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## ABSTRACT

This manual was prepared in response to the overwhelming interest of Head Start staff and other early childhood professionals to presentations of the Parent Involvement Project Intervention at national conferences. The manual presents two strategies designed to help staff better understand and work with parents, especially those perceived to be difficult to engage in the Head Start experience. The strategies are also designed to provide techniques to engage and encourage parent participation. The first strategy consists of a staff development and training workshop, the goal of which is to present a process of self-awareness and understanding. Ten pertinent exercises are presented: (1) learning about parent involvement; (2) categorizing level of parent involvement; (3) perceptions of the uninvolved parent; (4) uncovering prejudices; (5) the "life load"; (6) depression in low income families; (7) the life load and parent involvement; (8) empowerment; (9) linking empowerment to parent involvement; and (10) choosing hard to engage parents for the peer group. The second strategy presented consists of organizing a peer group for social services and parent involvement staff. Three appendices include background information on the development of the intervention, describe three parent surveys that were used in the Parent Involvement Project, and describe male involvement in Head Start. (SD)

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# **PARENT INVOLVEMENT**

## **A Training Manual for Head Start Staff**

National Head Start Association

City of New York, Administration for Children's Services, Head Start

National Council of Jewish Women (NCJW) Center for the Child

National Head Start Association, 1997

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National Council of Jewish Women (NCJW) Center for the Child

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## Dedication

This manual is dedicated in memory of Elaine Danavall-Williams, community consultant member of the Head Start Research Group. Over several years of involvement in this project, she made an ongoing and substantial contribution to our thinking about working with hard-to-engage parents in Head Start. Her long-standing involvement in Head Start and her commitment to improving the lives of parents and children were an inspiration and guiding force for all of us. Her contributions to this project are many, and for this we are deeply indebted. She played a vital role in developing and implementing the parent surveys, the workshop exercises, and the ongoing peer group. Her rendition of talk show host "Okra Stirfry" was particularly memorable, as it exemplified her warmth, good humor, and ability to maintain her roots in the local Head Start community. We all wish that she could be with us to see the fruits of our hard work and effort. We remember her with respect and deep affection.

## Acknowledgments

*Parent Involvement: A Training Manual for Head Start Staff* has taken several years to develop from a research-based intervention to a practical tool for Head Start staff in their work with parents. This intervention was funded by The Administration on Children, Youth, and Families and the National Council of Jewish Women (NCJW) Center for the Child (CFTC) as part of the larger parent involvement project conducted at the NCJW Center for the Child. The manual became a reality through the faith and confidence of Susan Katz, former President of NCJW; Richard Gonzales, Assistant Deputy Commissioner, the City of New York, Administration for Children's Services, Head Start; and the staff of the National Head Start Association under the direction of the Research and Evaluation Division. We thank them for their continual encouragement, and their organizations, for their dedication and financial support.

We are grateful to many other people for giving of their time and expertise. Edward Zigler, through his unrelentless insistence that this be a "user friendly," "non-research jargony" document, helped the first author through what he termed her "identity crisis." Moncrieff Cochran, Douglas Powell, and Mary Lerner reviewed an early draft of the manuscript and offered invaluable, critical comments and suggestions.

We would like to give special thanks to Chaya Piotrkowski, former Director of the NCJW Center for the Child, for her valuable contributions and support. Not only did she play an important role in conceptualizing, developing, and guiding the parent involvement project, she also helped design and implement many of the training activities described in this manual.

Without the staff and parents of the Ft. George Community Enrichment Center Head Start and the Staten Island Mental Health Society Head Start, the research intervention and this manual would not have been possible. The CFTC researchers and members of the Head Start community developed the intervention out of their concern for the emotional well-being and personal growth of the staff and parents at the two Head Start agencies. They wanted to address the stresses and pressures as well as the strengths and hopes shared by parents and staff alike. We continue to be inspired by their persistence, resilience, and willingness to trust despite enormous odds.

We were lucky to have Chabiram Rampersad (CTFC) and his assistant, Nuris Cevallos, for their work on early drafts of the Manual; Joyce Latham, for her editorial contribution; and Deborah Butler (NHSA) for the final layout and production, and timely completion of the Manual. We greatly appreciate their invaluable skills and assistance.

## Preface

This manual is based on a staff development and training intervention conducted at the National Council of Jewish Women (NCJW) Center for the Child as part of a 5-year study of parent involvement in Head Start entitled, *The Impact of Parent Involvement in Head Start on Parents and Children*. The Parent Involvement Project was funded primarily by the Administration on Children, Youth and Families (ACYF) and the NCJW Center for the Child, with additional funding from the Ford Foundation and other private foundations. It was conducted by NCJW in collaboration with the Yale Bush Center in Child Development and Social Policy.

The development and implementation of the project was a joint endeavor by Head Start staff, parents, community leaders, and NCJW Center for the Child research staff who formed a partnership called the Head Start Research Group (HSRG). The commitment to this joint effort is based on the belief that practitioners, parents, and researchers have expertise and creativity that, if combined, will improve the validity of the research design, measures, and results of a study and ultimately increase the probability of its findings being used. This partnership model of conducting research is consistent with recommendations of the Administration for Children and Families Advisory Committee on Head Start Quality and Expansion to "expand the partnership between research and practitioners by encouraging better communication and better utilization of data." Moreover, Edward Zigler, a founder of Head Start, advocates that these types of partnerships play a vital role in the successful design and implementation of early intervention programs.

From the onset of the Parent Involvement Project, there were to implement an intervention to enhance parent involvement. To begin, the HSRG identified and explored what it felt were important issues related to the development of any intervention for enhancing parent involvement within the context of poverty and its resulting stresses on families. As these issues were explored, members of the group felt more and more strongly that they could not enhance their parent involvement (and social services) component without first addressing the attitudes, feelings and needs of staff, particularly those working most closely with parents. Thus, the HSRG developed and implemented an intervention intended to strengthen staff's professional image, improve their skills, and foster empathy, as well as ultimately enhance parents' participation in the Head Start program. (For more detail, see Appendix A.)

This manual is a response to the overwhelming interest of Head Start staff and other early childhood professionals to presentations of the Parent Involvement Project Intervention at national conferences. Conference attendees felt that this intervention could be generalized to their own programs and asked for a useful tool for staff development and training in parent involvement.

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## Introduction

This manual presents two strategies: 1) a staff development and training workshop for all staff; and 2) an ongoing peer group for social services/parent involvement staff. The strategies are designed to help staff better understand and work with parents, especially those perceived to be difficult to engage in the Head Start experience. They are intended to provide a deeper understanding of the strengths, needs, values, and goals of Head Start parents (as well as staff's), and to teach key psychosocial concepts in child and family development. These strategies also are designed to give staff opportunities to engage and encourage parent participation while developing their own skills and self-confidence. The overarching aim is to empower both staff and parents.

### Goals of Staff Development and Training in Parent Involvement

- Increasing staff's understanding of and empathy toward the life experiences, strengths, and needs of Head Start parents and their peers.
- Increasing staff's self-awareness, and ability to communicate with parents as partners.
- Showing how barriers to involvement can be faced in positive ways.
- Increasing the skills of social services/parent involvement staff in report writing, overall presentation of ideas, problem-solving, and organization.
- Building, for social services/parent involvement staff, supportive and mutually beneficial peer relationships to enhance personal growth and professional pride.
- Strengthening an agency's parent involvement and social services components to realize fully the intended goal of Head Start as a two-generation program
- Helping Head Start parents become confident in Head Start as an important resource and support for them.
- Helping parents form attachments to social services/parent involvement staff.
- Enhancing parental participation in Head Start activities and experiences.

### Important Information

The manual includes selected research results from the Parent Involvement Project. These results are included to give you a flavor of how staff members and parents responded. They are not meant to be "right" answers or necessarily what you might obtain from implementing the information presented in this manual at your agency. Regardless of how your staff and/or parents may respond, the Head Start Research Group felt that you might find these results both interesting and informative.

Appendix A includes background information on the development of the intervention. Appendix B describes three parent surveys that were used in the Parent Involvement Project. The "responses from Head Start" in Appendix B come from two Head Start agencies in New York City (one with over 50 staff serving over 350 families, the other with about 25 staff serving about 100 families) that were the sites for the Parent Involvement Project. One serves primarily Dominican families in a high-crime, drug-infested community; the other serves primarily African-American and white families in several low- to moderate-



income communities. Even with these differences, the results were similar enough that they were combined for presentation in this manual.

