toddlers, young children and their families (Parlakian 2001, 2002; ZERO TO THREE, 2003). Programs that offer parent education through home visiting or site-based services can help to ensure program quality, reduce staff turnover, and expand staff capacity by including practices that support the key elements of reflective supervision and demonstrate the following:

- Administrative commitment to a reflective supervisory model is evident in policy, procedure, and practice.
- Adequate resources have been allocated to provide supervision to all staff.
- Supervision is available on a regular schedule and allotted adequate time.
- Supervision is designed to fit the type of services program and/or the individual needs of staff.
- Clear mutual expectations are established in the supervisory relationship.
- The relationship between supervisor and supervisee is mutually respectful and collaborative through open communication and shared problem solving.
- Supervision offers opportunities to discuss individual goals, increase self-understanding, broaden one's knowledge base, and expand service capacity.
- Staff are encouraged to become aware of aspects of their work that are challenging or troublesome and share their feelings and reactions.
- Opportunities exist for staff to sort out these feelings and reactions and explore ways to respond differently.
- Staff are encouraged to examine their personal values, professional identity, and provider practices as part of personal growth.
- Creative opportunities for peer supervision, mentorship, or outside consultation are used to expand or supplement reflective learning.

**Adapted from:**

EDK Associates (1992). Appendix A: Supervision and mentorship—A qualitative study of early intervention practitioners, child care professionals and public agency supervisors. In Maryland in *Learning through supervision and mentorship to support the development of infants, toddlers, and their families: A sourcebook*. Washington DC: ZERO TO THREE.

Fenichel, E. (1992). Learning through supervision and mentorship to support the development of infants, toddlers, and their families. In *Learning through supervision and mentorship to support the development of infants, toddlers, and their families: A sourcebook*. Washington DC: ZERO TO THREE.

Fenichel, E., & Eggbeer, L. (1992). Overcoming obstacles to reflective supervision and mentorship. In *Learning through supervision and mentorship to support the development of infants, toddlers, and their families: A sourcebook*. Washington DC: ZERO TO THREE.

# ANNOTATED RESOURCES

## BOOKS AND PRINT

### Designing Parenting Education, Training Guides for the Head Start Learning Community

(1998) RMC CORPORATION

The purpose of this guide is to assist planners in designing family-centered parent education according to parent interests. It is intended to enable providers to create an array of learning opportunities working one-on-one with a family, with family groups, or with teams of families and staff who are charged with the responsibility of planning a training event. The guide also provides a process for programs to use in taking a critical look at their current parenting education efforts in order to improve them.

*U.S. Department of Health and Human Services, Administration for Children and Families, Head Start Information and Publication Center 703-683-2878, 703-683-5769 (fax) or www.headstartinfo.org. (Single copy, free.)*

### Head Start Home Visitor Handbook

(Undated) Trans-Management Systems Corporation

This handbook was prepared for Head Start Home Visitors to guide their understanding of the home-based program model, the services delivered during home visits, the value and delivery of socialization activities, and evaluation of services. Although specific to Head Start, it offers valuable guidance and Appendices that could be adapted to other home visiting models.

*U.S. Department of Health and Human Services Administration for Children and Families, Head Start Information and Publication Center 703-683-2878, 703-683-5769 (fax) or www.headstartinfo.org. (Single copy, free.)*

### Learning and Growing Together with Families Video Package

(2001) PAWL, J. AND DOMBRO, A.L.

Designed for home visitors, early care and education providers, and others who work with the families of young children, this training package will help providers learn specific ways to build strong, collaborative relationships with families and with colleagues. The package includes a book—*Learning & Growing Together With Families: Partnering With Parents to Support Young children's Development*, a 25-minute

video—*Learning & Growing Together With Families: Seven Ways to Build Strong Relationships*, and a video guide. The materials are useful for administrators, supervisors, providers, and trainers. Some materials are available separately. *ZERO TO THREE: National Center for Infants, Toddlers, and Families, P.O. Box 960, Herndon, VA, 1-800-899-4301, 703-661-1577 (fax), or at www.zerotothree.org. (\$69.95)*

### Learning through Supervision and Mentorship to Support the Development of Infants, Toddlers, and Their Families: A Sourcebook

(1992) FENICHEL, E.

This resource shows supervisors how mentoring and supervision can be the basis of relationships that provide regular opportunities for joint reflection upon work with infants, toddlers, and their families. The text provides a clear and comprehensive picture of supervision and mentorship of practitioners—professional or paraprofessional—and identifies issues for supervisors and program directors.

*ZERO TO THREE, National Center for Infants, Toddlers, and Families, P.O. Box 960, Herndon, VA, 1-800-899-4301, 703-661-1577 (fax), or at www.zerotothree.org. (\$18.95)*

### Look, Listen, and Learn: Reflective Supervision and Relationship-Based Work

(2001) PARKALKIAN, R.

This document explores the link between supportive supervisory practices and effective staff-parent relationships. Useful for providers and supervisors of early care and education services to young children and their families.

*ZERO TO THREE, National Center for Infants, Toddlers, and Families, P.O. Box 960, Herndon, VA, 1-800-899-4301, 703-661-1577 (fax), or at www.zerotothree.org. (\$12.50)*

### Parentmaking Educators Training Program: A Comprehensive Skills Development Course to Train Early Childhood Parent Educators

(1995) ROTHENBERG, B.A.

These training materials provide a 36-hour course to prepare parent educators in 18 group leadership skills. Although it includes information on some of the most important child development content



## C. Professional and Paraprofessional Competence

topics for early childhood parent educators, the focus is on a foundation for leading and teaching parenting groups, such as ways to lead successful discussions, methods to encourage group problem solving, and other training skills most relevant to the context of a parenting education group. It can be useful as in-service training for parent education staff, nurses, childbirth educators, early care and education providers, and others who work with young children and their families.

*Child Rearing Program, CHC Center for Child and Family Development. Banster Press, P.O. Box 7326, Menlo Park, CA, 1-650-369-8032, 1-650-364-2299 (fax), or [www.bansterpress.com](http://www.bansterpress.com). (Manual, \$39.95, Videotapes \$75.00)*

### **Reflective Supervision in Practice: Stories from the Field**

(2002) PARKALKIAN, R.

This training resource follows four infant/family programs as they implement reflective supervision and experience the challenges and benefits of this approach to program improvement. Discussion questions and suggested activities can facilitate both self- and group learning. This tool is useful for providers, administrators, and supervisors considering the implementation of reflective supervision in their program and trainers in building program capacity.

*ZERO TO THREE, National Center for Infants, Toddlers, and Families, P.O. Box 960, Herndon, VA, 1-800-899-4301, 703-661-1577 (fax), or at [www.zerotothree.org](http://www.zerotothree.org). (\$15.00)*

### **Supporting Family Learning, Training Guides for the Head Start Learning Community**

(1998) RMC RESEARCH CORPORATION

The purpose of this guide is to broaden the idea of “parents as teachers” by looking at the entire family learning environment and ways that programs can support family learning experiences. This guide has particular relevance for staff making home visits and for providers or teachers concerned with building bridges between early learning and families. Parents and families can benefit from the resources and content of this training guide.

*U.S. Department of Health and Human Services, Administration for Children and Families, Head Start Information and Publication Center 703-683-2878, 703-683-5769 (fax) or [www.headstartinfo.org](http://www.headstartinfo.org). (Single copy, free.)*

## **ON-LINE RESOURCES**

### **Core Competencies for Parent Education Home Visitors—Paraprofessionals and Professionals** (2000) BROWN, M.

This section of the full on-line resource—*Recommended Practices in Parent Education and Support*—details essential skills, abilities, and competencies for those providing parent education services. The text is useful to administrators, providers, trainers, and those interested in career development for parent educators in home or site based settings. Full text available at <http://ag.udel.edu/extension/fam/recprac/tablecon.html>

*University of Delaware Cooperative Extension*

### **Core Competencies for Supervisors of Parent Education Home Visitors**

(2000) BROWN, M.

This section of the full on-line resource—*Recommended Practices in Parent Education and Support*—details essential skills, abilities, and competencies for those supervising home visitors delivering parent education services. The text is useful to administrators, providers, and supervisors. Full text available at <http://ag.udel.edu/extension/fam/recprac/tablecon.html>

*University of Delaware Cooperative Extension.*

### **Technical Assistance Paper No. 2: Early Head Start Home-Based Program Option: Recruiting, Training, and Retaining Qualified Staff**

(1999) EARLY HEAD START NATIONAL RESOURCES CENTER, ZERO TO THREE.

This technical paper, guided by the Head Start Performance Standards, provides information and Early Head Start program profiles to assist programs in the effort to develop high quality home visiting services for pregnant women and families with infants and toddlers. It also includes a list of selected resources for further research and review. This paper is useful to administrators, providers, and home visitor supervisors. Full text available at

[www.ehsnrc.org/publications/cetap.htm](http://www.ehsnrc.org/publications/cetap.htm)

*U.S. Department of Health and Human Services, Administration for Children and Families, Head Start Information and Publication Center 703-683-2878, 703-683-5769 (fax) or [www.headstartinfo.org](http://www.headstartinfo.org). (Single copy, free.)*

## WEBSITES

### Child Development Media

[www.childdevmedia.com](http://www.childdevmedia.com)

This website is committed to training and supervision of those who work with children and their families. It offers a wide range of unique, high quality resources including videos, books, curricula, and training manuals that match training interests and needs—including parent education. The site also includes related links.

### Head Start Information and Publications Center

[www.headstartinfo.org](http://www.headstartinfo.org)

The Head Start Information and Publication Center (HSIPC), a service of the Head Start Bureau supports the Head Start community and other organizations working in the interest of children and families by providing information products and services; conference and meeting support; publication distribution; and marketing and outreach efforts.

### National Parenting Education Network

[www.npen.org](http://www.npen.org)

The National Parenting Education Network is committed to advancing the field of parenting education through networking among practitioners and organizations involved in parenting education; knowledge development in parenting and parenting education; professional development of parent education practitioners; and proving national leadership in the field of parenting education among professionals, policy makers, media, and the public. The site also includes resources for parent educator professional development.

### National Resource Center for Paraprofessionals

[www.nrcpara.org](http://www.nrcpara.org)

The National Resource Center for Paraprofessionals mission is to address policy questions and other needs of the field, provide technical assistance and share information about policy questions, management practices, regulatory procedures, and training models that will enable administrators and staff-developers to improve the recruitment, deployment, supervision, and career development of paraprofessionals in the early childhood, education, and disabilities field. The site offers information related to training, training materials and resources, and links to the education and disabilities community.

### Parenting of K-6 Children

<http://childparenting.about.com>

This broad website on parenting, children's interests, and education also includes resources for parent educators, parenting education products and programs information, and articles related to parenting education research and issues.

### The Center for Home Visiting

[www.unc.edu/~uncchlvr](http://www.unc.edu/~uncchlvr)

The Center for Home Visiting at the University of North Carolina supports research, program evaluation, professional training, and staff development related to home visiting through collaborative efforts with researchers, educators, evaluators, trainers, practitioners, and policy makers. The mission of the center is to promote interdisciplinary research and evaluation, training at the college and university levels, professional development for providers, knowledge development concerning practice and training. The site serves as a national resource for information on home visiting including guides to written and audio-visual training materials for home visitors and links to other organizations.

### The Program for Infant Toddler Caregivers

[www.pitc.org](http://www.pitc.org)

The Program for Infant/Toddler Caregivers (PITC) was developed by WestEd, Center for Child and Family Studies in collaboration with the California Department of Education Child Development Division to promote responsive caring relationships for infants and toddlers. This site offers information and access to resources to help caregivers and program managers prepare providers to build relationships and partnerships with families that support their role as the primary educators of their children.

### ZERO TO THREE

[www.zerotothree.org](http://www.zerotothree.org)

ZERO TO THREE's mission is to promote the healthy development of our nation's infants and toddlers by supporting and strengthening families, communities, and those who work on their behalf. This site includes a variety of resources, publications and links related to advancing the current knowledge; promoting beneficial policies and practices; communicating research and best practices to a wide variety of audiences; and providing training and technical assistance and leadership development.

# D Evaluating Parent Education Programs

## OVERVIEW OF THE ISSUE

The interest in home visiting and site-based parent education programs has grown as a result of recent research and the publication of the National Education Goals and the No Child Left Behind Act which encourage parents as teachers and parent involvement in a child's development and readiness for school. Similarly, the drive for quality, accountability, and evidence of impact or measurable effect has emphasized the need for program evaluation. Although evaluation has long been a common program feature and grant requirement when seeking private or public funding for programs, the interest in "evidence-based practices" has raised the bar on evaluation processes within programs and has increased the interest in considering and funding those practices determined to be evidence-based. (Huang et al., 2003; Mihalic, 2003)

It is through research that a program's evidence base—or evidence of effectiveness—is established; and for intervention programs with children and families the research design issues are large. Research evaluation of a parenting program—home visiting or site-based parent education—is far more complex compared to some other aspects of education (Gomby, 1999; Robertson, 2001). In addition to determining short-term goals, it is important to determine the long-term impact so often considered in the cost-benefit analysis formula applied to early childhood programs and interventions (Karoly, 1998). The long term nature of changes in parenting practices or the small, incremental changes in parent-child interactions that can have a magnified effect years later make this research challenging (National Research Council and Institute of Medicine, 1999). For example, to make the connection between a home visiting program, a child's birth weight, and school readiness seems a quantum leap. Most can make an intuitive link, but those who are committed to discovering proof—or the evidence base—work hard to meet this challenge.

This tool kit provides snapshots of programs that have established evidence of being effective as well as those that have made the sometimes difficult transition from research to practice. When implementing these programs in a community, fidelity to the curriculum or program should result in the outcomes identified in the evidence base (Mihalik, 2002). However, even those with the most vigorous evaluation efforts have noted inconsistencies in their evaluation data from site to site at the community level. These tool kit examples are intended to encourage anyone implementing a home visiting or parent education program to give evaluation data and the evidence base a close and careful look and the ongoing evaluation of any program serious effort.



At the community level, designing an evaluation plan can be challenging and may require additional resources. Some feel that far too little attention has been focused on developing research designs, methods, and measures that are valued, respected, and understood by program managers so that they can become increasingly able to naturally incorporate both quantitative and qualitative evaluation strategies into their programs and, in turn, make necessary refinements in program design (National Research Council and Institute of Medicine, 1999). Well established home visiting and parent education programs offer provider preparation and training as well as evaluation design guidance, recommendations for measures, and forms for data collection. Some may provide data analysis and reporting services. In addition, technical assistance on interpreting data and making program adjustments may also be available. These are useful considerations during the curriculum or program selection process. In general and in brief, key questions in evaluation design are:

- What are the intervention goals?
- What are the specified measurable outcomes? Short term? Long term?
- What is the mechanism of change or how is the program to be implemented?
- What measures or instruments are appropriate to use?
- How will the data be collected? At what intervals?
- How will this outcome data be used?

Other important features that influence evaluation are the community context; unique outcomes desired by the community; and the cultural context, interests, and value systems of family's that participate in the program and in the evaluation process. (Lynch & Hanson, 1998; Robertson, 2001; Slaton, 2003)

Gathering family input has an obvious and essential role in evaluation of home-visiting or parent education programs. Some of the main features of gathering family input relate to the following:

- **Individualized goals:** In addition to the goals of the intervention program, families have their own goals for themselves and their children. Individualization of a home visiting or parent education program can help support these goals without compromising the design of the intervention.
- **Feedback:** Formal research evaluation can intimidate some families. Cultural issues, literacy and language skills, and concerns about confidentiality must be addressed (Huang, 2002). When the program is implemented in the community, feedback from families is essential to refining any intervention as well as assessing progress toward the family's individualized goals. Family feedback can be achieved by multiple means—such as formal measure, survey, interviews, etc.—in a well thought out evaluation plan.
- **Families as evaluators:** A continuum for engaging families in the evaluation process suggests that families enrolled in a home visiting or parent education program would: 1) understand the goals of the program; 2) understand the purpose and the process for evaluating services; 3) determine individualized goals, 4) complete surveys, questionnaires or otherwise participate in feedback measures; 5) receive feedback about their own and program progress and outcome and refine personal goals; 6) and understand how the data will be used to refine the program or to promote program sustainability. (Federation of Families, 2000; Green & McAllister, 1998; Schutte et al., 2003)

## D. Evaluating Parent Education Programs

### Critical Questions for Communities

- *What are our community's definition, goals and indicators of school readiness?*
- *What approach to intervention will best suit our community—home visiting, site-based, or a combination or continuum of the two?*
- *What home visiting program or site-based parent education program best matches our community goals and indicators of school readiness?*
- *What is the evaluation plan or process for the specific program we select?*
- *What measures or instruments are recommended and are the culturally appropriate for our community?*
- *What is our capacity to carry out the evaluation plan?*
- *What resources exist within our community or the administrative organization to carry out the evaluation plan?*
- *How will the data be collected? At what intervals? By whom?*
- *How will this outcome data be used to adjust, to promote, or to sustain our community program?*

### Key Strategies for Families, Providers, and Administrators

#### What Families Can Do:

- Identify personal, family goals and outcomes for themselves, the child, and their family.
- Request or gather information about how progress will be measured and become an active partner in the process.
- Use feedback on progress to adjust personal goals and overall information about the program to become an active partner in program planning.

#### What Providers Can Do:

- Dedicate adequate time, preparation and effort to understand, design, and implement the evaluation component of the program.

- Provide clear information about program evaluation and the processes involved to participants.
- Use evaluation data to adjust and or refine individualized services and or the program implementation.

#### What Administrators Can Do:

- Provide administrative and resource support for program evaluation.
- Engage community partners to share or outsource evaluation functions.
- Engage family input and utilize outcome data to leverage new resources or program expansion.

## Tips for Using Evaluation Data

Program evaluation data can be used at multiple levels. Depending on the design of the evaluation plan for a home visiting or site based parent education program, evaluation data can focus on the individual participant, the service or unique program, the agency or community provider, or the community, state or national impact. Using the evaluation data effectively to inform a variety of stakeholders in meaningful ways requires forethought, planning, creativity, communication and timing. Evaluation data can be powerful as an influence on assessing progress, decision making, resource allocation, and policy making. Crafting the right message, in the right format or product, for the right audience are also a key elements. Tips for using evaluation data effectively include:

- ✓ **Understand the interests of each stakeholder group:** Engage in dialogue with stakeholder groups, including families, in order to understand their interests, identify outcome indicators of most value to them, and accountability expectations.
- ✓ **Establish a “culture of evaluation” within the program or agency:** Within the program or agency, identify outcomes, indicators, and data collection procedures that are relevant and useful to all involved. Create a shared “logic model” or “theory of change” and how evaluation data will inform practice and program adjustments. Make evaluation part of the process of delivering services.
- ✓ **Use data regularly to inform practice and program adjustments:** Making evaluation data available at regular and timely intervals and with direct links to current practice and program goals can assist decision making, program improvement, and capacity building.
- ✓ **Make evaluation data reports concise, easy to understand, and tailored to the audience:** Use evaluation data to convey messages that can educate, enrich, and persuade stakeholders in the direction of outcomes-based decision making and service and system improvements. Be clear about what the data shows and does not show and interpret the implications clearly.
- ✓ **Combine message delivery methods for maximum impact:** A variety of venues and modes of communication can deliver the message of evaluation data. Using articles, reports, graphics, presentations, personal stories, public events, community meetings, open houses, training sessions or combinations of these strategies may be useful.

### Adapted from:

Green, B. and McAllister, C. (1998, February/March). Theory-based, participatory evaluation: A powerful tool for evaluating family support programs. *Bulletin of ZERO TO THREE*, 14(4).

Woodbridge, M. & Huang, L. (2000). Using evaluation data to manage, improve, market, and sustain children’s services. *Systems of care promising practices in children’s mental health, 2000 Series, Volume II*.

Washington, DC: Center for Effective Collaboration and Practice, American Institutes for Research.

Retrieved February 9, 2004 from the Center for Effective Collaboration and Practice Web site:

<http://cecp.air.org/promisingpractices/2000monographs/vol2.pdf>

## D. Evaluating Parent Education Programs

### Benefits of Engaging Families in Program Evaluation

Families who are served by programs for young children and their families can bring powerful perspectives and resources to program evaluation. In addition to their very personal interest, experience and wish to benefit from a program, families have a deep investment in effective services and improved service delivery systems. As consumers, families represent a valuable voice to address, inform, and participate in program evaluation.

