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Early Intervention and Parenting Support in the Public Schools: An Inalienable Right For All

Heidi Berlinger

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EARLY INTERVENTION AND PARENTING SUYPPORT IN THE PUBLIC SCHOOLS

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ABSTRACT

EARLY INTERVENTION AND PARENTING SUPPORT
IN THE PUBLIC SCHOOLS:
AN INALIENABLE RIGHT FOR ALL

By
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M.B.A., Lake Erie College, 1989
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Professor of Education

Dissertation Submitted in Partial Fulfillment of
the Requirements for the Degree of
Doctor of Philosophy

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May, 1994

The present study was designed to document the effects of early intervention and parenting support, and to provide a model program proposal for federal adoption.

Specifically, this paper redefines the term "readiness" to recognize the diverse needs of infants and their families.

Research indicates several factors influence school readiness: physical well-being and motor development including proper prenatal, perinatal, and early childhood care and nutrition; social and emotional development; approaches toward learning; language usage; and cognition and general knowledge. Parental understanding of how to facilitate the advancement of young children in these areas is extremely important. Without this knowledge parents are likely to perpetuate intergenerational patterns of behavior which may adversely effect the child's growth and development. Research proves that parental attitudes and child-rearing practices, during the child's crucial early years, will help or hinder the child's chance for success later in school and into adulthood.

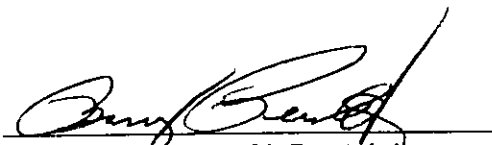
In recognition of these needs, many state and federal programs have been initiated. The researcher has reviewed several successful programs. Yet, these programs are unable to reach the multitude of Americans who need them. Many programs focus solely on "at-risk" populations, largely due to budgetary constraints. However, research shows that universally children and their families benefit from early intervention and support. Therefore, if all children have the capacity to benefit, then all children share the risk factors involved with the absence of programming. In this very real sense, all children are "at-risk."

The research finds that there is clearly need for infant intervention and family support programming. This programming must be available with unconditional acceptance standards. The researcher proposes a valid program as a unique and viable answer to the issue of change, which must occur for the benefit of our children and our nation's future.

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A handwritten signature in black ink, appearing to read "Barry Persky", written over a horizontal line.

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Dedication

This dissertation is dedicated to my darling daughter, Rebekah, who has been my greatest inspiration and my sincerest joy. Also, I would like to dedicate this work in memory of my mother, the late Ruth Harris Miller, and to my father, Philip Miller.

Acknowledgments

I would like to express my appreciation to my faculty advisor, Dr. Barry Persky, who guided me through my dissertation and my doctoral training program. I would also like to thank all the members of my dissertation committee for their special support: Dr. George Gustafson, Dr. Jules Pagano, and Dr. Dale Good. Lastly, appreciation is given to my friend of many years, Philip Kopel, President of Kopel Research Group, for his generous time in providing the computer technology to print this work.

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CHAPTER ONE: BASIS OF RESEARCH

Introduction

As the mother of a deaf/blind child, the researcher studied and attended several infant stimulation programs. The researcher observed the various ways in which neurologically impaired children were stimulated from birth through positive sensory experiences and early socialization exposure to other children. Parental participation in these programs was significant. Parents were taught techniques for working with their children. In addition, parents seemed to form an informal network and support group.

At that time, the researcher was teaching a variety of art classes for children as well as art classes for adults. It occurred to the researcher that if neurologically impaired children benefit from early intervention and parental support, perhaps all children could benefit from the same. The researcher started her own variation of infant stimulation classes at a community center that serviced a tri-county area. Classes were very popular. The researcher had a tremendous amount of positive feedback. Parents who attended classes with their infants tended to return for classes after their next children were born.

Statement of the Problem

To date, there is no governmental program to provide the mainstream of our society with a comprehensive infant intervention program, although such programs exist for the disabled.

Background

The Ypsilanti Michigan Head Start study (Schweinhart and Weikart, 1990) followed children for 20 years. This is one of the few educational programs formed by the government in the 1960s that is still in existence. The study concluded that children who received the benefits of a positive early environment, which fostered self-esteem, had more productive life-styles than the control group. The program had produced dramatic long-term effects in the educational performance of these children in later years. Additionally, the Head Start group, as adults, had a much lower incidence of unwanted pregnancies, incarceration, early death by violence, and welfare roles (Holden, 1990, pp. 1400-1403). The American Psychological Association's Task Force on Prevention selected Head Start as an exemplary prevention program.

Many early intervention programs, such as Head Start, incorporate principles of providing an appropriate learning environment for thought to formulate. Piaget (1971) concluded that the human tendency is naturally set on organizing ones environment. It is this organizing process that Piaget defined as intelligence. Adaptation to the environment cultivates the intellectual process. Enright (1977) wrote the following in regard to Piaget's theory:

The adaptive process takes the form of assimilation and accommodation. Assimilation is defined as the intake through the senses of new information to our existing understanding or knowledge. Accommodation is taking into account the newly acquired information and changing our ideas to conform to the new information. Once this adaptive process is completed, the individual is said to be in a state of equilibrium. What one knows fits closely with what one is experiencing...In time, new experiences will bring new information which cause us to re-digest or re-shape our thinking. Thus, it is this process of assimilation and accommodation which results in the refinement of thought. (P.8)

According to Levy (1992), providing the appropriate environment for assimilation and accommodation to occur is the basis of Maria Montessori's philosophy. Dr. Montessori was a physician and educator from the 1870's to the early 1900's. She worked for many years with the impoverished children of Rome. Although these children were economically disadvantaged, the educational environment provided by Montessori encouraged these children to flourish intellectually. Montessori observed that children have different characteristics and varying needs at different ages. Thus, Montessori created an educational philosophy and methodology which responds to child's needs at varying educational levels, resembling Piaget's stages of development. Montessori's method included comprehensive, interactive materials incorporated into the "prepared environment", which allowed a child to learn individually at his or her own speed in a non-competitive atmosphere. Education, then, was very child-centered, where the student was an active participant and the teacher functioned as a facilitator. This method allowed the child's own curiosity and zest for learning to be developed.

Providing the appropriate environment for assimilation and accommodation of thought was of vital importance to Montessori. As Montessori concluded, the environment is most effective when it is child centered, building a sense of identity and self-esteem.

Dr. Levine (1993), author of several books on learning disabilities, lectured at a seminar the researcher attended at The Carol School in Lincoln, Massachusetts. The title of this lecture was, "Understanding, Accommodating and Celebrating Developmental Pluralism in Childhood: A Crucial Challenge for Contemporary Society." In his presentation Dr. Levine said, "Children are like chemistry - a lot of individual elements can fit together in many different ways." According to Levine, educators must discover what these ways and modes of learning are for each particular child, and provide encouragement.

Many educators and theorists agree that it is most important to provide a nurturing, stimulating, child-centered environment from birth. According to Freud (cited in Baldwin, 1980) and Erikson (1982), children who do not encounter a positive environment will transfer difficulties from one stage of development to another unless conflicts are resolved. For this reason, among others, parental involvement is an important part of infant/child intervention. Parents need the opportunity to learn proper child rearing processes.

It is important to provide an appropriate environment for learning to transpire. Head Start parents are taught to provide this environment and as a consequence were an important part of the success of their children. Other programs, such as Home Instruction Program for Preschool Youngsters (HIPPY), incorporate the ideals of Piaget and Montessori, and are underway to help infants and their families. Yet no comprehensive, viable program has been established to reach the full scope of the American public.

Purpose of the Study

It was the purpose of this study to generate a model for state and federal legislation that would mandate public school systems to offer early intervention and parenting support.

Significance of the Study

New programs are underway to help, mostly impoverished, infants and their families. There is federal legislation to provide infant intervention for disabled children through the public school system. Yet no program has been able to reach the full scope of Americans with a comprehensive, viable system of early intervention. This dissertation presents the rationale and justification for such a program.

Definitions

Formal Education As the term is used in this paper; education normally received in an institutional or other setting outside the home which is conducted in accordance with principles or doctrines of educational philosophy.

Infant Intervention As the term is used in this paper; a process of guiding and stimulating children from birth to help maximize their potential used in conjunction with parental training and support.

Parent Education/Support As the term is used in this paper; part of an appropriate intervention program which provides parent support activities, the provision of resource materials on child development and parent-child learning activities, private and group educational guidance, individual and group learning experiences for the parent and child, and other activities that enable the parent to improve learning in the home. (This definition is adapted from the H.R. 520, 1991 Parents as Teachers Proposal)

Inalienable Right Refers to the constitutional right to "life, liberty, and the pursuit of happiness" which cannot be denied or taken away. The researcher chose this term for the title because it is her strong belief that the quality of life, liberty and happiness hinge on the support of family and the formation of very basic skills which take root in infancy.

Readiness The skills which enable a child to be "ready for school", in the researcher's view, and the view of many professionals, are the same learning and coping skills that prepare a child for success in life. Therefore, the term readiness as used in this paper, refers to the child as a whole (not just reading readiness). The readiness which the researcher speaks of, is the development of learning and coping mechanisms along with an appropriate attitude toward life and learning- a joie de vivre - joy and zest for life.

Deaf/Blind By the legal definition, one whose vision is 20/200 or worse including any possible correction and whose hearing loss is equal to, or in excess of, 80 decibels.

Program Proposal

In light of the various theories and the programs studied, a proposal based on these findings was presented. This proposal was presented as a concise outline of a model program. The researcher believed that brevity and clarity were crucial to readability and comprehension, thus she hoped to increase the prospects for adoption of said proposal.

CHAPTER TWO: RELATED LITERATURE

Theories of Learning and Cognition

Hill (1985) defined learning in terms of what it is not. "What is learned need not be "correct" or adaptive (we learn bad habits as well as good), need not be conscious or deliberate (one of the advantages of coaching in a skill is that it makes us aware of mistakes we have unconsciously learned to make), and need not involve any overt act (attitudes and emotions can be learned as well as knowledge and skills)" (p.1)

Elkin (1986) asserted that children learn best through direct encounters with their world rather than through formal education that involves the inculcation of symbolic rules. "Given the well-established fact that young children learn differently, the conclusion that educators must draw is a straight forward one: the education of young children must be in keeping with their unique modes of learning." (p. 631)

Piaget's theory of cognitive development (1971) is based on a biological model and includes differences in modes of thinking between various life stages. Piaget believes that intelligence is a biological adaptation which evolves gradually through multiple assimilations and accommodations. Mental structures called schemes incorporate and process new information. These schemes develop in four periods and increase in complexity. The first stage is sensorimotor. This period occurs in infancy. The child's intelligence relies on the senses and bodily motion for equilibration. Thus, the child's primary mode of learning is through sensory stimulation. Although Piaget did

not work directly in the field of education, many infant stimulation programs are based on Piagetian philosophy. An important point regarding Piaget is that he stressed the importance of giving each child enough learning materials appropriate to each stage of growth, so that no areas of the mind are left undeveloped.

Estes (1970), author of several books on learning theory and mental development, believed Piaget's theories have great merit. However, Estes contended, a major part of the research on development of intellect was instigated by problems arising when development deviated from the "normal"- such as mental retardation or deafness. Piaget's stages of learning and development, Estes contended, do not apply to this segment of the population. It is true that developmental stages for disabled children do not generally occur at the same rate or necessarily to the same degree. Assimilation and accommodation occur often at a slower rate and often not to the same degree. However, the principle of providing a stimulating environment for the learning process to occur is consistent for both populations.

The strength of psychoanalytic psychology, as presented by Freud, is that it dealt with a wide range of emotions. It viewed the individual as a whole, including the conscious and the unconscious mind. This theory explored interpersonal relationships, in particular the relationship of the child and the family. This relationship is of primary importance to an infant and can effect later stages through life as unresolved conflicts transfer from one phase of development to another.

Historical Context of Theories

Educational practice is determined, at least in part, by the social, economic and political tenor of the times. The conception of the child changes with the times as well. For example, a dominant conception of the child in the nineteenth century, dictated by the religious orthodoxy of the time, was the notion of the "sinful child." Educating the sinful child necessarily involved "breaking the will" by whatever harsh means were needed.

The advent of Freudian psychology in the early twentieth century, along with the continuing secularization and urbanization of American society, gradually replaced the concept of the sinful child with the concept of the "sensual child." Freud's depiction of infantile sexuality and his theories regarding the central role of sexuality in the formation of neuroses focused attention on the development of a "healthy personality."

The intellectual importance given early childhood education by the civil rights movement and the education reform movement of the 1960s was inconsistent with the concept of the sensual child. Therefore, a new concept of infants and young children was required. This new concept had to be in keeping with the new significance attached to academic education during the early years. What emerged was the concept of the "competent infant." (Elkin, 1986).

Thus, the conception of the competent infant and young child was dictated at least in part by social and political forces rather than strictly by any new data or findings about the modes of learning of young children, as Elkin (1986) viewed it.

The consequences of this "miseducation", as Elkin terms it, may be viewed in both the short and long-term. The short-term consequence is undue stress on the infant, the major long-term consequence is that the child will lose the motivation to learn. Thus, while infant education is important it must be handled properly in accordance to the child's own natural modes of learning. The issue then becomes creating a program based on these natural modes of learning which will enable the child to begin formal education ready to learn.

Readiness

The skills which enable a child to be "ready for school", in the researcher's view, are the same learning and coping skills that prepare a child for success in life. Therefore, the term readiness as used in this paper, refers to the child as a whole not just reading readiness. Readiness is the development of learning and coping mechanisms along with a positive attitude toward life and learning, a "joie de vivre" or joy and zest for life.

In Heart Start (Zero to Three, 1992) Brazelton contended these early years are crucial to a child's preparation for the rest of his or her life.

A child's experiences in the first months and years of life determine whether he or she will enter school eager to learn or not. By school age, family and caregivers have already prepared the child for success or failure. The community has already helped or hindered the family's capacity to nurture the child's development.

In our diagnostic work at Children's Hospital in Boston we can tell by eight months of age whether a baby expects to succeed or to fail by the way he or she approaches a task. We offer two blocks to a seated eight-month old, and then we demonstrate that we'd like her to place the two blocks together. A baby who expects to succeed, and who is used to the approval and encouragement of adults around her, will pick up one block, mouth it, rub it in her hair, drop it over the side of the table, watching to see whether you will retrieve it for her. When you do, she finally completes the requested task-place the two blocks together. Then she looks up at you with a bright-eyed look of expectancy that says: "Tell me how great I am!"

But a baby who has an untreated learning disability, or who comes from an environment too chaotic or too hopeless to reinforce in him a feeling of success, will demonstrate an expectation to fail. The baby will accept the offered blocks, look dully at them, bring them close together dutifully as directed, but without excitement or enthusiasm. He has demonstrated his cognitive understanding of the task, then he pushes them past each other, apparently failing the task. Then comes the symptom: he looks up at you with the hangdog look that says, "Hit me, I'm no good. See! I've failed!" This child will expect to fail in school. He will expect no encouragement from teachers, and may shrink encouragement if it is offered. He is likely to find school embarrassing and joyless and may eventually drop out.

This report shows how we can produce many more confident and achieving children, and many fewer who expect to fail—who come almost to welcome failure as a retreat from overwhelming circumstances. It shows how a child's expectations and attitudes are formed in the very first years and months of life, and why encouragement and stimulation are the second most important gifts that parents can provide their children. Love comes first. But parents also need to understand how their actions can help generate the confidence, the pleasure in learning and the understanding of limits that will make their children expect to succeed and help them do so. And policy makers need to understand and support the social policies that can aid parents in achieving those results.

Also in Heart Start, Boyer (1992), wrote a profound justification for early programming:

The nation's schools are, in many respects, nothing short of miraculous. They open their doors and serve an unbelievable range of students, against the most impossible odds. Undermined by poverty, violence, political cross-fire and the sharp string of critics, the schools continue valiantly to carry on their work. In most communities, one can find teachers who are effective, even exemplary, and classrooms where lives are being transformed.

Still, there is another side to the equation. Even in the best of our nation's schools, there children who do not reach their full potential. The reasons for such failure are complex, but at least one primary problem is quite clear: many children come to school without the essential support they need to learn effectively.

Nearly thirty years ago, policy-makers in this country acknowledged the consequential role that preschool can play in improving children's prospects for school learning. During the decade of the sixties, they created Head Start to give early educational support to children who are most at risk of school failure. As the first graduates of this program proceeded through the grades, it became clear that early intervention truly can make a difference.

Even in preschool, though, children vary greatly in their readiness to learn. Some are more intellectually curious than others. Some read and spell well, while others have difficulty communicating. Some concentrate more readily than others. Some play and interact successfully with their peers, while others prefer to pick fights or remain alone at the fringe of classroom activity.

In the last two decades, our understanding of child development has grown at a dramatic pace. Above all, we now know that later learning depends heavily on what happens to a child in the first few years of life. We realize that infants, whose development has been compromised during pregnancy, are less likely to succeed in school. We understand, too, that even healthy children who are neglected, abused or subjected to significant instability in their early years can be educationally impaired.

The conclusion is beyond dispute. If we care about our children, then we must ensure that every child-from no matter what socioeconomic class, no matter what race, and no matter what family circumstances-has the support he or she needs to become ready to learn. (Boyer, in *Zero to Three - Heart Start*, 1992, p.iii)

The U.S. Department of Education's Office of Educational Research and Improvement is currently reviewing the research on achieving the nation's readiness goal: By the year 2000, all children will start school ready to learn. Demarest, 1993.

The research concedes that concepts of child development and readiness are evolving from a narrow emphasis on reading readiness to a concern with the whole child. Also, according to Demarest (1993) it is increasingly recognized that, "children develop within multiple contexts, including families, schools or child care settings, and communities. Development is affected by what happens in all of these contexts, and by how they interact with each other and with the child." (p.i) This research also found that there has been a shift in social programs in recent years to examine social intervention and methods of prevention.