Until recently, male involvement in Head Start has not been the focus of special attention. It was commonly understood that most "parent" participation in Head Start usually meant the involvement of mothers or other female caregivers. This has changed with the initiation of the ACYF Male Involvement Demonstration Projects in 1992, and the nationwide interest in the impact of fathers on children's development and school adjustment. Therefore, the Head Start Research Group has included information in this manual (in Appendix C) on current male involvement projects. If you wish to include a focus on Head Start male caregivers, a specific exercise may need to be created. This might include an exploration of the feelings and attitudes of female staff on their own experiences, both personally and professionally, with men.

In this manual, the term "parent" refers to the primary caregiver(s) for the Head Start child. This might be a grandparent, foster parent, aunt, uncle, other relative, or significant other adult who seems to be taking responsibility for the care and welfare of the child in Head Start.

## **Importance of the Facilitator**

### **Selecting a Facilitator**

The selection of a facilitator for the workshop and the peer group is probably the most important choice you will make after deciding to undertake this staff training. The facilitator must have the experience and knowledge to handle the multiple challenges of working with staff on sensitive, often personal material. We recommend, if possible, that the same person facilitate both the workshop and the peer group. However, if this is not possible, the peer group facilitator must participate as an active member of the workshop prior to taking on the peer group facilitator role.

The facilitator must have a good grasp of the Head Start process (i.e., the Head Start Program Performance Standards, staff, parent population), and the concepts used in both the workshop and the peer group: 1) the goals of parent involvement in Head Start; 2) cross-component team building; 3) how to help staff members uncover preconceived notions, assumptions, and prejudices about the group they are serving; 4) the role of one's life experiences and their impact on parent involvement; 5) psychosocial theories of depression/demoralization, "blaming the victim," cultural sensitivity, empowerment; and 6) how parent involvement is linked to empowerment.

### **Facilitator Role**

**Two-Day Workshop.** During the 2 days of the workshop, the facilitator needs to help create an atmosphere in which staff feel comfortable talking about their view of the parents, while taking care that this does not become a forum for "parent bashing" or complaining about job difficulties. The facilitator will need to help staff remain focused on the strengths and needs of the parents and always bring the discussion back to the ultimate objective of their work: strengthening families. It is essential that the facilitator create a nonjudgmental climate that allows staff to be open to self-assessment. For example, staff need to be able to see similarities between the remarks of Dr. Ray Cyst (Exercise #4) and their own statements about parents without becoming defensive.

It is important for the facilitator to have some experience in working with groups in this kind of setting — knowing how to encourage discussion, how to elicit responses from those reluctant to share, not allowing

the most verbal to monopolize the discussion, staying on topic, and knowing how and when to end the discussion. The facilitator will also need to be sensitive to the skill level of the staff and to sense when they are tired (or emotionally drained) and need a break or relaxation exercise, which should be planned in advance. This might be especially helpful while discussing the concept, "life load" in Exercises #5 and #7.

To ensure that the workshop runs smoothly for the 2 days, the facilitator needs to be familiar with the entire workshop prior to beginning. S/he should go through the manual thoroughly, have all of the materials available ahead of time, create props, and rehearse the role-plays in Exercises #4 and #8.

**Peer Group.** In running the peer group, the facilitator will need the same organizational and interpersonal skills required in the workshop, with some additional educational experience in family development, family process, child development, and group process (if possible). Again, experience working in Head Start and a good grasp of the concepts presented and discussed at the workshop are essential. The facilitator needs to keep in mind that the staff's abilities are diverse and encourage those who are "stronger" to mentor the others.

## **STRATEGY 1.**

### **Staff Development and Training Workshop: A Process of Self-Awareness and Understanding**

#### **Purpose and Objectives**

The purpose of this workshop is to: 1) explore the strengths, values, needs, and self-awareness of Head Start staff members as they relate to their work with Head Start parents; and 2) increase and strengthen staff skills in working with parents who they perceive as "hard-to-engage." Specific objectives include:

- Increasing staff's awareness of their own strengths, values and needs related to the scope and complexities of parent involvement;
- Identifying assumptions and beliefs about Head Start parents, particularly those who seem hardest to engage, and the different world views these assumptions represent;
- Learning useful psychosocial concepts to increase their job skills;
- Learning how parent involvement and empowerment are intertwined in the Head Start process;
- Selecting hard-to-engage parents as the "caseload" for Strategy 2, the peer group; and identifying parental life events/experiences related to level of involvement.

#### **Information for Facilitator**

The workshop is designed to be implemented near the beginning of the Head Start year. Several programs may conduct the workshop together, although it is strongly recommended that no more than 50 staff members participate at one time, to preserve the easy flow of discussion and group participation. The final exercise, designed to be agency-specific, allows staff to collect information on their selected families and apply what they learned in the workshop to their ongoing work in the peer group.

The workshop has 10 exercises lasting from 20-40 minutes each. Most exercises have seven parts intended for the facilitator's information:

**Outcomes** list what the staff is expected to learn from the exercise;

**Time** gives the approximate length of time needed to complete the exercise;

**Format** explains the style of the exercise (e.g., role-play, discussion);

**Special Note to Facilitator** includes information on what other outcomes might be sought in the exercise, how to stimulate discussion around certain issues, unusual or surprising dynamics to watch out for, and how to use the exercise to implement change;

**Context** gives the background and framework for the exercise and is especially useful for introductory comments and discussion;

**Materials** lists all of the items needed to conduct the exercise;

**Instructions** is a point-by-point guide on how to implement the exercise; and

**Responses** from Head Start are sample results from the Parent Involvement Project.

Each exercise may be made shorter or longer, depending on the time frame for the entire workshop. The most flexible area time-wise is the discussion section. Serving breakfast and lunch or other refreshments sets a relaxed and "fun" tone for the learning experience. Short stretching and other physical exercise breaks of about 10-15 minutes are recommended after every two to three exercises to keep staff alert and foster a positive attitude.

## Exercise #1: Learning About Parent Involvement in Head Start

### Outcomes

Staff will have:

- Knowledge of the history of parent involvement in Head Start.
- Knowledge of the *Head Start Program Performance Standards*, especially areas that pertain to parents.
- The opportunity for cross-component team building around parent involvement.

**Time:** 40 minutes

**Format:** Small-group activities and discussion

**Special Note to Facilitator:** The purpose of this exercise is to ensure that all staff understand the goals and objectives of parent involvement in Head Start, learn the *Head Start Program Performance Standards*, and see themselves as an integral cross-component team working for the benefit of parents in the program.

**Context:** Parent involvement has been a mandated aspect of Head Start since the program's authorization through the Economic Opportunity Act of 1964. The mandate calls for the "maximum feasible participation" of parents in all programmatic efforts. From the start, parent involvement was conceptualized as the key to success for both parents and children, although this notion well received by all. Community advocates insisted that parent involvement and decision-making were critical to success, while some politicians and researchers focused on preschoolers' IQ scores as the measure of Head Start's success. Thanks to Head Start's pioneering role in this area, today early childhood programs include parent involvement as a matter of course.

Parent involvement activities were built into Head Start to give parents opportunities to advance their education and develop vital life and job-related skills. This involvement was also seen as an opportunity to provide basic social support and assistance to enhance parents' personal growth and development.

In addition, parent involvement was considered vital for children as well. Uri Bronfenbrenner's ecological perspective provides a framework to understand that for improvements to be sustained, children needed to live in decent housing, be loved, well-fed, healthy, and well cared for. In other words, the children were seen as part of an integrated family unit living in a supportive community. Therefore, promoting the development of parents was seen as essential for maintaining the gains made by the children.

### Five Dimensions of Parent Involvement

**Parent Education.** The Head Start philosophy acknowledges parents as responsible guardians and primary educators of their children. Consequently, activities that support parents' understanding of child development, parenting skills, and involvement in their children's education and health care are vital.

Parents are encouraged to work actively with teachers to develop and carry out classroom activities, use those activities in the home, practice preventive health strategies with their children, and actively participate in medical and dental check-ups.

**Making Decisions.** Parent involvement in program decisions is a hallmark of Head Start. Under a 1975 federal mandate, parents lead and serve on Policy Committees that make decisions on budgets, curriculum development, health services, setting goals, and implementing services.

**Volunteering.** An even larger proportion of Head Start parents influence their programs through work as volunteers in the centers and classrooms. Their work includes helping teachers, accompanying groups of children on trips and to medical examinations, planning and conducting parent meetings, developing and reviewing program plans, hiring staff, helping with meal preparation, and performing office tasks and custodial work. These activities play a potentially important role in developing pre-employment skills. In fact, over one-third of former Head Start parents become Head Start staff.