Potential benefits of engaging families in program research and evaluation include:

- **Selection of more relevant research or evaluation questions**—Families can help evaluations to “ask the right questions” or those that are most important to service consumers.
- **Increased cultural and linguistic competence**—Families can share cultural perspectives and linguistic features that influence how evaluation questions are crafted, the process for data collection, care in interpretation, and the process for dissemination most appropriate for their community.
- **Improved retention of program participants**—Involving families in the evaluation process builds trust and ownership, important ingredients for supporting program participation.
- **Improved interpretation of findings and outcomes**—Family input into evaluation questions influences what is measured and interpretation of findings and outcomes. In addition, review of findings and outcomes by families and community members can provide a “check and balance” to data interpretation.
- **Wider dissemination of findings**—Involved families who understand the evaluation process and the implications of evaluation data can assist in its dissemination and act as strong advocates for effective services and system change.
- **Increased collaboration between providers and family members**—Family involvement in program evaluation builds trust and working relationships that support partnerships and family-centered care.

**Adapted from:**

CrossBear, S. (Fall, 2002). Families and communities in evaluation. *FOCAL POINT: A National Bulletin on Family Support and Children's Mental Health*, 16(2), 16-18. Retrieved February 19, 2004 from Portland State University, Regional Research Institute for Human Services, Research and Training Center on Family Support and Children's Mental Health Web site: [www.rtc.pdx.edu](http://www.rtc.pdx.edu)

Schutte, K., Jivanjee, P., Robinson, A., & Koroloff, N. (2003). *Families in the world of evaluation: The evaluation of the National Federation of Families for Children's Mental Health Course I, "How to understand evaluation"*. Retrieved on February 25, 2004, from the Portland State University, Research and Training Center on Family Support and Children's Mental Health Web site: [www.rtc.pdx.edu/pgPublications.php](http://www.rtc.pdx.edu/pgPublications.php)

Walker, J. (2003) *Family participation in evaluation: Training needs*. Featured Discussions. Retrieved from the Portland State University, Research and Training Center on Family Support and Children's Mental Health Web site: [www.rtc.pdx.edu/pgFeaturedDiscussions.php](http://www.rtc.pdx.edu/pgFeaturedDiscussions.php)

Woodbridge, M. & Huang, L. (2000). Using evaluation data to manage, improve, market, and sustain children's services. *Systems of care promising practices in children's mental health, 2000 Series, Volume II*. Washington, DC: Center for Effective Collaboration and Practice, American Institutes for Research. Retrieved February 9, 2004 from the Center for Effective Collaboration and Practice Web site: <http://cecp.air.org/promisingpractices/2000monographs/vol2.pdf>

## ANNOTATED RESOURCES

### BOOKS AND PRINT

#### Theory-Based Participatory Evaluation: A Powerful Tool for Evaluating Family Support Programs

(1998, FEB./MAR.) GREEN, B. & McALLISTER, C.  
Within the full issue, *Opening the Black Box: What Makes Early Child and Family Development Programs Work?*, this article examines both theory-based and participatory evaluation and how the two methods can support program-friendly evaluation design and implementation. In particular it describes the application to family support programs and the benefits and challenges and is useful to program planners, administrators, evaluators, researchers, and families.

*In Bulletin of ZERO TO THREE: National Center for Infants and Toddlers, 18(4). ZERO TO THREE, P.O. Box 960, Herndon, VA, 1-800-899-4301, 703-661-1577 (fax), or at www.zerotothree.org. (\$10.00 for full issue).*

### ON-LINE RESOURCES

#### Families as Evaluators: Annotated Bibliography of Resources in Print

(2003) JIVANJEE, P., SCHUTTE, K., AND ROBINSON, A.  
This web-based resource is an annotated bibliography listing articles related to family participation in research and evaluation and general references about community/consumer participation in research and evaluation. Full text available at through the RTC Publications page, [www.rtc.pdx.edu/pgPublications.php](http://www.rtc.pdx.edu/pgPublications.php) or at [www.rtc.pdx.edu/PDF/pbFamEvalAnnotBib.pdf](http://www.rtc.pdx.edu/PDF/pbFamEvalAnnotBib.pdf)

*Portland State University, Research and Training Center on Family Support and Children's Mental Health, Portland, OR.*

#### Participatory Action Research as a Model for Conducting Family Research

(1998) TURNBULL, A.P., FRIESEN, B.J., & RAMIREZ, C.  
This article discusses the advantages and challenges inherent in the PAR process and the collaboration between researchers and family members, the people who are expected to benefit from a particular service or research effort. This text is useful to administrators, researchers, and family members. Full text available at [www.beachcenter.org/research/FullArticles/PDF/PAR1PARModel.pdf](http://www.beachcenter.org/research/FullArticles/PDF/PAR1PARModel.pdf)

*Journal of the Association for Persons with Severe Handicaps, 23(3), pp. 178-188*

#### Participatory Action Research Involving Families from Underserved Communities and Researchers: Respecting Cultural and Linguistic Diversity.

(1998) MARKEY, U., SANTELLI, B., & TURNBULL, A.P.  
This overview of participatory action research (PAR) examines this research and the point of view of traditionally underserved communities as well as researchers. This text is useful to families, evaluators, and researchers planning to engage in a partnership process. Full text available at [www.beachcenter.org/research/FullArticles/PDF/PAR3PARInvolvingFamilies.pdf](http://www.beachcenter.org/research/FullArticles/PDF/PAR3PARInvolvingFamilies.pdf)

*In Ford, B.A. (Ed.), Compendium: Writings on effective practice for culturally and linguistically diverse exceptional learners, Reston, VA: Council for Exceptional Children*



## D. Evaluating Parent Education Programs

### **Using Evaluation Data to Manage, Improve, Market, and Sustain Children's Services, Systems of Care Promising Practices In Children's Mental Health 2000 Series, Volume II**

(2000) WOODBRIDGE, M. AND HUANG, L.

This text is one of a collection of monographs of the Promising Practices Initiative of the Comprehensive Community Mental Health Services for Children and Their Families Program. The monograph describes promising practices in the use of evaluation data at sites funded by the federal Center for Mental Health Services with the intent of sharing ideas and experiences from these sites about using local data in ways that can impact the delivery, management, and sustainability of community-based services for children and families. The text is useful to administrators, providers, evaluators, and families involved in designing evaluation services and data management systems and strategies. Full text available at <http://cecp.air.org/promisingpractices/2000monographs/vol2.pdf> or order information at [www.air.org/cecp](http://www.air.org/cecp)

*Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children's Mental Health and American Institutes for Research, Center for Effective Collaboration and Practices, Washington, DC.*

### **Web-based Resource List for Evaluators and Family Evaluators**

(2003) SCHUTTE, K., JIVANJEE, P, AND ROBINSON, A.

This resource list offers useful information and Internet links about evaluation. The list is divided into several categories and includes websites offering glossaries, guides to conducting evaluations, instrument and measurements, and issues related specifically to children and families and participatory evaluation. This resource list can be accessed on the RTC Publications page, [www.rtc.pdx.edu/pgPublications.php](http://www.rtc.pdx.edu/pgPublications.php) or at [www.rtc.pdx.edu/PDF/pbP8webresources.pdf](http://www.rtc.pdx.edu/PDF/pbP8webresources.pdf)  
*Portland State University, Research and Training Center on Family Support and Children's Mental Health, Portland, OR.*

## **WEBSITES**

### **Federation of Families for Children's Mental Health**

[www.ffcmh.org](http://www.ffcmh.org)

The Federation is a nationwide advocacy organization for families and youth with mental

health needs. With state and local chapters, the Federation provides opportunities for families around the country to link with each other, increase their knowledge about the political processes, and build their effectiveness at the local state, and national policy levels. Of particular note is their training initiative focused on family involvement in evaluation titled *The World of Evaluation*. This three part training curriculum for family members provides the information, skills, tools, and strategies necessary to use research and evaluation information to advocate for individuals and for system change.

### **Georgetown University Technical Assistance Center for Children's Mental Health**

*The Evaluation Initiative at the National Technical Assistance Center for Children's Mental Health (TA Center)*

<http://gucchd.georgetown.edu/eval.html>

The Evaluation Initiative was created to provide technical assistance (TA) to states and communities on the evaluation of children's services. The initiative was developed in response to the increased need for performance measurement, outcomes, and system accountability in the children's services arena. The goals of the Evaluation Initiative are to facilitate the capacity-building of states and local communities in their evaluation of children's services in systems of care and identify promising practices in the design implementation of effective evaluation programs and integrated information systems. The site also includes access to *Data Matters: An Evaluation Newsletter* and other resources.

### **Harvard Family Research Project**

[www.gse.harvard.edu/~hfrp/](http://www.gse.harvard.edu/~hfrp/)

The Harvard Family Research Project strives to increase the effectiveness of public and private organizations and communities as they promote child development, student achievement, healthy family functioning, and community development. In its relationships with national, state, and local partners, HFRP fosters a sustainable learning process—one that relies on the collection, analysis, synthesis, and application of information to guide problem-solving and decision-making. The site includes access to *The Evaluation Exchange*, a free on-line periodical that addresses current issues facing program evaluators of all levels.

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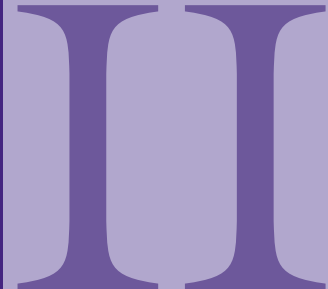
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# Parents As Leaders

ENGAGING PARENTS  
AS ADVISORS, ADVOCATES,  
AND DECISION-MAKERS





# II Parents As Leaders

## ENGAGING PARENTS AS ADVISORS, ADVOCATES, AND DECISION-MAKERS

### A Parent Involvement and Leadership Roles

#### OVERVIEW OF THE ISSUE

##### Developing A Family—Centered Approach

Engaging parents as leaders, advisors, advocates, and decision-makers related to young children and school readiness must begin with a review of the concepts of parents as primary partners and a family-centered approach. Family-centered care represents a reciprocal relationship between providers and families. It is based on the philosophy that recognizes the pivotal role of the family in the lives of their children. This approach ensures that families are supported in the natural caregiving and decision-making roles for their children by building on their unique strengths. Family-centered services are designed in an equal partnership between parents and providers; individualized for the child in the context of their family; and tailored for the family in the context of the service systems and supports within the community (Communities Can!, 2001; Turnbull et al., 2000).

The concept of family-centered partnership or family-centered care grew out of the health, mental health, and special needs communities. Families challenged with meeting the needs of their children, working closely with specialty service providers, and supporting or providing intervention services, pushed for an equal voice and shared decision making in the interest of appropriate care, education, and intervention for their child. Eventually, vigilance and advocacy efforts were supported by legislation, and continuing efforts have impacted many child-serving systems. Over time, experience, and the passionate work of many, various human services and education systems have moved along a developmental continuum to expand the perception and role of parents as primary partners and truly establish family-centered partnerships, family-centered care, and family-centered schools. The concept of family-centered, community-based, coordinated services are firmly embedded in the professional experience and philosophies that guide early childhood programs (National Research Council and Institute of Medicine, 2000).

## A. Parent Involvement and Leadership Roles

Key elements of family-centered care and true partnerships with families that can cross service, early care, and education systems reflect the values of family involvement in leadership roles. These elements are

- Recognition that the family is the constant and primary influence in the child's life;
- Treating parents and families with dignity and respect, including with regard to cultural and linguistic diversity;
- Sharing complete and unbiased information with parents and families in ways that are useful and affirming;
- Recognition of parents and families strengths and individuality and building upon them;
- Assurance that the design and delivery of services is flexible, accessible, and responsive to family needs, including issues related to cultural and linguistic diversity;
- True partnership and collaboration that occur in policy and program development, provider education, as well as in the delivery of services;
- Implementation of appropriate policies and programs that support this approach; and
- Encouragement and facilitation of parent-to-parent support.

(Communities Can!, 2001; Institute for Family Centered Care, 2003; Family Support America, 2001; National Child Care Information Center, 2003; National Research Council and Institute of Medicine, 2000)

Developing such strong parent-professional alliances is a critical first step in improving the quality and cultural responsiveness of services to young children and their families (Buysse, 2003). In addition, it is the first step to expanding family involvement to include families in advisory, advocacy, and leadership roles.

### Family Involvement and Leadership Roles

Parent involvement in leadership in early care, education, and other services to young children and families encompasses many roles and activities.

**Parents as advisors** share their perspective and experience in any part they play, whether it is time limited, ongoing, formal, or informal. The term “advisory” describes any role that enables family members to have direct input and influence on policies, programs, and practices that impact on the care and services children and families receive (Jeppson and Thomas, 1995).

**Parents as advocates** engage in any activity that attempts to influence someone on behalf of another. For parents this may be for themselves or their child, but can move beyond to advocacy for children, programs, or policy. Parents may take on a formal role and responsibilities within a program or organization or join a parent advocacy group or organization (Parents as Teachers, 2003).

**Parents as leaders** may have formal positions, roles, and responsibilities in collaborative efforts toward service or system implementation, improvement, or change. Leadership is a combination of values, skills, and observable behaviors that can be learned, improved

and expanded; can be adapted to address various situations in a changing environment; and will result in mobilizing people to expand their capacity to learn together and create the vision they share (Communities Can Leadership Academy, 2003).

In the context of early care and education, the role of parent as a decision maker or leader goes beyond active involvement in their child’s learning to include decision-making in leadership roles. For example, parents may serve on the child care center board, on site-based management teams, or on advisory councils. They have the power to affect the offerings and climate of early care and education programs and the school. The trend towards site-based management and collaborative decision-making in early care settings and some schools illustrates these opportunities for parents to make a difference (Berger, 2000). When families participate as decision makers at all levels, they influence policies, programs, and practices.

Families as advisors, advocates, and leaders may also take on the role of change agents. Meaningful parent leadership occurs when parents address the challenges of parenting, gain the knowledge and skills to function in meaningful leadership roles and represent a “parent voice” to help shape the direction of their families, programs, and communities (Parents Anonymous, undated). By having a voice, sharing their expertise, and helping to address the challenges to school readiness for children, their schools, and their community, families become leaders in school readiness efforts.

The values and principles associated with family involvement and leadership roles dovetail with the elements of family-centered care. Values and principles put forward by various resources include those listed below.

- Parents are the decision makers for their child and their child’s strongest advocate.
- Families should be full participants in all aspects of their children’s early care, education, and services planning and delivery.
- Families have strengths and the capacity for self-help and self-determination.
- Partnerships, leadership, and decision making experience strengthens parents and families.
- Empowered parents have increased capacity as parents and higher aspirations for themselves.
- Continuity of care between family, early care, education and other services is developmentally appropriate and vital for young children.
- Effective parent involvement is comprehensive, long-lasting and well planned.
- Collaboration between families and providers is a powerful force that can improve the quality and cultural responsiveness of services to children and families and make them more tailored to the community’s needs.

(Administration for Children and Families, 1998; Berger, 2000; Buysse, 2003; Jeppson and Thomas, 1995; Simpson et al., 1999; Strauss, 2002)

## Family Involvement in Leadership Roles and School Readiness

Research on the impact of parent leadership in early care and education for very young and preschool age children and systems change related to school readiness is limited. Only a few studies have examined the particular impact on children of empowered parent involvement in decision-making roles in educational programs for children. The

## A. Parent Involvement and Leadership Roles

studies included here found evidence that this level of parent involvement impacted both child and parent achievement.

Gillum (1977) studied the adoption of reading programs in three elementary districts. Each district shared information with parents about the program, but one of the three also involved parents in decisions about implementation of the program as well as strategies for reinforcement in the home. The children of these families had significantly higher reading scores. In another study, Bromley (1972) found that when Head Start parents participated in program decision-making, they were motivated to increase their own learning as well as increased their overall program involvement. More recently, Henderson and Mapp (2002) cited a study related to parents as decision makers or in leadership roles and their impact on achievement. Moore (1998) studied parent-majority school councils in Chicago and found that schools with strong councils had increased reading scores for children in that school. He found strong relationships between the “cooperative adult effort” among the teachers, parents, community members, and administrators involved in the school and student achievement. Parents as decision-makers and in leadership roles is an important area for further research and validation as more communities engage families in system change and efforts to improve services, early care, and education for young children and their families.

Henderson and Mapp (2002, pp. 53, 63-67) go on to make recommendations relevant to empowered parents and partners as decision makers in their child’s education, school environment, and community—including community organizing efforts. These recommendations are listed below.

- **Work with families to build their social and political connections.**  
When parents feel they have the power to change and control their circumstances, children tend to do better in school. Their parents are also better equipped to help them. When schools work with families to develop their connections, families become powerful allies of the schools and advocates for public education.
- **Develop the capacity of school staff (*and providers*) to work with families and community members.**  
Few teacher (*and provider*) programs include instruction on how to partner with parents and community and preservice and in-service educational opportunities should include focus on the advantages of school, family, and community connections, building relationships with families, accessing community resources, and the benefits of sharing power with families and community members.
- **Embrace a philosophy of partnership and be willing to share power with families.**  
Make sure that parents, school staff, and community members understand that the responsibility for children’s educational development is a collaborative enterprise. Partnership means sharing power with families and community members. Both lose interest in partnership with schools when their participation is token.
- **Find workable ways to involve families and community members in planning, establishing policy, and making decisions.**  
Organized efforts to build parent and community leadership to improve low-

performing schools have contributed to changes in policy, resources, personnel, school culture, and educational programs.

Although, parent and community organizing efforts extend beyond the bounds of parents as decision makers and in leadership roles in the context of involvement **within** early care and education programs, the potential impact on services to young children and families and school readiness is worth considering. This survey of recent research describes the “new” effort related to school accountability and the impact of the No Child Left Behind Act. It represents an opportunity for parents of young children to become involved in community-wide leadership, collaboration, and advocacy in the interest of school readiness that impacts the entire community—and beyond. In addition, there may be valuable opportunities for learning leadership roles and skills to empower and support parents as decision makers that impact other systems of care.

**Parent and Community Organizing Efforts**

- Build on a base of parents and residents who engage in collective action;
- Focus on winning concrete changes in schools through mobilization, direct action, negotiation, training, and forming coalitions;
- Support democratic decision making by members in all aspects of the organization;
- Develop leaders from within the membership;
- Build a strong, lasting organization; and ultimately,
- Are based outside of schools, overtly political, aim to change educational conditions, and create local leadership to rebuild communities. (Henderson & Mapp, 2002, pp. 53-60).

**Parents as Decision Makers and Other Systems of Care**

Some systems have been significantly impacted by family-centered care, parents as valued partners in decision making, and “community” organizing efforts. In the last thirty years, progress has been made to shift from provider-driven to family-driven services and systems of care. Grassroots activities, the family movement, and legislation, in the “communities” of early intervention, disabilities, and mental health services have shifted the focus to families as essential team members and true partners in decision making for their own children as well as the systems that serve them. This paradigm shift of parent involvement from expert model to family-centered care to true partnership and collaborative leadership can be can be illustrated in the diagram below.

Professional-Centered	Family-Focused	Family-Allied	Family-Centered	Team-Centered
Parent is the problem Professional is the expert	Families “one-down” to the professional are helpers and allies  Professional is the expert	Family caregiver is an equal  Family and professional work collaboratively to address mutually agreed upon goals	Parents know best  Professionals are “one down” to families and their role is to support families to help their child	Team makes decisions  Team includes family, provider, child and others

**Adapted from:**  
McManus, M. (1998, Fall). Family-professional relationships: Moving forward together, A summary of the National Peer Technical Assistance Network’s. In *FOCAL POINT: A National Bulletin On Family Support & Children’s Mental Health*.

## A. Parent Involvement and Leadership Roles

Within effective systems of care, families are partners in the care of their own children as well as at the policy making, management, and service levels—all levels of decision-making. For example, parents may comprise the majority vote on governance bodies; they may be part of the team that writes and responds to proposals and contracts; and they may serve on advisory boards. Parents may be involved in quality improvement processes, in evaluating services, or in training activities. Parents may be service providers, care managers, and advocates on behalf of other families (Pires, 2002). Sharing these strategies for involving families in leadership roles and sharing lessons learned across systems can strengthen all services to young children and families.