The National Educational Goals Panel (NEGP) has exemplified this multifaceted concept of the whole child in its definition of early development. The NEGP has agreed that the following five dimensions of early learning and development are all important to consider in assessing a child's development and readiness for school:

1. Physical well-being and motor development
2. Social and emotional development
3. Approaches toward learning
4. Language usage
5. Cognition and general knowledge

These five areas actually overlap in many ways. However, a careful examination of contributing factors in these areas needs to be addressed. Therefore, the researcher has chosen to use these five categories as a basis of research. (Demarest, 1993)

Physical Well-Being and Motor Development

A major contributor to physical well-being and motor development is the control of preventable health problems. This begins with early detection of potential physical anomalies via proper screening methods and appropriate pre-natal and early childhood care.

Research indicates that 12% of this nation's children, over 450,000 children each year, suffer health damage that affects their learning. Recent biomedical research (Demarest, 1993) indicates that the major preventable risk factors are:

- low birth weight
- parental exposure to alcohol and drugs
- maternal smoking
- lead poisoning
- child abuse and neglect
- malnutrition

Moreover, multiple risk factors often affect the same child (Newman and Buka, as cited in Demarest, 1993)

Research (Creel and Albright, 1987; Newman and Buka, 1990; Worthington-Roberts, 1985) clearly indicates that prenatal care, good health, and proper nutrition of young children are definitely aspects of readiness for school and learning. The implications for the school system suggest an interdisciplinary approach to education. Physical contributors to learning impairments may be detected through early screening and assessment procedures. Additionally, the research indicates that the school system can form a vital link to local health services as a referral network- a link back and forth to assist in appropriate health care that can affect learning. Furthermore, the need for prenatal education and information is clearly warranted.

Social and Emotional Development

Western thought has traditionally tended to separate reason and emotion, recent research suggests that there is considerable interaction (Demarest, 1993). According to Powell (1991), many studies show an association between the affective quality of mother-child relationships and infant and preschool children's cognitive functioning. Other reviewers of this research (Estrada, 1987) have noted a positive association with social development as well.

Specifically, research has shown that children who were securely attached (emotionally) to their mothers as infants subsequently approach problem-solving tasks more effectively. Their problem solving style is characterized by more curiosity, persistence, and enthusiasm, and exhibits less frustration, than children who were less securely attached as infants. Children who were securely attached as infants are, as they grow older, more able to benefit from maternal assistance during problem-solving tasks and to interact well with teachers. (Bretherton as cited in Demarest, 1993, p.17)

Most of the research on affective relationships involves infants, but a recent longitudinal study found that the affective quality of the mother-child relationship when children were 4 years old correlates strongly with school readiness at ages 5/6 and with school achievement at age 12. The criteria used to measure affective quality in this study were: responsiveness, flexibility, warm concern, acceptance, emotional displays of affection, and punitiveness. (Estrada as cited in Demarest, p. 17)

While the basic association between the affective quality of relationships and positive social and cognitive development has been demonstrated, this research area has not received as much attention as it deserves. More research involving fathers, caregivers and teachers, siblings, and whole families is needed. Also, we need to understand in more depth how cognitive and affective processes relate, and whether and how affective relationships exert influence throughout the lifespan. (Demarest, 1993, p. 18).

Grubb and Larson (as cited in Demarest, 1993) have examined historical perspectives of early intervention. A historical analysis of social policies suggests that societies reluctance to intervene in the family's domain remains a significant obstacle to receiving intervention, or meeting readiness goals.

Despite this reluctance, research indicates that a range of community strategies can improve the capacity of families to foster children's readiness for learning and, at the same time, strengthen the communities themselves. Strategies are most effective when they aim to achieve the same broad goals:

1. Improving the capacity of parents to nurture and stimulate their children
2. Strengthening families
3. Revitalizing the institutions that give structure and meaning to individuals, families communities and societies. (p.29).

Longitudinal studies have acknowledged the importance of family, community and society. In an August 1992 article in American Psychologist titled, "Early Childhood Intervention: A Promising Preventative for Juvenile Delinquency", longitudinal studies of some early childhood education programs suggest that they may help reduce future delinquency. In the article, Belsky (1992), Bronfenbrenner and Zigler find that the first important influence on children is the family. However, children and families are interactive members of a large system of social institutions. The school, the workplace, community health and child care services are all part of this larger system.

By improving parents' interactions with these systems, and by helping them to support their child's physical, cognitive, and socioemotional development, early intervention programs aim to make positive changes in overall functioning that will help the child to be effective in a variety of social contexts. The success of this approach is documented by solid evidence that graduates of several preschool programs demonstrate lasting improvements in social competence (Berrueta-Clement, Schweinhart, Barnett, Epstein, & Weikart, 1984; Consortium for Longitudinal Studies, 1983; Copple, Klein, & Smith, 1987; Price, Cowen, Lorion, and Ramos-McKay, 1989).

Because not engaging in delinquent behavior is one sign of social competence, as is success in school, it does seem conceivable that comprehensive early childhood programs could alleviate some of the risk factors that make a child prone to delinquency.

Perhaps the most famous research in the area of reduced delinquency, is the Ypsilanti Michigan Head Start program (Schweikart & Weikart, 1990). The findings of this study are summarized below:

Conducted by the High/Scope Educational Research Foundation of Ypsilanti, Michigan, the study examined the lives of 123 African Americans born in poverty and at high risk of failing in school. At ages 3 and 4, these individuals were randomly divided into a program group who received a high-quality, active learning preschool program and a no-program group who received no preschool program.

All but 6 of the original study participants were interviewed at age 27; additional data were gathered from their education, social services, and police records.

The program group significantly surpassed the no-program group on measures of social responsibility. As compared to only 7% of the program group, 35% of the no-program group had 5 or more arrests by age 27. Also, as compared to only 7% of the program group, 25% of the no-program group had been arrested at least once for drug dealing.

On measures of earnings and economic status, the program group was significantly better off at age 27 than the no-program group.

- As compared to 29% of the program group, only 7% of the no-program group earned \$2,000 or more per month.
- As compared to 36% of the program group, only 13% of the no-program group owned their own homes.
- As compared to 30% of the program group, only 13% of the no-program group owned second cars.
- As compared to only 59% of the program group, 80% of the no-program group received social services at some time during the previous 10 years.

The program group significantly surpassed the no-program group on measures of educational performance. As compared to 71% of the program group, only 54% of the no-program group completed 12th grade or a higher level of schooling. Earlier, the program group had significantly higher achievement scores at age 14 and literacy scores at age 19 than the no-program group.

At age 27, the program group demonstrated greater commitment to marriage than the no-program group. Although the same percentages of program males and no-program males were married (26%), the married no-program males were married an average of only 3.3 years, but the married program males were married an average of 6.2 years. Forty percent of program females, but only 8% of no-program females, were married at age 27. While 57% of the births to program females were out-of-wedlock, 83% of the births to no-program females were out-of-wedlock. (pp.2-3)

Schweinkart and Weikart (1990), who began the High/Scope Perry Preschool

Study in 1962, noted:

When the preschool studies of the 1960's began, people spoke of breaking the cycle of poverty and inoculating children against failure. Poverty and failure are more complicated than that, but this study shows that a good preschool program can provide children born in poverty with significant benefits. (p.2)

Socioeconomic status is category is very important because many programs have been designed for "high risk" children. This category primarily includes economically disadvantaged children. A reason for this, as the High/Scope study indicates, is that these programs were often viewed as a deterrent for future crime. However, many studies over the last two decades have examined the relationship between family income and children's intellectual/emotional attainment. It appears that high-risk children benefit significantly from early intervention. The important question arises, do children from economically well-off families need intervention?

Bowles, Leibowitz, Sewell, and Hauser (cited in Demarest, 1993) have demonstrated that measures of family status such as parental education, occupation, and income are related to children's educational attainment and thereby to future earnings. Family resources such as income and social status are often associated with the development of some skills such as reading, while other types of family resources such as the quality of interpersonal processes are associated with the development of such traits as self-esteem (Amato and Ochiltree, cited in Demarest, 1993). Some studies have found that mothers with high educational attainment and a positive orientation toward school, as well as high incomes, tend to have high achieving children.

In France, where almost all three-year-olds get placed in state nursery schools, there has been a debate about whether this should be extended to include two-year-olds. A study (The Economist, 1992) of 2000 children looked at whether children who had gone to school at two did better in the long run.

The earlier the children went to school, the better they seemed to do academically and socially. What surprised the researchers was that those who benefited most were the children from better-off homes; they had expected poor children to benefit more from being taken away from their grimmer circumstances. The researchers concluded that, if the state was thinking of spending more on education, it would be wiser to provide places for two-year-olds than to cut the size of primary classes by five pupils, which would cost about the same.

Datcher-Loury (1988) explored why some children growing up in poverty are successful in school and others are not. Her study suggests that variations in children's outcomes across families that are identical in measures of social and economic well-being result from differences in behavior and attitudes among the families. (Datcher-Loury as cited in Demarest, 1993, p. 22)

Similarly, research by Tulkin, and Scott-Jones focused on differences in development during infancy and early childhood as a function of family SES.

Tulkin argued that social class per se is not the critical variable, rather SES is a vehicle for classifying groups who provide different sets of experiences for their children. This research found that middle-class mothers engaged in more reciprocal interactions with their infants and provided them with a greater variety of stimulation than working-class parents (Tulkin and Kagan, 1972). Subsequent study revealed that middle-class mothers were more likely to agree with statements stressing the importance of perceiving and meeting the infant's needs, the value of mother/child interaction, and the moderate control of aggressive impulses (Tulkin and Cohler, 1973).

In summary, according to Scott-Jones (1984), SES interacts with and appears to be a better predictor of children's performance than other status variables. But SES is not in itself an explanatory variable. Substantial correlations of SES occur within large aggregated units of analysis, but when individuals are used as units of analysis, more precise variables related to family processes become important. (as cited in Demarest, 1993, p. 22)

These studies suggested, to the researcher, that if "variables related to family process" are more relevant to school success than socioeconomic status per se, than perhaps children who have a lot of positive variables perform a substantial amount better when these positive factors are refined and reinforced through proper education. Therefore, it would be logical to identify positive family variables, or processes, and establish programs that reinforce these processes.

In recognition of these factors, Missouri pioneered a state-wide program which mandates (since 1984) the availability of early intervention and parenting support for all children and their families. Their Parents as Teachers (PAT) program has formed a National Center for establishment of PAT programs across the country. Forty-two states are now sponsoring PAT programs, although most areas have adopted a local rather than statewide program.

The PAT program has had astonishing results. An extensive study of the program (1992) revealed:

At the conclusion of their pilot project, New Parents as Teachers (NPAT) children at age three were significantly more advanced than comparison group children in language, social development, and problem-solving--competencies that are essential to later school success. NPAT parents were knowledgeable about child development and child rearing practices and viewed the school district more positively than parents in the comparison group.

A 1989 follow-up study of these children that at the end of first grade, NPAT children scored significantly higher than the comparison group on standardized reading and math tests and were rated higher in school performance by their teachers. Significantly more NPAT parents initiated requests for parent-teacher conferences; NPAT parents were twice as likely as parents in the comparison group to be involved in their children's school experiences.

The Second Wave study looked at a broad range of families in the statewide Parents As Teachers program. Findings, released in July, 1991, showed that at age three, children in parents as Teachers on the average scored significantly above the national norms on measures of school related achievement. (Zero to Three, 1992, p.25).

Minnesota, was also a pioneering state. This state sponsored an Early Childhood Family Education (ECFE) program. A 1979 survey of kindergarten teachers in forty-nine schools found that a majority of teachers reported that children who had been in the ECFE program had more positive attitudes toward school, better preparation in prekindergarten basic skills, more confidence and social skills, fewer behavioral problems, better relationships with their parents, and greater emotional maturity.

A recent parent outcome study conducted by ECFE and based on interviews before and after a year of participation found that after a year in the program parents report:

- increased peer support;
- increased sense of confidence and self-esteem as a parent;
- increased knowledge, awareness, and understanding about children and child development;
- changed perceptions and expectations for themselves as parents and for their children; and
- changed behavior such as giving more time and attention to their children, becoming more sensitive to their children's needs and viewpoints, and acting less impulsively with their children. (Stief, 1993, p. 10).

In a later section of this paper model intervention/parent support programs from several states will be viewed. The majority of these programs are not fully statewide yet. Some, like Missouri and Minnesota, are in every school district and available to all children. Other programs focus solely on high-risk families. However, the important

issue, is that the children and families who have been served by these programs are thriving.

Approaches Toward Learning-

The researcher finds it interesting that the National Educational Goals Panel chose to separate this category. Approaches toward learning are highly influenced, if not molded, by the other four areas. However, as a criteria for evaluation of readiness, an approach may be something which is more easily identifiable than a specific developmental level per se. For instance, the way a child approaches problem-solving tasks is in this researchers view an approach toward learning.

Language

Piaget and Inhelder (1969) believed that the emergence of internal representation (of which spoken language is one form) increases the powers of thought in range and speed. They suggested that there are three major differences between representational and sensory-motor behavior:

1. The sequence of events in sensory-motor patterns is restricted to the speed of sensory-motor acts, making sensory motor intelligence very slow. On the other hand, verbal behavior permits the representations of many acts very quickly.
2. Sensory-motor adaptations are limited to the immediate actions of the child, while language permits thought and adaptation to range beyond present activity.
3. Sensory-motor intelligence proceeds in a one-step-at-a-time fashion, while representational thought and language permit the child to simultaneously handle many elements in an organized manner.(p. 86)

Thus, because language is a form of representation of objects and events, thought involving language is liberated from the limitations of the direct action of sensory-motor thought. Intellectual activity can proceed rapidly and with a range and speed not previously available.

Language is a facilitator for thought. It is a tool which provides a framework for thought. Language and the comprehension of spoken words are important to the understanding of written words. Historically, this pre-literacy skill has been considered a major factor in school readiness. According to Wells (1988) some experts now believe that literacy skills begin to appear in early childhood. This concept, called emergent literacy, has important implications for the way we think about the education of our children. Educational researchers William Teale of the University of Texas and Elizabeth Sulzby of the University of Michigan (Wells, 1988) offered a glimpse of the new view in Emergent Literacy, a collection of essays they edited. According to Teale and Sulzby, New Zealand educational researcher Mairi Clay introduced the notion of emergent literacy in 1987. She hypothesized that literacy development was a continuous process that begins long before formal instruction starts in the first grade.

According to Teale and Sulzby (cited in Wells, 1988) a study by linguist Charles Read was instrumental in moving the concept of emergent literacy into the nursery. Read was interested in reports by a number of parents who said that children as young as 3

were spelling words. The spellings were unconventional, but Read found that they revealed a sophisticated grasp of language.

Adams and Chomsky (cited in Demarest, 1993) both found that the most important parental teaching strategy, in reference to teaching reading, is to read aloud to children regularly and interactively. Reading is interactive when parents try to elicit comments from their children and encourage children to imagine alternative possibilities. Chomsky also found that progress is greatest when the reading materials are slightly above the child's level of linguistic maturity.

In conclusion, the research indicates that pre-literacy skills, such as language and an interest in reading, are important to the cognitive process and invaluable to school readiness.

Cognition and General Knowledge

Early intervention and parental training were proven to prevent early school failure according to studies by Slavin, Karweik, and Wasik (1993). They focused their work on 11 early intervention programs. These programs varied in duration, program focus, and intensity. Their findings concluded that early intervention programs get children off to a good start. Of the eleven programs reviewed, eight showed immediate progress after intervention. Although early intervention programs with continued follow-up appeared to have long term benefits for children, those children who did not receive continued follow-up generally were unable to maintain their success in school.

Intensive child and intensive parent programs were the most effective interventions, not only immediately but for at least one year following the intervention (Slavin, 1993). Slavin (1993) and his colleagues strongly argue that early intervention with a consistent high degree of parental education, is necessary to prevent early school failure.

Osborne (The Futurist, 1987) agreed that parental involvement in preschool education is extremely important. He commented that parents can set the stage for their children to see that learning can be exciting, challenging and a lot of fun. This understanding is necessary before children can fully utilize formal education. Osborne was quoted in a study sponsored by Worldbook (The Futurist, 1987). Worldbook's study concluded that children need to learn to acquire 105 specific skills and concepts before beginning school, in order for the experience to be useful. These skills include recognizing primary colors; understanding the concept of top, bottom, and middle; drawing and coloring beyond a simple scribble; and basic early socialization skills.

Recommendation from The Council of Chief State School Officer's

The Council of Chief State School Officer's (Weiss, 1989) have produced a document, Family Support, Education, and Involvement: A Guide for State Action. This study contended that schools cannot operate in isolation from the family and the community, and it is in the self-interest of schools to help create "holistic, comprehensive, family-oriented programs that will require collaboration with other

community agencies" (p.273). They recommend that school systems build their programs on these six principles:

1. a two-generational, as opposed to exclusively child focus;
2. a comprehensive, long-term strategy, as opposed to a quick fix;
3. a recognition of family diversity;
4. an emphasis on prevention and enhancement of development, as well as on the capacity to respond when prevention is not enough;
5. linkage and collaboration with other agencies; and
6. "most of all, programs and actions geared toward families must seek to empower them to progress and regenerate so that they remain viable after supports are lessened or withdrawn" (p. 273)

The National Education Goals

According to the Goals 2000 report (Demarest, 1993) the responsibility to educate our children is shared between the family, schools and the community.

Every parent is urged by national objectives to be the child's first teacher and to devote time each day to helping their preschool children to learn. This objective also states that parents will have access to the training and support they need.

The following section of this paper will view model programs which have sought to obtain this objective.