**Building Skills.** In addition to more informal opportunities for building skills, Head Start supports parents' efforts to improve their education and employment status. The *Head Start Program Performance Standards* require that programs identify continuing education programs in the community that will help prepare parents for employment including: basic adult education, vocational training, and employment counseling. The Head Start Improvement Act of 1992 mandates that all Head Start programs offer parents literacy training.

**Personal Support.** Head Start also aims to promote the self-confidence and personal well-being of parents. The social services and parent involvement staff works intensively with families to identify their strengths and address a variety of needs, in order to reduce family stress and improve quality of life and feelings of self-worth. Programs are required to provide counseling or crisis intervention, either directly or through other community agencies.

These five core dimensions of the program represent an implementation of the *Head Start Program Performance Standards*. These standards suggest the scope and depth of parent involvement to which programs must comply in order to receive federal funds.

The Head Start community (i.e., federal, regional, and local staff and parents) has interpreted parent involvement in various ways. For example, teachers tend to define the standards in terms of the class-

room and their children's development there; social services staff focus on supportive counseling and resources to meet family needs; and parent involvement staff emphasize workshops, special events, and policy committee meetings. Clearly, how one defines parent involvement colors the scope and implementation of one's parent involvement program.

### Challenges for Parent Involvement Today

Much of what is described in the original *Head Start Program Performance Standards* is relevant to the needs and issues of families today. They stand as the cornerstone of any future parent involvement strategy. However, the task for Head Start today is to develop its parent involvement and social services components to support a two-generation strategy more systematically. This strategy must reflect the changing needs of families in order to provide them with the support and the tools they need to face increasingly stressful life circumstances and new demands. Specifically, these stressors include positives such as employment, job training, and education as well as negative experiences of lack of high-quality child care, inadequate or overcrowded housing, unsafe neighborhoods, unemployment or the lack of meaningful employment, and (for those receiving public funds) the requirements of welfare-to-work programs.

In clarifying parent involvement today, several issues should be considered:

- How Head Start can support and train staff to work more effectively with parents;
- How Head Start can deliver to families more individualized supports that promote the multiple goals of parent involvement. These include bolstering self-worth and well-being and affecting efforts toward economic self-sufficiency; and
- How Head Start can build on the relationships between staff and parents to make activities and experiences more "user friendly" to meet the needs of parents today.

Thus, any program of parent involvement needs to fully take into account the family support and participation mandated by the *Head Start Program Performance Standards*. In this way, Head Start will strengthen its capacity to become a fully-realized "two-generation" program.

**Materials:** Full copies of the *Head Start Program Performance Standards*; 70.2 Head Start Policy Manual, pads, pencils, chalkboard, chalk, or flipcharts.

**Instructions:**

- 1) Distribute materials.
- 2) Divide staff into their components: education, social service, parent involvement, and health. (Seat support staff such as cooks, custodians, and administrative assistants among component groups as you see fit).
- 3) Ask each group to list parent involvement activities and experiences from the *Head Start Program Performance Standards*.
- 4) Have a spokesperson from each group report this list to the full group. Record on chalkboard (or flipchart).
- 5) Discuss and note where staff focus on their own component.
- 6) Form groups based on a combination of staff from different components (i.e., one teacher, one family worker, one cook, etc.).
- 7) Ask each group to list ways in which its members could coordinate their efforts to assess the needs of families and provide services and support.
- 8) Have a spokesperson from each group report this list to the full group. Record on chalkboard (or flipchart).
- 9) Discuss and note interesting ideas for coordination of service delivery.

## Exercise #2: Categorizing Level of Parent Involvement in Your Class

### Outcome

Staff will have:

- A list of all parents in their classroom separated into three categories of participation (high, medium and low) with reasons for low or noninvolvement in parent activities and experiences.

**Time:** 30 minutes

**Format:** Recordings on the Class Parent List form, followed by group discussion

**Special Note to Facilitator:** This exercise provides a baseline for addressing staff's preconceived notions, assumptions and, in many cases, prejudices about the group they are serving. As they progress through the exercises, there should be changes in their attitudes and beliefs that reflect a developmental progression from "blaming the victim" to a "family empowerment" perspective. This list is saved and used in Exercise #10.

**Materials:** Class Parent List form (see page following), pencils; class attendance books; chalkboard and chalk, or flipchart and markers.

### Instructions:

1) Have each staff member create a personal and private list of all the parents in their class. Then have them categorize each parent along the following continuum: 3 = highly involved; 2 = moderately or somewhat involved; and 1 = low to not involved at all. Staff should be encouraged to use their own criteria to judge parents' level of involvement, based on experiences with the parent. To judge high involvement, they might want to think about attendance at workshops, volunteering in the classroom and elsewhere, participation in policy committee meetings, etc. Moderate involvement is occasional participation in these activities, with the parents who are left falling into the "Low or Noninvolvement" category.

2) After staff members have categorized each parent, they should be asked to focus on those parents categorized as "1." Ask staff members to put the reason(s) why they have placed these parent(s) in this category.

3) The facilitator should collect the lists and store them in a locked file for use later in Exercise #10.

4) Open the floor for group discussion. Focus on the following questions. Record answers on chalkboard or flipchart to facilitate dialogue among the components:

- Why do you think parents really are not coming in or really are not engaging in Head Start?
- How is your answer different from the one that you hear from some parents?
- How are the social services/parent involvement staff's answers different from those of teachers or the other component staff?

**Date of Workshop:** \_\_\_\_\_

Class: \_\_\_\_\_ A.M. P.M. (circle one)

- Choose the primary caregiver for each child and list his/her name under “Parent’s Name.”
- Record below in column marked “Category” 3 for highly involved; 2 for moderately or somewhat involved; and 1 for low toot involved at all (only choose one category for each parent).
- For those parents categorized with a “1,” enter next to his/her name why you feel that they are low or non-participants in Head Start parent activities/experiences.

<u>Parent's Name</u>	<u>Child's Name</u>	<u>Category</u>	<u>Reasons for low or non-involvement</u>



### Exercise #3: Perceptions of the Uninvolved Parent

#### Outcomes

Staff will have:

- Knowledge of staff assumptions and beliefs, both implicit and explicit, about parents who are hard-to-engage in the Head Start experience.
- An anonymous summary of terms they used to describe hard-to-engage parents for use in Exercise #4.

**Time:** 30 minutes

**Format:** Anonymous descriptive terms written on scraps of paper collected and read to the group, followed by discussion

**Special Note to Facilitator:** This exercise is designed to reveal the feelings and attitudes of staff that may hinder their successful work with parents. Since this exercise is based on the anonymity of responses, staff members become freer to express their true feelings. (Don't be surprised by the large percentage of negative personal characteristics attributed to hard-to-engage parents.) Completion of this exercise represents a step in staff's understanding of their work with parents.

**Context:** Without understanding their own hidden assumptions and beliefs about some of the parents served by Head Start, staff cannot serve these parents effectively. Through the open and accepting discussion format of this exercise, staff members will learn that they are not alone in their negative thoughts and feelings. It is imperative to make clear to all before the discussion begins that they should not criticize the comments of others or make judgments. Through Exercises #3 and #4, staff can come to terms with their attitudes.

**Materials:** Small squares of paper, pencils, small basket, chalkboard and chalk, or flipchart and markers (purpose: to write staff responses large enough for all staff to be able to see; staff responses will form the basis of the discussion).

#### Instructions:

- 1) Pass out small squares of paper to staff.
- 2) Ask staff to answer the question: "What are the first words that come to mind when you think of a parent who is hard-to-engage in Head Start? Instruct staff to write answers on the small squares of paper (one answer per paper); encourage people to define the term hard-to-engage in their own words. Staff should be told not to write names on the papers, as the purpose is to keep answers anonymous to allow for more honest and open responses.
- 3) Encourage staff to be as honest as they can, assuring confidentiality.
- 4) When staff members are finished, ask them to fold the papers and place them in the basket being passed around.
- 5) Once all have completed this task, read the answers aloud and record them on a board so all can see. Discuss responses. Save responses for Exercise #4.

## Responses from Head Start — Perceptions of the Uninvolved Parent

Head Start staff responded to the question: *"What is the first word that comes to mind when you think of a parent that is hard-to-engage in Head Start?"*

### PARENTS TOO BUSY

working  
having to work harder  
too many children  
no time  
too busy  
not able to compromise

### PARENTS DON'T CARE

lazy  
lack of motivation  
unaware  
stubborn  
apathetic  
mistrusting  
careless  
resistant  
selfish  
not in touch  
hard headed  
excuses  
uncaring  
difficult  
unconcerned  
unreliable  
uninformed  
refuse  
not interested  
don't care for their children

### PARENTS TOO STRESSED

new and strange environment  
depressed  
shy  
afraid  
expression: unchanging gaze  
low self-esteem  
stressed out  
overwhelmed  
frustration  
confusion  
preoccupied with too many problems in general  
pain  
personal problems  
family problems

## Exercise #4: The "Okra Stirfry Show" - Uncovering Our Prejudices

### Outcomes

Staff will have:

- An understanding of their own prejudices as they become aware of the similarities between their negative responses to Dr. Ray Cyst and their own responses from Exercise #3.
- Knowledge of the two different views of disadvantaged families: 1) blaming people for their own trouble ("blaming the victim"); and 2) family empowerment.
- Knowledge of how our view of poverty and economically disadvantaged families affects what we do about it and how we help people.