### Potential Outcomes of Shared or Collaborative Leadership

Shared or collaborative leadership is successfully achieved when parents and professionals build effective partnerships and share responsibility, expertise, and leadership in decisions being made that affect families and communities (Parent's Anonymous, undated). Ideally, this shared leadership in communities works toward school readiness by sharing a vision for young children and taking the opportunity to exchange different perspectives, identify common interests, and discover solutions to reach this vision and the community goals (Communities Can!, 2003).

Involving parents in leadership roles and in collaborative leadership with professionals can strengthen

- Individuals, parents, families, and professionals through collaboration and empowerment and experience;
- Early care and education in providing appropriate learning experiences and supporting parent involvement;
- Service systems that provide services to young children and families and help them be ready to learn;
- Positive outcomes for young children and their families;
- Initiatives and policies in support of families and young children; and
- Program governance, school reform and community organization efforts to increase student achievement, school success, and community development.

Administration for Children and Youth, 1998; Henderson & Mapp, 2002;  
National Child Care Information Center, 2003)

Continuity for young children and their families depends on the home, school, and community working as partners to achieve common goals. As partners in collaboration, parents as decision makers in shared leadership enable schools and community partners to develop an effective system of response to local needs. (Regional Educational Laboratory Network, 2000).



## Meriden, Connecticut

### *The Parent Leadership Training Institute and Meriden Children First*

The Parent Leadership Training Institute (PLTI), created by the State's Commission on Children, is a public-private partnership that can be embedded into local communities to increase the number of parents trained in civics and democracy. PLTI teaches parents, who want to improve the lifelong health, safety and learning of children, how to become change agents for the next generation. Over the years, funding has come from private corporations: Pitney Bowes, GE, Peoples Bank; third sector organizations: school readiness councils, housing authorities, school systems; and private individuals: PLTI alumni, community organizers, and Design Team members.

Participants are offered three steps of training built on interactive adult learning practices.

- A retreat to develop group and define mission;
- A 10-week course on building community of parent leaders
- A 10-week course on engaging systems within a community framework
- A community project of the participant's choosing to practice the skills writing the community as they define it

Creating a PLTI community involves creating and using local PLTI Design Team, a collaborative representing a community's assets and resources, as the major decision making body for the managing, implementing, and sustaining the PLTI model. The Design Team Coordinates the PLTI and introduces leadership opportunities to those who participate in the training. Meriden, CT is one PLTI's success stories.

Meriden, CT lies 30 miles south of Hartford. In a recent "snapshot" of the children and families in Meriden, the statistical overview revealed that Meriden is a working community where nearly 50% of elementary age children qualify for the free/reduced price meal program. The population is more diverse than the rest of the state, with Hispanics representing 21% of the total. In 2000-2003, 26% of Meriden students lived in families in which a language other than English is the primary language. Meriden is home to the Meriden Children First Initiative that seeks to assist children age birth to eight and their families residing in the greater Meriden area.

Meriden Children First has a longstanding commitment to growing parent leaders. The first Meriden participants in the Parent Leadership Training Institute graduated in 1998. The total number of graduates now stands at

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## A. Parent Involvement and Leadership Roles

### PROMISING PRACTICE

MERIDEN, CONNECTICUT CONTINUED

85, all of who remain active on youth and family issues; are involved with the children's schools; and encourage others to participate in leadership training to influence policies and services to children and families. Meriden parents with PLTI experience have worked with other parents, community leaders, and organizations to influence availability of baseline data on Meriden's children and families, school budgets, school enrichment programs, the school breakfast program, child care quality, and other school readiness concerns. In return, Meriden PLTI graduates influenced support for securing state resources dedicated to parent leadership development through the Commission on Children and the creation of the Parent Trust Fund. Meriden benefited greatly from the Parent Leadership Training Institute and contributed to its sustainability and availability to communities across the state. For more information about PLTI, call the Connecticut Commission on Children at (860) 240-0290. For more information about Meriden's experience, contact David Radcliffe at 203-630-3566 or [dwradcliffe@juno.com](mailto:dwradcliffe@juno.com) or visit [www.meridenchildrenfirst.org](http://www.meridenchildrenfirst.org)

### Critical Questions for Communities

- *What are our beliefs, values, and principles related to family-centered care and collaboration with families?*
- *What are our beliefs, values, and principles related to parents and families in leadership roles?*
- *What barriers must we address to strengthen having parents as primary partners, advisors, advocates, decision-makers, and in leadership roles.*
- *What examples of promising practices already exist within our community?*
- *How can we empower parents and families and include them in community organizing efforts related to school readiness.*

# Key Strategies for Families, Providers, and Administrators

## What Families Can Do:

- View themselves as the primary decision makers in their child's health, development, early care and education.
- Communicate opinions and concerns clearly and firmly when interacting with providers, administrators, and community members.
- Take on leadership roles and become involved in decision making activities.

## What Providers Can Do:

- Understand and value parents as primary decision makers for their child.
- Support families in taking on leadership roles.
- Adopt the values and principles of family-centered care and the shared power in collaborative leadership.

## What Administrators Can Do:

- Adopt service or program-wide guiding values and principles that support parents as primary partners, in both delivery of family-centered care and engaging parents in leadership roles.
- Advocate for shared governance within their agency, organization, or service system.
- Seek and support parents for leadership roles and partner with family or advocacy organizations.

## A. Parent Involvement and Leadership Roles

## Leadership Roles for Parents

Very often, roles that parent leaders can play are limited by perceptions about parents and about what constitutes leadership. Leadership roles for parents are varied, and can include, as well as be expanded beyond, those traditionally associated with governance and formal support systems. The following list is intended to expand the thinking of leadership roles for parents in initiatives focused on school readiness.

- |   |   |
|---|---|
| <input type="checkbox"/> Advisory Board Member              | <input type="checkbox"/> Quality Improvement Reviewer |
| <input type="checkbox"/> Task Force Member                  | <input type="checkbox"/> Speaker or Presenter         |
| <input type="checkbox"/> Program Evaluator                  | <input type="checkbox"/> Mentor and Guide             |
| <input type="checkbox"/> Trainer or Co-trainer              | <input type="checkbox"/> Peer Support                 |
| <input type="checkbox"/> Grant Writer                       | <input type="checkbox"/> Community Guide              |
| <input type="checkbox"/> Grant Reviewer                     | <input type="checkbox"/> Panel Member                 |
| <input type="checkbox"/> Focus Group Member                 | <input type="checkbox"/> Interviewer                  |
| <input type="checkbox"/> Translator/Interpreter             | <input type="checkbox"/> Key informant                |
| <input type="checkbox"/> Materials Reviewer                 | <input type="checkbox"/> Paid staff                   |
| <input type="checkbox"/> Materials Developer or Contributor | <input type="checkbox"/> Co-chair                     |
| <input type="checkbox"/> Group Facilitator                  | <input type="checkbox"/> Fundraiser                   |
| <input type="checkbox"/> Recruiter                          | <input type="checkbox"/> Representative               |
| <input type="checkbox"/> Ambassador or Spokesperson         | <input type="checkbox"/> Consultant                   |
| <input type="checkbox"/> Advocate                           | <input type="checkbox"/> Networker                    |
| <input type="checkbox"/> Hiring Committee Member            | <input type="checkbox"/> Delegate                     |
| <input type="checkbox"/> Witness                            | <input type="checkbox"/> Policy Maker                 |
| <input type="checkbox"/> Media Interviewee                  | <input type="checkbox"/> State Level Advisor          |

**Adapted from:**

Jeppson, E. S., & Thomas, J. (1995). *Essential allies: Families as advisors*. Bethesda, MD: Institute for Family Centered Care.

Parents Anonymous. (undated). *Effective parent leadership: A practical approach to meaningful partnerships between parents and providers*. Retrieved December 22, 2003, from the Parents Anonymous Web site: [www.parentsanonymous.org](http://www.parentsanonymous.org)

Parents Anonymous. (2003). *20 ways to demonstrate parent leadership in National parent leadership month tool kit*. Retrieved December 22, 2003, from the Parent Anonymous Web site: [www.parentsanonymous.org](http://www.parentsanonymous.org)

## Checklist for Involving Families as Advisors and Consultants

This checklist is a tool to help think about ways that families are participating as advisors and consultants at the policy and program level. Rate each item and then cite specific examples that illustrate how the program is involving families. Use this tool to initiate new opportunities to work in partnership with families or to expand on current activities.

PRACTICES	Not doing well Doing okay Doing very well			EXAMPLES
<ul style="list-style-type: none"> <li>• We recognize and respect the expertise of families as policy and program advisors.</li> </ul>				
<ul style="list-style-type: none"> <li>• We are vigilant about seeking opportunities to involve families in advisory activities.</li> </ul>				
<ul style="list-style-type: none"> <li>• We seek to involve families who reflect the racial, ethnic, cultural, and socioeconomic diversity of families currently served by the program.</li> </ul>				
<ul style="list-style-type: none"> <li>• We use a variety of strategies to identify and recruit families to serve in advisory roles.</li> </ul>				
<ul style="list-style-type: none"> <li>• We demonstrate appreciation for the contributions that families make to policy and program development.</li> <li>• We have developed both short term and long term advisory roles for families.</li> </ul>				
<ul style="list-style-type: none"> <li>• We create opportunities for families to participate that are consistent with their cultural practices and individual personalities.</li> </ul>				
<ul style="list-style-type: none"> <li>• We have developed a range of ways for families to participate as advisors including:                             <ul style="list-style-type: none"> <li>– Participating as trainers in staff orientation and in-service programs</li> <li>– Reviewing written and audiovisual materials developed by the program</li> <li>– Conducting evaluation activities</li> <li>– Participating in focus groups</li> <li>– Serving as members of committees, boards, and task forces</li> <li>– Reviewing grants</li> <li>– Developing educational and informational materials for other families</li> <li>– Conducting needs assessments</li> </ul> </li> </ul>				<i>Continued</i>

## A. Parent Involvement and Leadership Roles

Checklist for Involving Families as Advisors and Consultants Continued

PRACTICES	Not doing well Doing okay Doing very well			EXAMPLES
<ul style="list-style-type: none"> <li>We support families serving in advisory roles by:                             <ul style="list-style-type: none"> <li>– Reimbursing their travel and child care expenses</li> <li>– Offering a stipend or honorarium for their participation</li> <li>– Providing mentors</li> <li>– Offering training programs and workshops</li> <li>– Providing secretarial support</li> <li>– Facilitating their networking with other families</li> <li>– Being aware of parental burn out</li> </ul> </li> </ul>				
<ul style="list-style-type: none"> <li>We provide training to staff on working collaboratively with families at the policy and program level.</li> </ul>				
<ul style="list-style-type: none"> <li>We have a paid Parent Consultant(s) on staff.</li> </ul>				
<ul style="list-style-type: none"> <li>We support the Parent Consultant by:                             <ul style="list-style-type: none"> <li>– Creating flexible work schedules</li> <li>– Developing clear job descriptions</li> <li>– Ensuring access to a supportive supervisory relationship</li> </ul> </li> </ul>				
<ul style="list-style-type: none"> <li>We have a Family Advisory Council or committee.</li> </ul>				
<ul style="list-style-type: none"> <li>Membership on the Advisory Council reflects the diversity of families served by the program.</li> </ul>				
<ul style="list-style-type: none"> <li>The Family Advisory Council reports to top level administration.</li> </ul>				

Jeppson, E. S., & Thomas, J. (1995). *Essential allies: Families as advisors*. Bethesda, MD: Institute for Family-Centered Care.

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## Common Challenges and Possible Solutions

By examining lessons learned from early childhood and special care systems, communities can anticipate common challenges and possible solutions in parent involvement and collaborative leadership. Winton et al (2000) describe the lessons learned from Smart Start, an early childhood initiative in North Carolina that involved local partnerships of parents, educators, child care providers, nonprofits, churches and business people to decide how to improve local child care, health care, and family services to children under the age of six. Through a multi-method research approach, Winton sites three major factors that presented challenges to meaningful parent involvement on decision-making boards. The three categories of factors are:

- *Logistical*—time of meeting, arranging for child care, transportation, and reimbursement for expenses,
- *Structural*—group size, lack of orientation prior to meetings, number of parents, and decision-making process; and
- *Climate*—intimidation, not knowing others, vocabulary used, not feeling useful.

Others, as well, contributed to the following brief list of common challenges and possible solutions.

CATEGORY/COMMON CHALLENGE	POSSIBLE SOLUTIONS
<p><b>Climate:</b></p> <ul style="list-style-type: none"> <li>• Commitment to shared leadership</li> <li>• Family reluctance and self-doubt</li> <li>• Perceptions of families</li> <li>• Empowerment of families</li> <li>• Intimidation and adequate voice</li> <li>• Personal interest to collaborative work</li> </ul>	<ul style="list-style-type: none"> <li>• Core principles, policies, and practices</li> <li>• Parent education and training</li> <li>• Professional preparation and training</li> <li>• Engage in meaningful work</li> <li>• Multiple parent leaders, mentors</li> <li>• Reframe personal experience as enhancing leadership skills</li> </ul>
<p><b>Structural:</b></p> <ul style="list-style-type: none"> <li>• Power and decision-making</li> <li>• Limited roles for parent involvement</li> <li>• Group size and tokenism</li> <li>• Recruiting parents and families</li> <li>• Having all voices heard</li> </ul>	<ul style="list-style-type: none"> <li>• A clear decision making process</li> <li>• Expanded roles for parents</li> <li>• Multiple parent leaders, small group activities</li> <li>• Personal invitations and nominations</li> <li>• Use a neutral facilitator</li> </ul>
<p><b>Logistical:</b></p> <ul style="list-style-type: none"> <li>• Level of regular participation</li> <li>• Time, energy, and cost of participation</li> <li>• Balance of personal/public responsibilities</li> <li>• Culturally and linguistically competent materials and communication</li> <li>• Information sharing</li> </ul>	<ul style="list-style-type: none"> <li>• Convenient meeting places and times</li> <li>• Child care, stipends, reimbursement, transportation</li> <li>• Flexible levels of involvement</li> <li>• Translators and interpreter</li> <li>• Communication systems</li> </ul>

**Adapted from:**

Berger, E. (2000). *Parents as partners in education*. Upper Saddle River, New Jersey: Prentice-Hall, Inc.

Jeppson, E. S., & Thomas, J. (1995). *Essential allies: Families as advisors*. Bethesda, MD: Institute for Family Centered Care.

National Center for Early Development & Learning. (2000, June). Parent involvement in decision-making. *NCEDL Spotlights, No. 23*. Chapel Hill, NC: Frank Porter Graham Child Development Institute. Retrieved April 4, 2004 from, [www.fpg.unc.edu/~ncedl/PDFs/spot23.pdf](http://www.fpg.unc.edu/~ncedl/PDFs/spot23.pdf)

Parents Anonymous. (undated). *Effective parent leadership: A practical approach to meaningful partnerships between parents and providers*. Retrieved December 22, 2003, from the Parents Anonymous Web site: [www.parentsanonymous.org](http://www.parentsanonymous.org)

Parents Anonymous. (2003). *20 ways to demonstrate parent leadership in National parent leadership month tool kit*. Retrieved December 22, 2003, from the Parent Anonymous Web site: [www.parentsanonymous.org](http://www.parentsanonymous.org)

Simpson, J., Koroloff, N., Friesen, B., & Gac, J. (1999) *Promising practices in family-provider collaboration. Systems of care promising practices in children's mental health. 1998 Series, Volume II*. Washington, DC: American Institutes for Research, Center for Effective Collaboration and Practices.

Winton, P., Barrick, M., & Thegen, K. (2000) *Is there room at the table? A study of family involvement in community collaboratives*. Washington, DC: Presentation at Head Start's Fifth National Research Conference. Retrieved April 4, 2004, from the National Center for Early Development & Learning Web site: [www.ncedl.org](http://www.ncedl.org)

## A. Parent Involvement and Leadership Roles

### ANNOTATED RESOURCES

#### BOOKS AND PRINT

##### **Essential Allies: Families as Advisors**

(1995) JEPSON, E.S. & THOMAS, J.

A practical how-to manual on involving families as consultants and advisors in policy and program planning with examples and descriptions of how hospitals, state agencies, community programs, and universities have fostered family-professional collaboration. Particular focus involves emphasis on involving families who have been traditionally underrepresented in policy making activities. This text is appropriate for communities, administrators, families, and providers.

*Institute for Family-Centered Care, 7900 Wisconsin Avenue, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or online at [www.familycenteredcare.org](http://www.familycenteredcare.org) (\$15.00)*

##### **Every Voice Counts: Holding a Shared Leadership Event to Make Decisions Together**

(2003) STRAUSS, J.

This text describes how to plan and host a one- to three-day Shared Leadership event that results in a Consensus Document: a grant proposal, program or business plan, piece of legislation—whatever you need to make change happen. Tools include sample agendas, tracking and planning charts, tip boxes and other event planning resources. This resources is useful for communities, administrators, families, and providers.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or online at [www.familysupportamerica.org](http://www.familysupportamerica.org). (\$25.00)*

##### **Family/Professional Partnerships: Moving Forward Together**

(2000, SECOND PRINTING) ADAMS, J., BISS, C., BURRELL MOHAMMAD, V., MEYERS, J., & SLATON, E.

This monograph, is a work in progress reflecting an on-going dialogue between professionals and family advocates on issues of power, empowerment, interdependence, mutuality, and reciprocity. This document resulted from a partnership among four national technical assistance organizations that are working to develop peer-to-peer technical assistance in the building of comprehensive community systems of care for children and their families. Six chapters

present research and commentary on issues related to a systems approach to family/professional partnership. This text is useful for communities, administrators, providers, families, and family advocates.

*Peer Technical Assistance Network, Partnership for Children's Mental Health. Federation of Families for Children's Mental Health, 1101 King Street-Suite 420, Alexandria, VA 22314, 730-684-7710 or the National Technical Assistance Center for Children's Mental Health, Publications Manager, 202-687-5000. (\$5.00)*

##### **Making Room at the Table: Fostering Family Involvement in the Planning and Governance of Formal Support Systems.**

(1997) JEPSON, E.S., THOMAS, J., MARKWARD, A., KELLY, JOANNE, KOSER, G., AND DIEHL, D.

Family support relies on families getting involved not just as recipients of services, but as shapers of services and the systems that they are a part of. With this three-hour program of guided activities, families, program planners, staff, policymakers, and other key players develop the awareness and skills they'll need to work as a team in planning services and carrying out programs. Packed with overheads and charts, this easy-to-follow guide walks the facilitator through a session appropriate for in-service, pre-service training, workshop, or other learning environment.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or online at [www.familysupportamerica.org](http://www.familysupportamerica.org). (\$20.63)*

##### **Parents Becoming Leaders: Getting Involved on Behalf of Children**

(2003) WESTHEIMER, M.

This handbook tells the inspirational stories of seven parents who became advocates for children and provides insight and advice for parent advocates, those who wish to become advocates, and professionals who work with parents in the interests of children. This text is enlightening for families, administrators, and providers.

*Families and Work Institute, 267 Fifth Avenue, New York, NY, 10016 or online at [www.familiesandwork.org](http://www.familiesandwork.org). (\$7.00)*



### **Putting Parent Engagement into Action: A Practical Guide**

(2002) WILLIAMS, A.

This booklet shares concrete recommendations on promoting parent leadership, along with real life stories and personal testimonials showing the strategies in action. A revealing text for families, administrators, and providers.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or online at [www.familysupportamerica.org](http://www.familysupportamerica.org). (\$15.00)*

### **ON-LINE RESOURCES**

#### **A New Wave of Evidence—The Impact of School, Family, and Community Connections on Student Achievement.**

(2002) HENDERSON, A.T. & MAPP, K.L.