Model State Programs

Overview

The review of the literature revealed that studies were recently completed on working models of intervention/parenting programs in various states. Harvard University received funding for a several year in-depth study of these programs. Therefore, the researcher contacted Harvard and requested to talk to their researchers to view their research. At this time the researcher was invited to visit the resource center at the Harvard Family Research Project (H.F.R.P.). The researcher found the Harvard study a superb example of concise, well documented programs. As a result the researcher chose to present the Harvard findings as published in their literature. This is followed by a review of federal programs, and agencies and advocacy groups which were supportive in the establishment of intervention/parenting programs. After which, the legislative processes involved in establishing these programs, along with program evaluations, is presented. A rationale for the researcher's model and a comparative analysis of the findings are included in Chapter 4: Presentation and Analysis of the Data. Lastly, the researcher's model is presented in Chapter 5.

Connecticut: Parent Education Support Center (PESC)

Connecticut's Parent Education Support Centers (PESC) program was established in response to a number of economic factors, including rising minority unemployment, increases in the number of single-parent households and in the number of minority children living in poverty. The Department of Children and Youth Services (DCYS) established 10 centers in 1987. The goal of this program is to strengthen the capacity of parents to raise their children by providing education and support. Although all parents of children 17 years of age and younger are eligible to participate, priority is given to adolescent, low-income, first time, and minority parents. Due to these broad eligibility standards, PESC is considered more prevention oriented than programs in states which target services to at-risk parents. This program is currently statewide.

Key Events

1985 The DAYS Division Or Planning and Community Development begins planning a prevention-oriented initiative for children and families, leased on J. David Hawkins and Joseph C. Wets Social Development Model of Positive Youth Development.

Legislature passes FY 1985-86 budget which includes permanent funding for a DAYS Prevention Coordinator.

1986 Legislature passes FY 1986-87 budget which includes six-month funding to develop a network of Parent Education and Support Centers.

Request for proposal issued by DCYS announcing the availability of \$150,000 for 10 centers to be funded at \$150,000 each for six months.

1987 Ten centers begin operation. Appropriation for PESC is annualized to \$300,000 plus a cost of living increase for FY 1987-88 (i.e., \$31,200 per center per year).

Request for proposal issued for the evaluation of PESC initiative with funds made available by the Federal Juvenile Justice and Delinquency Prevention Act.

The University of Southern Maine's Center for Research and Advanced Study is chosen to evaluate PESC. USM consultants begin evaluating two of the 10 centers.

- 1988 Legislature approves \$175,000 in new funds: \$75,000 to implement an urban center in Bridgeport and \$10,000 in new funds for each of the 10 existing centers. The FY 1988-89 allocation for each of the original centers is \$42,697. PESC evaluation expands to six sites.
- 1989 The Canton New Parents as Teachers program is transferred to the PESC program category bringing the total number of centers to 12.
- 1990 Legislation is passed supporting the PESC initiative which specifically outlines the four service categories (parent education; parent support; information and coordination; technical assistance) and special conditions which each program must address.

Request for proposal issued by the Children's Trust Fund. Four centers are awarded \$15,000 each to provide services to families who are on or referred to the DAYS caseload.

A Family Resource Center incorporating many PESC principles is planned for New Haven as part of the Annie E. Casey Family Initiative.

Program Description

Organization The Department of Children and Youth Services uses a request for proposal process to fund programs through community-based agencies. PESC sponsors include local community service agencies mental health services Catholic Charities a board of education and a youth and family services agency. Planning and implementation at each site are overseen by a local advisory board.

Goals The program is designed to support families and strengthen family processes by promoting positive parent and child interaction; increasing community based prevention resources for parents; improving linkages between parents and community resources; and providing technical assistance and training to schools and other agencies working with parents.

Funding The PESC program is funded exclusively by the Department of Children and Youth Services. Initial funding was \$300,000 for 10 centers. In FY 1988-89 funding was increased to \$475,000, \$75,000 of which was designated for a new urban center model. FY 1989-90 funding for 12 centers was \$549,674.

Staff Qualifications for staff members are determined by local program directors.

Services Each center must provide parent education and parent training services; parent support services (groups, drop-in programs, parent-child activities); information and coordination services and technical assistance, consultation and training services for other community agencies.

Participants Centers must serve all parents of children 0-17, with priority given to those groups in the community that are underserved (i.e. teen, single, and low-income parents, two-worker families, parents with limited proficiency in English)

etc.). Selection for programs is "non-evaluative and not based on any negative criteria."

Parents' Role At least 51 percent of the members of each local advisory board must be parents who are eligible for PESC services and representative of the population being served.

Evaluation Consultants from the University of Southern Maine are conducting a formative evaluation in six sites. Monitoring of program implementation in all centers is managed by the Division of Program Development at DCYS. (H.F.R.P.,1992,pp.1-4)

Kentucky: Parent and Child Education (PACE)

Kentucky began its Parent and Child Education (PACE) program when the state was ranked last in the country in the percentage of adults who completed high school. In an effort to reduce inter-generational illiteracy and the related problem of attracting industry to a state whose work force was undereducated the Kentucky General Assembly appropriated 51.2 million for family support and education in 12 school districts. Recently, PACE has expanded to 30 districts serving over 1,800 parents and children. Premised on the belief that a child's chances of future educational and economic success are a function of the parent's level of education, PACE attempts to promote positive attitudes toward academic achievement in both parents and children. Eligibility for this program is limited to parents without a high school diploma or its equivalent and their three- and four-year-old children. PACE is a winner of several awards: the 1988 Ford Foundation/Harvard University Kennedy School of Government Awards for innovations in State and Local Government, the 1989 Kentucky Community Education Association Five Star Award and the 1990 Innovations Award from the Council of State Governments. The PACE program has been widely disseminated and adapted for use in other states.

Key Events

- 1985 Roger Noe, Chairman of the Kentucky House Education Committee, asks Kentucky Department of Education to develop a program to address intergenerational illiteracy that serves mothers and children simultaneously. Sharon Darling and Jeanne Heberle develop PACE prototype.

- 1986 Noe submits PACE as HB 662 to Kentucky General Assembly. PACE passes with \$300,000 for first year appropriations to open six centers, and \$900,000 for the second year of the biennium.
- 1987 Two sites close because of low participation; eight new sites are selected. Total number of sites operating during F Y 1987-88 is 12 with 18 classrooms.
- 1988 General Assembly votes to fund existing program at \$1.8 million. HB 544 enacted, changing county eligibility requirements from 60 percent of the adult population without a high school diploma to 50 percent and capping enrollment in each program at 15 families.

The Kenan Family Literacy Project, later named the National Center for Family Literacy, funds and implements programs based on the PACE model in Kentucky and North Carolina.

PACE is cited as one of 10 outstanding programs in the US by Innovations in State and Local Government Awards Program, co-sponsored by the Ford Foundation and Harvard University's Kennedy School of Government.

- 1989 Two classrooms funded federally as a pilot to test PACE as a vehicle for education and training mandated by the Family Support Act.

PACE awarded the Kentucky Community Education Association Five Star Award.

- 1990 Kentucky General Assembly votes to double PACE allocation to \$3.6 million and expand service to 30 districts with a total of 33 classrooms. PACE is moved from Department of Education to Workforce Development Cabinet.

PACE component included in Family Resource and Youth Service Centers mandated in or near public schools where 20 percent or more of the students are eligible for free school meals.

United States Department of the Interior, Bureau of Indian Affairs selects five school sites for implementation of the PACE model. PACE receives Innovations Award from the Council of State Governments.

Program Description

Organization School districts in which the percentage of adults without a high school diploma is greater than 50 percent are eligible for state grants to establish a PACE program in or near public schools. Since 1990 the Department of Adult and Technical Education in the Workforce Development Cabinet has assumed administrative responsibility for the program. Training for adult and early childhood education is conducted by the National Center for Family Literacy.

Goals PACE aims to break the cycle of under education by uniting parents and children in a positive educational experience and to raise the educational level and aspirations of the family.

Funding PACE is funded entirely by the state of Kentucky which appropriated \$1.2 million to begin services in six sites for the 1986-88 biennium. For 1990-92 the 33 site program was funded at \$3.6 million (i.e., \$1.8 million per year).

Staff Each site has one adult educator one preschool teacher and one teaching assistant. Staff are employed by the school district and compensated according to district Lewis Programs are supervised by school administrators.

Services PACE services include a preschool program for three-and four-year-old children based on the High/Scope Educational foundation developmental model; parent-child activities literacy tutoring adult basic education classes and GED coaching for parents parent support groups on personal academic and vocational issues.

Participants Eligibility for participation is restricted to parents who do not have a high school diploma or its equivalent with three and four-year-old children. The great majority of the base participant population is female and white.

Parent's Role Parent volunteers contribute to curriculum development and participate in recruitment efforts.

Evaluation PACE collects raw data on adult educational ability at entry & exit [measured according to the Comprehensive Adult Student Assessment System (CASAS)]; adult attitudinal and behavioral changes at entry and exit (self-report); children's developmental progress [Child Observation/Child Assessment Record (COR/CAR)]; total enrollment retention rates and GED completion or grade advancement. Districts are eligible for annual refunding only upon demonstration of satisfactory levels of student participation and improvement. A summary report on the program was made by the KDE Office of Research and Planning in 1989 and is available on request.(H.F.R.P., 1992, pp.6-9)

Maryland: Family Support Centers (FSC)

This program was established in response to the state's high statistics linking adolescent pregnancy and parenting with increased incidences of child abuse. The goal of the program is to provide comprehensive community-based preventive services on a drop-in basis to families who live in neighborhoods that show high concentrations of teen pregnancies, high school dropouts, poverty, low-birthweight babies, child abuse and neglect, and unemployed adolescents and adults. The FSC program is a public/private partnership administered jointly by the Social Services Administration of the Department of Human Resources and participating foundations and overseen by a non-profit corporation called Friends of the Family. Initial state funding was augmented by grants from many foundations along with the US Department of Health and Human Services. By FY 1990-91 with a total budget of \$3.8 million the FSC program had expanded to 13 sites providing services to more than 2,500 individuals annually.

Key Events

- 1984 Governor's Commission on Children and Youth created. Frank Farrow, Director of Social Services Administration at Department of Human Resources, convenes working group to develop a family support initiative.
- 1985 Governor includes FSC proposal in his budget recommendation to General Assembly. Budget Committee awards \$300,000 to FSC program. Straus and Goldseker Foundations commit \$50,000 each. Four sites selected from 30 proposals made by community organizations.
- 1986 Legislature approves \$600,000 in funding for FSC program. Federal grant of \$75,000 from National Center on Child Abuse and Neglect facilitates expansion to eight sites.
- 1987 Ford Foundation announces grant of \$128,000, Knott Foundation awards \$27,000 and Public Welfare Foundation provides \$110,000.

1988 Goldseker increases its commitment to \$75,000 per year. Legislature increases state funding to over \$1 million. Annie E. Casey Foundation awards grant of \$7.5 million over five years for major reform of child and family service system; FSC program is a component of this reform.

Two sites are closed. One new center opens, the first to be located in a public school.

1989 Friends of the Family receives \$880,000 annual grant from US Department of Health and Human Services for Family Start, a program providing child development services to 120 families in Baltimore City over a five-year period. Four new centers open.

1990 Expansion of Home Intervention Program which provides intensive home visiting services to 500 families under stress. Five new Family Support Centers open.

1991 Friends of the Family wins Award for Innovations in State and Local Government cosponsored by the Ford Foundation and Harvard University's Kennedy School of Government.

Program Description

Organization The FSC program is jointly sponsored by the Social Services Administration of the Department of Human Resources and participating private foundations. It is administered by Friends of the Family an independent non-profit corporation overseen by a board of directors. Individual centers are sponsored by community-based agencies such as community centers, Catholic Charities, churches etc. Community advisory boards provide programmatic and administrative assistance to each center.

Goals To develop community-based support services that prevent unwanted pregnancies among adolescents; assist adolescent parents to become better parents; assure the healthy growth and development of children of adolescent parents; and help adolescent parents remain in the mainstream by completing school and preparing for employment.

Funding The program is supported by the State of Maryland Department of Human Resources, Department of Health and Mental Hygiene, Department of Education and the Office for Children, Youth and Families. Additional funding sources include the US Department of Health and Human Services and eight private foundations. The overall budget is supplemented by contributions from community partners centers' sponsoring agencies and individuals. Centers also benefit from the help of volunteers and contributions of in-kind space equipment and services.

Staff Qualifications of staff are negotiated between Friends of the Family and local program sites.

Services Each center provides the following core services: child care programs for children 0-3 years educational and literacy opportunities; job skills training; developmental screening for infants; advocacy and community-building; adolescent pregnancy prevention; parent education and support; program and service coordination with other agencies; health education and referral.

Participants Participation is limited to adolescent parents, their partners and family.

Parents' Role Parents contribute to planning social, recreational and peer support activities.

Evaluation The Friends of the Family evaluation system provides monthly process and quarterly outcome data on services provided by all Family Support Centers. The monthly summary provides data on services provided; number of participants by age, gender and type; minimum and maximum number of visits and number of units of service provided for each type of service. Annual and quarterly reports provide outcome and more extensive demographic data. (H.F.R.P., 1992, pp. 11-14)

Minnesota: Early Childhood Family Education (ECFE)

As early as 1974 the Minnesota state legislation authorized the funding of six Early Childhood Family Education (ECFE) pilot sites in local school districts under the auspices of the State Department of Education. The central purpose of ECFE is to enhance the competence of parents to provide the best possible environment for the healthy growth of their children during the formative years between birth and kindergarten enrollment. The program is voluntary and open to expectant parents, grandparents, foster parents, siblings, and others who have substantial involvement with and responsibility for children under the age of five. The state legislation established an innovative funding mechanism combining state aid with a property tax-based levy which allowed for rapid expansion of the initiative from 34 sites in 1984 to 380 sites in 1991 throughout the state.

Key Events

- 1973 Democratic Farmer-Labor Party assumes majority in Senate Jerome Hughes becomes Chairman of Education Committee and introduces first ECFE bill which is laid over until 1974.
- 1974 ECFE bill reintroduced. Compromise negotiated which gives Council on Quality Education \$230,000 to initiate six pilots. ECFE Advisory Task Force is established to oversee program.
- 1975-1979 Gradual expansion of pilot program to 36 sites in 29 districts by 1979. Appropriations for FY 1979-80 are \$1.65 million.
Grant category for serving economically disadvantaged parents is established.
- 1980-1982 Revenue crisis results in budget cuts. ECFE appropriations are reduced by more than \$600,000 between FY 1980-81 and FY 1982-83.
- 1983 Hughes becomes President of Minnesota Senate. Legislature shifts responsibility for ECFE program to Community Education unit.

- 1984 Hughes sponsors legislation to introduce a funding formula combining: 1) revenue based on a district's population under five; 2) levy based on the local property tax base; and 3) state aid based on the difference between revenue and levy. Legislation specifies program characteristics and accounting procedures and requires teacher licensure for staff.
- 1985 Local districts allowed to levy for FY 1986-87. Levy increased for FY 87-88. Expectant parents included among eligible participants. Roughly 70 districts operate ECFE programs.
- 1986 First year of implementation under funding formula. Total state appropriations increase to over 55 million with local levy generating nearly 57.5 million. 253 out of 435 school districts offer ECFE services.
- 1989 Total FY 1989-90 funding increased to over \$23 million; 340 districts offer ECFE programs.
- 1990 Legislature provides one-year grant of \$500,000 for up to 10 demonstration sites for expansion of ECFE to K-3 children and their families. Department of Education hires Parent Involvement Specialist [a build upon ECFE: experiences for K-12. Adult and Family Education unit is established. Short term parent outcome study implemented.
- 1991 Legislature changes funding formula to increase funding for ECFE by 13.5 percent over the next two years. Three hundred and eighty districts encompassing 98 percent of the population levied to offer the program in 1991-92.

Program Description

Organization During the pilot phase, the Council on Quality Education, as part of the State Department of Education, awarded competitive grants for ECFE programs to school districts.

In 1984 responsibility for ECFE was assigned to the Department of Education's Community Education unit. A peer-based regional staff network facilitates information dissemination and problem solving. Local advisory councils are appointed by the district for each program.

Goals The major goals are to strengthen families by supporting parents in their child rearing efforts; offer child development information and alternative parenting techniques; foster effective communication between parents and their children; supplement the discovery and learning experiences of children; and promote positive parental attitudes throughout the children's school years.

Funding Initial funding in FY 1974-75 for six pilots was \$230,000 from the Council on Quality Education. Funding, based on the formula introduced in 1984 was approximately \$9.7 million in state aid and \$13.7 million in property tax revenue for 340 programs in FY 1989-90. Local districts may also charge participants reasonable fees, but must waive fees for those unable to pay. Funding may also be received from other sources including state vocational-technical aid, federal grants and foundation funds.

Staff Most programs employ parent educators early childhood teachers and a coordinator on a full-time or part-time basis. All teachers must be licensed as parent educators or early childhood teachers.

Services Local services may vary, but the most common form of programming is a weekly class for children held simultaneously with a parent class. Services may also include home visits for outreach, education and support, special events, access to toys and books, newsletters, sibling care, and special services for particular populations (e.g., Southeast Asian immigrants, single parents, teen parents).

Participants All children from birth to kindergarten are eligible as well as the parents grandparents foster parents and/or anyone responsible for the care of such children. Expectant parents are also eligible. Special efforts are made to recruit low-income families and those experiencing stress. The average rate of participation is 35 percent of the eligible population, with up to 90 percent participating in some districts.

Parents Role Parents constitute a majority of the membership of local advisory councils.