**Time:** 40 minutes

**Format:** A role-play television talk show: station WYRU with host "Okra Stirfry" and two guests, "Dr. Emily Power" and "Dr. Ray Cyst." Discussion of the role-play.

**Special Note to Facilitator:** In this exercise, using humor to make outrageous, prejudicial statements takes some of the "sting" out of staff members' realization that some of the very words that they used to describe hard-to-engage parents in Exercise #3 are the same words for which they now condemn Dr. Ray Cyst. This exercise marks the beginning of self-awareness and potential openness to positive growth and change in their work with parents.

**Context:** Our prejudices, values, and judgments color how we approach our work, what we perceive our job to be, and how we go about working with families served by Head Start. Sometimes our prejudices are not conscious, but they still affect how we do our work. This role-play is used to portray two views of poverty. One model, often called the "deficit" model, blames the families for their own problems ("blaming the victim"). The other takes into account the economic and social realities of poverty, recognizes the responsibility that families must take in moving out of poverty, and builds on their strengths (family empowerment).

**Materials:** The Okra Stirfry script (see pages following). Props that may be used: sign for the televi-

sion station (WYRU); host and guest name cards; costume for Dr. Cyst: hat, tie, mustache/beard; and three large cards, one with "Boo," one with "Hiss," and one with "Applause" written on them (to encourage group participation). The use of props is encouraged to make the role-play as elaborate and fun-filled as possible.

### Instructions:

- 1) Set up a "stage" in front of the group with three chairs. The staff member playing the host should be in the center.
- 2) Encourage staff to play the roles. However, it is recommended that the workshop facilitator play the part of Dr. Ray Cyst, since the person playing this role must be prepared to handle the negative feelings directed at "him" as the role-play progresses. It is also recommended that staff be chosen in advance to allow for practice time, questions, and debriefing. When enacting the role-play Okra should make Dr. Ray Cyst's name sound like "racist" after her initial introduction of him to the audience as Dr. Ray Cyst. Also, subsequent to her introduction as Dr. Em Power, Okra should make her name sound like "empower."
- 3) Before the role-play begins, the host should instruct the audience staff to participate. Ask the staff to "Boo," "Hiss," and "Applaud" when instructed as the cards are held up. [Please refer to the actual script for the appropriate times to hold up

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these cards.]

4) After the script has been read, discuss the role-play; probe for staff comments and thoughts. Use the "Context" section above to help move the discussion along.

5) Ask the questions: "How does our view of poverty and economically disadvantaged families affect what we do about it? How do we help people who have differing family circumstances?"

6) Give a summary of the role-play debate. Why did we do the role-play? What have we learned? How are many of the words we chose to describe hard-to-engage parents in Exercise #3 reflected in this role-play?

7) Discuss the issues and feelings raised. Ask for comments and thoughts. Be sure to discuss the two different views of economically-disadvantaged parents: deficit model (blaming the victim) and empowerment model (family empowerment). The focus of this discussion should be on seeing disadvantaged parents as either deficient or in a more positive light, focusing on their strengths and the inadequacies of the present social/economic system. The important concept to learn is that focusing on strengths rather than deficiencies will lead to different kinds of programs and different ways of working with parents.

## Materials for Exercise #4: The Okra Stirfry Show

### WYRU TELEVISION

**OKRA:** Today we have a very special show. Our guests are two experts on parent involvement in Head Start. Dr. Ray Cyst, who will be with us shortly, and Dr. E. Power. Dr. Power started out with Head Start in 1965 and is doing research on parent involvement. By the way Dr. Power, what does "E." stand for?

**DR. EM POWER:** Emily, but my friends call me Em.

(Dr. Ray Cyst enters.)

**OKRA:** Ah, Dr. Ray Cyst is with us. Dr. Cyst has spent over 20 years working in Head Start and in the classroom, and is a leading expert on parent involvement.

All right, we're ready to begin. If you like what they say, let me hear it. If you don't like it I expect to hear some BOOS! You've got to let them know what you think.

(Okra turns to the "experts")

My first question is to Dr. Ray Cyst: You think that parents should be involved in Head Start, right? So why do you think some parents don't get involved?

**DR. RAY CYST:** That's easy. They aren't responsible parents. They don't care about their children enough; they like to drink and party more than parent. They didn't get good parenting, so how can they be good parents?

*[Audience is instructed to "Boo" and/or "Hiss"]*

**OKRA:** Dr. Em Power, what do you think about what Dr. Ray Cyst just said?

**DR. EM POWER:** Dead wrong. That's what we call victim blaming and victim bashing. Most parents want the best for their children.

*[Audience is instructed to "Applaud"]*

(Dr. Cyst interrupting)

**DR. RAY CYST:** Best for their children? Not from where I sit. I see plenty of those parents hanging out in the neighborhood.

**OKRA:** Wait a minute. I have a follow-up question to Dr. Power. If Dr. Cyst is wrong, why don't they get involved?

**DR. EM POWER:** Overburdened by their life circumstances, doing one more thing is too much; they are overloaded. That's one of the things that poverty does: it creates huge

demands while not providing resources like jobs, money, or decent housing. Also poor mothers often are very socially isolated — they feel all alone.

**DR. RAY CYST:** Wait a minute. If that's your idea, how do you explain why some parents become very involved? My explanation is that there's something wrong with the parents who don't get involved and there's not a lot to be done about it. Maybe it's their genes, they're just born that way — They shouldn't be parents.

*[Audience is instructed to "Boo" and/or "Hiss"]*

(Okra turns to the audience)

**OKRA:** Hey, that's pretty tough talk.

*[Audience is instructed to "Applaud"]*

**DR. EM POWER:** Hold on. You can't know who should be a parent or not. Parents need support and communities to support them.

*[Audience is instructed to "Applaud"]*

**DR. RAY CYST:** Well, Dr. Em Power, you tell me why some parents do get involved. Head Start parents are all poor, you know.

**DR. EM POWER:** Among all families, poor and not poor, life circumstances vary. Some parents feel sad or down some of the time or most of the time; others have many children at home with not many adults around to help out; still others have a job that stresses them out or are going to school or are engaged in a job training program; still others suffer from the effects of poor housing and single parenthood. In short, some people are more socially isolated than others. They may not have family and friends who can help them. Some parents have lots of demands on their time and energy, but they are isolated because the people around them cannot give them the support they need. These are some of the barriers we found to parents' involvement in Head Start. It is important to understand that it is not the specific barriers but rather the number of barriers that determines risk for a parent and her child.

**DR. RAY CYST:** Wait a minute. You're saying that parents aren't responsible for their own behavior. That reminds me of people who say the murderer isn't responsible for his action, he's had a bad childhood and lives a hard life.

**DR. EM POWER:** No, not at all. There are two responsibilities here: First, the job a family has to do is huge: raising kids is tough enough, but a family has to maintain enough money to support themselves as well as know the basics about life so they are able to handle and care for their children appropriately. It's society's responsibility to support families by providing the resources and opportunities for them to do their work as a family. On the other hand, families and parents have to be responsible for taking care of their children and

being good parents. Without society's support it's much harder for them to do their jobs. In short, parents are responsible for their children but communities are responsible for families. This is what we call 'shared responsibility'.

*[Audience is instructed to "Applaud"]*

In some other countries, health care and child care are seen as people's rights and families don't have to worry about them. Milk and bread are subsidized so that everyone can afford them.

**OKRA:** Well, what difference does it make? What does this mean for Head Start staff trying to get parents to participate?

**DR. RAY CYST:** Well, there's not much to be done about it. Actually, just make your program as good as it can be and offer it to parents. Some will get involved and some won't.

**DR. EM POWER:** I agree with part of what you say. Yes, make your program as good as it can be. But, there's more that can be done. Understand why parents are not involved. Get at the reasons and then you have to develop ways of reaching out to them, so that they can get involved.