This publication provides a review and synthesis of current research about family and community connections with schools and their impact on student achievement and success. Two features of this publication are the emphasis on studies that describe successful practices in engaging families in this work and how scores of community groups are organizing a power base of parents and residents of low-income communities to improve outcomes for all students. This document is useful to communities, administrators, providers, families, advocates, researchers, evaluators, and policy makers. Full text available at [www.sedl.org/connections/](http://www.sedl.org/connections/)

*Southwest Educational Development Laboratory, National Center for Family & Community Connections with Schools*

#### **National Parent Leadership Month Tool Kit**

This timely resource from Parents Anonymous includes materials designed to assist in promoting and gaining visibility for Parent Leadership Month in your community. These resources will help to discuss and describe Parent Leadership. They can be used as flyers, as handouts, or given to the media to be used with stories about National Parent Leadership Month and provide an opportunity to educate neighbors, colleagues, the media and public officials about National Parent Leadership Month. This Tool Kit is designed for use by both staff and Parent Leaders. Full text available at [www.parentsanonymous.org](http://www.parentsanonymous.org)

### **National Standards for Parent/Family Involvement Programs**

These standards were developed by the National PTA in cooperation with education and parent involvement professionals through the National Coalition for Parent Involvement in Education (NCPIE). Building upon the six types of parent involvement identified by Joyce L. Epstein, Ph.D., of the Center on School, Family, and Community Partnerships at Johns Hopkins University, National PTA created program standards of excellence. These standards, together with their corresponding quality indicators, were created to be used in conjunction with other national standards and reform initiatives in support of children's learning and success by communities, school administrators, providers, and families. Full text available at [www.pta.org/parentinvolvement/standards/index.asp](http://www.pta.org/parentinvolvement/standards/index.asp)

#### **National Standards for Parent/Family Involvement: Checklist for Quality Indicators**

The "Checklist for Quality Indicators" are self-evaluations to help schools examine the current status of parent and family involvement. They can be used by staff and parents to survey the current situation in regard to supporting the National Standards for Parent/Family Involvement, which includes Standard V: School Decision Making and Advocacy relevant to parents as leaders. Checklists are available in six languages. Full text available at [www.pta.org/parentinvolvement/standards/appenda.asp](http://www.pta.org/parentinvolvement/standards/appenda.asp)

#### **Parent Involvement Resource Guide (1998)**

This guide provides information on resources that support families and build confidence in their knowledge, interest, and skills. Included in this guide are selected recent journal articles, book titles, video titles, and lists of associations and organizations that specialize in Parent Involvement. A separate resource guide, Parent Resources: An Internet Pathfinder, contains internet sites on Parent Involvement useful to the full range of early care and education service providers, organizations, communities, and families. Full text available at [www.headstartinfo.org/pdf/rg\\_prntin.PDF](http://www.headstartinfo.org/pdf/rg_prntin.PDF)

## A. Parent Involvement and Leadership Roles

### **The Case for Parent Leadership**

(2004) HENDERSON, A., JACOB, B., KERNAN-SCHLOSS, A., & RAIMONDO, B.

This guide draws on research that documents the impact of parent involvement on student achievement. It includes exercises and talking points to help parents identify what role they want to play...from teacher to supporter to decision maker...and what kind of school their child attends, from open-door to fortress. Full text available at [www.centerforparentleadership.org](http://www.centerforparentleadership.org)

### **WEBSITES**

#### **Center for Parent Leadership**

[www.centerforparentleadership.org](http://www.centerforparentleadership.org)

The Center for Parent Leadership's (CPL) mission is to provide parents with the skills and opportunities they need to become effective leaders and advocates in their local schools. As an initiative of the Prichard Committee, CPL utilizes the parent leadership model developed and implemented through the Commonwealth Institute for Parent Leadership. Additional resources, training, and technical assistance are also available.

#### **Center on School, Family, and Community Partnerships**

[www.csos.jhu.edu](http://www.csos.jhu.edu)

The Center for Social Organization of Schools (CSOS) was established in 1966 as an educational research and development center at Johns Hopkins University. The Center conducts programmatic research to improve the education system, develops curricula and other products, and provides technical assistance to help schools use the Center's research. The Center currently includes the federally-supported Center for Research on the Education of Students Placed at Risk and the Center on School, Family, and Community Partnerships. The Center on School, Family, and Community Partnerships is home to the National Network of Partnership Schools ([www.csos.jhu.edu/p2000/default.htm](http://www.csos.jhu.edu/p2000/default.htm)) where researchers, educators, parents, students, community members, and others are working together to enable all elementary, middle, and high schools develop and maintain effective programs of partnership.

#### **Families and Work Institute**

[www.familiesandwork.org](http://www.familiesandwork.org)

Families and Work Institute (FWI) is a nonprofit center for research that provides data to inform decision-making on the changing workforce, changing family and changing community—including child development, parenting, and leadership.

#### **Family Support America**

[www.familysupportamerica.org](http://www.familysupportamerica.org)

Family Support America, formerly Family Resource Coalition of America, promotes family support as the nationally recognized movement to strengthen and support families, and places the principles of family support practice at the heart of every setting in which children and families are present. This site includes information related to technical assistance, training and education, conferences, publications, and other resources related to family support and promoting the voice of families—see especially, the Shared Leadership Series.

#### **Family Voices**

[www.familyvoices.org](http://www.familyvoices.org)

Family Voices, a national grassroots network of families and friends, advocates for health care services that are family-centered, community-based, comprehensive, coordinated and culturally competent for all children and youth with special health care needs; promotes the inclusion of all families as decision makers at all levels of health care; and supports essential partnerships between families and professionals.

#### **National PTA**

[www.pta.org](http://www.pta.org)

National PTA is the largest volunteer child advocacy organization in the United States. A not-for-profit association of parents, educators, students, and other citizens active in their schools and communities, PTA is a leader in reminding our nation of its obligations to children. This website includes guidance and resources related to parent involvement and parent leadership, including program information about Early Childhood PTA's and building blocks to creating local organizations.

### Parents Anonymous

[www.parentsanonymous.org](http://www.parentsanonymous.org)

As the nation's premier child abuse prevention organization, Parents Anonymous® Inc. is a community of parents, organizations and volunteers committed to strengthening families and building strong communities, achieving meaningful parent leadership and shared leadership, and leading the field of child abuse and neglect. In addition to a description of the leadership initiative, publications, resources, and related links, this site describes training programs and technical assistance services for promoting and implementing meaningful Parent Leadership and Shared Leadership in communities.

### Pew Partnership

[www.pew-partnership.org](http://www.pew-partnership.org)

The Pew Partnership is a civic research organization. Its mission is to identify and document promising solutions and strategies crucial to strong communities. The five areas that guide the work are thriving neighborhoods, living-wage jobs, viable economics, healthy families and children, and collaborative leadership. The site includes a definition and guidance related to collaborative leadership as well as information about LeadershipPlenty®, a copyrighted leadership training program designed by the Pew Partnership for Civic Change to prepare citizens to successfully address local problem-solving priorities and leadership challenges.

### Research and Training Center on Family Support and Children's Mental Health

[www.rtc.pdx.edu](http://www.rtc.pdx.edu)

This site developed by the Graduate School of Social Work at Portland State University features current research and training activities at the center, excellent articles on a variety of topics related to children's mental health, and an online version of their innovative newsletter, *Focal Point*. Information about research related to family participation at the policy level is included. This site is useful to families and professionals and links to other valuable online resources.

### The Federation of Families for Children's Mental Health

[www.ffcmb.org](http://www.ffcmb.org)

The Federation of Families for Children's Mental Health is a national family-run organization dedicated exclusively to helping children with mental health needs and their families achieve a better quality of life. The organization provides leadership to develop and sustain a nationwide network of family-run organizations; focuses on changing how systems respond to children with mental health needs and their families; and helps policy-makers, agencies, and providers become more effective in delivering services and supports that foster healthy emotional development for all children.

# B Policies and Standards: Infrastructure to Support Parent Involvement and Leadership Roles

## OVERVIEW OF THE ISSUE

### Policies and Standards

While early childhood systems have long supported the notion of parent involvement and parents as decision makers, most often, the focus has been the family's involvement regarding their own child and the working relationships with providers related to the child's care or services. Although building relationships is the foundation to any and all parent involvement, a shift in focus to parent involvement and leadership roles can be challenging to implement in an effective and meaningful way. Implementation requires

- Administrative support to actively involve family members;
- Programmatic and fiscal flexibility to individualize ways and means for families to participate; and
- Time and opportunities for information sharing and training to prepare providers and parents and build partnerships and become leadership teams (Caplan et al., 1998).

Specific agency or organization policy and infrastructure can help to support parent involvement and parents in leadership roles. While policies and standards have their place, it is in the meaningful practice and implementation where the support for parent involvement becomes a reality. Some examples of policies and standards related to early care and education, parent involvement, and school readiness are highlighted briefly below.

#### ■ Head Start and Early Head Start

As federal-to-local grant programs for the provision of early childhood education, Head Start programs must adhere to a set of Program Performance Standards regarding all aspects of the program services. The key components of the standards most relevant to parent involvement are: 1) to encouraging involvement through building relationships, home visits, and partnership agreements; 2) to help families access community resources to meet their family goals; 3) to provide opportunities for families to learn about child development, their child's learning experience, and opportunities for parents to volunteer or work in the program; 4) to provide opportunities to enhance parenting skills; 5) to support parents as advocates for their child, appropriate community services, and in transition to elementary school; and 6) to encourage participation in a formal structure of shared governance including policymaking and program decisions. In addition, parents have the opportunity to participate in the National Head Start Association in advocacy and policy initiatives. Within these

standards, Head Start programs are able to establish specific policies, procedures, services, and supports that can maximize parent involvement within their unique community (Administration for Children and Youth, 1998; Schumacher, 2003)

#### ■ **Title 1 and the No Child Left Behind Act**

Under Title 1, schools are required to provide assistance to parents to help them understand the National Education Goals and the standards and assessments that will be used to determine children's progress. Each district must also provide training/education programs for parents with guidance from parents as to how these training dollars should be spent. Each local education agency (LEA) must have a parent involvement policy, jointly developed with, and approved by, and distributed to parents. The policy must outline how the LEA will involve parents, build their capacity for involvement, coordinate strategies with other programs, evaluate the effectiveness, and adjust their policy as needed. Each school that receives Title 1 funds must have a parent involvement policy as part of its Title 1 plan. Each school must also develop jointly with parents a school-parent compact that outlines how parents, school staff, and students will share responsibility for ensuring improved student achievement. (Center for Law and Education, undated)

#### ■ **Mental Health and Early Intervention**

Since 1986, when Congress passed the State Mental Health Services Comprehensive Plan mandating family member participation in the development of state mental health plans, additional mandates have supported family member involvement in decision and policy making. Family involvement is also a key component of federally-funded early intervention services to infants and young children who have disabilities or are at risk of developmental disabilities. In addition, IDEA and special education requirements for family participation in the development of individualized education plans for their children also support family member participation in policy making related to children with or at risk of disabilities. (McManus & Koroloff, 1998)

#### ■ **Parent Teachers Association**

The National Parent Teachers Association's (PTA) long-standing position statement on parent/family involvement acknowledges the multi-faceted role of parents as first educators, decision makers, and advocates for children's success. It charges the school's contribution as including parents as stakeholders in leadership capacities in all stages of program planning, design, and implementation. The statement acknowledges the PTA's role and commitment to parent development, child advocacy, legislative and policy activities, and participation in decisions affecting school goals, policies, programs, curriculum, rules, and regulations. More recently, the PTA has extended these responsibilities to support the development of Early Childhood PTA's for those interested in the education and development of children from birth to age 5 and school readiness. (National PTA, 1998)

These few examples demonstrate the role of national policies and standards in assuring parent involvement and leadership roles. They have been instrumental in efforts to involve family's themselves in policy work related to early childhood services, care, and education and provide the guidelines within which state or local agencies and organizations can tailor their approach.

## B. Policies and Standards

### Involving Families in Policy Work

In those systems where parents of young children have leadership roles and are involved in policy work, their participation is often due in part to the efforts of the federal government to institutionalize family involvement in policy making (Focal Point, 1998). However, parents as partners in policy making requires far more than the policy or mandate. Involving families in policy work—at the program, system, state, or national level—requires that service systems and agencies be prepared and intentional about engaging families and that families be prepared to speak with authority and make recommendations based on their experience and knowledge. Whether active in an advisory, advocate, governance or other leadership capacity, parents contribute reality-based, culturally relevant information from a valuable perspective (Federation of Families for Children’s Mental Health, 2001). Preparing to include families in policy work and preparing families for policy work has features similar to generally preparing families for leadership roles. However, there are specific informational needs, skills, and tools related to policy-making that can make involving families in policy work most effective. Support for this work can come from the state level, service system leadership, family support organizations, programs that serve young children and their families, or advocacy groups. Some important themes and content in preparation for meaningful involvement of families in policy work are

- Understanding the governance process, policy-making bodies, their roles and functions;
- Strategies for effective participation and skills to exert influence, to communicate, and deal with conflict;
- Organizing as advocates and how advocacy organizations can best influence systems and support change efforts; and
- Resources for decision making and using background data and information to inform and support proposals and ideas. (Administration for Children and Families, 1998; Hunter, 1994)



## New York

### *Early Intervention Partners Project—Local and Statewide Parent Leadership*

The Early Intervention Partners Training Project (EIPTP) empowers parents of infants and toddlers with disabilities to become self-advocates and to participate in early intervention related policy activities. By participating in the EIPTP, parents receive information, build skills, develop a network, and identify resources to support their competence as leaders. The goals of the project are to:

- Achieve productive partnerships between parents of children with disabilities and Early Intervention policy makers
- Increase the number of parents participating on Local Early Intervention Coordinating Councils in the state
- Create opportunities for program graduates to become involved in state level early intervention program and policy initiatives
- Nurture and develop the leadership abilities of parents of children with disabilities by enhancing their knowledge of the Early Intervention Program.

The Early Intervention Partners Project is led by the Family Initiatives Coordinator at Just Kids Early Childhood Learning Center in Middle Island, NY with funding and in partnership with the State Department of Health. The Coordinator began her leadership career as a parent concerned about her own child with a disabilities. Through years of personal learning, experience on committees, councils, and projects, and various employed positions, the Coordinator expanded her own leadership to guide the evolution of the Early Intervention Partners Training Project and contribute to its success. Since 1995, EIPTP training has graduated 700 parents across the state who have applied their advocacy and leadership skills in early intervention, education, health, recreation, and other areas that impact young children and their families. Key strategies to support success include:

- Passionate belief in and value for family centered services;
- Using group process and parent support to decrease isolation and build empowerment;
- Providing individualized levels of support for participation;
- Building relationships with and among participants;
- Recruiting family participants by direct-mailing;
- Offering training at no cost to participants and offering supports, such as child care and transportation reimbursement;

CONTINUED

## B. Policies and Standards

### PROMISING PRACTICE

#### NEW YORK

- Applying a selection criteria that emphasizes parents committed to using their new leadership skills to benefit others in their community;
- Adjusting the curriculum to adapt to diverse learners—culture, language, reading level, education, etc.; and
- Linking participants to leadership opportunities that match their personal interest.

For more information contact Margaret Sampson at 631-205-0502 or [ms.fic@att.net](mailto:ms.fic@att.net)

### Critical Questions for Communities

- *What federal, state, or local mandates or standards impact parent involvement in leadership roles in services to young children in our community?*
- *How do we evaluate the impact of these mandates on systems that serve young children and families in support of school readiness?*
- *How can these mandates or standards influence those systems without specific requirements or guidelines to better serve young children and families?*
- *What are the service system and program policy and infrastructure implications of these mandates or standards?*
- *How are the relevant program policies and infrastructures implemented and what is their impact on family involvement in leadership roles?*
- *What resources and approaches are needed to create policies and practices that work to involve families and engage them as decision makers and policy makers?*
- *How are parents and families of young children prepared for involvement in policy making?*
- *What training opportunities exist within our community and how might they be used or adapted to focus on young children, families, and school readiness concerns?*

# Key Strategies for Families, Providers, and Administrators

## What Families Can Do:

- Learn about the program policies that influence your child's services and your involvement as a decision maker
- Become involved on committees, task forces, advisory groups, or governing bodies
- Join a parent organization or parent support group

## What Providers Can Do:

- Participate in the development of agency or organization policy related to parent involvement.
- Inform families about programs policies related to services and parent involvement.
- Support, encourage, and coach parents who demonstrate passion, interest, and strengths in policy work.

## What Administrators Can Do:

- Create administrative structures, policies, and procedures that support partnerships between providers and parents and parent involvement in decision making and policy development.
- Use or adopt mandates for parent involvement as a program or service requirement to launch meaningful parent participation in program policy, advocacy, and broader policy efforts to match shared interests in the context of community.
- Utilize resources to offer parent development opportunities to enhance participation in decision making and policy development.

## B. Policies and Standards

## A Checklist of Policies that Support Parent Involvement and Leadership Roles

A commitment to support parent involvement and leadership roles is reflected in program policies and practices. National policies and standards can provide specific requirements and guidelines, but community-based agencies, organizations, and early care and education services must operationalize policies and practices to meet these requirements. The following checklist offers examples of specific policies with practice implications that can maximize parent involvement and parents in leadership roles.

To support family involvement as decision makers and in leadership roles, we have...		
YES	NO	POLICY CONSIDERATION
		A written Parent Involvement Policy, developed in partnership with parents, that reflects a genuine interest in and support for working cooperatively with parents and the community.
		A policy that describes governance structures, a requirement for parent participation, and their roles and responsibilities.
		Realistic reimbursement policies to reimburse parents for expenses (including gas, tolls, transportation, meals, and child care) in a timely fashion in a method that is easy to understand and submit expenses.
		A consultant fee policy that allows family members to be offered a stipend or consultant fee for service and time spent at meetings.
		A policy or clear guidelines for accountability and reporting back requirements for parents who represent other parents or participate in policy group work.
		A policy for hiring practices that gives hiring parents a priority whenever their skills, interests, and abilities fit the job requirements.
		A policy that asserts that parent's are the primary decision maker for their child's early care, education, or services.
		Grievance procedures that are clearly communicated to parents and encourage deliberate dialogue and conflict resolution.
		Staff and volunteer training and development policies that enable us to provide and maintain training for families as leaders.
		A policy that allows families time off for involvement in their child's early intervention or school program.
		A review committee that includes parents to review policies and practices specific to parent involvement in decision-making and leadership roles.

### Adapted from:

Family Support America (2002). *Shared leadership: Forging a consensus to strengthen families and communities* (Executive summary). Retrieved May 20, 2003, from the Family Support America Web site: [www.familysupportamerica.org/test/policy/articles/shared\\_leadership\\_exec.htm](http://www.familysupportamerica.org/test/policy/articles/shared_leadership_exec.htm)

Popper, B. (1997, October). Enhancing family roles in EI Programs. *Early Childhood Bulletin: News by and for Parents and Parent Members of State Interagency Coordinating Councils*. Retrieved March 5, 2004, from: [www.nectac.org/~pdfs/topics/enhanfam.pdf](http://www.nectac.org/~pdfs/topics/enhanfam.pdf)

State of Connecticut Commission on Children. (undated). *The Parent Leadership Training Institute: A Commission on Children Civic leadership initiative*. Retrieved April 11, 2004, from: [www.ctprevention.com/act/plti.html](http://www.ctprevention.com/act/plti.html)

Schumacher, R., (2003). *Family support and parent involvement in Head Start: What do Head Start program performance standards require?* Retrieved January 20, 2004, from: [www.clasp.org/DMS/Documents/1053553717.7/HS\\_fam\\_supp.pdf](http://www.clasp.org/DMS/Documents/1053553717.7/HS_fam_supp.pdf)

## Parent Self-Assessment for Policy Work

Parents are key partners at the policy-making tables addressing young children and school readiness. Becoming involved in policy work takes time, energy, and effort. Parents, who want to contribute their expertise, skills, and experiences to decision-making and policy work, must weigh the benefits and costs of this level of involvement and may find the following self-assessment questions useful.

- ✓ What particular issues, concerns, or services related to young children and school readiness am I most interested in?
- ✓ What groups, committees, or boards are most likely to deal with my interests?
- ✓ How can I find out what they do and what is the best way to get involved?
- ✓ What skills and knowledge do I want to gain from this experience?
- ✓ What skills and knowledge do I bring to this experience?
- ✓ How much time and energy do I have to work on a board or committee?
- ✓ Can I take time away from other obligations—such as work, to be involved in this leadership role?
- ✓ What other “costs” might be involved—such as time away from my family, cost of child care, transportation, etc.?
- ✓ Am I prepared to share my personal experience when useful to inform decision, make a key point, or advocate for change?
- ✓ What do I need to learn to be an effective member on a board or committee?
- ✓ Who is available to be a support to me in this work and how?
- ✓ What other supports would be useful to me in this work?