Evaluation There were several formative evaluations during the pilot phase of the program. Since then local programs have been required to submit annual reports of participation rates by type of activity to the State Department of Education. Demographic data on all families is collected and compared to the actual composition of the community. A data base for future longitudinal studies is being developed from information provided by each child's enrollment form. A short-term parent outcome study is underway and follow-up studies are being undertaken to identify continued involvement of past participants.(H.F.R.P., 1992, pp.11-14)

Missouri: Parents as Teachers (PAT)

Under the Early Childhood Development Act of 1984, Missouri became the first state in the US with a statutory mandate to provide parent education and family support services in every school district. The Parents as Teachers (PAT) philosophy is that parents are the child's first and most influential teachers and that the role of the school is to "assist the family in giving the child a solid educational foundation." The program aims to enhance child development and scholastic performance through parent education and preschool developmental screening. PAT began in 1981 as a pilot program in four school districts with federal and local support and funding from the Danforth Foundation. In FY 1990-91 with a budget of \$13 million PAT served over 100,000 families with children under five. As of 1991, 200 PAT programs have been established in 35 additional states (with enabling legislation and funding in 12, [as of 1993- PAT is in 42 states]) as well as three in New South Wales Australia. Delaware was the first state outside of Missouri to offer PAT statewide.

Key Events

- 1981 Second Conference for Decision Makers held to provide state direction in early childhood/parent education. Conference participants launch New Parents as Teachers (NPAT) based on Burton White's model. NPAT becomes collaborative effort of the Department of Elementary and Secondary Education and the Danforth Foundation.

Four school districts selected as NPAT pilot sites on the basis of competitive proposals. Department of Education commits \$130,000 from state's Chapter II ECIA funds. Mildred Winter selected to administer the pilot.

- 1982 An advisory committee, Committee on Parents as Teachers (CPAT), is created with political and fund raising functions. Committee members include medical, educational and political leaders from across the state.

- 1984 Governor Kit Bond travels throughout Missouri to mobilize public endorsement for NPAT and works for bipartisan legislative support.
- Early Childhood Development Act authorizes parent education and screening for children birth to age five. Legislation mandates provision of services in all 543 school districts.
- 1985 Legislature appropriates \$2.7 million for PAT program. NPAT Evaluation Report released by Research and Training Associates of Overland Park, Kansas. Winter sets up statewide training institutes.
- First year of statewide implementation of developmental screening for children ages one and two and parent education for parents of children birth to three. Districts are reimbursed for 10 percent of eligible population.
- 1986 Second wave PAT evaluation study involving 37 school districts is begun. Districts reimbursed for 20 percent of eligible population.
- 1987 PAT National Advisory Board convenes. PAT National Center established with assistance of the Greene, Danforth and Ford foundations.
- Districts reimbursed for 30 percent of eligible population. Follow-up study of NPAT participants entering kindergarten is initiated.
- PAT awarded the Ford Foundation and Harvard University's Kennedy School Innovations in State and Local Government Award.
- 1988 Legislature appropriates \$11.4 million for PAT.
- 1989 National Center receives Danforth Foundation grant to build capacity in public policy arena. Independent follow-up study of NPAT pilot project shows carryover of early gains to formal school experience.
- PAT selected as one of eight recipients of the Council of State Governments' Innovations Award.
- 1990 US Senator Kit Bond riles SB 2366, "Parents as Teachers: The Family Involvement in Education Act of 1990," providing \$20 million for five years for implementation or expansion of PAT programs.
- PAT selected by Bureau of Indian Affairs to be implemented in five sites as part of its Early Childhood Development/Parental Involvement Pilot Program. National Governors' Association commends Missouri for its PAT program.

Program Description

Organization PAT is administered by the Department of Elementary and Secondary Education and implemented in every school district in Missouri. Parent educator training program evaluation and national dissemination of the PAT model are the responsibility of the PAT National Center, which is overseen by the National Board. Community advisory groups assist with planning and implementation at the local level, and build support for the program in the community.

Goals The goals of the program are to provide parents with information and guidance to assist their child's physical, social, and intellectual development, and to reduce the stresses and enhance the pleasures of parenting. The long range objective is to minimize the need for expensive remediation and special education services.

Funding The NPAT pilot was funded with local and federal dollars from Chapter II ECIA funds. State funding, which began in FY 1985-86, has increased to \$13 million for FY 1990-91. Local districts are reimbursed by the state for 30 percent of eligible families. Additional school district and in-kind funds are provided at local discretion. Private funding since 1981 from the Danforth, Ford and other foundations has amounted to more than \$1 million.

Staff Parent educators and program directors are hired by local districts, but selection criteria are set by the state board of education. Parent educators must complete a required program of pre-service and in-service training.

Services School districts are mandated to provide three types of services: parent education in the form of home visits, parent group sessions, and developmental screening for physical, cognitive, and language development of children through age four. Additional services, such as "drop in and play" times, toy and book lending libraries, parent newsletters, and referrals are offered by most centers.

Participation Parents with children birth to four are eligible for services. Although PAT is a universal program, special efforts are made to enroll parents of newborns and at-risk families.

Parents' Role Some parents participate in local advisory boards and district parent councils.

Evaluation A summative evaluation was part of the pilot design. Research and Training Associates compared 75 participating families with a comparison group and found positive child outcomes (better intellectual language and social development) and positive parent outcomes (increased knowledge of child development, positive feelings about PAT and the school district). A pilot project follow-up study in 1989 found that PAT children scored significantly higher on standardized measures of math and reading in first grade than did comparison children, and that PAT parents were more involved in their children's school experiences than were comparison families. A second wave evaluation was conducted from 1986-90 to study the program's impact on 400 randomly selected families from 2500 enrolled in 1986-87 in 37 school districts. A further study of parent outcomes and parent-child interaction was conducted with a subsample of 150 urban families. (H.F.R.P., 1992, p.21-25)

Arkansas: Home Instruction Program for Preschool Youngsters (HIPPY)

Home Instruction Program for Preschool Youngsters (HIPPY) began in Israel in 1969. Arkansas adopted this home-based school readiness program for children at risk of failing in school. HIPPY provides parents with a structured two-year curriculum of daily lessons in an attempt to create an enriching educational experience for children and empower parents to become effective and involved teachers. HIPPY utilizes paraprofessionals recruited from the participants own community to instruct and provide peer support for parents and to lead group meetings. Due to its success, HIPPY has been replicated rapidly throughout Arkansas and served over 2,500 children at 22 sites in 1990. HIPPY USA, the national organization, was started in the USA by the National Council of Jewish Women. Today, HIPPY USA has 58 programs in 17 states.

Program Development

HIPPY was designed in Israel in 1969. Arkansas contracts the program from its sponsors at Hebrew University through its HIPPY USA office in New York City. In 1985 HIPPY caught the attention of Arkansas First Lady Hillary Clinton and she became its advocate among state educators. After a statewide conference and attendance by state educators at the HIPPY International Workshop in Israel four HIPPY projects were funded by foundation grants in 1986.

Key Events

- 1984 The first US HIPPY program begins.
- 1986 The first four Arkansas HIPPY programs begin.
- 1987-1988 Fifteen additional programs initiated throughout the state.

- 1990 Arkansas Children's Hospital becomes first site for a HIPPIY Regional Training and Technical Assistance Center, and statewide jurisdiction transferred to the center. Three additional sites added.
- 1991 Arkansas State Legislature allocates \$15 million to the ABC Act. Eleven additional HIPPIY sites added for a total of 33.

Program Description

Organization [Former] Governor and Mrs. Clinton initially promoted HIPPIY, and the Governor's Early Childhood Program coordinated fund raising and service delivery until 1990. Since then, the HIPPIY Regional Training and Technical Assistance Center at the Arkansas Children's Hospital has coordinated administration grant distribution, staff training and evaluation. Locally, HIPPIY funds are awarded to school boards and private non-profit groups such as community centers, YWCAs and community action agencies, as well as a state educational cooperative.

Interagency Coordination HIPPIY projects have been linked to preschool and job training initiatives. School districts where HIPPIY programs operate "adopt" the program. The ABC Act requires local HIPPIY projects to form Community Advisory Committees composed of parents, school personnel, human service agent representatives, government officials and local business representatives.

Goals HIPPIY seeks to promote school readiness by enhancing parents involvement and interest in their child's academic success. HIPPIY empowers parents by rekindling interest in their own academic potential training them as paraprofessionals, and addressing their needs and interests in biweekly group meetings. Long-term goals of the program are to reduce welfare dependence and unemployment among parents, increase parental involvement in the public schools, and reduce dropout rates among HIPPIY children.

Funding Until 1991, 90 percent of HIPPIY funds came from federal sources with foundations and private organizations contributing the rest. HIPPIY's dual focus on adult education/literacy and early childhood education enables it to secure both Job Training Partnership Act (JTPA) and Chapter I and II funds. School districts provide direct financial aid and in-kind donations. Foundations private organizations and the local business, community also offer financial support.

Approximately 60 percent of HIPPIY's FY91-92 budget came from the 1991 ABC Act. The legislation requires local matches from foundations, businesses, school districts and other governmental programs such as Title XIX of Medicaid. Individual project funding varies by size and need.

Participants HIPPIY provides services to the parents of educationally at-risk children over a two-year period, starting the year before the child begins kindergarten. At-risk families are defined as those with low income or education levels, adolescent parents, a low-birth weight child, or those with problems of substance abuse, alcohol abuse or child abuse or neglect.

Staff HIPPIY recruits and trains parents from the immediate community to provide home instruction. These paraprofessional parents work with 10-15 families each. To qualify for training they must have a four-year old child and almost all of them

are women. Every program employs one coordinator for every 12 parent educators. Coordinators are expected to have a bachelor's degree and a background in management and early-childhood education. Staff guidelines are set by HIPPY USA.

The Arkansas Children's Hospital Technical Assistance and Training Center provides pre-service and in-service training for all the HIPPY sites. It employs two full-time trainers who provide technical assistance across the state.

Services Parent educators conduct bimonthly home visits and provide parents with teaching materials and culturally sensitive instructions on preparing children for school. Parents are expected to conduct 15-minute lessons with their child every day to develop the child's pre-reading/language, cognitive distinction and problem-solving skills.

On alternate weeks mothers attend group meetings to share experiences with peers and participate in enrichment programs. Meeting topics include: health, safety, nutrition, child rearing, making toys and games, stress management, job training and adult education.

Parents Role The highly structured curriculum precludes parental input in the program's design but parents are involved as paraprofessional staff and in planning events for children and group meetings.

Evaluation HIPPY programs gather data in the form of parent self-esteem inventories, JTPA literacy tests for parents, and achievement tests for children. The data are available to local sites for improvement and fund raising. The Arkansas Children's Hospital technical assistance center now serves as a data tracking site for all HIPPY programs. The US Department of Education has also begun evaluations of three HIPPY projects nationally, one of which is in Arkansas. (H.F.R.P., 1992, pp.1-5)

Oregon: Together For Children (TFC)

Oregon's Together for Children allows communities to formulate their own service strategies for parent education within broad parameters set by the state. TFC stresses responsiveness to the strengths and needs of local communities. The program encourages coordination between community agencies and local school districts and innovation in service delivery in an attempt to eliminate early school failure. The program was established in 1988 as a companion to early-childhood education initiatives and as an alternative intervention for at-risk children. TFC also attempts to avoid the pitfalls of stigmatized services by employing broad eligibility criteria and integrating services for at-risk families with those for the general population. The program served over 500 hundred parents in 1990. Oregon had expanded this program for FY 1991-93 to serve five counties.

Program Development

Origins

TFC was one of two initiatives emerging from the Oregon Board of Education's State Early Childhood Initiative Project. Drawing its membership from a wide range of education and social service agencies the Project promoted an expansion of Head Start as well as the initiation of TFC. The TFC idea was based on Minnesota's Early Childhood Family Education and Missouri's Parents as Teachers.

Key Events

1986-1987 State Early Childhood Initiative Project drafts legislation for TFC which is passed by the Oregon General Assembly.

1988 Three TFC projects begin operations.

1989-1991 TFC refunded for two successive bienniums.

Program Description

Organization State leadership for TFC is provided by the early-childhood division of the State Department of Education. The Department awards and monitors grants to local public non-sectarian, community-based agencies and community colleges. TFC requires the creation of a local advisory board composed of parents and community organizations.

Interagency Coordination TFC was promoted by an interagency coalition of representatives from education and human resources organizations, the governor's office and the legislature. The Department of Education was chosen as the lead administrative agency for its emphasis on prevention and its ability to involve local school districts. All TFC programs work directly with schools social service agencies community colleges Head Start and health agencies. These partnerships involve donations of space and time as well as joint delivery of services.

Goals TIC provides parents with information on child development and parenting as well as with formal and informal support systems to help solve family problems. The program focuses on family strengths, adopts sensitive and multicultural approaches to teaching parenting skills and works to build parent self-esteem and independence. TFC also strengthens links between community agencies serving families.

Funding The legislature appropriated \$267,000 for the implementation of the TFC initiative in 1988-1989. The Department of Education received an additional appropriation of \$66,000 for the administration and training costs of both the TFC and its companion pre-kindergarten initiatives. In 1989, TFC's funding was renewed at \$500,000 for 1989-91 and \$609,252 for FY 1991-93. Some sites also received small private grants and donations, in-kind contributions and fees from parents able to pay. Funding is determined by the number of families served and varies by site.

Participants The TFC initiative is open to parents of children up to eight years of age who are at risk of school failure. The definition of at risk includes children with single parents, step parents, teen parents, low-income families, dual career families, migrant families and families for whom English is a second language. This broad definition was adopted in an effort to serve as wide a population as possible. Almost half of the participants fall below the poverty level and many are teenage parents with low educational levels.

TFC also keeps the program open to as many kinds of families as possible to minimize the stigma often attached to "targeted" family services. Families who do not meet the at risk definition can utilize services for a fee, receive referrals and TFC literature, and participate in workshops.

Staff Backgrounds of program staff vary and the Department of Education has no formal requirements. All TFC programs include a staff development and in-service training component designed by directors at each site, and developed individually or in cooperation with professional associations.

Services TFC programs are required to offer parent education, training and support as well as access and referrals to community resources. Programs are free to choose how to deliver services. All three sites offer parenting classes for adults and teenage parents as well as some of the following: workshops on parenting topics, support groups, resource centers and libraries, phone call-in lines, crisis intervention, counseling, parenting literature and newsletters, family home visits, parent/child play groups, information and referral, community network enhancement, and parenting classes for migrant or Spanish-speaking mothers. Efforts are underway to expand day care provision for children of teen parents.

Parents Role The program is designed to incorporate participant feedback into program design. Some sites also have parent representation on advisory boards.

Evaluation The Oregon General Assembly did not appropriate funds to evaluate TFC. The Center for Urban Research in Education, the Oregon Community Foundation, and the Portland State University School of Education provided initial assistance with the annual descriptive reports required by the enabling legislation. These reports describe participation and services; summarize participant and staff evaluations of programming; and document human and fiscal resources used by the program. In addition, an independent consultant conducted site visits, completed a positive program assessment and developed tracking forms and procedures for the sites.(H.F.R.P., 1992, pp.13-17)

Vermont: Parent-Child Centers (PCC)

Vermont's Parent-Child Centers began as an effort to prevent child abuse and neglect through parent education and support. As Vermont's first community-based preventive and family-centered program PCCs are a vehicle for communities to address a range of family crises. PCCs are open to all families on a sliding scale basis. In 1992 they served over 3,500 families. The focus of services varies by site but all centers share the philosophy that education and peer support can help parents overcome the difficulties and isolation of parenting. PCCs have been cited as an effective model of prevention by the Governors Task Force on Teen Pregnancy and the Governors Team on Drop-out Prevention.

Program Development

Origins

The initial eight PCCs developed under the auspices of community action agencies in the mid-1960s and were largely funded with federal money. Committed to community-based preventive programming Vermont established the Children's Trust Fund in 1983 which added state funding to the PCC budgets.

By 1987, however, federal funding for the centers was endangered and PCC directors organized themselves into the Parent-Child Center Network. Rather than compete for funding as they had done with the Children's Trust Fund, the directors successfully lobbied the state legislature for a line item in the budget to maintain all the PCCs.

Key Events

1987 PCC Network established. Vermont General Assembly approves \$360,000 for eight centers.

- 1988 Bill sponsored to establish PCCs statewide does not pass. Funds appropriated for two new centers.
- 1989 Bill establishing PCCs statewide reintroduced and enacted by Vermont General Assembly. Funds appropriated for four new centers.
- 1990-1991 PCC's refunded for FYs 1990-91 and 1991-92. A separate \$40,000 grant secured for fifteenth center.

Program Description

Organization The planning division of the Agency of Human Services administers state funding to the PCCs. Agency staff work directly with the PCC Network to issue and monitor grants, develop services, and evaluate the effectiveness of the individual centers. A Peer Review Committee, composed of Agency of Human Resources staff and the Executive Committee of the PCC Network, meet annually with the Executive Director and the Board Chair of each PCC to discuss three year plans, core service delivery, development of birth to three services and coverage of catchment area. Grants are made to community-based organizations which provide prevention and early intervention services to families.

Interagency Coordination In addition to referrals to community resources, PCCs jointly deliver services with other human service agencies in particular geographical areas.

Goals PCCs provide preventive services for prospective parents and families with children under three years old. Aiming to prevent not only child abuse and neglect but a broad range of crises that put families at risk, PCCs have expanded their initial mission to include prevention of drug and alcohol addiction, teenage pregnancy, and unemployment. The PCCs also work to create a broad based network of community support services for all families and decrease the cost of later specialized services.

Funding PCCs are funded by state appropriations, federal agencies, state agency contracts, private foundations, fund-raising efforts, town budgets in-kind contributions and client fees. Vermont allocated \$360,000 to eight PCCs in 1987-88, \$10,000 to 10 PCCs in FY 1988-89, \$610,000 to 13 PCCs in FY 1989-90, \$615,646 in FY 1990-91, and \$612,324 to 14 PCCs in FY 1991-92. An additional \$40,000 was awarded by Vermont as a start-up grant for a fifteenth center. State grants to each center vary by number of families served and the state PCC appropriation accounts for between five and 40 percent of the center budgets.