**OKRA:** O.K. Now we will take some questions from our audience!

**[NOTE: try to pull as many questions from as many staff as you are able to; audience participation should last about 5-10 minutes.]**

**OKRA:** Our time's up. Do you each have a final word? Ray, what about you?

**DR. RAY CYST:** Don't bust your butts. Some people just don't care. Work with the nice ones — the ones that smile and appreciate you.

**OKRA:** Em, Do you have a final few words?

**DR. EM POWER:** Hang in there. You have an important job because what you do can make a difference. It is possible to involve parents who don't participate at first. It's worth the effort because the stakes are so high. We're talking about children's lives here.

**OKRA:** Thank you Dr. Ray Cyst and Dr. Em Power. Signing off now for station WYRU.

## Exercise #5: The Life Load

### Outcomes

Staff will have:

- An understanding of the concept of "life load."
- Knowledge of their own life load — the demands and challenges they face and the resources they have to lighten their life load.
- An understanding of the life load of Head Start parents.

**Time:** 40 minutes

**Format:** Demonstration, self-directed exercise, discussion

**Special Note to Facilitator:** The issue of stress often comes up during a discussion of the demands of one's life; this is a good time to introduce the idea of "stress reduction," along with techniques that might be used. These may include deep breathing exercises, relaxation, meditation, and music.

**Context:** Life load equals the demands and challenges of life minus one's resources and supports. One's life load can be very heavy and cause extreme stress if the resources and supports available do not meet the individual's level of demands and challenges. Some people face relatively few stresses while others face many. Some people have many resources and supports available to them (e.g., a high-paying job, helpful friends and family, affordable child care), while others have few.

We use the term "life load" as a way of describing the relationship between stressors and resources. Poverty generally creates a heavy life load in two ways: It increases stressors while blocking access to the resources needed to meet those challenges. Some people may begin life with a heavy life load or acquire one in early childhood because of low birth weight, fetal alcohol syndrome, abuse, health problems, etc. For others, the life load may get heavy later in life because of early pregnancy, bad schools, or the death of a parent. Low-income parents — especially single ones — carry a particularly

heavy life load. On the one hand, Head Start might be perceived by some parents as a source of support and a resource for information and services. On the other hand, Head Start itself could be seen as an additional burden because of the program's demands on parents to participate.

**Materials:** List of demands and challenges, resources and supports entitled Your Life Load (see pages following), lots of walnuts and black beans (large and small objects), enough small paper lunch bags for each staff member attending the workshop.

### Instructions:

- 1) Distribute and review Your Life Load and discuss it with staff. The purpose of the handout is to help stimulate ideas.
- 2) Demonstrate how to create a "bag" of one's life load (based on yourself or a fictitious person). To do this, label each demand or challenge (can be voted on by all participating in the workshop) as either large (walnut) or small (bean). Then place that object into the bag to represent that particular demand or challenge. Do this for each life load experienced. Take a moment to discuss the "weight" of the life load. Next, remove either a large (walnut) or small (bean) object from the bag for each resource or support presently available in your life. Demonstrate how "heavy" or "light" the load is now. How and why did it change in weight?
- 3) Distribute a pile of large (walnuts) and small (beans) objects and a paper bag to each staff member.

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- 4) Ask each to create a personal life-load bag independently.
- 5) Ask staff to hold up these bags upon completion. Compare life loads and discuss, using the "Context" section as a reference. Be sure to point out that the weight of the bags are different since everybody's life load is different.
- 6) Ask a staff member for an example of a Head Start parent. Do not use the real name, but allow the staff member to describe the parent's life circumstances. Have another staff member place objects into the bag representing each of that parent's demands, challenges, resources, and supports. Using the "Context" section as a reference, encourage the

staff to make comments and note variations in how "heavy" each individual's life load is.

- 7) Ask staff to empty their personal life loads and to think about a Head Start parent that they know. Ask them to create independently a life-load bag with that parent in mind, using the same procedure they used to create their own life-load bags.

- 8) Discuss the parents' life loads. Ask the questions:

- How do the parent's bags compare to the staff's?
- Can a person with a heavy life load help another person with a heavy load? Why? How? Why not?

#### Responses from Head Start — The Life Load of a Hypothetical Head Start Parent

Part I: Challenges and demands, add walnut for large and bean for small.

Financial Problems	5 Walnuts
Children	3 Walnuts
Single Parenting	3 Walnuts
Crime	5 Walnuts
Housing (overcrowding)	2 Walnuts
Emotional Problems	3 Walnuts
Drug Abuse	4 Walnuts
Unemployment	5 Walnuts
Child Care Problems	4 Walnuts
Other Family Problems	3 Walnuts
Family Member in Jail	4 Walnuts
Violence at Home	5 Walnuts
Personal Issues	3 Walnuts
Housing (utilities)	3 Walnuts
No Support System	2 Walnuts
Racism and all the "isms"	"Fill another bag"
Work/School/Job Training	2 Walnuts
No Child Support	3 Walnuts
Rats/Roaches	5 Walnuts
Homelessness	2 Walnuts
STDs	4 Walnuts
Limited Education	4 Walnuts
Parent By Herself in USA	2 Walnuts, 2 Beans
Parent Doesn't Speak English	2 Walnuts
Parent is Undocumented	5 Walnuts
<b>TOTAL</b>	<b>83 Walnuts, 2 Beans, and Another Whole Bag</b>

#### Responses from Head Start — The Life Load of a Hypothetical Head Start Parent

Part II: Resources and Supports. Remove walnut for large and bean for small.

##### Head Start

Child in program/parent not involved	5 Walnuts
Parent involved	10 Walnuts
Religious Supports	5 Walnuts
Medicaid	7 Walnuts
Community Resources	3 Walnuts
Friends	2 Walnuts
Mate/Partner	1 Walnut
Family Supports	5 Walnuts
Positive Self-Image	5 Walnuts
Mentors	2 Walnuts
Positive Effects of School/Job Training	3 Walnuts
Enrollment in Drug Program	2 Walnuts
Single Parenting (getting rid of bad spouse)	2 Walnuts
<b>TOTAL</b>	<b>52 Walnuts</b>

SO... 83 Walnuts, 2 Beans, and Another Whole Bag  
[challenges/stressors]  
- 52 Walnuts [resources/supports]

**GRAND TOTAL 31 Walnuts, 2 Beans and Another Whole Bag**

## Materials for Exercise #5: The Life Load

**Step 1.** Think about your life load. Life loads can be positive or negative. What they have in common is that they create demands on you. Examples of life loads are:

### HEALTH

Sickness or injury  
Dental work  
Pregnancy  
Miscarriage  
Positive self-image  
Illness of a child or other family member  
Young daughter who is pregnant  
Problems with Medicaid  
Emotional problems  
Substance abuse  
Young son who becomes a father

### WORK AND SCHOOL

Beginning school or going to school  
Being in a job training program  
Having a hard job  
Difficult work or school schedule  
Trouble with your boss  
Being laid off  
Enrollment in drug program  
Involved in Head Start

### HOME

Overcrowding  
Difficulty finding decent housing  
Moving  
Homeless  
Rocks and rats  
No hot water or heat  
Crime in the neighborhood  
Painting apartment  
Violence in the home  
Community resources available  
Religious supports

### FAMILY AND FRIENDS

Single parent  
Wedding to plan  
Problems with boyfriend/spouse  
Family members on drugs or alcohol  
Family member with alternative sexual orientation  
Child in trouble at school  
Parent comes to live with you  
Child in a special program

Beginning a new relationship (partner or friend)  
In-law trouble  
Separation or divorce  
Death of a loved one  
Changing child care arrangements  
Getting rid of boyfriend/spouse  
Family member arrested or jailed  
Lots of friends  
Gaining a new family member (birth, adoption, etc.)  
Strong/weak family support system

### FINANCIAL AND LEGAL

Checks stolen or late  
Unable to pay bills  
Robbed  
Victim of a violent act  
Involved in an accident  
Involved in a lawsuit  
No child support  
Pay day  
Rent due  
TV or telephone disconnected  
Medicaid

**Step 2.** See how heavy your life load is. Put your life load into your paper bags. Use little beans for small ones. Use bigger beans for big ones.

**Step 3.** Think about those things in your life that make your life load lighter.

(a) Think about things in your bag of life loads that are also positive and nice. For example, going to school is a demand but it is also nice.

(b) Take out a bean that matches how positive the life load is. Take out as many beans as you need to.

(c) Think about things and people in your life that make your life load lighter. For example, a friend who helps out can make things easier and better for you. Take out a bean for every person or thing that makes your load lighter. Take out as many beans as you need to.