**Adapted from:**

Charnov, D.J. & Rutsch, C. (2000). *Making a difference: A parent's guide to advocacy and community action*. Washington, DC: Children's Resources International, Inc.

Hunter, R. (1994). *Parents as policy-makers: A handbook for effective participation*. Portland, OR: Portland State University, Families in Action Project, Research and Training Center on Family Support and Children's Mental Health.

## B. Policies and Standards

## ANNOTATED RESOURCES

## BOOKS AND PRINT

**Essential Allies: Families as Advisors**

(1995) JEPSON, E.S. &amp; THOMAS, J.

A practical how-to manual on involving families as consultants and advisors in policy and program planning with examples and descriptions of how hospitals, state agencies, community programs, and universities have fostered family-professional collaboration. Particular focus involves emphasis on involving families who have been traditionally underrepresented in policy making activities. This text is appropriate for communities, administrators, families, and providers.

*Institute for Family-Centered Care, 7900 Wisconsin Avenue, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or [www.familycenteredcare.org](http://www.familycenteredcare.org) (\$15.00)*

**Every Voice Counts: Holding a Shared Leadership Event to Make Decisions Together**

(2003) STRAUSS, J.

This text describes how to plan and host a one- to three-day Shared Leadership event that results in a Consensus Document: a grant proposal, program or business plan, piece of legislation—whatever you need to make change happen. Tools include sample agendas, tracking and planning charts, tip boxes and other event planning resources. This resource is useful for communities, administrators, families, and providers.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or [www.familysupportamerica.org](http://www.familysupportamerica.org) (\$25.00)*

**Linking Our Voices**

(1996) HEAD START BUREAU

This videotape-based program is designed to prepare current and prospective parents and community representatives to be effective Policy Council members. It can be used to increase the knowledge and skills of Policy Council members and to influence participants' attitudes and behavior toward being a Policy Council member. The materials can be used with other interested groups such as Head Start staff, members of governing bodies, and community groups. The training package includes a videotape, a facilitator's manual, a set of participant workshop

materials, and a set of overheads to make transparencies. The workshops are designed to follow the viewing of the video and are based on real stories of representative Policy Council members. The videotape is close-captioned.

*Administration for Children and Families, Head Start Bureau, Head Start Information and Publications Center, Order Fulfillment Department, P.O. Box 26417, Alexandria, VA 22313-0417, (703) 683-2878, (703)683-5769 (fax), or [www.headstartinfo.org](http://www.headstartinfo.org) (Single copy free)*

**Making A Difference: A Parent's Guide to Advocacy and Community Action**

(2000) CHARNOV, D. J. AND RUTSCH, C.

This handbook provides practical advice to help parents become effective advocates in their schools and their communities. "How-to" strategies help parents improve services for their children and their family. Step-by-step directions and real-life stories of successful advocates are interwoven to guide readers through the process of advocacy.

*Children's Resources International, Inc. 5039 Connecticut Avenue, NW, Suite One, Washington DC, 2008 202-363-9002, 202-363-9550 (fax) or [www.childrensresources.org](http://www.childrensresources.org) (\$15.95)*

**Making Room at the Table: Fostering Family Involvement in the Planning and Governance of Formal Support Systems.**

(1997) JEPSON, E.S., THOMAS, J., MARKWARD, A., KELLY, JOANNE, KOSER, G., AND DIEHL, D.

Family support relies on families getting involved not just as recipients of services, but as shapers of services and the systems that they are a part of. With this three-hour program of guided activities, families, program planners, staff, policymakers, and other key players develop the awareness and skills they'll need to work as a team in planning services and carrying out programs. Packed with overheads and charts, this easy-to-follow guide walks the facilitator through a session appropriate for in-service, pre-service training, workshop, or other learning environment.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or online at [www.familysupportamerica.org](http://www.familysupportamerica.org). (\$20.63)*



## Parents as Policy-Makers: A Handbook for Effective Participation

(1994) HUNTER, R.

The purpose of this manual is to provide parents and other family members of children with emotional disorders some practical ideas and tools with which they can become effective partners with professional in the policy-making process. It provides assistance and guidance to parents and other family members who are members of state or local agency boards, advisory committees, or other formal decision-making bodies that are involved in shaping mental health services for children.

*Portland State University, Research and Training Center on Family Support and Children's Mental Health, Families in Action Project, P.O. Box 751, Portland, Oregon, 97201-0751, 503-725-4040 or [www.rtc.pdx.edu](http://www.rtc.pdx.edu). (\$7.25)*

## ON-LINE RESOURCES

### Families as Advocates

(UNDATED) FAMILY VOICES NATIONAL OFFICE

This tip sheet offers guidance for being a health advocate for your child with special health care needs, offers links to additional supports, and is useful for parents, families, and family advocates. Full text available at <http://familyvoices.org/Information/FamiliesAsAdvocates.htm>

*Family Voices National Office, 3411 Candelaria NE, Suite M, Albuquerque, NM, 1-888-835-5669 or [www.familyvoices.org](http://www.familyvoices.org)*

### Family Experiences: Ways to Lead Change Through Telling Your Story

(1998) GABBARD, G.

This edition focuses on ways parents can act as advocates and shape their stories so that key themes are emphasized and improvements are made within a program or system. For use by parents and family advocates, it describes key issues to consider in preparing and presenting a personal story. Full text available at [www.nectac.org/~pdfs/pubs/famexp.pdf](http://www.nectac.org/~pdfs/pubs/famexp.pdf)

*NECTAC Early Childhood Bulletin: News by and for Parents and Parent Members of State Interagency Coordinating Councils, Spring Issue. NECTAC Publications, Campus Box 8040, UNC-CH, Chapel Hill, NC 27599-8040, 919-966-7463 (fax) or [www.nectac.org](http://www.nectac.org). (\$3.00)*

### Family Participation in Policymaking

(1998) CAPLAN, E., BLANKENSHIP, K., AND MCMANUS, M.

This issue of *Focal Point* is dedicated to issues related to family member involvement and family participation in policymaking. It offers articles describing the influence of legislation, pathways of family member involvement, training opportunities, and best practices descriptions. Full text available at [www.rtc.pdx.edu/pgFocalPoint.shtml](http://www.rtc.pdx.edu/pgFocalPoint.shtml)

*FOCAL POINT: A National Bulletin on Family Support & Children's Mental Health, Fall Issue. Portland State University, Regional Research Institute For Human Services, Research and Training Center on Family Support and Children's Mental Health, Portland, OR.*

### Involving Families In Policy Group Work

(2001) THE FEDERATION OF FAMILIES FOR CHILDREN'S MENTAL HEALTH

This tip sheet offers guidance for involving family members in the work of mental health policy groups. It provides a definition of "family member", and briefly describes the context for family involvement in policy group work, contains strategies for recruiting family members to join policy groups, training and supporting family members in the work, and sustaining their participation over time. Full text available at [www.ffcmh.org/publication\\_pdfs/involv-fam.pdf](http://www.ffcmh.org/publication_pdfs/involv-fam.pdf)

*The Federation of Families for Children's Mental Health, 1101 King Street, Suite 420, Alexandria, VA 22314, 703-684-7710.*

### Making Your Case

(2004) PARTNERS IN POLICY MAKING

This three-hour, self-directed on-line course is one of two courses available to graduates of the *Partners in Policymaking* training to supplement their learning. It focuses on how to communicate with public officials by effectively telling your personal story, writing a letter, providing testimony, and communicating in positive ways. For a preview and registration go to [www.partnersinpolicymaking.com/makingyourcase](http://www.partnersinpolicymaking.com/makingyourcase).

*Partners in Policy Making, Minnesota Governor's Council on Developmental Disabilities E-Learning Courses, 370 Centennial Office Building, 658 Cedar Street, St. Paul, Minnesota 55155, [www.partnersinpolicymaking.com](http://www.partnersinpolicymaking.com). (\$30.00, each course)*

## B. Policies and Standards

### **National Standards for Parent/Family Involvement Programs**

These standards were developed by the National PTA in cooperation with education and parent involvement professionals through the National Coalition for Parent Involvement in Education (NCPIE). Building upon the six types of parent involvement identified by Joyce L. Epstein, Ph.D., of the Center on School, Family, and Community Partnerships at Johns Hopkins University, National PTA created program standards of excellence. These standards, together with their corresponding quality indicators, were created to be used in conjunction with other national standards and reform initiatives in support of children's learning and success. Full text available at [www.pta.org/parentinvolvement/standards/index.asp](http://www.pta.org/parentinvolvement/standards/index.asp).

### **Parents As Teachers Advocacy Guide**

(2000) PARENTS AS TEACHERS NATIONAL CENTER, INC.

This advocacy guide is intended to support advocacy for the Parents As Teachers program and young children and families to government agencies, elected officials, board of education members, and other decision-makers in a community. The guidance information can be used by communities, administrators, advocates, and families and adapted for a variety of advocacy efforts as well and connects users to additional resource links. Full text available at [www.patnc.org/forpatprograms-advocacyguide.asp](http://www.patnc.org/forpatprograms-advocacyguide.asp)

## **WEBSITES**

### **Family Support America**

[www.familysupportamerica.org](http://www.familysupportamerica.org)

Family Support America, formerly Family Resource Coalition of America, promotes family support as the nationally recognized movement to strengthen and support families, and places the principles of family support practice at the heart of every setting in which children and families are present. This site includes information related to technical assistance, training and education, conferences, publications, and other resources related to family support and promoting the voice of families.

### **Partners in Policymaking**

[www.partnersinpolicymaking](http://www.partnersinpolicymaking)

Partners in Policymaking was created in Minnesota by the Governor's Council on Developmental Disabilities in 1987. Partners is an innovative, competency based leadership training program for adults with disabilities and parents of young children with developmental disabilities. The purpose of the program is twofold: To teach best practices in disability, and the competencies of influencing public officials. This website offers information about the training, a replication packet, resources, and links related to policy, advocacy, and disabilities.

# C Engaging Families in Leadership Roles

## OVERVIEW OF THE ISSUE

In programs that serve young children and their families, the staff-parent relationship is the conduit to enhance the child-parent relationship (Berlin et al., 1998). Likewise the staff-parent relationship and agency-family relationship is also the conduit to enhance parent involvement, family development, and families in leadership roles.

To engage families in parent involvement and leadership related to early childhood and school readiness, **families must:**

- Understand their important role in their child’s development;
- Understand the concept of school readiness;
- Perceive their potential impact on services that can affect their child’s development and school readiness;
- Understand guidance, standards, and mandates that support their involvement, such as the Education Goals 2000, the No Child Left Behind Act, and implications for their opportunity to be involved;
- Reframe their commitment to their own child to that of all children and reframe their perception of themselves as decision makers; and
- View themselves as having leadership interests and potential to make a difference for all children. (Buysse, 2003)

To engage families in parent involvement and leadership related to early childhood and school readiness, **systems, organizations, and agencies must:**

- Value family involvement as an important program or service philosophy and goal;
- Reach out to families and convey their vital importance in their child’s development;
- Offer family-friendly services that are flexible, individualized, and family-centered and to meet the child’s and family’s needs and goals;
- Build relationships that are built on strengths and foster trust, exchange of information, and mutual respect;
- Offer opportunities and support for parent involvement, including decision-making and leadership roles; and
- Offer training and staff/parent development opportunities for team building and taking on decision-making and leadership roles and the tasks that accompany these roles.

## C. Engaging Families in Leadership Roles

In the process of family-provider collaboration and transition to families in leadership roles, engagement involves continuing to build on the relationships between the family and provider. Once a collaborative partnership and shared leadership relationship is established, the **partnership must**:

- Include ongoing dialogue on vision and goals;
- Focus attention on how power (e.g., administrative, financial) is shared;
- Attend to how responsibilities in planning and decision making are distributed;
- Engage in open and honest two-way communication and sharing of information; and
- Build, express and maintain mutual respect as equals among all participants.

(Simpson, et al., 1999)

### Critical Questions for Communities

- *Do families in our community realize the importance of their role as parents in their child's development and school readiness?*
- *How are messages about the vital role of families in child development and school readiness communicated?*
- *Is the concept of school readiness within our community one that is understood, agreed upon, and consistent among providers and families?*
- *How do providers communicate the opportunities for parent involvement in services to young children?*
- *Are opportunities for parent involvement provided in flexible and family-friendly ways?*
- *What providers are most successful in engaging parents and what lessons can be shared with others who serve young children and their families?*
- *How are families encouraged to share their perspective at the personal service level, agency level, and community level?*
- *What opportunities exist to encourage parents to take a decision-making and leadership role?*

# Key Strategies for Families, Providers, and Administrators

## What Families Can Do:

- Realize their primary role as the expert and decision maker for their child and learn about and reflect on personal perceptions about school readiness for their child.
- Discover ways to be involved in their child's early care and learning experiences—including those outside of the home—and take advantage of opportunities to express views and opinions.
- Consider getting involved in a leadership role by participating on a committee, task force, advisory group, or governing structure.

## What Providers Can Do:

- Make a commitment to and prepare for partnerships with parents, including those opportunities for shared decision making.

- Encourage parents to express their views, give feedback, and offer input into service delivery and program services.
- Recommend that parents be included in program and policy decisions and nominate parents for leadership opportunities.

## What Administrators Can Do:

- Encourage and recognize successful partnerships between providers and parents.
- Adopt agency policy for parent representation on governing bodies.
- Provide training, mentoring, and support for parents who are interested in taking leadership roles.

## C. Engaging Families in Leadership Roles

### Tips for Inviting and Engaging Families to Take Leadership Roles

When recruiting families for leadership roles in an effort or organization, it is vital that:

- The philosophy and values of partnership and parent leadership is clear;
- The benefit of family involvement and leadership to school readiness can be articulated;
- The anticipated roles and responsibilities expected of families who become involved are inclusive, broad, and yet well defined;
- Establishing trust is the foundation for successful recruitment; and
- Culturally and linguistically competent approaches are utilized.

Some specific strategies that communities, agencies, or organizations may find useful are listed below.

- |   |   |
|---|---|
| <input type="checkbox"/> Build on existing relationships and make a personal connection and invitation.                                     | <input type="checkbox"/> Contact local or state-wide parent organizations.  |
| <input type="checkbox"/> Post public announcements, advertisements and/or open invitations about specific opportunities.                    | <input type="checkbox"/> Have already involved parents or families invite other parents or families.  |
| <input type="checkbox"/> Target invitations through community organizations that serve young children and their families.                   | <input type="checkbox"/> Use “key informants” in the community to link to community-based groups.   |
| <input type="checkbox"/> Hold community forums or neighborhood meetings.  | <input type="checkbox"/> Link existing parent leadership groups in other systems for a cross-system focus on school readiness.  |
| <input type="checkbox"/> Make presentations to community groups or community member gatherings.   | <input type="checkbox"/> Inquire across-systems for additional successful strategies for engaging families as leaders.  |
| <input type="checkbox"/> Host a booth at a community event or one hosted by another community organizations.                                | <input type="checkbox"/> Use early care, education or service enrollment as an opportunity for parents to learn about parent involvement and leadership role opportunities. |
| <input type="checkbox"/> Use consumer satisfaction or feedback surveys to inquire about interest in a leadership role.                      | <input type="checkbox"/> Provide orientation sessions to program services and make opportunities for parent involvement and leadership opportunities clear and inviting.    |
| <input type="checkbox"/> Ask providers or teachers to nominate parents or families.   | <input type="checkbox"/> Connect to grassroots organizations that promote citizen and parent involvement.   |
| <input type="checkbox"/> Ask community organizations, such as churches, civic groups, or social clubs to post notices or nominate families. |   |

**Adapted from:**

Jeppson, E. S., & Thomas, J. (1995). *Essential allies: Families as advisors*. Bethesda, MD: Institute for Family Centered Care.



# ANNOTATED RESOURCES

## BOOKS AND PRINT

### Communicating with Parents

(2000) RMC CORPORATION

This functional guide for use with program staff focuses on the concrete communication skills of listening and observing as well as speaking and writing that support successful partnerships with parents. From the perspective of program management, this guide can improve the opportunities for parents and staff to work effectively together on program planning and participation.

*U.S. Department of Health and Human Services, Head Start Bureau, Head Start Information and Publication Center 703-683-2878, 703-683-5769 (fax) or online at [www.headstartinfo.org](http://www.headstartinfo.org). (Single copy, free.)*

### Engaging Parents

(1995) RMC CORPORATION

The focus of this training guide is building a common vision for parent involvement, adapting parent involvement activities to make them more accessible and inviting to parents; using observation and listening skills to engage parents, and analyzing current parent involvement practices in order to identify program strengths and potential areas for improvement. The training guide can be adapted to other early care, education, and service organizations interested in parent involvement.

*U.S. Department of Health and Human Services, Head Start Bureau, Head Start Information and Publication Center 703-683-2878, 703-683-5769 (fax) or online at [www.headstartinfo.org](http://www.headstartinfo.org). (Single copy, free.)*

### Essential Allies: Families as Advisors

(1995) JEPSON, E. S. & THOMAS, J.

A practical how-to manual on involving families as consultants and advisors in policy and program planning with examples and descriptions of how hospitals, state agencies, community programs, and universities have fostered family-professional collaboration. Particular focus involves emphasis on involving families who have been traditionally underrepresented in policy-making activities. This text is appropriate for communities, administrators, families, and providers.

*Institute for Family-Centered Care, 7900 Wisconsin Avenue, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or online at [www.familycenteredcare.org](http://www.familycenteredcare.org) (\$15.00)*

### Parents Becoming Leaders: Getting Involved on Behalf of Children

(2003) WESTHEIMER, M.

This handbook tells the inspirational stories of seven parents who became advocates for children and provides insight and advice for parent advocates, those who wish to become advocates, and professionals who work with parents in the interests of children. This text is enlightening for families, administrators, and providers.

*Families and Work Institute, 267 Fifth Avenue, New York, NY, 10016 or online at [www.familiesandwork.org](http://www.familiesandwork.org). (\$7.00)*

### Putting Parent Engagement into Action: A Practical Guide

(2002) WILLIAMS, A.

This booklet shares concrete recommendations on promoting parent leadership, along with real life stories and personal testimonials showing the strategies in action, and is a revealing text for families, administrators, and providers.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or online at [www.familysupportamerica.org](http://www.familysupportamerica.org). (\$15.00)*

## C. Engaging Families in Leadership Roles

### Seven Lessons of Early Childhood Public Engagement

(2000) O'DONNELL, N.S. AND GALINSKY, E.

This paper describes recent early childhood public engagement efforts and outlines lessons for public engagement leaders. Part I defines public engagement and describes how national, state and local leaders have stimulated action that brings about change. Part II outlines seven key lessons that informed these efforts. Part III offers concrete tips for how a wide variety of community members—including families—can do something to promote the healthy development of our nation's youngest children.

*Families and Work Institute, 330 Seventh Avenue, 14th Floor, New York, NY 10001, 212-465-2044. 212-465-8637 (fax) or online at [www.familiesandwork.org](http://www.familiesandwork.org). (\$10.00)*

### ON-LINE RESOURCES

#### Engaging Families to Improve Achievement: Advice from the Research

(2002) SOUTHWEST EDUCATIONAL DEVELOPMENT LABORATORY

This tip sheet, developed from *A New Generation of Evidence: The Family is Critical to Student Achievement* by Anne T. Henderson and Nancy Berla and *A New Wave of Evidence: The Impact of School, Family and Community Connections on Student Achievement* by Anne T. Henderson and Karen L. Mapp, captures key findings of the research and a quick reference for promising practices. Full text available at [www.ncpie.org/pubs/AdviceEngagingFamilies.pdf](http://www.ncpie.org/pubs/AdviceEngagingFamilies.pdf)

#### Reaching All Families: Creating Family-Friendly Schools

(1996) U.S. DEPARTMENT OF EDUCATION'S PARTNERSHIP FOR FAMILY INVOLVEMENT IN EDUCATION

This text offers strategies that focus on ways school personnel can reach out and engage diverse families regarding school goals, programs, activities and procedures, and parent involvement. Full text available at [www.ed.gov/pubs/ReachFam/](http://www.ed.gov/pubs/ReachFam/)

### Speak Up! Engaging Policymakers with Educators and Communities in Deliberative Dialogue

(1999) GUZMAN, J. AND POLLARD, J.