Participants PCCs are designed for universal eligibility. However, program statistics reveal that most adult service recipients are women, most are under 30, and the annual income of almost two-thirds of families served is \$15,000 or less. Some centers receive special state funding under the Intensive Family-Based Services Act, which requires service to families at risk of abusing or neglecting their children.

Staff Staff qualifications and positions vary by site. Although training is not mandated by the state, the Agency of Human Services provides training upon request and has staff available for technical assistance. Many PCCs arrange their own in-

service training and the PCC Network sponsors statewide conferences and training

Services Services vary from site to site but fall into four categories oriented to children, parents, families and communities. The primary focus of child-oriented services is developmental child care including before-and after-school programs, infant care, and summer camps. Parent-oriented programming includes formal parenting education classes, informal parent support, and drop-in programs which disseminate information on varied topics and offer crisis intervention. Family-oriented services include play groups for children and home visits to help resolve family conflict and behavior issues. Community-oriented services include community needs-assessment surveys and health promotion endeavors. Many PCCs run programs on specific issues such as the prevention of drug and alcohol abuse.

Parents' Role The PCCs are required to include parent representation on advisory boards. Where PCCs operate under the management structure of a larger agency, this requirement enables parents to shape curriculum agency operations and scheduling.

Evaluation All PCCs collect basic data on families served and submit biannual program and financial reports. The 1988 report to the state legislature on Parent-Child Centers in Vermont proposed a more extensive evaluation system involving the collection of standard information on children and families and PCC services across the state. A subcommittee of the PCC Network is currently developing performance and reporting standards. The peer evaluation process has also been a central evaluation component. (H.F.R.P., 1992, pp.13-16.)

Federal Programs

Federal Initiatives in Parent Education

The federal government provides some funding for parent education programs.

These include:

Comprehensive Child Development Program

The Comprehensive Child Development Program was established by Congress in 1988 and administered by the Administration for Children, Youth and Families, U.S.

Department of Health and Human Services. Stief (1993) noted:

The program was established to provide intensive, comprehensive, integrated, and continuous support services to children from low-income families from birth to entrance into elementary school and to provide needed support services to parents and other household family members to enhance their economic and social self-sufficiency. (p.23)

As of 1993 there were a total of twenty-four programs nationwide in the following states: Arizona, Arkansas, California, Colorado, Florida, Iowa, Kansas, Kentucky, Maryland, Massachusetts, Michigan, New Mexico, New York, North Dakota, Pennsylvania, Tennessee, Texas, Utah, Vermont, Washington, Wisconsin, and the District of Columbia.

Even Start

The federal Even Start program (Part B of the Elementary and Secondary School Improvement Amendments of 1988) was started to promote family literacy. This program, according to Stief (1993), is administered by the Department of Education, and was designed to improve educational opportunities of children and adults by integrating early childhood education and adult education for parents into a unified program.

Even Start programs have three interrelated goals:

- to help parents become full partners in the education of their children;
- to assist children in reaching their full potential as learners; and
- to provide literacy training for parents.

To be eligible for a program a parent must need basic adult education, reside in a school attendance area that receives Chapter One funds, and have a child under age eight. Even Start programs are usually run by local school districts and at least some part of the program is required to be home-based. The National Literacy Act of 1991 amended Even Start to change its name to the Even Start Family Literacy Program. The new law also established community-based organizations and other nonprofit organizations as eligible entities for grants. Even Start funding reached \$70 million in 1991, triggering a provision in the original law that when funding passed the \$50 million mark, the program would be turned over to the states. As of 1992, the administration of the Even Start program was shifted to the states. To date, 240 school districts across the nation have received Even Start grants. (Stief, 1993, p.23)

Family Resource and Support Program

Family Resource and Support (FRS) programs are part of the Human Services Reauthorization Act of 1990, which authorized funding for a National Resource Center. to assist states in establishing networks of local family resource and support programs in collaboration with existing agencies.

The National Resource Center for Family support Programs was established in 1991 with a grant awarded to the Family Resource Coalition in Chicago, Illinois. This year, Congress appropriated \$4,910,000 for state grants. Applications are currently being reviewed. FRS programs are required to provide educational and support services to assist parents in acquiring parenting skills, learning about child development, and responding appropriately to the behavior of their children. In addition, programs must offer developmental screening, outreach services, community referral, and follow-up services. (Stief, 1993, p.24)

Other federal programs

Parent education and infant services are also offered through other federal programs including Head Start , Chapter One, the Family Support Act, the Education of the Handicapped Act, the Bilingual Education Act, the Carl D. Perkins Vocational Education Act, and the Omnibus Budget Reconciliation Act of 1993.(Stief, 1993)

These programs are primarily either limited in scope or available predominately to high-risk populations.

H.R. 520

Congressman Wheat of Missouri had proposed a Bill H.R. 520 (1991) to provide federal support for infant intervention and parenting programs. A copy of this Bill is included in the Appendix . If passed, this legislation would have awarded grants to states for establishment of these programs. The grant would give priority to high-risk populations or any state operating a parents as teachers program which is associated with the Parents As Teachers National Center in St. Louis, Missouri. The researcher contacted both the Senate and the House for insight into this legislation. Congressional

spokesperson Sam Alfriti, was very helpful in providing information on this bill.

According to Mr. Alfriti, the original intention of this Bill was to extend federal support to the Parents as Teachers Program because "imperial evidence shows that PAT works and is an excellent investment." Although this legislation had bipartisan support from both congressman Wheat and Senator Bond, the bill was not passed into law.

In a telephone conversation (January, 1994) Mr. Alfriti stated the following:

We learned this bill couldn't be approved by itself. To obtain funding it needed to be part of a more comprehensive larger bill. Therefore, efforts are being made to include portions of H.R 520 in Goals 2000 and the Reauthorization of Elementary and Secondary Education Act.

However, even if some federal funding is allocated through H.R.520, this is not a federal mandate to require these programs in our public schools.

Supportive Agencies/Programs

There are several supportive agencies such as United Way's Success By Six, the Children's Povertyline Campaign (see Appendices E & F), and the Linking Network For Kids (LINKS). LINKS is well organized. LINKS provide a newsletter which includes legislative policy updates and lists conference dates of member organizations. Because providing a link to the community is vital to the long term success of a program, this national link of child-related agencies is included. Additionally, most communities have their own resources which may be supportive in the establishment and running of intervention/parenting programs.

According to the May 1993 LinksLetter, the following organizations are members of LINKS:

Child Welfare League of America (CWLA) is a federation of 700 public and voluntary child welfare agencies, community-based and regionally organized, working with children and their families on critical issues such as child abuse, adolescent pregnancy, adoption, out-of-home care, child day care and homelessness. More than 200,000 professionals work at member agencies, serving two million children and their families each year. LINKS Representative: Marjorie Kopp, Child Day Care Program Director and Policy Analyst, CWLA, 440 First Street NW, Suite 310, Washington DC 20001; 202/638-2952.

Division for Early Childhood of the Council for Exceptional Children (DEC), formed in 1973, is a professional organization for individuals who work with or on behalf of infants and young children (birth through 8) who have special needs and their families. Children with special needs include those who are disabled, gifted or at risk of disabilities or developmental delays. DEC currently has a membership of approximately 7,000. LINKS Representative: Dr. Barbara Browne, George Washington University, Dept. of Teacher Preparation and Special Education, Suite 524, 2201 G St. NW, Washington DC 20052; 202/994-1548.

National Association of Child Care Resource and Referral Agencies (NACCRRA) is a national membership organization of more than 400 community child care resource and referral agencies. Dedicated to quality, these local agencies offer parents detailed, up-to-date information about the full range of local child care and early education programs and providers, current openings and sources of financial aid. Each year, NACCRRA members help nearly 750,000 parents choose child care from more than 250,000 providers listed on the CCR&R data bases. Because of these daily contacts with parents and child care providers, the resource and referral agencies play leadership roles in building their communities' child care supply by leveraging resources through public/private partnerships with unions, employers, foundations and community organizations. LINKS Representatives: Yasmina Vinci, Executive Director, Deborah Bric; Sarah Nordmann, Member T/A Services; NACCRRA, P.O. Box 40246, Washington DC 20007; 202/333-4194.

National Association for the Education of Young Children (NAEYC) is the nation's largest membership organization of early childhood professionals and others dedicated to improving the quality of services for young children and their families. NAEYC, founded in 1926, is a nonprofit organization of more than 83,000 members in 425 affiliate groups who believe the years from birth through 8 are critical years of development. NAEYC offers a wide range of services to assist early childhood professional, parents, policy makers and others in learning more about child development and early education and improving the quality of services to children from birth to age 8. LINKS Representative: Elizabeth Ford, Director of Special Projects, NAEYC, 1509 16th St. NW, Washington DC 20036-1426; 202/232-8777.

National Association for Family Day Care (NAFDC) is a national nonprofit professional membership organization of family and group child care home providers and advocates. Its mission is to improve the quality of care for children through a professional accreditation program, setting a standard of child care quality. NAFDC also offers support systems for individual family child care providers through local and state associations. LINKS Representatives: Linda Geigle, President, 801/268-9492, and Betty Cassidy, Vice President, 703/823-1385; NAFDC, 1331 A Pennsylvania Ave. NW, Suite 348, Washington DC 20004.

National Black Child Development Institute, Inc. (NBCDI), founded in 1970, is the only national organization dedicated to improving the quality of life for Black children and youth on the national and local levels. NBCDI primarily focuses on issues and services in four major areas: health, child welfare, education and child care/early childhood education. With an affiliate network in 42 U.S. cities, NBCDI monitors public policy issues, publishes reports and newsletters and convenes public educational forums, including an annual conference. LINKS Representative: Erica Tollett, NBCDI, 1023 15th St. NW, Suite 600, Washington DC 20005-5002; 202/387-1281.

The National Head Start Association (NHSA) is the membership organization representing the 622,000 children, 105,000 staff and more than 1,900 Head Start programs in America. It is the only national organization dedicated exclusively to the concerns of the Head Start community. NHSA is a private not-for-profit corporation governed by a 49-member board of directors composed of parent, staff, director and friend representatives from each of the 12 federal regions. LINKS Representative: Sarah Greene, Chief Executive Officer, NHSA, 201 N. Union St., Alexandria VA 22314; 703/739-0875.

Zero To Three/National Center for Clinical Infant Programs is the only national nonprofit organization dedicated solely to improving the chances for healthy physical, cognitive and social development of infants and toddlers and their families. Zero To Three is committed to exercising leadership in developing and communicating a national vision of the importance of the first three years of life and of early intervention and prevention to promote a child's healthy growth and development. LINKS Representative: Virginia View, Zero To Three/NCCIP, 2000 14th St. N., Suite 380, Arlington VA 22201; 703/528-4300.

Children's Defense Fund (CDF) is a nonprofit research and advocacy organization that exists to provide a strong and effective voice for the children of America, who cannot vote, lobby or speak out for themselves. CDF pays particular attention to the needs of poor, minority and disabled children. Its goal is to educate the nation about the needs of children and encourage preventive investment in children before they get sick, drop out of school, suffer family breakdown or get into trouble. LINKS Representative: Gina Adams, CDF, 25 E. St. NW, Washington DC 20001; 202/6623545.

Child Care Law Center is a national nonprofit legal services organization working for the development of safe, high-quality and affordable child care. The Center provides technical assistance to legal services offices, R&R's, child care providers and advocates. LINKS Representative: Carol Stephenson, Executive Director, Child Care Law Center, 22 Second St., 5th Fl., San Francisco CA 94105; 415/495-5498.

George Washington University, The Early Intervention Programs is in the Department of Teacher Preparation and Special Education. The programs have a long history of providing training to the early intervention community. Masters of Arts degrees are offered in the fields of infant and early childhood special education. Special projects focus on training child care providers to include children with special needs and helping special educators to be consultants and collaborators to preschool programs. LINKS Representative: Carole Brown, GWU, Dept. of Teacher Preparation and Special Education, 2201 G St. NW, Washington DC 20036; 202/994-7328.

Georgetown University Child Development Center (GUCDC), started in 1955 as a diagnostic clinic, has expanded to include interdisciplinary training of health, mental health and education professionals. Community outreach initiatives include working with homeless children and families, individuals with AIDS and group homes. National projects provide training and technical assistance to Head Start staff and families, CSHCN directors and states implementing Part H and Section 619 of IDEA. GUCDC has focuses on improving the delivery of systems of care for children with special health and developmental care needs and their families. This Center plays a leadership role in national and state policy development related to children with special health care (including mental health care) needs and their families. LINKS Representatives: Roxanne Kaufmann, GUCDC, 2233 Wisconsin Ave. NW, Suite 215, Washington DC 20007; 202/338-1698; Pam Coughlin, 202/687-8705.

Family Resource Coalition is a national, multi-racial, not-for-profit membership organization that represents some 2,500 community-based family resource programs and thousands of people who work with programs and families throughout the U.S. and Canada. Its major function is to provide information, technical assistance and training for people involved in this rapidly growing discipline. LINKS Representative: Bryan Samuels, Director of Public Policy, FRC, 200 South Michigan Ave., Suite 1520, Chicago IL 60604; (312) 341-0900.

Judge David L. Bazelon Center for Mental Health Law (formerly Mental Health Law Project) was formed in 1972 as a national nonprofit public-interest organization to establish the legal rights of people with mental retardation and mental illness and end the exclusion of children with disabilities from the nation's public schools. Today the Bazelon Center promotes access to resources and services that will give children and adults with mental disabilities the choices and opportunities other Americans enjoy. The Center's child advocacy emphasizes access for children with disabilities to health care and income support through the federal SSI program and the creation of family-and community-based care and support systems for young children at risk of developmental delay or disability and for emotionally disturbed children at risk of institutionalization. LINKS Coordinators: Margaret Lorber and Leticia Patino, Bazelon Center, 1101 15th St. NW, Suite 1212, Washington DC, 20005-5002; 202/467-5730. (pp.2-4)

Legislative

Weiss (1989) traced steps of four pioneering states who were successful in implementing intervention/parenting programs: Connecticut, Maryland, Minnesota, and Missouri.

Our research shows how a small group of policy entrepreneurs went about the essential political job of convincing executive and agency staff, legislators, and others to add support and funding of this new type of service to the states policy and funding agenda. These entrepreneurs - usually a legislator or a state agency staff person - saw the promise of family support as a means to achieve important goals in public education or social services. They devoted their substantial political skills and understanding of their state's politics, as well as considerable time, to building support for the initiative among members of the legislature, the governor's office, state administrative personnel, relevant advocacy organizations, and professional and provider groups in each state. (p.268)

As may be concluded by the preceding paragraph, there are several lessons to be learned from the experiences of these policy entrepreneurs beginning with the importance of leadership, and the political skill to read what will motivate state policy makers. In Minnesota and Missouri policy entrepreneurs capitalized on growing interests in early childhood preventative interventions. In the 1970s, when they began to generate support, the need for early intervention programs was tied to the prevention of more costly remediation efforts later. Policy advocates in Missouri predicted upcoming increases in educational expenditures, and brought in nationally known experts to present models for discussion at public conferences.

Connecticut and Maryland also took advantage of the growing importance paid to children's issues within the political trends. Children's well-being was linked to the state's economic well-being. In Maryland, family support programs were promoted as a deterrent to the growing number of teen pregnancies. In Connecticut, there was much concern for the welfare of minority families, particularly single and adolescent mothers. Accordingly, Parent Education and Support Centers were linked to preventing problems for these populations.

In 1976, when Kentucky's Parent and Child Education (PACE) program began, the state was ranked last in the country in the percentage of adults who completed high school (H.F.R.P., 1993). In an effort to address the issue of intergenerational illiteracy and the related problem of attracted industry to a state whose workforce was undereducated, PACE advocates convinced the Kentucky General Assembly to appropriate \$1.2 million for family support and education in 12 school districts. Due to the success of this program by 1992, 30 districts were serviced. As of 1993, 531 adults, 517 children, and 512 families were being served by the program (Stief, 1993).

The policy entrepreneurs of each state tried to fit their initiatives into the particular policy agendas of key decision makers. This includes governors, key commissioners and legislators, and special interest and advocacy groups. In sum, family support programs were proposed as part of the solution to family-related concerns including teen-age pregnancy, illiteracy, unemployment, and rising social welfare costs.

A second lesson according to Weiss (1989) was the "Importance of understanding and shaping the program in light of the prevailing values and beliefs in each state about the role of government in family life" (p.270).

Missouri has historically been a politically and fiscally conservative state. This factor was complicated by the prevailing belief in the state that the education of young children is strictly the responsibility of the parents. Incorporating these beliefs into a parent focused program, not only structured the program but was the political strategy used to sell it. The program was presented as initiatives to assist parents in raising their children. The Parents As Teachers proponents also emphasized the program's cost-effectiveness.

Also successful policy entrepreneurs in these states were able to avoid association with controversial family related issues. For example, Maryland and Minnesota avoided the issue of abortion and church-state relations. Minnesota was careful to keep provisions of child care out of the legislation because child care connected to public schools would have been politically unacceptable (Weiss, 1989).

The likelihood of broad and bipartisan support also was enhanced by the careful attention paid to framing the programs so they would not be seen as usurping parental responsibilities, or as efforts by the state to dictate how to parent. Proponents shaped the various initiatives in order to ensure a strong community base as well as community input and that, in turn reduced some of the concern about state government's entry into the parenting arena. Finally, initiatives were characterized and presented in terms that addressed the policy values and goals favored by both liberals and conservatives (i.e., promoting well-functioning, independent, self-supporting families who can contribute to the economic and social growth of the state and nation.) (p. 271)

The third lesson in implementing programming, according to Weiss (1989), was the need to enlist and maintain the support of a number of key actors in order to initiate and maintain the program:

Once a commitment was made to develop a programmatic initiative, the policy entrepreneurs conducted an informal environmental scan to determine the most likely sources of support and opposition. Continuous attention was paid to understanding the views and current interests of the various actors within the state policy arena. (p.271)

The scan typically led to certain members in the following groups: the governor and his staff, state legislators and their staffs, personnel in key agencies, service providers and the business community. Also, it was important two other groups be considered during the initial stages of policy formation, as well as later on: implementors at the local level such as program directors and staff, secondly; potential or actual participating parents. The scanning process is ongoing. According to Rabinowitz (Peirce, 1992), the goal was not necessarily to develop a perfect program, rather to develop "a tailored solution fitting the local, social and political environment" (p.2)

As Demarest (1993) argued, it is important for policy makers and practitioners to think in terms of groups of factors working together, and in terms of probabilities rather than certainties.