## Exercise #6: Depression in Low-Income Families and Their Social Supports

### Outcomes

Staff will have:

- Knowledge of key research on depression in adults, especially mothers, and how it may affect their behavior, relationships with their children, possibly their children's behavior and feelings.
- An understanding of how some symptoms that look like depression are really signs of demoralization and sadness and what that means when working with some parents.
- Familiarity with the signs and symptoms of depression.
- The ability to identify certain behaviors — in themselves, their peers, some parents, and some Head Start children — that may point to depressed feelings.
- An understanding of how their work with parents serves as an important source of social support and potential reduction of depressed feelings.

**Time:** 40 minutes

**Format:** Pencil recordings on small squares of paper, discussion and didactic presentation

**Special Notes to Facilitator:** This exercise is included in the workshop for two reasons. First, research results from the Parent Involvement Project revealed that 47% of 68 Head Start mothers who were interviewed admitted to "often feeling sad, down, and depressed." Second, the Head Start staff involved in the Parent Involvement Project wanted more information about what the symptoms of depression looked like in adults and the effects of maternal depression on young children, since they felt that it was a real problem for some parents at their agencies. A reference list follows this exercise for those who would like further reading on this topic. The "Context" section is based on the information from these sources.

**Context:** Some people (including children) have physical and emotional symptoms that are revealed in their day-to-day behavior and relationships with others. These behaviors may not clearly show that people are suffering from depression, but they may be. Low-income parents are particularly vulnerable because poverty contributes heavily to an excessive life load that can lead to low self-esteem, as well as

eating and/or sleep problems. In some cases, a parent may let personal hygiene and appearance deteriorate. The parent may be especially irritable with his/her children and appear overwhelmed by their needs. Some parents may feel helpless and hopeless about their lives and their problems, and appear to be very passive. Indeed, they may appear to Head Start staff as apathetic, and display an "I don't care" attitude.

Once people become depressed, they find it more difficult to help themselves and a vicious cycle of defeat and demoralization is established, with the depressive symptoms getting even worse. Even people who act angry and belligerent actually may be feeling quite depressed.

**Research on Depression and Social Supports.** Research indicates that depressive symptoms are highly prevalent among women of child-bearing age. As a result, many children are exposed to mothers who experience feelings of depression, sadness, and being "down." The effects of depressed mothers on their infants and young children include slower development and insecure attachment behavior, higher rates of adjustment problems, and lower levels of emotional well-being than infants and young children of mothers without depressive symptoms. These children also are at-risk for devel-

oping chronic depression themselves. Depressive symptoms in mothers also are associated with difficulties in parenting, leading to negative child-rearing attitudes and behaviors (See chart, *The Effects of Maternal Depression on Both Mothers and Children* following).

Several studies focusing on minority families examined the prevalence of depressive symptoms. They found, for example, that Hispanics suffer from higher rates of depression than non-Hispanic whites, with women showing the highest rates of depression when compared to men across both groups. Parker and her colleagues found that in a sample of low-income Head Start mothers, 47% of Hispanics and 42% of African Americans reported "often feeling sad, down, and depressed."

Research also indicates that traumatic and chronic stresses, including what Richter calls "economic stress," are related to psychological distress and the quality of parenting. In her study of parents in South Africa, Richter sees some mothers as carrying such a heavy load without sufficient social supports that they become "demoralized, withdrawn, and depressed." In fact, she quotes Fried who feels that the "emotional withdrawal" connected with low-level depression is "one of the most common forms of psychological distress..." among low-income families who suffer from chronic stress.

Conversely, social supports appear to serve as a buffer against the effects of stress. Such supports as can be offered by early intervention programs, friends and family, strong religious beliefs, and solid relationships with others may counteract the harsh impact of these negative forces.

In an earlier study of parent involvement in Head Start, Parker, Piotrkowski, and Peay conceptualize the Head Start program as a "supportive" institution to the degree that parents use the experiences and

activities it offers. Thus, parent-focused activities and experiences may provide an important source of social support. In a related study examining what kinds of experiences are associated with depression in mothers, de Leon Siantz found that when mothers have support and assistance in the care of their children, they are less likely to become depressed. In fact, for many mothers, it is probably true that being able to leave their child in the safe, nurturing environment of Head Start each day is a support in and of itself.

**Head Start Parent-Staff Relationships.** In order for Head Start to be truly supportive to parents, the relationships between parents and staff need to be developed as a mutual partnership. The work of Jean Baker Miller and her colleagues on women's development may be applied here, since it underscores the importance of mutual relationships, rather than the traditional social work model of "helper/helpee." Understanding others and being understood leads to self-knowledge and growth. In this type of relationship, each member experiences a greater sense of vitality, a greater ability to act, a clearer picture of the self, higher self-esteem, and more sense of connectedness, which motivates each to seek this in other relationships.

Parents in Head Start have the opportunity to build relationships with other parents and staff members, and there is evidence that when they do, they become less depressed, feel more in control of their lives, and have higher levels of self-worth. This, in turn, may lead to feelings of empowerment, one of the major goals of Head Start's Parent Involvement component.

**Materials:** Copies of the chart, *The Effects of Maternal Depression on Both Mothers and Children*, paper, pencils, chalkboard and chalk, or flipchart and markers.

### Instructions:

- 1) Ask the question: what do you think a depressed person looks like? How would the person act and speak?
- 2) Instruct staff to record their answers on the small squares of paper.
- 3) Collect and read answers aloud and record on a board for all to see. Discuss.
- 4) Share the information from the "Context" above. Discuss.
- 5) Hand out the chart on signs and symptoms, and the effects of depression on parents, the parent-child relationship, and on children (see page following). Discuss.

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Chart for Exercise #6

## The Effects of Maternal Depression on Both Mothers and Children

### Thoughts, Feelings, and Actions

#### Cognitive:

1. Negative beliefs.
2. Inability to see whole picture; may focus only on the negative tendency to overgeneralize; thinking things are either all good or all bad.
3. Selective focus on past events.
4. Assigning negative meaning to events.
5. Sense of time distorted.

#### Emotional:

1. Apathy.
2. Pessimism.
3. Hopelessness.
4. Overly sensitive to minor obstacles.
5. Isolation, frustration with role/responsibilities.
6. Anxiety, less self-confidence.

#### Behavioral:

1. Self-blaming, low self-esteem.
2. Low problem-solving ability.
3. Reduced ability to ask for help.
4. Easily hurt by innocent statements of others.
5. Exaggerates external problems.
6. Loss of energy.
7. Irritability.
8. Negative attitude & behavior are less likely to be responded to with positive behavior of others. This results in less positive social relations.

#### Effects on Parenting

1. Less interactive with child.
2. Less complex language.
3. Lack of give-and-take between parent and child.
4. Less likely to be child-centered, less likely to acknowledge child's contributions.
5. Preoccupied.
6. Critical of child.
7. Less likely to follow through with child.
8. More parent-child conflicts.
9. Distant/uninterested behavior toward child.
10. Negative perceptions of child's behavior.
11. Poor modeling of positive behavior for child.
12. Less sensitive to child.
13. Less responsive to child.
14. Indecisive in dealing with children's problems.

### Thoughts, Feelings, and Actions

#### Effects on Child

1. Behavior problems.
2. Learned helplessness.
3. Insecure attachment.
4. Cognitive deficits.
5. Low self-esteem.
6. Negative attitudes toward people and events.
7. Reduced ability to cope with life events, at-risk for depression.

## Exercise #7: The Life Load and Parent Involvement

### Outcomes

Staff will have:

- An understanding of the link between life load and parent involvement.
- Knowledge about how parent involvement in Head Start can help reduce parents' life load.

**Time:** 30 minutes

**Format:** Pencil recordings on small squares of paper, followed by discussion

**Special Note to Facilitator:** For this exercise, make sure that staff discusses ways in which Head Start activities and experiences may increase a parent's life load if the staff is not sensitive to individual needs and goals (e.g., a parent in school or job training being expected to volunteer often in the classroom).

Help staff to generate alternative ways for parents with heavy life loads to be involved.

The intent of this exercise is to create a positive view of parent involvement, but staff may tend to vent about their own jobs and life load. Another tendency to watch for is staff members trying to find ways to reduce all of the parents' problems; they need to develop a view of what they can realistically accomplish. They should be helped to make decisions based on their capabilities, and the resources of the agency and the community.

The suggestions generated by staff during the discussion periods should be revisited in the peer group as staff and parents work together.

**Context:** Head Start staff may help reduce a parent's life load by:

- Providing a safe, nurturing, and educational environment for the child(ren);

- Helping to break down a parent's social isolation;
- Offering support to parents;
- Providing resources for social and educational services;
- Offering a variety of educational opportunities, such as parenting and child development workshops, adult education classes, and self improvement seminars; and
- Creating concrete ways of linking parent involvement and welfare-to-work requirements, to reduce parental stress and support efforts toward economic self-sufficiency.