This issue of *Insights on Education Policy, Practice, and Research* focuses on the use of deliberative dialogue as a process for engaging all partners—including families—in discussion, decision making, and planning. It defines deliberative dialogue, cites resources for deliberative dialogue models, and highlights implementation issues in the context of education. This text is useful to community leaders, administrators, providers, families, family advocates, and policy makers. Full text available at [www.sedl.org/policy/insights/oct99/insights09.pdf](http://www.sedl.org/policy/insights/oct99/insights09.pdf)

*Insights on Education Policy, Practice, and Research, Southwest Educational Development Laboratory, 211 East Seventh Street, Austin, TX 78701, 512-476-6861, [www.sedl.org](http://www.sedl.org).*

### WEBSITES

#### Intercultural Development Research Association

[www.idra.org](http://www.idra.org)

IDRA is an independent, non-profit organization that advocates the right of every child to a quality education. For almost 30 years, IDRA has worked for excellence and equity in education in Texas and across the United States. IDRA conducts research and development activities; creates, implements and administers innovative education programs; and provides teacher, administrator, and parent training and technical assistance. Three on-line tools include: *Community Engagement-Review and Planning Guide*; *Improving Educational Impact through Family Engagement—A Review and Planning Guide*; and *Family and Community Engagement Survey*.

### **National Coalition for Parent Involvement in Education**

*www.ncpie.org*

NCPIE's mission is to advocate the involvement of parents and families in their children's education, and to foster relationships between home, school, and community to enhance the education of all our nation's young people. The coalition seeks to serve as a representative for a strong parent and family involvement initiatives at the national level; to conduct activities to increase family involvement; and to provide resources and legislative information that can help member organizations promote parent and family involvement.

### **Parent Leadership Associates**

*www.plassociates.org*

Parent Leadership Associates is a collaboration between the Prichard Committee for Academic Excellence and KSA—Plus Communications. Their mission is to improve student achievement by engaging parents to become decision-making partners in public schools through on-site consulting technical support, workshops, conferences, and materials.

### **Southwest Educational Development Laboratory**

*www.sedl.org*

The Southwest Educational Development Laboratory (SEDL) is a private, not-for-profit education research and development corporation based in Austin, Texas. SEDL works with educators, parents, community members, and policymakers to build or find strategies and tools addressing pressing educational problems and improve education for all students. SEDL uses “deliberative dialogue” to refer to the small-group practice of exploring a particular issue by calling on the experiences, perspectives, and knowledge of group members toward a shared understanding of the issue. This site offers multiple resources related to engagement, community building, and education.

### **The Right Question Project**

*www.rightquestion.org*

The Right Question Project, Inc. (RQP), a nonprofit organization based in Cambridge, Massachusetts, USA, offers an effective, easy-to-use educational strategy and a clear vision of how to build a more democratic society through engaging each citizen on all levels. The work of RQP impacts the lives of low and moderate-income families who come into regular contact with public schools, welfare agencies, the health care system, housing programs, homeless shelters, job training centers and many other publicly supported agencies, programs and institutions. This site describes an educational strategy that teaches people the skill of formulating their own questions, and helps them focus effectively on key decisions made by public institutions that affect them. Resources and links related to advocacy and parent leadership are also highlighted.

# Parent Preparation for Parent Involvement in Leadership Roles

## OVERVIEW OF THE ISSUE

There are many myths about leadership and those who have leadership roles. Many assume that leaders are those who are in charge or have authority by virtue of their position. Others assume that leaders are those who have advanced degrees or training. In fact everyone can have leadership qualities, exhibit leadership behaviors, and take on leadership roles (Kouzes & Pozner, 1997). Parents have opportunities as leaders to strengthen their own decision-making skills; to apply themselves to making a difference in their child's readiness for school; and to participate in community efforts to improve services for all young children and families.

Many parents need encouragement to view themselves as decision makers and leaders. There may be reluctance to perceive and identify personal strengths, express views and opinions, and take on more formal leadership roles. Parents have their own "readiness" to consider as well as the readiness of the service, early care or education providers and systems to view and value parents as decision makers and leaders. In service systems where parent involvement is highly valued, parent leadership may be more approachable. In Head Start and Early Head Start, for example, parents are encouraged to participate in all decisions for their child and their personal development goals, decisions related to program design and delivery, and decisions related to program governance. Focused philosophy, policy, and active attention to parent personal development; opportunities to "practice" leadership skills; formal roles in program policy and governance; and appropriate parent training and preparation have supported Head Start parents as leaders (Research Assessment Management, Inc., 1996).

Parents have been encouraged and supported as leaders in other service systems as well. Lessons learned from families and systems that care for children with special health care needs or disabilities portray the value of parents as decision makers; parental voices to focus attention on quality of care and motivators for change; and parents as leaders in system change. Parents as advisors, advocates, and leaders have resulted in family-centered care, individualized services, inclusive schools, community- and home-based services, and parent-to-parent support systems (Jeppson & Thomas, 1995). For young children, parents as leaders have influenced a number of service systems that influence school readiness—and are continuing to find their voice and role as leaders in school reform and school readiness initiatives (Henderson & Mapp, 2002).

In *Essential allies: Families as advisors*, Jeppson and Thomas (1995) highlight key issues in parent and system “readiness” to support and prepare parents for leadership roles. Parents and families might need additional support in building partnerships and sharing leadership roles with providers because they may

- Come from a culture and past experience that impacts their perception, interest, and willingness to take on leadership roles;
- Be unaccustomed to working collaboratively with providers or professionals except in relation to their own child;
- May have doubts about the value and influence of their personal experience beyond their own family;
- Perceive leadership capacity as restricted to those with a specific level of education or experience;
- Have intense emotions related to their personal experience and limited comfort with sharing their personal story;
- Have difficulty shifting from an “adversarial” position as an outspoken advocate to aligning in partnership with providers;
- Be concerned about being a “token” parent without a meaningful or substantive role;
- Have experienced systems that lack opportunities for family involvement or only offer limited roles and expectations;
- Be concerned about commitment of time, resources, and available logistical and practical support; and
- Feel unprepared for collaboration and leadership roles.

## PREPARATION THROUGH TRAINING

Leadership training can take many forms, involve various commitments of time and effort, and focus on broad and/or specific conceptual and skills development. Leadership training topics for parents and professionals alike may include personal values; personal vision; leadership attributes, behaviors, and skills; group process; shared vision; decision making; setting goals and objectives; conflict resolution; and advocacy (Communities Can!, 2003). In process, training should be based on adult learning principles and include various modes of delivery and experience; such as presentation, reading, group exercises, personal sharing, practical application, and reflection. Parent leadership training should also provide written materials that are easily understood and culturally and linguistically competent. Training resources or opportunities should be reviewed with these considerations in mind.

## STRATEGIES FOR TRAINING AND SUPPORTING FAMILIES

Training can be offered by one agency or program, or on a broader scale through local, regional, or state-wide initiatives. Some services systems—such as Early Intervention, Disabilities, Children’s Mental Health, and Head Start—have incorporated parent training and leadership skills development and opportunities for experience into the context of their service system implementation. In addition to workshops or training events focused on leadership, they have established parent support systems, such as

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formal parent organizations, parent-to-parent support, mentoring strategies, and active advocacy groups. Advocacy organizations at the national, state, and local community level that may have broader, less “single system” based training opportunities also offer formal parent leadership training opportunities. Henderson and Mapp (2002) highlight studies of community organizing efforts related to school reform and their focus on leadership development, partnership, collaboration, and shared decision making. Some of the partnership and leadership training opportunities affiliated with these and other child and family advocacy efforts may offer skill building that can be utilized across and within systems that serve young children and their families.

### PROMISING PRACTICE

#### Maryland

#### *Maryland Parent Leadership Institute—Raising Student Achievement through Parent Involvement and Leadership*

Maryland public schools have been actively engaged in the continuous improvement process for more than a decade. Raising student achievement through higher expectations and a more challenging curriculum has resulted in meaningful accomplishments (increased test scores and improved attendance) in nearly all schools. The schools demonstrating the greatest improvement in student achievement have a high level of parent, family and community involvement.

In order to build upon this “lesson learned”, supported by current research on parent involvement and student achievement, Maryland public schools are investing in equipping parents to navigate the unique institutional structures of public schools; fully participate in the decision-making process; and become involved and contributing stakeholders to discussions and planning sessions as equal partners. Every parent has a leadership role to play in their children’s education, including those families in the early childhood community. Parents are their child’s first and best teacher and critically affect the fundamentals of early learning, school readiness and success in school. The skills and empowerment parents will gain from the Institute will enable them to be active and effective leaders, ensuring strong involvement before and after their child’s enrollment in a public school. The overall goal is to ‘leave no parent behind’.

Maryland Public School’s Parent Leadership Institute (PLI), administered by The Family Works, Maryland Parent Information Resources Center, provides leadership training to parents, enabling them to use leadership skills in a variety of decision-making settings. Parents become adept at navigating the policies and practices of educational institutions for the benefit of their children. The skills they learn will be as useful in the workplace and

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## MARYLAND PARENT LEADERSHIP INSTITUTE CONTINUED

community, as they will be in the schools. The results identified for graduates of the Institute are:

- 1) Understanding of leadership styles and roles leaders play in educational organizations
- 2) Ability to apply leadership skills in response to a variety of situations and issues in organizational settings with the goal of improving student achievement
- 3) Knowledge of school and school system procedures, practices and processes for acquiring information and problem resolution
- 4) Ability to design and implement school-wide or district-wide practices that improve student achievement.
- 5) Confidence to play a meaningful and effective role in decision-making in schools and the community at-large
- 6) Ability to interpret data and assess results
- 7) Ability to reach out to under-involved parents to improve student achievement

School-based issues are addressed with a focus on appropriate use of leadership skills in a real-life context. As part of the leadership training, participants collaborate with their school and/or district to implement a project designed to improve student achievement as part of a two-year commitment. Following the six-day training program (three weekends), parents become part of a network designed to provide on-going consultation and support to the schools. Additionally, Institute graduates will be part of a mentorship/support network, supported by PLI staff, which will provide follow-up sessions focusing on problem solving and continuous improvement.

For more information, contact Barbara Gimperling at 301-840-3192 or [gimperlingb@familyservicesagency.org](mailto:gimperlingb@familyservicesagency.org)

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### Critical Questions for Communities

- *What core competencies in partnership, leadership, and shared decision-making are desirable for parents and caregivers of young children?*
- *Are there state level initiatives or service systems that offer leadership training for parents and caregivers?*
- *What general resources, such as community colleges, universities, or special health care providers within our community offer leadership training for parents and caregivers?*
- *What service systems or direct service providers within our community offer leadership training for parents and caregivers?*
- *What professional, parent, advocacy, or community development organizations available to our community offer leadership training and experience?*
- *Which or what combination of these resources provide the best “fit” with our interests in supporting partnerships and leadership related to services for young children and families and school readiness?*
- *What resources are available in our community to support any training activities, including funding, space, materials, faculty, etc?*
- *What agencies and organizations within our community have a strong parent-provider partnership model and approach, including shared leadership?*
- *How might others learn from these agencies and organizations?*
- *What experiential opportunities and continuous learning strategies might support parent and caregiver leadership development in our community?*

# Key Strategies for Families, Providers, and Administrators

## What Families Can Do:

- Engage in opportunities for parent involvement, including partnering with providers, taking leadership roles, and encouraging other parents.
- Participate in parent-provider partnership and leadership training activities.
- Act as a co-trainer in parent-provider partnership and shared leadership training activities.

## What Providers Can Do:

- Value parents as partners and leaders and take opportunities to include parents.
- Participate in training to support partnership and shared leadership.
- Become a co-facilitator or co-trainer in parent-provider partnership and shared leadership training activities.

## What Administrators Can Do:

- Model partnership and shared leadership through agency policy and practice.
- Encourage opportunities for parent-provider partnership and leadership roles for both.
- Identify opportunities and provide resources and support for training and continuous improvement.

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## Key Questions for Parent Leadership Training Selection

Communities, organizations, or agencies considering a program to support parent leadership should select a parent leadership training program that meets criteria determined by their specific goals. The following key questions can assist in this process.

### The Basics

- What is the lead agency or sponsoring organization for the training program?
- What are the philosophical foundation, values, and principles of this training program?
- What are the primary goals of the training program?
- Does the training program have a developed and replicable model curriculum?
- Who is the intended audience?
- Is there an established evidence base or independent evaluation data available on this program?

### Background and Development

- Were parents involved in the development of the training program?
- Were any community organizations or groups involved in this program's development?
- Has the training program been used successfully in communities outside its community of origin?
- Has the training program been used in communities with culturally and linguistically diverse communities?

### Content and Learning Process

- What are the key content areas of the training?
- Are there different levels of training? Are they separate or sequential?
- Are the materials accessible, written for all levels of readers, and easy to use?
- Are the materials available in languages other than English?
- Can the training be modified to fit the unique needs of a community?
- What training approaches are used in this training? Are they based on adult learning principles?
- Does the program include follow-up activities or continuing support after the formal training?
- Does the training emphasize putting learning into practice through a community project activity for participants?
- Is the training a certificate program or can the training be eligible for college credits?

*Continued*

*Key Questions for Parent Leadership Training Selection Continued*

**Trainers**

- What are the trainer requirements (education, preparation, number of trainers, etc.)?
- Must trainers from the program deliver the training or is there a training-of-trainers opportunity?
- What training is required in the training-of-trainers preparation? What follow-up, certification, or certification renewal are involved?

**Participants**

- Who is the intended audience?
- What is the recommended number of participants for a training event?
- How long is the training: single session/total length/follow-up activities?

**Set-Up and Logistics**

- What are the ideal training location, space, or set-up requirements?
- What are the audio-visual requirements?
- Must materials be ordered or can they be reproduced for the training?

**Outcomes and Evaluation**

- What are the intended outcomes for training participants?
- How are they measured?
- What evaluation information, data, or independent assessment of this program is available? Is there an evidence base?
- What technical support (forms, data tracking, analysis) is available for evaluation?
- What community resources are required for evaluation?

**Adapted from:**

Council for Civic Parent Leadership, Family Support America, and Minnesota Parenting Association. (1999). *Parent leadership database*. Retrieved January 21, 2004, from the Council for Civic Parent Leadership Web site: <http://parentleadership.org/history.html>

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## ANNOTATED RESOURCES

## BOOKS AND PRINT

**Essential Allies: Families as Advisors**

(1995) JEPSON, E.S. AND THOMAS, J.

A practical how-to manual on involving families as consultants and advisors in policy and program planning with examples and descriptions of how hospitals, state agencies, community programs, and universities have fostered family-professional collaboration. Particular focus involves emphasis on involving families who have been traditionally underrepresented in policy making activities. This text is appropriate for communities, administrators, families, and providers.

*Institute for Family-Centered Care, 7900 Wisconsin Avenue, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or [www.familycenteredcare.org](http://www.familycenteredcare.org) (\$15.00)*

**Families as Advisors: A Training Guide for Collaboration**

(1997) INSTITUTE FOR FAMILY-CENTERED CARE

This companion to *Essential allies: Families as advisors* is a practical step by step guide for conducting training session appropriate for both families and providers to increase the involvement of families serving in advisory roles. Includes read-to-copy handouts and overhead transparency masters.

*Institute for Family-Centered Care, 7900 Wisconsin Ave, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or [www.familycenteredcare.org](http://www.familycenteredcare.org). (\$10.00)*

**Linking Our Voices**

(1996) HEAD START BUREAU

This videotape-based program is designed to prepare current and prospective parents and community representatives to be effective Policy Council members. It can be used to increase the knowledge and skills of Policy Council members and to influence participants' attitudes and behavior toward being a Policy Council member. The materials can be used with other interested groups such as Head Start staff, members of governing bodies, and community groups. The training package includes a videotape, a facilitator's manual, a set of participant workshop materials, and a set of overheads to make transparencies. The workshops are designed to follow the viewing of the video and are based on

real stories of representative Policy Council members. The videotape is close-captioned.

*Administration for Children and Families, Head Start Bureau, Head Start Information and Publications Center, Order Fulfillment Department, P.O. Box 26417, Alexandria, VA 22313-0417, (703)683-2878, (703)683-5769 (fax), or [www.headstartinfo.org](http://www.headstartinfo.org). (Single copy free)*

**Making A Difference: A Parent's Guide to Advocacy and Community Action**

(2000) CHARNOV, D. J. AND RUTSCH, C.

This handbook provides practical advice to help parents become effective advocates in their schools and their communities. "How-to" strategies help parents improve services for their children and their family. Step-by-step directions and real-life stories of successful advocates are interwoven to guide readers through the process of advocacy.

*Children's Resources International, Inc. 5039 Connecticut Avenue, NW, Suite One, Washington DC, 2008 202-363-9002, 202-363-9550 (fax) or [www.childrensresources.org](http://www.childrensresources.org). (\$15.95)*

**Making Room at the Table: Fostering Family Involvement in the Planning and Governance of Formal Support Systems.**

(1997) JEPSON, E.S., THOMAS, J., MARKWARD, A., KELLY, JOANNE, KOSER, G., AND DIEHL, D.

Family support relies on families getting involved not just as recipients of services, but as shapers of services and the systems that they are a part of. With this three-hour program of guided activities, families, program planners, staff, policymakers, and other key players develop the awareness and skills they'll need to work as a team in planning services and carrying out programs. Packed with overheads and charts, this easy-to-follow guide walks the facilitator through a session appropriate for in-service, pre-service training, workshop, or other learning environment.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or online at [www.familysupportamerica.org](http://www.familysupportamerica.org). (\$20.63)*



### Parent Leadership Development: Building Strong Voices for Children

(2002) WESLEY, P. AND BUYSE, V.

The Parent Leadership Development Facilitator Guide and the accompanying Participant Notebook and overheads were developed by The Parent Leadership Development Project to provide leadership training and support to parents of young children with disabilities (birth to 5 years). The intent of the project and the training is to prepare families to be effective leaders in early intervention in order to promote early intervention services that are family centered, inclusive, and culturally sensitive. In addition, the training responds to parents' need for information about local, state, and national resources and can assist professional groups in increasing parent representation and leadership throughout the early intervention system.

*University of North Carolina at Chapel Hill, Frank Porter Graham Child Development Institute, Parent Leadership Development Project, Chapel Hill, NC. Available through FPG Publications Office 919-966-4221 or online at [pubs@mail.fpg.unc.edu](mailto:pubs@mail.fpg.unc.edu). (\$75.00 per set, additional Participant Notebooks, \$10.00 each)*

### Parents as Policy-Makers: A Handbook for Effective Participation

(1994) HUNTER, R.

The purpose of this manual is to provide parents and other family members of children with emotional disorders some practical ideas and tools with which they can become effective partners with professional in the policy-making process. It provides assistance and guidance to parents and other family members who are members of state or local agency boards, advisory committees, or other formal decision-making bodies that are involved in shaping mental health services for children.

*Portland State University, Research and Training Center on Family Support and Children's Mental Health, Families in Action Project, P.O. Box 751, Portland, Oregon, 97201-0751, 503-725-4040 or online at [www.rtc.pdx.edu](http://www.rtc.pdx.edu). (\$7.25)*

### Partners in Decision Making, Head Start Training Guide

(2000) HEAD START BUREAU

This technical training guide helps staff and parents work together as a team while respecting each other's unique contribution to the group process and to the Head Start program. Specifically this guide focuses on creating a climate for decision making partnerships; building trusting relationships among team members; and decision making strategies. The text can be adapted to other programs serving young children and families.

*Administration for Children and Families, Head Start Bureau, Head Start Information and Publications Center, Order Fulfillment Department, P.O. Box 26417, Alexandria, VA 22313-0417, (703)683-2878, (703)683-5769 (fax), or online at [www.headstartinfo.org](http://www.headstartinfo.org). (Single copy free)*

### Telling Your Family Story...Parents as Presenters

(UNDATED) KING, S.

This 30-minute videotape and guide are intended to be used in helping family members and caregivers who have children with special needs enhance their presentation skills as they begin telling their family stories in order to share information, advocate for their child, or advocate for services and system change.

*University of Wisconsin, Waisman Center, Wisconsin Personnel Development Project, Parent Projects. Available from Child Development Media online at [www.childdevmedia.com](http://www.childdevmedia.com). (\$70.00)*

### The Parent Leadership Program Training Manual

(1992) BLOUGH, J., BROWN, P., DIETRICH, S., AND FORTUNE, L. B.