A fourth lesson, which ties into the earlier discussion, is the importance of understanding turf issues from within and across agencies. Weiss and Halpern (1989) recognized that policy makers want evaluations yet will rarely pay for them due to scarce

resources. Therefore, they caution not to over promise on the effectiveness of a program.

Set realistic goals and conduct accurate evaluations.

In summary, the experiences of these pioneering states showed that programming is interconnected with politics. The success of developing and maintaining a program is contingent upon understanding the prevailing state values and political climate along with the ability to enlist the support of a network of key legislators and players.

Evaluations

Evaluations of the programs presented here, which are representative of other states and programs, prove that unilaterally these programs work. Kentucky, Maryland, and Arkansas, focus on high risk children, due to budgetary constraints and political issues.

A 1987 study (Stief, 1993) of Kentucky's Parent and Child Education program found that PACE children demonstrated an average of 28 percent increase in developmental abilities. A 1989 evaluation (Stief, 1993) found that adults improved their skills an average of 1.1 grade levels in reading, 1.7 grade levels in math, and 1.1 grade levels in language. Also 72% of former PACE parents passed their GED. Children who had received early intervention had much better attendance according to the Department of Education.

Maryland's Friends of the Family program reports (Stief, 1993) that 93% of children from 0-5 who are involved in with the Family Support Center had up to date immunizations compared to 56% statewide. 83% of parents who were not high school graduates enrolled in school or education courses leading to a GED. No child who participated in this program was removed from his/her home, and 48 children were returned from foster care to their families. Among the parents who participated in the program, very few had repeat pregnancies.

Several studies (Stief, 1993) done in Arkansas have found that HIPPY children outscore non-HIPPY children in measures of school readiness and school achievement. HIPPY children are retained less often in the early grades. HIPPY USA, which was established in 1988 in New York City by the National Council of Jewish Women, conducted a survey which supports evidence that HIPPY enhances parent literacy. The HIPPY USA study (Stief, 1993) focused on a sample of research from their 80 HIPPY programs in 23 states which provided services to 11,000 families nationwide. This study found that parent's reading level rose significantly after parent participation.

Other states, such as Missouri, Vermont, Connecticut, and Minnesota, have universal programs. These programs are available statewide to all families upon request, although specific attention is paid to target children traditionally considered high-risk. These programs reduce the stigma associated with a strictly "targeted" program.

An evaluation of Connecticut's Parent Education and Support Centers, conducted by the University of Southern Maine (Stief, 1993), found that as a result of participation, parents: were more confident in their parenting skills; reported assigning appropriate consequences to negative behavior; and reported a reduction in family conflicts and an increase in parent-child negotiations regarding rules and limits.

At the conclusion of their pilot project, Missouri's New Parents as Teachers (NPAT) noted that children at age three were significantly more advanced than comparison group children in language, social development, and problem-solving

competencies that are essential to later school success. NPAT parents were knowledgeable about child development and child rearing practices and viewed the school district more positively than parents in the comparison group.

A 1989 follow-up study of these children that at the end of first grade, NPAT children scored significantly higher than the comparison group on standardized reading and math tests and were rated higher in school performance by their teachers. Significantly more NPAT parents initiated requests for parent-teacher conferences; NPAT parents were twice as likely as parents in the comparison group to be involved in their children's school experiences.

The Second Wave study looked at a broad range of families in the statewide Parents As Teachers program. Findings, released in July, 1991, showed that at age three, children in parents as Teachers on the average scored significantly above the national norms on measures of school related achievement. (Zero to Three, 1991, p. 25)

Minnesota, as well had reported these positive results:

A 1979 survey (Stief,1993) of kindergarten teachers in forty-nine schools found that a majority of teachers reported that children who had been in the ECFE program had more positive attitudes toward school, better preparation in pre-kindergarten basic skills, more confidence and social skills, fewer behavioral problems, better relationships with their parents, and greater emotional maturity.

Vermont's former Parent-Child Centers network chair, Christeen Binzen (Weiss,1989) states, "We know from experience that PCCs make a significant difference in the lives of children and families" (p.22). The state is currently working on a system to detail the effectiveness of their relatively recent program.

Oregon has expanded their definition of "at risk" to include single parents and two worker families, purposefully to encompass most of the community. Like several other states, Oregon had difficulty in securing appropriate funds for evaluation. In agreement with Weiss, Randy Hitz from the department of Education states (Weiss,1989), "Program evaluation is a major concern. Legislators seem to be reluctant to fund anything but direct services for children and families." (p.17) Regardless of the difficulty in obtaining a formal evaluation, independent consultants found the program to be very successful.

As far as federal or nationally affiliated programs are concerned, we have seen the results from HIPPI USA, and The PAT National Center prove that when these programs have been executed properly- they work. Likewise, the Head Start children, who are now adults, were more successful in school, were involved in fewer crimes, and were significantly less dependent on welfare. In general, these children led more productive lives as adults.

In summation, the evaluations from these models indicate that all categories of children, traditionally at risk or not, were helped by well run intervention and parent support. Research has shown that intervention/parenting education with consistency and continuity in program, produces consistent, positive long term results.

CHAPTER THREE: METHODOLOGY

Type of Research

A study such as this might normally be considered action research as it is a project to address something wrong or missing in society. However, the issue as the researcher viewed it, is not whether infant intervention and parenting support are worthwhile. Many studies have already concluded this. The researcher saw no need to repeat these efforts. Therefore, the issue became:

1. Documentation of these findings
2. In view of these findings what is the most appropriate form of infant intervention and parental support?
3. Concurrently, how do we bring this program into the public school system?

These issues suggested, to the researcher, a historical/descriptive methodology. This included studies by theorists and educators; information on how and why these theories are believed to be valid; plus principles and working examples.

Historical/Descriptive

Historical research, in this case, included a description of recent historical principles and practices in the area of study (particularly within the past two decades). Detailed analysis and a strong sense of the topics' current importance was included.

Research Questions

- Why begin formal education so soon?
- Why are early intervention and parental support so important?
- What does an early intervention program consist of?

Population and Programs Studied

The researcher's study showed that currently there is no educational reform act that would bring this programming to the availability of our entire society. However, there are currently programs of early intervention. Federal law provides programming support for disabled children. Part H of Public Law 99-457, enacted in 1986, added to the Education of the Handicapped Act- since renamed the Individual with Disabilities Education Act (IDEA)- a new program to encourage states to establish comprehensive, multi-disciplinary systems of early intervention services. In July 1991, Congress gave states the option of an extra two years to develop their systems before being required to serve all eligible children (P.L. 102-52), rewarding states that kept to the original five-year schedule with additional federal funds. In October 1991, Congress enacted P.L. 102-119, reauthorizing Part H for three years, strengthening its family-empowerment

provisions and expanding its potential for serving historically unreached families (Mental Health Law Project, 1992).

Because these programs for disabled children are already in place, the researcher sought to focus instead on the remaining population of children in society. The researcher sought to demonstrate that the value of infant intervention and family support programming is of universal importance. Some organizations, states, and federal sources have acknowledged this important issue, and have initiated programs or provided assistance and advocacy. However, in light of this seemingly wide range of programs, there is still no comprehensive early intervention program available to society at large.

An appropriate representation of these groups and programs was studied along with in-depth research which has been compiled on early childhood education. This culminated in a model program proposal which the researcher believes will offset any previous failures in this area. The population for which legislation is proposed, includes a free and appropriate education for all children in the USA.

Scope and Limitations of this Study

Due to the fact that the researcher's format was recent historical- theories, practices and programs were a large portion of her research and are contained in the literature review. Found throughout this research, is the common theme of providing an appropriate environment for learning with emphasis on the need for constructive change in the field of education.

The final section of this study entails a proposal for a legislative mandate which would provide infant intervention/education and parental support programming in the public school system (available to all children, not only those considered at risk). This is concise, and limited to basic educational components of such a program. A formal budget for the program was not done.

CHAPTER FOUR: PRESENTATION AND ANALYSIS OF THE DATA

Prior to this dissertation, the researcher had experience with intervention programs for the disabled and had taught infant/parent programs of universal acceptance. As the researcher began to collect data for this work, she was surprised by the multitude of programs in several states and the federal programs which serviced children. The researcher felt her ideas and mission were validated by the magnitude of professional educators and legislators that were in agreement with her educational philosophy - and that they too had put this philosophy into working practice. However, these programs still fall extremely short of reaching all the children and families who need them.

Research indicates several factors influence school readiness: physical well-being and motor development including proper prenatal, perinatal, and early childhood care and nutrition; social and emotional development; approaches toward learning; language usage; and cognition and general knowledge. Parental understanding of how to facilitate the advancement of young children in these areas is extremely important. Understanding is obtained through education. Without education parents are likely to perpetuate intergenerational patterns of behavior which may adversely effect the child's growth and development. Research proves that parental attitudes and child-rearing practices, during the child's crucial early years will help or hinder the child's chance for success later in school, and into adulthood.

Furthermore, many recent socioeconomic factors have decreased the support which parents in other generations may have received such as more two working parent households; more single parent families; and generally less assistance from family, neighbors, and the community.

In recognition of these needs, many state and federal programs have been initiated. The researcher has reviewed several successful programs. These programs vary in intensity, duration and criteria for acceptance. Most successful programs were those which provided intensive, integrated, comprehensive, and continuous education and support services.

Most of the programs viewed involved voluntary parental participation. Although, several of these programs were required for parents who had been abusive or negligent. Programs were especially successful in reducing many forms of abuse & negligence which stem from ignorance (especially repetition of accustomed behaviors) rather than willful attempts to harm children. When these parents learned appropriate child-rearing practices and appropriate control of their own behaviors, incidences of abuse and neglect declined considerably, especially among teen parents.

The programs viewed are a representative sample of the most highly developed programs in the country. Parent education is offered in various forms, and in numerous locations across the country. Programs vary in goals and approaches. Supporting agencies vary as well. Many programs are offered through state or federal education

allocations. Others are tied to human services, while yet others have combined sources of support including private grants and donations.

Research indicates that these program are cost-effective as they reduce the need for costly remediation, and induce long- term benefits such as reduction in unemployment, crime, and welfare costs. Children in these programs are more likely to complete their education successfully and become productive, responsible members of society.

Programs of universal eligibility reduce the stigma that is often associated with a strictly targeted service. Research shows that universally children and their families benefit from early intervention and support. Therefore, if all children have the capacity to benefit, then all children share the risk factors involved with the absence of programming. In this very real sense, all children are "at risk."

The research finds that there is clearly need for universal infant intervention and family support. Our educational system must acknowledge this, and function as a change agent to provide for the educational needs of America's future.

CHAPTER FIVE: CONCLUSIONS, IMPLICATIONS, AND RECOMMENDATIONS FOR FURTHER RESEARCH

The findings of this study draw several conclusions about the structure of an appropriate intervention/parenting program upon which the researcher's proposal is based.

The goal of this program is to empower parents to give their children the best possible start in life. The learning opportunities of a child during the earliest years of life make a permanent difference in his/her lifelong intelligence and functioning. Scientific research shows that the brain will actually have more neurons and interconnections so it will become more intelligent and more capable of learning and thinking for the rest of life (Beck, 1993).

We know from experience that certain kinds of learning opportunities and certain methods of delivery are crucial to the developing young child. These learning opportunities and methods involve creating an appropriate environment for learning to transpire. This environment should be child-centered and will entail much parental support and stimulation.

It is time our country stopped spending so much effort and money on programs to deal with delinquency, crime, and poverty once they have arisen and grown out of hand! It is time we realized that to produce a competent workforce, in an age of international competition, requires educated and responsible citizens. Educated and responsible citizens are not born, rather they are created from the support of family and the

community. It is time our legislature recognized our inalienable, constitutional rights; the quality of life, liberty, and the pursuit of happiness hinge on the support of family and the formation of very basic skills which take root in infancy.

What we need now is to bring these ideas and programs to the public - our public school system. We need a federal mandate to protect our children from the most life threatening disease of our times - ignorance.

Researcher's Proposal: Parent And Child Together (PACT)

Ideology

Children are intricately linked to families and the community. In a presentation on early intervention at a National Symposium, Chen (1993) stated the following as an ideology of an appropriately intervention program: "A comprehensive (cross-disciplinary), coordinated, family-oriented system of intervention is recommended. (p.37)" Specifically, establishing resource centers where families can receive information about available community services and programs, and giving parents (caregivers) more assistance in practicing early communication with the child is very important.

"Professionals should receive cross-disciplinary training that includes knowledge of family dynamics and cultural and life-style expectations, knowledge of technology... and skills in working with other professionals, as well as with adults and infants. A

"seamless" system should begin with early diagnosis and referral and end with true implementation of the Individual Family Service Plan." (Chen, 1993, p.37)

Program Goals

The goal of this program is to assist children nationwide in maximizing their potential and readiness for school through a curriculum that:

- Realizes the importance of the child within the family and the interdependence of family/school education. Thereby, the program will provide the parents with the necessary education and skills to function more effectively as parent educators.
- Acknowledges the role of the community in the education of children, viewing the child and family as interconnected or as a vital link in the community.
- Promotes the development of a healthy generation with a strong and positive sense of self-worth, and with the knowledge that each individual can contribute and own a special place in society.
- Minimizes the need for expensive remediation, and special education services. Reduces the intergenerational dependence of the family on the current welfare system through parent education and skill training.

Services

The researcher suggests federal legislation to mandate the availability of infant/parent programming through the public school system. Each state shall be responsible to coordinate programs with local schools systems. Although programs will have universal acceptance, they will be tailored to the populations and individuals served. Initial and subsequent assessments shall be done for each child/parent. Based on this

assessment an Individual Family Service Plan (IFSP) shall be established for each child 0-6 (or formal school age) and parent(s).

As required under Part H of P.L. 99-457, the Individualized Family Service Plan (IFSP) identifies services that will promote the infant's development and family's capacity for meeting a disabled infant's special needs. The researcher suggests a similar, yet simplified format for all children 0-6. In particular, the IFSP describes: the family's resources (non-financial), priorities and concerns relating to promoting the infant's development; particular early intervention services that are essential for meeting infant and family needs; and a service coordinator who is qualified to implement and coordinate the IFSP. As Chen (1992) points out, "By means of the IFSP, early intervention programs can implement family-focused services through family-professional partnerships, transdisciplinary teaming, and inter-agency cooperation" (p.39).

Services to be included in the IFSP are:

Assessment and Evaluations.

Children should be periodically assessed for general development as well as language, hearing, vision and motor skills. Evaluation of children's progress in these areas should be noted on an on going basis. Furthermore, any child who is found to be delayed or show physical or mental disability will be eligible for therapy and other specialized services under part H of the IDEA legislation. Additionally, family needs, as they pertain to the child's development, should be assessed.

Home Visits and Group Sessions

It is important to see the child interact in the home environment in order to facilitate appropriate suggestions and intervention. Group sessions often provide inspiration and build a support network.

Interagency Coordination Services

Interagency coordination with human services and health care agencies in addition to referrals to other community resources for child care and other necessary services should be provided.

Transportation and Accessibility

Transportation should be provided. Successful programs also provide a variety of times for working parents to meet. Some schools may utilize community resources or local businesses that employ a significant portion of the community, such as a steel factory or large manufacturing facility, as a meeting facility. Perhaps employers would be willing to allow a room over the lunch hour for group sessions. Businesses can also provide job sharing and flextime for employees.

Parent Literacy and Skill Training

Courses which will bring parents up to a high school equivalency should either be provided or a referral should be made to an appropriate resource.

Implementation of Services

A high degree of creativity is suggested for implementation under these guidelines. Additionally, these services will be provided in a format which is intensive and appropriate. Intensive meaning that programs are successful when they are frequent and occur over an extended period of time. Services must be provided which are appropriate to the developmental level and needs of the individual child.

Program Format

Participants

Universal eligibility for all children 0-6 (or formal school age) and their parents (primary caretakers or legal guardians) It is suggested that grandparents, other caretakers, and siblings be included in some sessions. Prenatal education and counseling is suggested as well.

Funding

The researcher suggests funding through the public school system. Federal funds, foundation grants, bond issues, tax levies, community and corporate contributions (of services as well as money) may also be utilized. Regardless of how funding is obtained (the researcher suggests that professionals bear in mind) welfare and other programs can get cut from the budget at the discretion of the governing legislative body. However,

once the child's IEP or IFSP is in place, it is the responsibility of the public schools to provide the appropriate programming.

Staff

"Unity" and "consistency" are crucial elements of an appropriate program which outline the need for inter-agency coordination at the state, local community and program levels (Chen, 1992) and for transdisciplinary teaming at the program level. Staff should therefor work interdisciplinarily to coordinate the IFSP. Selection criteria for staff should be set by the state board of education. Due to the particular needs of families and infants, special requirements for qualification and training in the area of infant/family intervention should be established.

Parents Role

It is suggested that parents may additionally be represented on school boards.

Evaluation

Thorough evaluations are required to meet the program guidelines suggested above. The researcher suggests each state be given the autonomy to determine how evaluations are to be conducted in accordance with meeting federal program requirements.