**Materials:** Paper, pencils, small basket, chalkboard and chalk or flipchart and markers.

### Instructions:

- 1) Ask the question: "How do you think parent involvement in Head Start can directly reduce a parent's life load? Be specific."
- 2) Instruct staff to record answers on the small squares of paper.
- 3) Collect and read answers aloud; record on a board so all can see. Discuss. Use information in "Context" section as reference and to help move discussion along.

### Responses from Head Start – The Life Load and Parent Involvement

**Head Start Staff Response to the Question:** *“How do you think parent involvement in Head Start can directly reduce a parent’s life load? Be specific.”*

#### Support

support from others in similar situations  
provides someone who listens  
support in a crisis  
breaks down social isolation future  
helps to motivate  
provides encouragement and acceptance  
respect from child  
keeps children (3 hrs. a day)  
assessment of children  
provides health services  
feeds children  
allows for new friendships

#### Skill Building & Resources

ESL, GED  
parenting skills  
educational skills  
coping skills  
job training programs  
Looking at Life workshop  
work in the classroom  
stimulates education as life learning process  
fund raising, child advocates, consultants, and social workers  
counseling, support, referral  
education and workshops  
parent holds positions (elected)

#### Personal

free time  
make parents feel valued by assigning tasks appropriately  
builds self-esteem  
optimism and goals for the  
builds confidence and self-worth  
stress reduction  
identify problems in a safe environment  
responsibility  
strive towards goals for improvement



## Exercise #8: Empowerment

### Outcomes

Staff will have:

- An understanding of the concept of empowerment.
- Familiarity with how empowered individuals behave and express themselves.
- Knowledge of how parental behavior affects children.

**Time:** 45 minutes

**Format:** Role-play to provide some concrete examples of what an empowered parent might look like

**Special Note to Facilitator:** If these situations do not reflect the experiences at your Head Start program, other scenarios with similar results may be substituted. An important aspect of the discussion at the end of this exercise is how the staff feels about parents who behave in certain ways. Be especially aware of the descriptions staff use when talking about the parent in Situations #1 and #2.

**Context:** We use the word "empowered" for individuals who feel they have control over their lives, believe they can change events through their own behavior, develop effective ways to meet life's challenges, and succeed in meeting their goals. An empowered person can reduce their life load by taking steps to reduce stressors, by facing challenges more effectively, and by gaining access to the resources and support needed to meet challenges. An empowered person is one who is effective in his/her life context.

**Materials:** Name tags for each role (described below), props if desired, chalkboard and chalk or flipchart and markers.

### Instructions:

- 1) Before the role-play begins, ask staff to define "empowered." What does an empowered person look like? (confident, in control, etc.) Record the answers on a chalkboard or flipchart.
- 2) Recruit volunteers for three role-plays. Another

way to obtain volunteers is to place a colored square of paper on the backs of certain chairs, each representing one of the role-plays. The staff members sitting in chairs with a particular colored square are part of that situation. As many different staff as possible should be involved.

3) Have the designated staff choose roles for Situations #1, #2, and #3.

4) Act out each situation in turn, with discussion after each one.

### Situation #1

A Head Start child has had the chicken pox. The parent brings the child back to school without a doctor's note (against Head Start policy). The parent is aggressive and upset when told by the social services/parent involvement staff that her child cannot return to school without a doctor's note. The director is called in when things start to get heated. The parent leaves angry and upset, saying that she doesn't need Head Start anyway.

**Players:** Head Start parent, Head Start child, social services/parent involvement staff member, Head Start director

**Instructions to Parent:** Be aggressive and demanding, lose control, yell, don't take no for an answer.

**Instructions to Staff:** Act intimidated and make efforts to soothe the parent.

**Instructions to Director:** Start out pushy but courteous, and end up frustrated and defeated.

## Situation #2

A parent buys a radio as a present for her child, but the radio does not work properly. She goes back to the store where she bought the radio, taking her child with her, and asks the store owner either to replace the radio or give back her money. She has her receipt and she bought the radio only 4 days earlier. The store owner is rude and refuses to replace the radio or refund the parent's money. The parent is intimidated, frightened, begins to cry, and leaves the store with her child and the broken radio.

**Players:** Head Start parent, Head Start child, store owner

**Instructions to Parent:** Act intimidated, frightened, cry.

**Instructions to Store Owner:** Act rude, do not listen, intimidate and frighten the parent.

## Situation #3

Same situation as #2; however parent knows her rights and states them clearly. She tells the store owner that if he does not either replace the radio or refund her money, she will call the Better Business Bureau (BBB) and report his business practices to them. In addition, she will tell all of her neighbors and friends about the incident and advise them not to shop in his store again. [Instruct the parent to be low-keyed and in control of angry feelings. Instruct the store owner to become more and more enraged as the situation progresses.] When the store owner hears the parent's remarks about contacting the BBB and what she will tell her neighbors and friends, he reluctantly gives her a brand new radio. The parent leaves the store with her child and the new radio, which she had asked the store owner to check in front of her to make sure it works.

5) After each role-play, ask staff to answer and discuss the following questions:

- 1) How do you think the parent felt?
- 2) How do you think the child felt?
- 3) How do you think the \_\_\_\_\_ (name title of each player in the situation, i.e., staff person, director, parent, child, store owner) felt?

Question staff members who participated in the role-play: How did you feel playing the part of the \_\_\_\_\_? Discuss each role in turn.

6) At the end of all three role-plays and discussion of each situation, ask the following questions:

- 1) Who is the empowered parent? Why do you think so?
- 2) What does an empowered person actually look like? What are the behaviors?
- 3) How was the life load of the parent in each situation affected by the outcome?
- 4) What did the empowered parent get that the others did not?
- 5) What messages do you think the child got from each situation?
- 6) What kind of role models for the child were the adults in each role-play?
- 7) Which of the three parents would you like to work with the most? Why? The least? Why?
- 8) Which parent do you think was the hardest to engage? Why?

7) Record all answers on the board and discuss further. It is important during this discussion time that at no point is there labeling of the parent or staff member as hostile, aggressive, timid, etc. What is being labeled are the behaviors of the staff and parents.

**Responses from Head Start —Empowerment****Mothers' Behaviors by Scenario****Situation #1**

alienated  
 parent with an attitude  
 won't take "no" for an answer  
 aggressive  
 frustrated with others involved  
 in situation, but stood up for  
 herself  
 created an impasse  
 knows she has rights  
  
 has the potential to become  
 empowered, but needs to be  
 channeled a little bit

**What Child Learns:**

aggression  
  
 "us against the world"  
 mentality  
 to feel victimized

**Situation #2**

victimized  
 sad  
 helpless  
 felt worse when she left  
 mad  
  
 frustrated  
 situation created another  
 burden in her life load  
 unimpaired

**What Child Learns:**

not to fight for what you  
 believe in  
 to give up  
  
 to conform

**Situation #3**

high self-esteem  
 smart  
 persuasive  
 knows her rights  
 assertive  
  
 not aggressive  
 in control  
  
 empowered

**What Child**

patience  
  
 assertiveness  
  
 pride

## Exercise #9: Linking Empowerment to Parent Involvement

### Outcome

Staff will have:

- A fuller understanding of their role in empowering parents through parent involvement.

**Time:** 30 minutes

**Format:** Pencil recordings on small squares of paper, followed by group discussion

**Special Note to Facilitator:** The focus of this exercise is to explore with staff members how they can better link parent activities and experiences with parental empowerment, given what they have learned in the previous exercises. Emphasize that this is only the beginning of their understanding of how they can use parent activities/experiences to build a supportive environment and encourage feelings of empowerment in each other as well as in parents. Let them know that they will be working on these links in an ongoing way in the peer group, as they apply what they have learned in the workshop to their daily contacts and work with parents and peers.

**Context:** The job of Head Start staff is to help create conditions that allow parents to increase their involvement in ways that are empowering. Without feeling empowered, parents will have a harder time decreasing their life loads (refer to Exercise #6). Once parents have even the smallest success in making things happen in their lives, they will experience themselves differently (refer to Exercise #8) — as an individual who can accomplish things, take control, and get things done. Situation #3 depicts an ideal way of handling a difficult situation. By being assertive, but not aggressive, hostile, timid or helpless, the mother gets what she wants.

Head Start parents and staff can learn new ways of relating to each other, coping, and behaving effectively. Staff need to grow in an understanding of how to work with parents from “where they are.”