This well-tested curriculum for building family leadership is full of creative activities and exercises. Developed by the Parent Leadership Program in Michigan, this curriculum is easily adapted for many situations where parents can benefit from leadership training.

*Parent Leadership Program, The ARC of Michigan, 1325 South Washington Avenue, Suite 104, Lansing, MI 48910, 1-800-292-7851. Available from Institute for Family-Centered Care, 7900 Wisconsin Ave, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or online at [www.familycenteredcare.org](http://www.familycenteredcare.org). (\$20.00)*

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### Words of Advice: A Guidebook for Families Serving as Advisors

(1997) THOMAS, J. AND JEPSON, E.

This companion to *Essential allies: Families as advisors* is a workbook for families who are new to advisory roles. It contains many self-assessment tools and exercises to help families identify their skills and interests. Includes “words of advice” from experienced families serving in advisory roles.

*Institute for Family-Centered Care, 7900 Wisconsin Ave, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or online at [www.familycenteredcare.org](http://www.familycenteredcare.org). (\$10.00)*

### ON-LINE RESOURCES

#### Making Your Case

(2004) PARTNERS IN POLICY MAKING

This three-hour, self-directed on-line course is one of two courses available to graduates of the Partners in Policymaking training to supplement their learning. It focuses on how to communicate with public officials by effectively telling your personal story, writing a letter, providing testimony, and communicating in positive ways.

For a preview and registration go to [www.partnersinpolicymaking.com/makingyourcase](http://www.partnersinpolicymaking.com/makingyourcase)

*Partners in Policy Making, Minnesota Governor's Council on Developmental Disabilities E-Learning Courses, 370 Centennial Office Building, 658 Cedar Street, St. Paul, Minnesota 55155, [www.partnersinpolicymaking.com](http://www.partnersinpolicymaking.com). (\$30.00, each course)*

#### Parent Leadership Database

(1999) COUNCIL FOR CIVIC PARENT LEADERSHIP, FAMILY SUPPORT AMERICA, AND MINNESOTA PARENTING ASSOCIATION.

This collaborative project identified criteria that would organize and evaluate parent leadership training models available nationally. The result was a matrix of training modules with details about each training, the content, audience, history, and other considerations. This resource is valuable to community planners, administrators, trainers, and family advocates. Full text available at [www.parentleadership.org](http://www.parentleadership.org).

### WEBSITES

#### Family Support America

[www.familysupportamerica.org](http://www.familysupportamerica.org)

Family Support America, formerly Family Resource Coalition of America, promotes family support as the nationally recognized movement to strengthen and support families, and places the principles of family support practice at the heart of every setting in which children and families are present. This site includes information related to technical assistance, training and education, conferences, publications, and other resources related to family support and promoting the voice of families—see especially, the Shared Leadership Series.

#### Head Start Bureau

[www.acf.dhhs.gov/programs/hsb/](http://www.acf.dhhs.gov/programs/hsb/)

The main website for Head Start and Early Head Start offers information about comprehensive child development programs that serve children from birth to age 5, pregnant women, and their families. Information includes policy, regulations, and resources related to every aspect of child-focused programs with the overall goal of increasing the school readiness of young children in low-income families and a cornerstone of parent involvement and shared-decision making. A link to the Head Start Information and Publication Center provides access to the information clearinghouse and archive that supports the Head Start community and other organizations working in the interest of children and families by providing information products and services; conference and meeting support; publication distribution; and marketing and outreach efforts.

#### Parent Leadership Associates

[www.plassociates.org](http://www.plassociates.org)

Parent Leadership Associates is a collaboration between the Prichard Committee for Academic Excellence and KSA—Plus Communications. Their mission is to improve student achievement by engaging parents to become decision-making partners in public schools through on-site consulting technical support, workshops, conferences, and materials.

**Parent Leadership Training Institute**

[www.ctprevention.com/act/plti.html](http://www.ctprevention.com/act/plti.html)

The PLTI seeks to enable parents to become leading advocates for children. The curriculum teaches parents who wish to improve the lifelong health, safety and learning of children, to become change agents for the next generation. The goals of the training are to enhance the capacity of parents as change agents for children; increase a parent's capacity to champion community efforts at the local, regional and state levels; and increase the quality of children's programs and parent interactions with program and policy leaders.

**Partners in Policymaking**

[www.partnersinpolicymaking](http://www.partnersinpolicymaking)

Partners in Policymaking was created in Minnesota by the Governor's Council on Developmental Disabilities in 1987. Partners is an innovative, competency based leadership training program for adults with disabilities and parents of young children with developmental disabilities. The purpose of the program is twofold: To teach best practices in disability, and the competencies of influencing public officials. This website offers information about the training, a replication packet, resources, and links related to policy, advocacy, and disabilities.

**The Federation of Families for Children's Mental Health**

[www.ffcmb.org](http://www.ffcmb.org)

The Federation is a nationwide advocacy organization for families and youth with mental health needs. With state and local chapters, the Federation provides opportunities for families around the country to link with each other, increase their knowledge about the political processes, and build their effectiveness at the local state, and national policy levels. Of particular note is their training initiative focused on family involvement in evaluation titled The World of Evaluation. This three-part training curriculum for family members provides the information, skills, tools, and strategies necessary to use research and evaluation information to advocate for individuals and for system change.

# E Provider and Professional Preparation for Partnerships and Collaborative Leadership with Parents

## OVERVIEW OF THE ISSUE

For providers and professionals serving young children and their families, engaging parents as decision makers requires dual understanding of the practices of partnership and leadership. Professional preparation for both of these concepts and the practice implications of each is uneven at best.

Although much progress has been made in the practice of including parents as partners, there is much yet to be done. Professional attitudes and education can make providers and professionals reluctant to engage in partnerships and collaborative efforts with families. While parent involvement is generally at higher levels in early care and education and special education than later years in elementary school and beyond (National PTA, 2003), barriers to true partnerships can still remain. According to Jeppson and Thomas (1995), professionals and providers might need additional support in building partnerships with parents because they may

- Lack training in partnership relationships with parents and have been cautioned against “over-involvement” with their patient, clients, or families with whom they work;
- Have been taught that they are the “experts”;
- Believe that part of helping families is to limit the “burdens” on families and that “helping” families means reducing demands on their time and energy;
- Perceive family input as criticism and feel unappreciated;
- Anticipate the family’s involved at the program and policy level may make unreasonable demands; and
- Believe that their current methods of gathering family input, such as consumer feedback, surveys, or focus groups, is adequate.

Provider and professional preparation and education must include a more focused and in-depth approach to learning how providers and parents can work together and maximize benefits to young children and families. Coursework and class experience in professional preparation of teachers, for example, can enhance attitudes and provide knowledge and skills to foster effective family involvement and partnerships (Morris et al., 1996; Shartrand et al., 1997). Once in the school setting however, teacher preservice education alone does not provide extensive opportunities to develop the skills needed to communicate with and engage parents. Therefore, schools must create an environment where teacher input on implementation of parent involvement strategies is sought out and encouraged (Caplan et al., 1997). The preparation and practice gap in the area of collaborative leadership may be even greater.

Providers and professionals are seldom schooled in qualities of leadership and leadership practices with the possible exception of those in or seeking management positions. This restricted exposure supports the myth that leaders are those who are in charge or have authority by virtue of their position or training and limits understanding of individual leadership capacity as well as the concept of shared leadership. In addition, many collaborative leadership models are focused on the internal school, agency, or organization management team—that may or may not include consumer or parent representation. In considering preparation for collaborative leadership with parents, it is important to realize that everyone has leadership qualities, can exhibit leadership behaviors, and take on leadership roles (Kouzes & Pozner, 1997) and that collaborative leadership can extend beyond the management team to include consumers and families. Through appropriate preparation, providers have opportunities to strengthen their own partnership skills; to recognize parent leaders; to recognize themselves as leaders; to reframe their work to make a difference in each child’s readiness for school; and to share responsibility for community efforts to improve services for all young children and families.

In *Essential allies: Families as advisors*, Jeppson and Thomas (1995) highlight key issues in providers and system “readiness” to support and prepare themselves for parents in leadership roles and collaborative leadership. These include:

- Organization, agency, or service system commitment to the idea of families as advisors, advocates, leaders, and decision makers and believe that family participation is essential;
- An expanded definition of successful family involvement and a broad view of the roles that families can have in shaping policies and practices;
- Providers (early care, education, health, etc.) who are alert to opportunities to include families and who seek and promote family involvement;
- Innovative ways to identify and recruit families that also begin the trust building process and understanding of potential new roles and expectations;
- Providing training and support to both families and providers that can help build the partnership essential to shared leadership;
- Addressing logistical barriers comprehensively and creatively so that families may participate without the burden of cost or inconvenience; and
- Recognizing the passion of personal experience for parents who are willing to be advisors and be aware of the risks of parental burn out.

## E. Provider and Professional Preparation

### PREPARATION THROUGH TRAINING

Preparation for collaborative partnership, leadership training, and learning to encourage leadership in others can take many forms, involve various commitments of time and effort, and focus on broad and/or specific conceptual and skills development. Like the preparation of parents as leaders, leadership training topics for professionals may include personal values; personal vision; leadership attributes, behaviors, and skills; group process; shared vision; decision making; setting goals and objectives; conflict resolution; and advocacy (Communities Can!, 2003). In process, training should be based on adult learning principles and include various modes of delivery and experience; such as presentation, reading, group exercises, personal sharing, practical application, and reflection. Other useful approaches include peer-to-peer support, guidance, and mentoring as well as supervision. Training can be offered by one agency or program, or on a broader scale through local, regional, or state-wide initiatives. Leadership training should also provide written materials that are easily understood and culturally and linguistically competent. Training resources or opportunities may be reviewed with these considerations in mind.

### TRAINING OPPORTUNITIES AND STRATEGIES FOR PROVIDERS

Training opportunities may occur in the course of professional preparation and pre-service or in-service training. According to a summary of a survey completed by the National PTA (2003), most parent involvement preparation occurs in early childhood or special education courses; no state requires a separate course in parent involvement for teacher licensure; and only a minority of states includes parent involvement in their competency standards for teacher/administrators. This same report described encouraging signs that both the national associations that either accredit or set standards for teacher preparation programs, NCATE (National Council for Accreditation of Teacher Education) and NASDTEC (National Association of State Directors of Teacher Education and Certification), have added or strengthened indicators aimed at parent involvement. The National Board for Professional Teacher Standards has included parent involvement competencies in its standards as well. The report does not clarify the nature of the parent involvement content and the extent to which it focuses on parents as partners, decision makers, and leaders. Similar efforts to prepare other types of services providers could contribute to a more holistic or cross system approach to parent involvement in support of school readiness. Some of these other service systems, family support, special health care, services to children with disabilities, and early care and education (e.g., Head Start, have implemented partnership, shared decision making, and leadership training opportunities that may be adapted for all those who provide services to and develop partnerships with parents of young children.



## Critical Questions for Communities

- *What core competencies in family-centered care, partnership with parents, and shared leadership are desirable for providers who serve young children and families?*
- *Are there state level initiatives or service systems that offer family-centered care, partnership, or shared leadership training for providers?*
- *What general resources, such as community colleges, universities, or special health care providers within our community offer these types of training for providers?*
- *What service systems or direct service providers within our community offer these types of training for parents and or providers?*
- *What professional, parent, advocacy, or community development organizations available to our community offer these types of training and experience?*
- *Which or what combination of these resources provide the best “fit” with our interests in supporting partnerships and shared leadership related to services for young children and families and school readiness?*
- *What resources are available in our community to support any training activities, including funding, space, materials, faculty, etc?*
- *What agencies and organizations within our community have a strong parent-provider partnership model and approach, including shared leadership?*
- *How might others learn from these agencies and organizations?*
- *What experiential opportunities and continuous learning strategies might support parent and professional partnership and leadership development in our community?*

## E. Provider and Professional Preparation

### Key Strategies for Families, Providers, and Administrators

#### What Families Can Do:

- Engage in opportunities for parent involvement, including partnering with providers, taking leadership roles, and encouraging other parents.
- Participate in parent-provider partnership and leadership training activities.
- Act as a co-trainer in parent-provider partnership and shared leadership training activities.

#### What Providers Can Do:

- Value parents as partners and leaders and take opportunities to include parents.
- Participate in training to support partnership and shared leadership.

- Become a co-facilitator or co-trainer in parent-provider partnership and shared leadership training activities.

#### What Administrators Can Do:

- Model partnership and shared leadership through agency policy and practice.
- Encourage opportunities for parent-provider partnership and leadership roles for both.
- Identify opportunities and provide resources and support for training and continuous improvement.

## Provider Self-Assessment for Parent-Professional Partnerships

Parents and professionals must work in partnership to support the development of young children and their readiness for school. Practicing partnership requires professionals to commit to the values and principles of family-centered care, collaborating with parents, and reflecting on their own practices. Providers may find the following self-assessment statements useful.

A	S	R	PARENT-PROFESSIONAL PARTNERSHIP
			I assume that all parents want to do their best for their children and can make important contributions to their children's school readiness
			I really believe that parents are equal to me as a professional and, in fact, are experts on their child.
			I consistently value the comments and insights of parents and make use of their knowledge about their child.
			I listen to parents, communicating with words, eye contact and posture that I respect and value their insights.
			I work to create an environment in which parents are comfortable enough to speak and interact.
			I strive to achieve cultural and linguistic competence and understand how culture and language influence each child, parent, and family.
			I speak plainly, avoiding jargon and making sure I am clear by inviting questions or getting feedback.
			I make a consistent effort to consider the child as part of a family, consulting parents about the important people in the child's life and their roles and relationships.
			I make every effort to build on the strengths of parents and families and actively seek their perspective and input on any goals, recommendations, education and intervention plans.
			I see my interactions with parents as a deliberate dialogue through which the goal is mutual understanding of a problem so that we can take action as a team.
			I share information completely and freely so that parents can be fully informed and participate in decision-making.
			I value and encourage parents to take on leadership roles in order to expand their influence in my organization or practice.
			I view parents as allies with concerns for children as valuable as my own.

A = ALWAYS, S = SOMETIMES, R = RARELY

**Adapted from:**

Borden, J. R., & Finde, G. Z. (1995). *Parent/professional collaboration: The current reality and challenges for the future*. New Hampshire Family Voices.

## E. Provider and Professional Preparation

### ANNOTATED RESOURCES

#### BOOKS AND PRINT

##### **Building Parent/Professional Collaboration: Facilitator's Guide**

(1992) KENNEDY KRIEGER INSTITUTE

This training program is one in a series (Train the Trainer Series in Family-Centered Service Delivery) designed to address key issues in family-centered care. This particular resource is designed for sessions in which both parents and professionals are participating. The overall format is specific and detailed in outlining the "how to's" and offers all materials necessary for each of nine content area activities.

*Kennedy Krieger Institute, Training and Products Division, 7000 Tudsbury Road, Baltimore, MD 21244, 410-298-9286, 410-298-9288 (fax) or online at [www.kennedykrieger.org](http://www.kennedykrieger.org) (\$20.00)*

##### **Essential Allies: Families as Advisors**

(1995) JEPSON, E.S. AND THOMAS, J.

A practical how-to manual on involving families as consultants and advisors in policy and program planning with examples and descriptions of how hospitals, state agencies, community programs, and universities have fostered family-professional collaboration. Particular focus involves emphasis on involving families who have been traditionally underrepresented in policy making activities. This text is appropriate for communities, administrators, families, and providers.

*Institute for Family-Centered Care, 7900 Wisconsin Avenue, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or [www.familycenteredcare.org](http://www.familycenteredcare.org) (\$15.00)*

##### **Families as Advisors: A Training Guide for Collaboration**

(1997) INSTITUTE FOR FAMILY-CENTERED CARE

This companion to *Essential allies: Families as advisors* is a practical step-by-step guide for conducting training session appropriate for both families and providers to increase the involvement of families serving in advisory roles. Includes read-to-copy handouts and overhead transparency masters.

*Institute for Family-Centered Care, 7900 Wisconsin Ave, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or online at [www.familycenteredcare.org](http://www.familycenteredcare.org) (\$10.00)*

##### **Family-Centered Communication Skills: Facilitator's Guide**

(1992) KENNEDY KRIEGER INSTITUTE

This program uses a variety of activities to explore the benefits of and challenges to family-centered communication. Participants review and practice useful strategies and techniques for enhancing communication among service providers and family members.

*Kennedy Krieger Institute, Training and Products Division, 7000 Tudsbury Road, Baltimore, MD 21244, 410-298-9286, 410-298-9288 (fax) or online at [www.kennedykrieger.org](http://www.kennedykrieger.org) (\$20.00)*

##### **Family/Professional Partnerships: Moving Forward Together**

(2000, SECOND PRINTING) ADAMS, J., BISS, C., BURRELL MOHAMMAD, V., MEYERS, J., AND SLATON, E.

This monograph, is a work in progress reflecting an on-going dialogue between professionals and family advocates on issues of power, empowerment, interdependence, mutuality, and reciprocity. This document resulted from a partnership among four national technical assistance organizations that are working to develop peer-to-peer technical assistance in the building of comprehensive community systems of care for children and their families. Six chapters present research and commentary on issues related to a systems approach to family/professional partnership.

*Peer Technical Assistance Network, Partnership for Children's Mental Health. Federation of Families for Children's Mental Health, 1101 King Street, Suite 420, Alexandria, VA 22314, 730-684-7710 or the National Technical Assistance Center for Children's Mental Health, Publications Manager, 202-687-5000. (\$5.00)*

##### **Head Start Handbook of the Parent Involvement Vision and Strategies**

(1996) RESEARCH ASSESSMENT MANAGEMENT, INC.

This handbook is based on the premise that Head Start programs must establish and sustain a relationship with every family in the program. The first part contains a statement of vision, values and opportunities and discusses each element of the vision statement in detail, incorporating relevant program performance standards. The second part presents parent involvement strategies the programs can use to carry out the vision statement. The handbook

contains action steps, activities and tips for implementing the strategies described.

*Administration for Children and Families, Head Start Bureau 330 C Street, SW, Washington, DC 20201. Available from the Head Start Information and Publications Center, Order Fulfillment Department, P.O. Box 26417, Alexandria, VA 22313-0417, (703)683-2878, (703)683-5769 (fax), or online at [www.headstartinfo.org](http://www.headstartinfo.org) (single copy, free)*

### **Infant Toddler Caregiving: A Guide to Creating Partnerships with Parents**

(1996) THE CENTER FOR CHILD AND FAMILY STUDIES  
This guide is rich in practical guidelines and suggestions for ways to establish and nurture the partnership between caregivers and families of infants and toddlers in child care. Special attention is given to bonding and separation, family stress, and cultural differences. Audiences would include early care and education providers, social services agencies, and professional developers.

*WestEd/Far West Laboratory, San Francisco, California Department of Education, Sacramento, CA (916) 445-1260. (\$12.50)*

### **Learning to Be Partners: An Introductory Training Program for Family Support Staff**

(1997) POOLEY, L.E., WORATSCHEK, F., WILLIAMS, J., AND ANDERSON, J.

This ready-to-use training program contains a week's worth of activities, handouts, discussion ideas, and mini-lectures to help staff begin to develop the skills and knowledge they need to act as true partners with families. Written by a team of seasoned practitioners, trainers, and researchers, the curriculum uses group experience rather than "classroom" learning, active participation, hands-on practice, and peer interaction and sharing. With this detailed road map, the trainer can guide staffs that are new to family support through a validating and supportive training experience. Training incorporates Our Families, Our Future videotape.

*Family Support America, Center for Assessment and Policy Development, and University of Pittsburgh Office of Child Development. Available at online at [www.amazon.com](http://www.amazon.com). (\$25.00)*

### **Making Room at the Table: Fostering Family Involvement in the planning and Governance of Formal Support Systems.**

(1997) JEPSON, E.S. AND THOMAS, J.

Family support relies on families getting involved not just as recipients of services, but as shapers of services and the systems that they are a part of. With this three-hour program of guided activities, families, program planners, staff, policymakers, and other key players develop the awareness and skills they'll need to work as a team in planning services and carrying out programs. Packed with overheads and charts, this easy-to-follow guide walks the facilitator through a session appropriate for in-service, pre-service training, workshop, or other learning environment.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or online at [www.familysupportamerica.org](http://www.familysupportamerica.org) (\$20.63)*

### **Parent Leadership Development: Building Strong Voices for Children**

(2002) WESLEY, P. AND BUYSSSE, V.