Future Research

Research shows that educating/stimulating children from birth, when done appropriately over an extended period of time, and with consistent parent involvement, will produce dramatically positive effects. Although this paper focuses on early childhood programming, parental involvement throughout the child's schooling is important. Classes in middle and high school on basic parenting and prenatal care are advisable as well. The full scope of social repercussions from a nationwide program are unknown. An area for further study is the impact of early education and parent involvement on the productivity of our children as adults in the global market. It is evident that by producing happy, healthy well educated children we are creating a future workforce of adults who will have more productive living and work skills. Perhaps our children as adults may be able to stabilize the world economy. Or, in this era when we are capable of enough nuclear power to destroy our planet, perhaps we may create a generation capable of bringing us to world peace.

There is an African proverb that asserts children belong to the entire village.

Every adult in the village shares the responsibility to look-out for every child's well-being. There is a recognition of the crucial years in a child's development, and an implied commitment that children have priority. The proverb exudes a real sense of security, a feeling of nurturance that allows children to explore their environment, to take appropriate risks, to feel a significant part of their village and to see childhood as a sound supportive base on which to construct their lives (LinksLetter, 1993, p. 5)

It is time for our village - our society - to make a PACT to recognize and support our children.

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APPENDICES

Appendix A

TOGETHER WE CAN BUILD A BETTER WORLD FOR OUR CHILDREN!

Enclosed the reader will find highlights of my doctoral dissertation (currently in progress at Walden University). This will be followed by a request for information and support.

INTRODUCTION

As the mother of a deaf/blind child, the researcher attended many infant stimulation programs, and worked with many therapists and physicians. The researcher observed the various ways neurologically impaired children are stimulated from birth through positive sensory experiences, and early socialization exposure to other children. Parents were also involved by being taught how to work with their children. Generally, parents seemed to create informal networks and support groups. At this time, the researcher was teaching a variety of art classes in Ohio for children as well as art classes for adults. It occurred to the researcher, "If neurologically impaired children can benefit from early intervention and parental support, why can't all children benefit from the same?" The researcher started her own variation of infant/parent classes at a community center which serviced a tri-county area. Classes were very popular. The researcher had a tremendous amount of positive feedback. Parents who attended classes with their infants tended to come back for classes after their next children were born.

PURPOSE OF THE STUDY

It is the purpose of this study to demonstrate that a government legislation which would mandate public school systems to offer early intervention and parenting support, age birth to 5, will increase the chances of success for children in our society. (The researcher is aware of the Individuals with Disabilities Education Act, part H. However, this Act is not inclusive of the mainstream of society.)

RESEARCH QUESTIONS

1. Why begin formal education so soon?
2. Why are early intervention and parental support so important?
3. What does an early intervention program consist of?
4. How can our society and our Congress be enlightened to consider the mandate of an Early Childhood Education Act?

FORMAT

The researcher has divided the research into two sections. One section is devoted to early childhood education and principles of learning. The scope of this study will be limited to theories and educational practices of the twentieth century. The point of interest being how we arrived at current early childhood education and how we separate what works best from what doesn't work well.

The second section of this study will entail a proposal for a legislative mandate for the availability of infant intervention/education and parental support into the public school system (available to all children, not only disabled or impoverished).

REQUEST

I am requesting from your organization two items so that we may respectively assist each other:

1. Information on current infant intervention and parenting support programs.
2. Information and support regarding a legislative proposal. Do you have any suggestions for curriculum or implementation of this program?

Please forward any materials you may have to my home address:

Heidi Miller Berlinger
50 Watertown St. #403
Watertown, MA 02172
Home phone: 617/926-4759

If you have any questions, or would like to talk to me directly, I welcome your response.

Thank you for your time and efforts!

Sincerely,

Heidi Miller Berlinger

Appendix B102D CONGRESS
1ST SESSION**H. R. 520**

To encourage States to establish Parents as Teachers programs.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 12 (legislative day, JANUARY 11), 1991

Mr. WHEAT (for himself, Mr. CALLAHAN, and Mr. GEPHARDT) introduced the following bill; which was referred to the Committee on Education and Labor

A BILL

To encourage States to establish Parents as Teachers programs.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the "Parents as Teachers: the
5 Family Involvement in Education Act of 1991".

6 **SEC. 2. FINDINGS.**

7 The Congress finds—

8 (1) increased parental involvement in the educa-
9 tion of their children appears to be the key to long-
10 term gains for youngsters;

11 (2) providing seed money is an appropriate role
12 for the Federal Government to play in education;

1 (3) children participating in the parents as teach-
2 ers program in Missouri are found to have increased
3 cognitive or intellectual skills, language ability, social
4 skills and other predictors of school success;

5 (4) most early childhood programs begin at age 3
6 or 4 when remediation may already be necessary; and

7 (5) many children receive no health screening be-
8 tween birth and the time they enter school, thus such
9 children miss the opportunity of having developmental
10 delays detected early.

11 **SEC. 3. STATEMENT OF PURPOSE.**

12 It is the purpose of this Act to encourage States to de-
13 velop and expand parent and early childhood education pro-
14 grams in an effort to—

15 (1) increase parents' knowledge of and confidence
16 in child-rearing activities, such as teaching and nurtur-
17 ing their young children;

18 (2) strengthen partnerships between parents and
19 schools; and

20 (3) enhance the developmental progress of partici-
21 pating children.

22 **SEC. 4. DEFINITIONS.**

23 For the purposes of this Act—

24 (1) the term "developmental screening" means
25 the process of measuring the progress of children to

1 determine if there are problems or potential problems
2 or advanced abilities in the areas of understanding and
3 use of language, perception through sight, perception
4 through hearing, motor development and hand-eye co-
5 ordination, health, and physical development;

6 (2) the term "eligible family" means any parent
7 with one or more children between birth and 3 years of
8 age, or any parent expecting a child;

9 (3) the term "lead agency" means the office or
10 agency in a State designated by the Governor to ad-
11 minister the parents as teachers program authorized by
12 this Act;

13 (4) the term "parent education" includes parent
14 support activities, the provision of resource materials
15 on child development and parent-child learning activi-
16 ties, private and group educational guidance, individual
17 and group learning experiences for the parent and
18 child, and other activities that enable the parent to im-
19 prove learning in the home;

20 (5) the term "parent educator" means a person
21 hired by the lead agency of a State or designated by
22 local entities who administers group meetings, home
23 visits and developmental screening for eligible families,
24 and is trained by the Parents As Teachers National
25 Center established under section 8; and

1 (6) the term "Secretary" means the Secretary of
2 Education.

3 **SEC. 5. PROGRAM ESTABLISHED.**

4 (a) IN GENERAL.—

5 (1) The Secretary is authorized to make grants to
6 States to pay the Federal share of the cost of estab-
7 lishing, expanding, and operating parents as teachers
8 programs.

9 (2) In awarding grants under paragraph (1), the
10 Secretary shall give special consideration to applicants
11 whose programs primarily serve hard-to-serve popula-
12 tions, including—

- 13 (A) teenaged parents,
14 (B) illiterate parents,
15 (C) economically disadvantaged parents,
16 (D) offenders and their families,
17 (E) unemployed parents,
18 (F) learning disabled parents, and
19 (G) non-English speaking parents.

20 (3) In determining the amount of a grant under
21 paragraph (1), the Secretary shall take into consider-
22 ation the size of the population to be served, the size
23 of the area to be served, and the financial resources of
24 such population and area.

1 (b) SPECIAL RULE.—Any State operating a parents as
2 teachers program which is associated with the Parents As
3 Teachers National Center located in St. Louis, Missouri,
4 shall be eligible to receive a grant under this Act.

5 **SEC. 6. PROGRAM REQUIREMENTS.**

6 (a) IN GENERAL.—(1) Each State receiving a grant
7 under section 5(a) shall conduct a parents as teachers pro-
8 gram which—

9 (A) establishes and operates parent education pro-
10 grams including programs of developmental screening
11 of children; and

12 (B) designates a lead State agency which shall—

13 (i) hire parent educators who have had su-
14 pervised experience in the care and education of
15 children;

16 (ii) establish the number of group meetings
17 and home visits required to be provided each year
18 for each participating family, with a minimum of 4
19 group meetings and 8 home visits for each partici-
20 pating family;

21 (iii) be responsible for administering the peri-
22 odic screening of participating children's educa-
23 tional, hearing and visual development, using the
24 Denver Developmental Test, Zimmerman Pre-

1 school Language Scale, or other approved screen-
2 ing instruments; and

3 (iv) develop recruitment and retention pro-
4 grams for hard-to-reach populations.

5 (2) Grants awarded section 5(a) shall only be used for
6 parents as teachers programs which serve families during the
7 period of time beginning with the last 3 months of a mother's
8 pregnancy and ending when a child attains the age of 3.

9 **SEC. 7. PARENTS AS TEACHERS NATIONAL CENTER.**

10 The Secretary shall establish a Parents As Teachers
11 National Center to disseminate information to, and provide
12 technical and training assistance to, States establishing and
13 operating parents as teachers programs.

14 **SEC. 8. EVALUATIONS.**

15 The Secretary shall complete an evaluation of the State
16 parents as teachers programs within 4 years from the date of
17 enactment of this Act.

18 **SEC. 9. APPLICATION.**

19 Each State desiring a grant under section 5(a) shall
20 submit an application to the Secretary at such time, in such
21 manner and accompanied by such information as the Secre-
22 tary may reasonably require. Each such application shall de-
23 scribe the activities and services for which assistance is
24 sought.

1 **SEC. 10. PAYMENTS AND FEDERAL SHARE.**

2 (a) **PAYMENTS.**—The Secretary shall pay to each State
3 having an application approved under section 9 the Federal
4 share of the cost of the activities described in the application.

5 (b) **FEDERAL SHARE.**—(1) The Federal share—

6 (A) for the first year for which a State receives
7 assistance under this Act shall be 100 percent;

8 (B) for the second such year shall be 100 percent;

9 (C) for the third such year shall be 75 percent;

10 (D) for the fourth such year shall be 50 percent;

11 and

12 (E) for the fifth such year 25 percent.

13 (2) The non-Federal share of payments under this Act
14 may be in cash or in kind fairly evaluated, including planned
15 equipment or services.

16 **SEC. 11. AUTHORIZATION OF APPROPRIATIONS.**

17 There are authorized to be appropriated \$20,000,000
18 for each of the fiscal years 1992, 1993, 1994, 1995, and
19 1996 to carry out this Act.

○

Appendix C

Marketing Plan

The Parents as Teachers Marketing Plan is based on the same general process which a company might use to launch a new product or service. It is structured to segment the different audiences and to tailor the messages and steps for program implementation for each audience.

To the extent possible, the marketing plan and all the materials produced to aid in program implementation will emphasize, to each audience, the consequences of program participation. These include:

- | | |
|-----------------------|---|
| Children | <ul style="list-style-type: none"> - Greater academic achievement over time - Enhanced socialization skills - Positive self-esteem |
| Parents | <ul style="list-style-type: none"> - Successful parent-child bonding - Helpful teaching skills - Early partner in educational process - Strengthened confidence in parenting role |
| Teachers | <ul style="list-style-type: none"> - Students more receptive to learning - Children more self-disciplined - Parents who work cooperatively with schools - Reinforced commitment to children |
| School Administration | <ul style="list-style-type: none"> - Early and continuing school support from parents - Reduced cost of remedial education - Higher long-range academic achievements |
| Legislators | <ul style="list-style-type: none"> - Improved public education - Cost effective investment - Socially responsible citizens |

Positive Consequences for Other Target Audiences

The positive consequences of early childhood family education are felt beyond the immediate program participants. A number of community "audiences" will also realize a benefit from successful implementation of the Parents as Teachers Program. For example:

- | | |
|---|--|
| Local Board of Education | <ul style="list-style-type: none"> - Develops a good relationship with parents from the beginning - Better start for students - Cost effective |
| Health, Mental Health and Social Service Agencies | <ul style="list-style-type: none"> - Mutually beneficial in terms of referrals---schools can assist families referred by the agency and agency can assist families referred by the school |

- | | |
|---------------------------|--|
| Civic Groups | - Benefit to their member families and communities
- Means of fulfilling their service mission |
| Churches | - Benefits their congregation
- Good support program for young parents |
| PTA/PTO | - Potential new members
- Parents enter elementary school already having a positive relationship with the school as well as a link with other parents |
| Senior Citizens | - Opportunity for inter-generational activities |
| Colleges and Universities | - Provides data and lab setting for early childhood development and parent education |

These positive consequences of program participation need to be emphasized when influencing parents and the community to participate in a Parents as Teachers Program ... not because it is mandated, but rather because it is the right and proper and highly beneficial thing to do.

Eight Steps to Successful Program Implementation

Step 1. Obtain school district commitment to aggressively implement the Parents as Teachers Program. The Parents as Teachers Program is new. Participation on the part of parents with preschool children is voluntary. The positive consequences of a new program are generally not known or well understood. Therefore, in order for the Parents as Teachers Program to reach out into the community and generate the benefits intended by the legislation, it is vital that the Superintendent and others in leadership positions make a firm, early commitment to carry out an effective program.

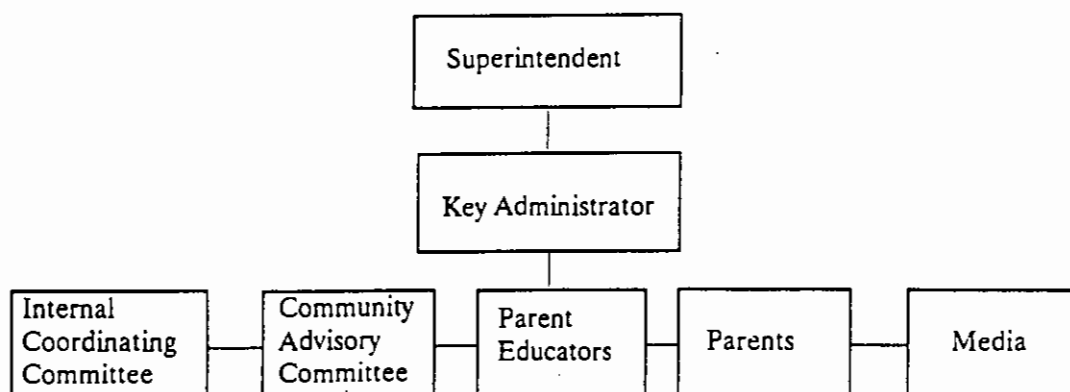
A full and enthusiastic presentation of the Parents as Teachers Program should be made to the Superintendent in order to help gain the needed commitment:

Step 2. Appoint the right person to serve as Key Administrator, or Manager, of the parents as Teachers Program. Strong internal leadership is essential to the successful, long-range operation of the Parents as Teachers Program. Therefore, the Superintendent should appoint a Key Administrator who has both leadership ability and a personal commitment to the Parents as Teachers concept.

The Key Administrator must build an environment with each program "audience" so that desired results can be achieved. The Key Administrator must manage, inspire and motivate those important to the Program's success, be able to set goals, coordinate an implementation timetable, analyze results, and exercise sufficient authority to accomplish the desired results.

The Key Administrator should (ideally) report directly to the Superintendent.

The Key Administrator should be prepared to manage a program organizational structure consisting of several different operating units, similar to this:



Step 3. Establish the school district coordinating committee. The Key Administrator should build the local school district "team," or Coordinating Committee, whose membership would share the responsibility for successful implementation of the Parents as Teachers Program. The Key Administrator would identify and ask the Superintendent to appoint members of the Committee, which should include:

- Elementary principal(s)
- Other administrator(s)
- Parent educator(s)
- Kindergarten or primary teacher(s)
- Child development and/or adult education teacher(s)
- Guidance counselor(s)
- Community awareness person (staff or volunteer)

Upon formation of the school district's Coordinating Committee, the Key Administrator would call the group together to discuss matters pertinent to successful program development:

- Organization of the program and staffing requirements
- Informing and "selling" the program to school district's staff and Board of Education on their role and the benefits that will come to them
- Steps needed to implement a district-wide program
- Establishment of a community advisory committee
- Training for parent educators
- Community awareness and publicity plan
- Plans for recruiting parents
- A timetable for implementation

Step 4. Establish the Community Advisory Committee. The Key Administrator should initiate action to form a Community Advisory Committee consisting of interested citizens within the community. To the extent possible, advisory members should belong to a variety of

organizations whose support of the Parents as Teachers concept will be essential in order for the program to achieve a high degree of success.

A. Members of the Committee should represent:

1. Local Board of Education
2. Mental Health Agency
3. Social Service Agency
4. Health Care Providers
5. Child Abuse Prevention Agency
6. Churches, Ministerial Alliance
7. Civic Service Groups
8. State Legislator(s)
9. PTA/PTO
10. Parents of Young Children
11. Senior Citizen Groups
12. Colleges, Community Colleges, or Universities

B. The Advisory Committee would have these primary responsibilities:

1. Act as personal contact with their own constituencies to promote the program
2. Recruit prospective parents
3. Serve as a resource to the Key Administrator and the Coordinating Committee

Step 5. *Recruit prospective participants.* The Key Administrator should initiate action leading to the formation of a recruitment plan which would attract parents of children ages birth to three. The plan might include the following elements:

A. Formation of a preschool parents group, perhaps in conjunction with or as part of the existing PTA/PTO organization

B. Planning and organizing door-to-door neighborhood recruitment of new parents--

1. Canvas neighborhoods
2. Identify potential participants
3. Explain program
4. Hand out program registration materials
5. Do follow-up contact (phone call or a second personal contact) to gain commitment to participate
6. Meet with program staff for professional follow-up

C. Implementing program promotion and publicity within the community

Step 6. *Generate community support through an aggressive media campaign.* When plans are in place and the time is appropriate, the Key Administrator should initiate promotion of the Parents as Teachers Program within the community. The following are some suggestions for publicity:

- A. Send a special announcement home to parents with elementary school children which would include:
 - 1. An explanation of the program
 - 2. How the program benefits everyone
 - 3. An invitation to expectant parents to participate in the program and to join the new preschool parent organization
 - 4. A request for everyone to inform expectant or new parent neighbors and friends about the program
- B. An initial announcement would be carried in the school district newsletter giving all program information (subsequent articles would contain information concerning child development, tips about parenting, etc.)
- C. News (and later feature) releases would be made to newspaper, radio and television stations. (A "promotion plan" follows with suggestions on the person responsible for generating media support and on ways to cultivate ongoing media interest and coverage of the Parents as Teachers Program.)