The Parent Leadership Development Facilitator Guide and the accompanying Participant Notebook and overheads were developed by The Parent Leadership Development Project to provide leadership training and support to parents of young children with disabilities (birth to 5 years). The intent of the project and the training is to prepare families to be effective leaders in early intervention in order to promote early intervention services that are family centered, inclusive, and culturally sensitive. In addition, the training responds to parents' need for information about local, state, and national resources and can assist professional groups in increasing parent representation and leadership throughout the early intervention system.

*The University of North Carolina at Chapel Hill, Frank Porter Graham Child Development Institute, Parent Leadership Development Project. Available through FPG Publications Office 919-966-4221 or [pubs@mail.fpg.unc.edu](mailto:pubs@mail.fpg.unc.edu) (\$ 75.00 per set, additional Participant Notebooks, \$10.00 each)*



## E. Provider and Professional Preparation

### ON-LINE RESOURCES

#### New Roles for Families in Systems of Care

(1999) OSHER, T., DEFUR, E., NAVA, C., SPENCER, S., AND TOTH-DENNIS, D.

This promising practice monograph from the mental health services and system of care community describes how families have found and developed their voice, become strong partners and assertive leaders in developing a better system of care for their children, and now serve as collaborators, advisors, providers, planners, administrators, evaluators, as well as advocates. This work provides information and assistance to other families, professionals, and other service systems considering how professionals and families can share leadership and work together. Special focus is on families as facilitators and families as faculty in preparing professionals. Full text available at [www.ffcmh.org/publication\\_pdfs/SystemsCareVolOne.pdf](http://www.ffcmh.org/publication_pdfs/SystemsCareVolOne.pdf)

*In the series Systems of Care: Promising Practices in Children's Mental Health, 1998 Series, Volume I, American Institutes for Research, Center for Effective Collaboration and Practice, Washington, DC.*

### WEBSITES

#### Family Support America

[www.familysupportamerica.org](http://www.familysupportamerica.org)

Family Support America, formerly Family Resource Coalition of America, promotes family support as the nationally recognized movement to strengthen and support families, and places the principles of family support practice at the heart of every setting in which children and families are present. This site includes information related to technical assistance, training and education, conferences, publications, and other resources related to family support and promoting the voice of families—see especially, the Shared Leadership Series.

#### Head Start Bureau

[www.acf.dhhs.gov/programs/hsb/](http://www.acf.dhhs.gov/programs/hsb/)

The main website for Head Start and Early Head Start offers information about comprehensive child development programs that serve children from birth to age 5, pregnant women, and their families. Information includes policy, regulations, and resources related to every aspect of child-focused programs with the overall goal of increasing the school readiness of young children in low-income families and a cornerstone of parent involvement and shared-decision making.

A link to the Head Start Information and Publication Center provides access to the information clearinghouse and archive that supports the Head Start community and other organizations working in the interest of children and families by providing information products and services; conference and meeting support; publication distribution; and marketing and outreach efforts.

#### Institute for Family Centered Care

[www.familycenteredcare.org](http://www.familycenteredcare.org)

The Institute for Family-Centered Care, a non-profit organization, provides essential leadership to advance the understanding and practice of family-centered care. By promoting collaborative, empowering relationships between providers and consumers, the Institute facilitates family-centered change in all settings where individuals and families receive care and support. The Institute serves as a central resource for policy makers, administrators, program planners, direct service providers, educators, design professionals, and family members. Institute staff promote change and enhance the quality of health and other human services through development of print and audiovisual resources, information dissemination, policy and research initiatives, training, and technical assistance.

#### National Resource Center for Family Centered Practice

[www.uiowa.edu/~nrcfcp](http://www.uiowa.edu/~nrcfcp)

This center, based at the School of Social Work at the University of Iowa, provides technical assistance, staff training, research and evaluation, and information about family-based programs and issues. The site contains extensive bibliographies on over 60 topics, numerous online links, an online newsletter, publications and resources and training descriptions in the areas of engaging families, cultural competence, supervision and management, and community development.



# F Sustaining Collaborative Leadership

Sustaining collaborative leadership requires constant and vigilant attention by all involved. It is both a desired outcome and an ongoing process. The following list compiled from a variety of sources addresses some of the challenges to and strategies for sustaining collaborative leadership.

Some of the **challenges to sustaining collaborative leadership** include:

- Lack of ownership or commitment.
- Changeover in staff or parent partners.
- Conflict or shifts in relationships.
- Unrealistic goals and expectations.
- Disappointment, deflation, and decreased energy from setbacks.
- Over-reliance on a few leaders and burnout.
- Loss of resources or flexible support strategies.
- Inadequate ongoing support structures, such as parent/staff development, supervision, mentoring, peer support.

Some of the **strategies for sustaining collaborative leadership** include:

- Make a firm commitment and build the infrastructure to support collaborative leadership into the program proposal, plan, and policy.
- Seek funding opportunities that value parent involvement and collaborative leadership.
- Start the work together, and establish ownership from the beginning.
- Create and maintain an environment of shared trust, careful listening, and predictable follow-through.
- Identify clear goals and reasonable positive outcomes.
- Recognize individual and group strengths.
- Share responsibility and divide up the work into manageable steps.
- Celebrate progress, successful steps forward, and outcomes.
- Make available and continue tangible supports for parent and staff participation.
- Provide regular opportunities for learning and personal support.
- Build peer-to-peer network opportunities.
- Link to other efforts for mutual support and resource sharing.
- Regularly evaluate the parent involvement effort and the state of collaborative leadership relationships.

(Jeppson & Thomas, 1995; State of Connecticut Commission on Children (undated))

## F. Sustaining Collaborative Leadership

### Critical Questions for Communities

- *What are the goals and expectations for collaborative leadership?*
- *What benchmarks or indicators will measure progress?*
- *What process will be used to focus attention and monitor progress in this area?*
- *What evaluation process will be used to acknowledge success and address concerns when they arise?*
- *What sustainability efforts or strategies are most vital to collaborative leadership in our community?*
- *What resources can be drawn upon to build in sustainability efforts right from the state?*
- *What resources must be found outside of the community to assist the effort?*
- *What programs, agencies, organizations or service systems have experience and success in sustaining parent involvement and collaborative leadership and what can be learned from them?*

### Key Strategies for Families, Providers, and Administrators

#### What Families Can Do:

- Take personal ownership in working toward and sustaining collaborative leadership.
- Provide a family perspective in setting the expectations and indicators or successful collaborative leadership.
- Utilize peer support, mentors, and other opportunities for problem solving, support, and renewal.

#### What Providers Can Do:

- Take personal ownership in working toward and sustaining collaborative leadership.
- Be vigilant about the potential impact of position and power within collaborative leadership.

- Utilize peer support, supervision, and other opportunities for problem solving, support, and renewal.

#### What Administrators Can Do:

- Take personal ownership in working toward and sustaining collaborative leadership.
- Support a collaborative process for establishing a self-assessment, evaluation and feedback system on collaborative leadership.
- Model and encourage opportunities for shared leadership.

## Communication Tips: The Key to Sustaining Collaborative Leadership

Communication that sustains collaborative leadership takes many forms and is consistent over time, accessible and understood by all involved. Actions and words communicate commitment, trust, partnership, and process—all essential to sustaining shared decision making. The following tips highlight those strategies that can facilitate communication in collaborative leadership between parents and professionals related to young children and school readiness.

### Communication Basics and Foundations

- **Express commitment in word and deed**  
Coming together “as if” there is shared leadership does not work. Collaborative leadership must be communicated in word and deed in consistent ways over time to sustain the shared relationship and responsibilities.
- **Gather the right mix of voices**  
Gathering the right mix of voices or messages means hearing ALL perspectives and engaging in a communication exchange.
- **Person to person contact**  
Direct and genuine communication and interactions build trust. It is often the relationships that sustain collaborative leadership through times of stress and conflict.
- **Support freedom of expression and equal voice**  
Make sure that processes are in place so that all voices can be heard. Communication strategies that encourage input, allow time for full discussion, and support an equitable and democratic process are crucial to sustaining shared leadership.
- **Listen, listen, listen**  
In collaborative leadership, listening is a high-level activity for sharing points of view. Only by truly listening to understand one another can collaborative leadership take place.
- **Establish a decision making process**  
Right from the start, specify how the collaborative will make decisions. Establish a voting or democratic process upon which all can agree and use it.
- **Announce and acknowledge contributions.**  
Expressing appreciation for individual or group contributions to collaborative efforts communicates value for that individual or group and encourages participation.

### Communication Processes and Procedures

- **Create an “open space” where differences can be explored and understood**  
Collaborative leadership can be difficult when differences and conflicting views come together. Providing time and ways to explore and understand differences is a learning opportunity that can be used positively to sustain shared decision making and shared leadership.

*Continued*

## F. Sustaining Collaborative Leadership

### *Communication Tips: The Key to Sustaining Collaborative Leadership Continued*

- **Have a neutral facilitator to assure that every voice is heard**  
One specific strategy to support the communication process is to have a facilitator join the group as a neutral party. The facilitator can make sure that every voice is heard, mediate difficult discussion, and keep the group moving forward.
- **Establish regular communication**  
Regular communication (notices, telephone calls, reminders, meeting minutes, survey's etc.) is inclusive of all partners, keeps the interest, maintains momentum, and sustains collaborative leadership.
- **Create contingency modes of communication**  
Anticipate changes in schedules, urgent issues, and unforeseen interruptions in collaborative efforts. Have contingency plans for communicating quickly and efficiently to minimize frustration, missed opportunities, and stall-outs in the collaborative process.

### **Communication and Access to Information**

- **Share complete information**  
All parties share a common information base. Only by communicating complete information can collaborators participate in informed decision-making.
- **Speak plainly so everyone may understand**  
Avoid jargon and highly technical or ambiguous language. Speak the language of parents so that everyone's perspective can be understood.
- **Keep formal notes and records**  
Keeping formal notes and records of meetings, discussions, decisions, goals, and progress helps to guide and inform the work of collaborative efforts. Recording "organizational history" can orient new leaders and can facilitate forward movement.
- **Gather information and disseminate it in understandable forms**  
When completing a community assessment, survey information, or other data, do so in easy to understand and culturally and linguistically competent ways. When everyone understands the information available to them, they can share in decision making and leadership.
- **Make information accessible**  
Communication occurs only when parties can connect. Use multiple modes of communication in order to make information accessible to all. Language, culture, and access to technology may vary. Use all forms, including: toll free numbers, multi-lingual resources, regular mail, telephone, e-mail, fax, flyers, etc.
- **Provide training and technology supports to facilitate communication.**  
Whenever possible, have a 'level playing field' for communication. Mutual access to technology and communication tools helps to sustain collaborative leadership.

*Continued*

*Communication Tips: The Key to Sustaining Collaborative Leadership Continued*

**Communication, Outcomes, and Advocacy**

- **Evaluation and feedback results**  
Evaluation, feedback, or outcome data is vital to monitoring progress and measuring impact. Using results information to communicate program effectiveness, advocate, or make decisions is an important responsibility of shared leadership.
- **Encourage and prepare parents and professionals to “tell their story” as a leadership tool.**  
Sharing one’s personal experience is a powerful way to inform, advise, and advocate; important tasks in shared leadership roles.

**Communication and the Public**

- **Keep the community at large informed**  
Spread the word through public awareness campaign. Create public announcements or information briefs that are culturally and linguistically competent
- **Establish lines of communication with parent support organizations, parent-to-parent support systems, and other organizations interested in similar issues.**  
Community partners can offer support, information, and other resources to help sustain collaborative leadership.
- **Acknowledge the power of word-of-mouth**  
Communication in communities most often takes place from one person to another. Word-of-mouth can sustain collaborative leadership by encouraging more individuals to take leadership roles, enrolling community members in the collaborative effort, and by raising more issues to be addressed.

**Communication and Cultural and Linguistic Competence**

- **Work with translators and interpreters**  
Translators, who will convert written materials from one language to another, and interpreters, who orally restate in one language what has been said in another language, are essential resources within diverse communities. Translators and interpreters can facilitate communication and help to sustain collaborative leadership.
- **Use “cultural brokers” to build communication and connections with diverse community members.**  
Only by connecting to all members of the community, including those of diverse cultural and linguistic origin, can collaborative leadership draw on community resources, build on community strengths, and sustain collaborative work. In addition, these connections can sustain collaborative leadership by drawing in new leaders and empowering other community members.

**Adapted from:**

Dombro, A., O’Donnell, N., Galinsky, E., Melcher, S., & Farber, A. (1996). *Community mobilization: Strategies to support young children and their families*. New York, NY: Families and Work Institute.

Strauss, J. (2002). *Every voice counts: Holding a shared leadership event to make decisions together*. Chicago, IL: Family Support America.

Williams, A. (2002). *Putting parent engagement into action: A practical guide*. Chicago, IL: Family Support America.

## F. Sustaining Collaborative Leadership

### ANNOTATED RESOURCES

#### BOOKS AND PRINT

##### **Developing and Sustaining a Patient and Family Advisory Council**

(2000) DEVINE WEBSTER, P. AND JOHNSON, B. H.

This resource profiles a variety of consumer advisory councils, their structures and activities. It provides guidance on establishing a new council as well as sustaining the momentum of an existing council. It also describes council responsibilities and the impact a council can have on an organization. Sample materials and forms from established councils across North America and an annotated bibliography are also included.

*Institute for Family-Centered Care, 7900 Wisconsin Avenue, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or online at [www.familycenteredcare.org](http://www.familycenteredcare.org) (\$30.00)*

##### **Essential Allies: Families as Advisors**

(1995) JEPSON, E.S. AND THOMAS, J.

A practical how-to manual on involving families as consultants and advisors in policy and program planning with examples and descriptions of how hospitals, state agencies, community programs, and universities have fostered family-professional collaboration. Particular focus involves emphasis on involving families who have been traditionally underrepresented in policy making activities. This text is appropriate for communities, administrators, families, and providers.

*Institute for Family-Centered Care, 7900 Wisconsin Avenue, Suite 405, Bethesda, MD 20814, 301-652-0281, 301-652-0186 (fax) or online at [www.familycenteredcare.org](http://www.familycenteredcare.org) (\$15.00)*

##### **Putting Parent Engagement into Action: A Practical Guide**

(2002) WILLIAMS, A.

This booklet shares concrete recommendations on promoting parent leadership, along with real life stories and personal testimonials showing the strategies in action. A revealing text for families, administrators, and providers.

*Family Support America, 20 N. Wacker Drive, Suite 1100, Chicago, IL 60606, 312-338-0900, 312-338-1522 (fax), or online at [www.familysupportamerica.org](http://www.familysupportamerica.org). (\$15.00)*

#### ON-LINE RESOURCES

##### **A New Wave of Evidence: The Impact of School, Family, and Community Connections on Student Achievement**

(2002) HENDERSON & A. MAPP, K.L.

This research synthesis is the second in a series that examines key issues in the field of family and community connections with schools. Also available are a Key Findings document and a Community Engagement Self Assessment document. Full text for all three documents available at [www.sedl.org/pubs/catalog/items/fam33.html](http://www.sedl.org/pubs/catalog/items/fam33.html)

*Southwest Educational Development Laboratory, National Center for Family and Community Connections with Schools. Available through SEDL Publications Department, 211 E. Seventh St., Austin, TX 78701, 1(800) 476-6861, (512) 476-2286 (fax) or online at [www.sedl.org/pubs](http://www.sedl.org/pubs) (\$26.00)*

##### **Becoming a Community of Learners: Emerging Leadership Practices**

(UNDATED) NORTH CENTRAL REGIONAL EDUCATIONAL LABORATORY (NCREL)

This self-assessment survey designed for schools or educational organizations reflect on leadership and leadership practices. This checklist is comprehensive, but may not address all the unique needs of a particular school or program. It can stimulate thinking about what is going well and what might need improvement to sustain leadership structures and practices that value and include parents. Full text available at [www.ncrel.org/cscd/pubs/lead21/2-11.htm](http://www.ncrel.org/cscd/pubs/lead21/2-11.htm)

##### **National Standards for Parent/Family Involvement Programs**

These standards were developed by the National PTA in cooperation with education and parent involvement professionals through the National Coalition for Parent Involvement in Education (NCPPIE). Building upon the six types of parent involvement identified by Joyce L. Epstein, Ph.D., of the Center on School, Family, and Community Partnerships at Johns Hopkins University, National PTA created program standards of excellence. These standards, together with their corresponding quality indicators, were created to be used in conjunction with other national standards and reform initiatives in



support of children's learning and success. Full text available at [www.pta.org/parentinvolvement/standards/index.asp](http://www.pta.org/parentinvolvement/standards/index.asp)

### **Partners in Education: 2002 Teacher-Parent Engagement through Partnerships Toolkit**

(2002) NATIONAL ASSOCIATION OF PARTNERS IN EDUCATION AND THE METLIFE FOUNDATION.

This toolkit addresses five elements critical to the development of comprehensive teacher-parent partnerships: effective communication, engaging families of diverse backgrounds in improving student success, facilitating time and access for families and educators to work together, effective school and community leadership, and professional development. By addressing each issue, providing tips, promising practice examples and resources, this resource can provide guidance in building and sustaining parent involvement, partnerships, and collaborative leadership in the education setting. Full text available at [www.napehq.org/ML-cards.pdf](http://www.napehq.org/ML-cards.pdf)

### **Supporting Parents as Leaders: Stories of Dedication, Determination, and Inspiration**

(2002) PETERSON, L.

In this report from the Parent Leadership Exchange Project (PLEP), outstanding parent leaders join educators in sharing their successes and perspectives on creating partnerships among schools, families, and communities to support quality education for all children. The Parent Leadership Exchange Project provides a resource network, complete with training, support, information and conferences. Full text available at [www.responsiveeducation.org/publications.html#partnership](http://www.responsiveeducation.org/publications.html#partnership)

*Parent Leadership Exchange Project, Institute for Responsive Education, 21 Lake Hall—Northeastern University, Boston, MA 02115, 617-373-2595, 617-373-8839 (fax)*

### **Web-based Resource List for Evaluators and Family Evaluators**

(2003) SCHUTTE, K., JIVANJEE, P, AND ROBINSON, A.

This resource list offers useful information and Internet links about evaluation. The list is divided into several categories and includes websites offering glossaries, guides to conducting evaluations, instrument and measurements, and issues related specifically to children and families and participatory evaluation. This resource list can be accessed on the RTC Publications page, [www.rtc.pdx.edu/pgPublications.php](http://www.rtc.pdx.edu/pgPublications.php) or at

[www.rtc.pdx.edu/PDF/pbP8webresources.pdf](http://www.rtc.pdx.edu/PDF/pbP8webresources.pdf)

*Portland State University, Research and Training Center on Family Support and Children's Mental Health, Portland, OR*

## **WEBSITES**

### **Family Support America**

[www.familysupportamerica.org](http://www.familysupportamerica.org)

Family Support America, formerly Family Resource Coalition of America, promotes family support as the nationally recognized movement to strengthen and support families, and places the principles of family support practice at the heart of every setting in which children and families are present. This site includes information related to technical assistance, training and education, conferences, publications, and other resources related to family support and promoting the voice of families—see especially, the Shared Leadership Series.

### **Institute for Responsive Education**

[www.responsiveeducation.org](http://www.responsiveeducation.org)

The Institute for Responsive Education (IRE) has been committed to a more equitable distribution of educational opportunities and achievement for all children across lines of race, ethnicity, language, religion, gender, economic conditions, and geography. Based on the belief that schools, families, and communities have a shared responsibility for the academic and social success of all children and that partnership is the means to exercise these shared responsibilities collaboratively, IRE offers information, resources, and support to partnerships.

### **Parent Leadership Training Institute**

[www.ctprevention.com/act/plti.html](http://www.ctprevention.com/act/plti.html)

The PLTI seeks to enable parents to become leading advocates for children. The curriculum teaches parents who wish to improve the lifelong health, safety and learning of children, to become change agents for the next generation. The goals of the training are to enhance the capacity of parents as change agents for children; increase a parent's capacity to champion community efforts at the local, regional and state levels; and increase the quality of children's programs and parent interactions with program and policy leaders.

# Part II

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