Step 7. Evaluate program performance. The Key Administrator and members of the Coordinating Committee should make regular, ongoing evaluations of program performance. Constant monitoring, perhaps monthly, of program results will help to focus attention on both the strengths and weaknesses of the program. As a result, problems can be corrected as they arise and greater emphasis given to those elements of the program which seem to be ineffective or moving ahead too slowly.

To aid in the evaluation process, specific goals should be set and a timetable established for reaching those goals, wherever possible. For example:

- A. The Coordinating Committee should be in place within 30 days of appointment of Key Administrator.
- B. The Community Advisory Committee should be in place within 60 days of appointment of Key Administrator.
- C. One hundred (100) parents shall be registered for the program by September 1; by January 1, enrollment will be increased to 200.

Program evaluation results should be shared with the Superintendent, members of the Coordinating and Advisory Committees and others important to program success.

Step 8. Honor and recognize outstanding contributors. Methods for honoring and recognizing those who contribute significantly to the program should be developed at the outset. An end-of-year dinner, reception or picnic might be held where program results would be reported to everyone. Public recognition and a small memento would be given to each person or group being honored.

Appendix D

Promotion Plan

I. Introduction

Generating community support for the Parents as Teachers Program through an aggressive media campaign is the sixth implementation step. Actually, publicity concerning organizational efforts and program objectives should begin soon after the School District Coordinating Committee (Step 2) is in place and operating smoothly. Good early publicity will make it easier to influence important community leaders to be willing to join the Advisory Committee, and early publicity might also assist in reaching those who will form the nucleus of a preschool parents group.

The main publicity thrust in a community-awareness program, however, should commence after the first five steps have been completed and just prior to an all-out, community-wide effort to reach the parents of young children. The value of a well thought-out and aggressively pursued community awareness program cannot be over-emphasized. In large measure, the degree of success ultimately achieved in the Parents as Teachers Program will depend upon how thoroughly and how frequently the Parents as Teachers message is delivered to each and every household in the community. Therefore, the community awareness effort should be well-planned and placed in writing with a timetable for execution. The responsibility for generating community awareness should be assigned to a person with the knowledge and capability of getting the job done.

II. Media Campaign Director

The task of promoting the Parents as Teachers Program should be assigned one individual who is: committed to the Parents as Teachers concept; experienced in writing, speaking before groups; and, ideally, familiar with how to approach members of the media to generate support for the Parents as Teachers movement. The person assigned to direct the community awareness effort should report directly to the Key Administrator and be included in all program matters which are relevant to the community awareness responsibility. When the scope of the community awareness responsibility is fully understood by the Director, he/she may choose to ask one or more additional people to provide assistance.

III. Objectives

- A. Generate awareness of and participation in the Parents as Teachers Program by the primary target audience: parents of children birth to age three.
- B. Generate public-at-large awareness of the Parents as Teachers Program among the many additional "audiences" who will benefit from implementation of the Parents as Teachers Program (school board members, teachers, social service and mental health delivery agencies, etc.).

IV. Promotional Activities

A. Media

1. Newspapers and other print media

The print media is generally highly supportive of new and constructive educational efforts which will benefit children, their parents and the community at large. Newspapers probably will be interested in publishing articles which describe the overall Parents as Teachers concept, the amounts of money allocated for program implementation in the local school district, and how the program is organized and delivered locally. In the long-term, newspapers probably will be interested in publishing testimonials and success stories which illustrate how individual parents and their children have benefited from program participation to the extent possible. Individual human experiences of a constructive nature should be emphasized in news releases.

The single best way to gain support of local newspapers is to set an appointment with the publisher or editor (often the same person in smaller communities). During a face-to-face meeting, provide the editor with a full, but succinct, background of the Parents as Teachers Program, emphasizing the positive consequences to children, parents and others in the community. Point out that parental participation in the program is voluntary and that, in order for the program to achieve success, it is necessary to generate parent awareness through the print media. Explain that the program periodically will forward typed releases to the editor and, on occasion, pictures too. Suggest that the program lends itself to interesting feature coverage and that staff would be happy to cooperate with any newspaper staff member who might want to write a feature story on the local program.

It is important that the releases be neatly typed on 8-1/2 x 11 sheets of paper and that the releases be written and prepared as professionally as possible. Releases should be mailed or hand-carried to the editor. Each release should have a purpose and a message. While it is unwise to swamp the editor with releases, it would be good if at least one release could be prepared for publication each thirty days.

2. Television

Releases sent to the newspapers should also be sent to the local television station. Because television news programs have such high viewership and because the nature of the TV media creates a strong impression within the home, it is important to establish personal contact with the local TV station(s). The initial point of contact might be the news director. Later, after having had an opportunity to work with various reporters from the station, it is an effective strategy to call the reporter directly when there is information that warrants inclusion in a TV newscast. Reporters, once one generates their interest in a specific topic, are quite prone to do follow-up stories and maintain an interest in a program (such as Parents as Teachers) over a long period of time. The Parents as Teachers Program lends itself to TV coverage because little children and their parents (human beings rather than things) are involved and being helped.

3. Radio

Radio offers many opportunities for inclusion on newscasts, public service announcements and for talk show participation. Again, newspaper releases should be sent to local radio stations. A personal visit to either the radio station manager or the radio station news director is important in order to open a channel of communication.

4. Posters and Special Announcements

Posters printed in color are expensive and probably not realistic for use because of cost and because of the problem of getting posters delivered all over town. Even so, simple posters can be made within the school and can be easily reproduced for placement in a number of locations where there is potential to reach "hard to reach" parents. For example, many grocery stores have a bulletin board where a poster could be placed. Posters might be placed in drug stores, social services agencies, pediatrician and obstetrician offices, etc. (PAT posters are available for purchase from the PAT National Center.)

B. Newsletter

Consider writing and publishing a simple quarterly newsletter that would be sent to all Parents as Teachers "stake holders" in the community. The circulation list might include parents currently enrolled in the program, with the suggestion that the newsletter be passed on to friends who might also be parents of young children. The newsletter, of course, would provide current information about the successes being achieved by the local program and who to contact for more information or enrollment.

C. Personal Presentations

Personal presentations covering the Parents as Teachers Program should be made wherever possible in order to reach prospective program participants. Perhaps a weekly five-minute presentation could be given at the local hospital to expectant parents and new mothers. Presentations could be given before local service organizations such as the Lions and Rotary Clubs because many young fathers (and interested grandparents) belong to these organizations. It would be advisable to consult with members of the Coordinating Committee and the Advisory Committee to search out other community groups that might be receptive to a Parents as Teachers Program presentation.

D. Direct Mail

A letter or brochure describing the local Parents as Teachers Program should be prepared. This piece, together with a warm, friendly personal letter, should be sent by direct mail to all prospective parents as they are identified.

E. Telephone

The telephone is an inexpensive, yet effective, communications vehicle. Telephone parties might be conducted periodically in an effort to reach and re-contact parents of young children.

F. Neighborhood Canvassing

An extremely effective method of reaching parents of infants and toddlers is through neighborhood canvassing. Through the canvassing technique, teams of volunteers actually go up and down assigned streets, knocking on doors, with the hope of finding parents of young children. Where a prospective parent is located a brief personal message of invitation should be extended and program information should be left. Where no young children are in the home, the person answering the door should be asked if he or she knows of other parents of young children either in the neighborhood or in the community. These names should be gathered and forwarded to a central "clearing point" where they would eventually be assigned to a volunteer for a personal contact.

G. Advertising

It is not anticipated that any formal advertising will be needed; however, one should consider contacting prominent local advertisers to see if they would, on some special occasion, devote a small section in their normal advertising to publicize the Parents as Teachers Program.

H. Evaluation

The Director of Media, together with the Key Administrator and members of the Coordinating Committee, should periodically review the outcomes and evaluate the effectiveness of the media campaign. The evaluation might include:

1. Program information materials which have been developed and distributed
2. Media contacts made and the results of those contacts, number of releases issued versus releases published, the amount of interest generated among members of the media, etc.
3. Personal presentations made and receptivity to those presentations
4. Personal calls or contacts made either through the volunteer canvassing effort or over the telephone, and the results of those contacts
5. Overall community interest generated as reflected by the number of parents and children in the program

Appendix E

Success by 6

Primary Focus: Mobilizes community awareness, resources, and cooperation to promote the healthy development of children, particularly those at risk of early academic failure.

Scope: Citywide in Minneapolis

Description: **I**n 1983, the Mayor of Minneapolis and the Superintendent of schools joined forces with business and other community leaders to address the problem of citywide long-term unemployment. Through many months of study and deliberation they concluded that "the root of the problem . . . starts in the early years with inadequate social and intellectual development." Based on this conclusion, the United Way of Minneapolis Area in 1988 created Success by 6, an initiative to develop and coordinate resources for serving children facing obstacles to school success and their families.

Success by 6, an initiative to develop and coordinate resources for serving children facing obstacles to school success and their families.

Success by 6 does not provide any direct services. Rather, it is an umbrella organization that coordinates the efforts of business, government, labor, education, health, and human service providers to address three objectives. First, it seeks to build community awareness about the needs of young children. Second, Success by 6 acts to improve access to social services for all families with young children. Finally, it works to expand collaboration between the public and private sectors to develop an integrated system of services. During its first two years of operation, the program has conducted a public awareness campaign on the urgent needs of today's children and has successfully lobbied with other organizations for a comprehensive state legislative agenda on children resulting in an increase of over \$35 million dollars being spent on children and child care.

Success by 6 efforts have also resulted in improved prenatal care, a school for pregnant teens, and a growing public education campaign directed to parents and providers of child care. Other products include ten culturally diverse child development tools for parents with low-reading skills that were developed and distributed to more than 30,000 families by children's service organizations, and the "Readmobile" which brings library materials to family child care homes. Way to Grow, an outreach and services integration model, was developed under the auspices of Success by 6 in order to bring the principles of Success by 6 to individual communities. Jointly operated by Success by 6 and the Minneapolis Youth Coordinating Board, Way to Grow has been replicated in 5 out of 11 geographic communities in Minneapolis.

In addition, the United Way of Minneapolis Area has formed a partnership with the United Way of America to replicate Success by 6 nationwide, offering technical assistance to communities wishing to adopt the Success by 6 concept. Currently, nearly 60 communities, mostly led by United Ways, are developing,

implementing, or exploring early childhood initiatives modelled on Success by 6.

Funding:

Success by 6 receives funding from many sources, each of which contributes to different program components. The United Way of Minneapolis provides the core funding for the project, allocating \$450,000 annually. Other groups, including the Honeywell Corporation and numerous community groups, regularly make in-kind contributions to the project by providing services, space and staff time.

Evaluation and Future Plans:

The University of Minnesota is conducting an extensive process evaluation of Success by 6. Preliminary findings indicate that the program has succeeded in raising awareness and increasing volunteerism and community involvement. Because of the involvement with numerous early childhood programs, the evaluators have not been able to isolate the specific effects of the program on participating children. Future plans include expanding the service area into the suburbs of Minneapolis.

Contact:

Laurie Ryan
Director
Mobilization for America's Children



701 North Fairfax Street
Alexandria, Virginia 22314-2045
Phone 703-683-7850
Fax 703-683-7840

Appendix F

Children's Poverty Line Campaign
c/o The Academy for State and Local Government
444 North Capitol Street, N.W., # 345
Washington, D.C. 20001

1 IN 5 AMERICAN CHILDREN IS GROWING UP IN POVERTY.

For a child, being poor is more than a matter of dollars and cents. It's having less of everything a child needs to get a good start in life. Things like good medical care... safe places to play... enough to eat... a stable place to live... and a dream of a good future.



As a result, by the time most poor children enter school, they have already fallen far behind

more fortunate children. Without help, 1 in 5 children will live his or her entire life in the shadow of the American dream.

WHEN YOU ROB CHILDREN OF THEIR DREAMS, YOU ROB AMERICA OF ITS FUTURE.

We cannot build a prosperous tomorrow by throwing away the potential of so many of today's children. But we can break the cycle of poverty and help them live richer lives. We know what it takes to make a difference.

THE KEY IS TO REACH CHILDREN EARLY.

We know that if poor children get help early, their life prospects can be changed. We know that by getting early, thorough prenatal care expectant mothers in poverty give birth to healthier, sturdier babies, fewer of whom have preventable disabling conditions.

We know that immunization campaigns and close follow-up help make sure that poor children get the medical care they need.

We know that home visits from "mentor mothers" help overwhelmed — often very young — mothers learn better ways to handle their children.

We know that neighborhood centers help create safe, nurturing places for children and families in otherwise dangerous and isolated neighborhoods.

We know that high-quality preschool classes — such as Head Start — help poor children catch up

and enter kindergarten ready to learn. Many Head Start programs also help mothers learn so they can better help their children with schoolwork.

EARLY HELP MAKES ALL THE DIFFERENCE.

We know that strong help in the early years changes lives. Careful research that tracked individual poor children over 20 years has shown it.

A poor child who received quality help when young was more likely to do well in school, stay out of trouble, graduate, hold a job, and raise a family successfully than a poor child who didn't get help. And in some cases, the investment in poor children ultimately paid back \$6 for every \$1 spent.

WE CAN CHANGE THE ODDS FOR A GENERATION — ONE CHILD AT A TIME.

This is the ideal time to get involved. With greater public support, many more poor children — one by one — can get the kind of help that makes a lasting difference.

But it won't happen unless caring, capable Americans like you step forward and get involved.

Whatever you have to give will help improve the life of a child. If you want to work directly with children, volunteers are needed in all kinds of schools and programs. Or you may want to be a public speaker, lobbyist, or community advocate for children.

Your family may have outgrown clothing or toys that children's organizations could put to good use.

Any time you can spend answering phones, fixing things, or raising money will help. So will donations of your professional skills. Monetary contributions are always needed. You can also involve your whole family and teach your children the meaning of giving in a powerful way.

YOU'VE ALREADY SHOWN THAT YOU CARE.

You asked for this brochure after you saw the commercial about helping children cross the

poverty line. In the commercial, you heard about Success by 6. It was pioneered by the United Way in Minneapolis, but more than 50 other communities are exploring or starting Success by 6. Yours may be one of them.

Success by 6 brings people from all walks of life together to make their community a great place for young children. Participants have sponsored public forums on early childhood development, provided parenting information to non-reading parents, formed voluntary committees to improve the availability of services for children and families, and



much more. In Minneapolis, Success by 6 — with strong business sponsorship — helped launch a program called Way to Grow. Way to Grow is helping poor families get the prenatal care, parenting support, and early childhood care that makes a difference in the lives of young children.



But Success by 6 is only one of the ways you can make a difference in the life of a child.

TAKE THE FIRST STEP

You understand the problem of child poverty. You know what needs to be done to help. Now it's time to roll up your sleeves and get involved. Here's how you can get started:

- Visit your town hall and talk with staff in your mayor's or council representative's office. Find out what programs are working to help poor children — and how you can get involved.
- Contact a school's kindergarten teacher to find out what her problems are in class and how you could help. An hour a week of volunteer time in the classroom can make a big difference.
- Call your Head Start office to learn how vol-

unteers can help expand the resources available to local programs so they can serve more children.

- Invite several friends over to talk about the problems of children in your community. Find out



what your local political leaders are doing to help poor children, then find a program that you can work on together.

- Call the United Way or Volunteer Center to get the

names of programs for children that need volunteers. Let them match you with a program or make the calls yourself.

- Find out from your local Health Department how many young children are not adequately immunized and ask for the names of organizations that are working to solve the problem. Then call and offer your help.

- Call organizations like Kiwanis, the Junior League or the American Medical Association and find out about their advocacy efforts on behalf of children. Ask how you can get involved.

- Contact your church or synagogue to find out what is being done to help children. Join or start a program.

- Contact one of the organizations listed on the enclosed card. They are waiting for your call.

BE PART OF THE SOLUTION. PICK UP THE PHONE. GET STARTED NOW.

Now is the time to help a young child get out from under the poverty line. Tomorrow will be too late. Early help makes all the difference. Reach out today to a child who needs your help. Help create the future that all our children will inherit.

To get an additional copy of the program list enclosed with this brochure, call 1-800-733-5400.

CURRICULUM VITA

HEIDI MILLER BERLINGER

**50 Watertown #403
Watertown, MA 02172
617/926-4759**

EDUCATION

- Present. Walden University, Ph.D. Education. Professional specialization in Educational Administration.
- 1989 Lake Erie College, Painesville, Ohio 44077 M.B.A Executive Program.
- 1980 Kent State University, Kent, Ohio 44240. B.F.A. Graphic Design and Crafts.
- 1976 Cleveland Institute of Art, Cleveland, Ohio 44106.

EMPLOYMENT

- 1984-1990 The Fairmount Center for Creative and Performing Arts, Novelty, Ohio 44072. Instructor. Created and implemented curriculum for several courses including infant stimulation. Worked with volunteer committee to advise Center in marketing and developmental strategies.
- 1989-1990 The Mort C. McClennan Company, Chagrin Falls, Ohio 44022. Account Executive. Established client base and developed advertising/sales promotion programs. Many promotions were developed to educate the public, in various public service sectors, for clients such as the county library system and major medical facilities.
- 1981-1990 Taught a variety of educational courses at numerous locations in northeast Ohio.

PROFESSIONAL ORGANIZATIONS

- Association for Supervision and Curriculum Development
- Doctorate Association of New York Educators
- Massachusetts Coalition of Parents for the Deaf-Blind and Multihandicapped. Co-chair and Director for birth - 11 age services
- The Helen Keller National Center Parent Network
- National Parent Network on Disabilities