An important consideration is to think about how staff may restructure and/or develop new activities and experiences that parents will perceive as desirable

supports to help decrease their life load and help increase their feelings of control over their lives. Developing these new ways of thinking will surely include addressing the issues of Welfare Reform that come into conflict with traditional notions of parent involvement. Keeping a flexible approach that stresses mutual relationships built on trust will help foster these new perspectives.

**Materials:** Paper, pencils, small basket, chalkboard and chalk or flipchart and markers.

### Instructions:

- 1) Ask staff to write down on one square of paper two ways that parent participation, as traditionally implemented, is supportive to families and on another square of paper two approaches they now use to increase a parent's feelings of empowerment.
- 2) When all staff have completed this task, collect the answers in the small basket that is being passed around. Read the answers aloud and record them on the chalkboard so all can see.
- 3) Discuss.
- 4) Then ask staff to write down on one square of paper two other or new ways that parent participation could be implemented to be more supportive to families, and on another square of paper two new ways to increase a parent's feelings of empowerment.
- 5) Again, when all have completed this task, collect the answers in the small basket that is being passed around. Read the answers aloud and record them on the chalkboard so all can see.
- 6) Discuss.
- 7) Use the ideas generated here for future discussions in the peer group and at other types of staff meetings.

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## Exercise #10: Choosing Hard-to-Engage Parents for the Peer Group Intervention (Strategy 2)

### Outcomes

#### Staff will have:

- Reviewed and discussed those parents rated "1" on the Class Parent List in Exercise #2.
- Made a final list of hard-to-engage parents for the Peer Group Intervention.

**Time:** 3 hours, with short breaks for stretching

**Format:** Paper-and-pencil recording and small group discussion

**Special Note to Facilitator:** Set up the tables in the room so that staff from each class (both educational staff and social service/parent involvement staff) are able to sit together. Assign the remaining staff (educational director, social services coordinator, cook, custodian, special consultants that may be available, etc.) to the tables, making sure that they are evenly placed.

**Materials:** Paper, pencils, Class Parent List with parent involvement ratings generated during Exercise #2, final list of parent names for the intervention (Hard-to-Engage Parents for Peer Groups Final List form, see pages following).

#### Instructions:

- 1) Have each team sit at a table. Include all those persons who will have responsibility for the family: social services staff, parent involvement staff, educational staff, etc. Place an administrative staff person at each table and have them rotate to all the tables.
- 2) Alone and privately, have staff members review their list of parents they rated #1 (low- or noninvolvement) on the Class Parent List generated from Exercise #2. In light of what was learned in the earlier exercises, ask staff members to create two lists: 1) parents whom they feel need an individual-level approach(es), and 2) those who need a group-level approach(es). If they feel that a family would benefit from both, that family's name should appear on each list, with the reason for placement there.

Examples of the need for individual-level approaches

are parents who appear to be depressed or abusing substances, seem to have marital or child-rearing problems, have multiple social service needs, etc. Examples of those who could benefit from group-level approaches are parents who seem too busy to participate, have small children, seem to have scheduling conflicts, need English as a Second Language (ESL) or high school equivalency diploma (GED) classes, etc.

- 3) Instruct staff to finalize these lists, creating separate ones for the A.M. and P.M. class (where applicable).
- 4) When everyone is finished, have team members share their lists. Have a recorder write down any names that come up at least two times, to ensure that the parents chosen for the peer group strategy are the ones who receive the highest staff agreement of family need.
- 5) Ask staff to record next to each name the reason this parent should receive group-level and/or individual-level approaches.
- 6) Count the names. The team should not have more families than staff can handle who are designated hard-to-engage and needing individual-level intervention. The team should assess whether several families have the same needs, and if those could be addressed using a group-level approach. Parents who need a group approach can be removed from the individual list. If there are still more than can be accommodated on the individual-level intervention list, the group must decide through consensus which parents should remain on the list.
- 7) Ask each team to make final lists that will then be used for the peer group intervention.



# Individual Family Intervention Plan

Name of Parent : \_\_\_\_\_

Class: \_\_\_\_\_

Assigned Staff: \_\_\_\_\_

Name of HS Child : \_\_\_\_\_

DATE	TIME FRAME	GOALS	LIFE EVENTS/ BARRIERS	ACTION	RESULTS	DATE ACCOMP

## Group Intervention Plan

Strategy: \_\_\_\_\_

Assigned Staff: \_\_\_\_\_

Life Event/Barrier: \_\_\_\_\_

DATE	TARGETED PARENTS	CLASS	TIME FRAME	IDEAS	ACTION	RESULTS	DATE ACCOMP
						44	

(For Peer Group)



## STRATEGY 2:

### Peer Group for Social Services/Parent Involvement Staff: Empowering Staff and Parents

#### Purpose, Objectives, and Outcomes

The peer group for social services/parent involvement staff provides a setting for staff to meet regularly with peers and a group facilitator. The purpose of the peer group is to reinforce and enhance the learning that took place during the workshop exercises in order to apply it to ongoing work with families — in particular, those selected in the workshop as hard-to-engage. Objectives include a focus on peer support, skill-building, and problem-solving as avenues to staff's personal and professional development and the enhanced involvement and empowerment of hard-to-engage parents.

#### Specific Staff Outcomes

- An understanding of how to use the concepts, research results and lessons learned in the staff development and training workshop in their work with "real" families in "real" situations;
- A working knowledge of the practical skills needed to communicate with parents as partners, including how to listen in a nonjudgmental way for the implicit agendas, values, and needs of both parents and peers;
- An understanding of how to work with hard-to-engage parents so that they become confident in Head Start as an important resource and support;
- Techniques that enable them to work with hard-to-engage parents and form attachments with them by applying understandings gleaned from the workshop;
- Knowledge of how barriers to involvement may be addressed and dealt with in positive ways;
- A set of creative individual and group strategies, developed with parents, to enhance parent involvement. These strategies take into account the *Head Start Program Performance Standards*, welfare reform agendas, and the individual differences of communities, agencies, parents, and staff;
- An understanding of organizational and community barriers to service delivery;
- An ongoing support group of peers that builds self-esteem and serves as a buffer to stress; and
- Increased oral, written, and organizational skills to improve job performance.

#### Setting up the Peer Group: Administrative Guidelines

##### Choosing a Facilitator

In addition to the skills needed for the workshop, a facilitator for the peer group also should have: 1) the management skills and time to handle the ongoing responsibilities of running the group; 2) good organizational skills; 3) skills in interpersonal relations; 4) some educational experience in family development, family process, child development, and group process (if possible); 5) experience working in Head Start; and 6) a good grasp of the concepts presented and discussed at the staff development and training workshop.

More specifically, the facilitator must be able to provide support and skill-building experiences for staff members, and guidance for them in working with hard-to-engage parents on individual and group strategies to enhance their participation in Head Start. The facilitator should be a person who can engender trust in staff and be able to attach a sense of "specialness" to this group experience. As stated earlier, it is recommended that the same person act as facilitator for both the workshop and the peer group. However, if this is not feasible, the person who will facilitate the peer group must have been an active participant in the entire workshop experience.

### **Deciding on Time Frame and Location**

Begin the peer group sessions as soon as possible after the workshop. Meetings should take place twice a month for 2 to 3 hours each time, for the remainder of the Head Start year. Choose a large, comfortable space that is somewhat private, and keep the same location throughout the life of the peer group.

### **Deciding Who Should Participate**

The agency director, with the delegate parent policy council, most likely will be responsible for selecting the members of the peer group. Ideally, input from potential staff members of the peer group should be included in the decision-making process. The peer group might include only social services/parent involvement staff, or it might include component heads, other consultants, and selected current or ex-parents. If the decision is made to include parents, two important criteria for selection would be: 1) at least a full year of Head Start; and 2) a high participator in parent activities. These parents might serve as valuable resources to the group, as well as designated mentors to hard-to-engage parents. If parents are included, confidentiality issues **MUST** be addressed and emphasized on an ongoing basis.

## **Setting up the Peer Group: Facilitator Guidelines**

### **Forms to Track Participation of Individual Parents and Groups of Parents**

Forms recommended for use in the peer group sessions are:

**Individual Family Intervention Plan.** This is used in staff's work with individual parents and includes the names of the parent and child, the class, and assigned staff. The purpose of this form is to provide a succinct overview of the goals of the parent, his/her life events and/or barriers inhibiting involvement, strategies developed with the parent and in the peer group to enhance participation, and the results of these efforts.

**Group Intervention Plan.** This is used to plan strategies with groups of parents having similar barriers to participation (e.g., child care, transportation, etc.) It includes the names of the targeted parents, assigned staff, life event or barrier inhibiting involvement, identified strategy to overcome the obstacle, actual steps taken, and results of the effort.

These forms serve to organize the information gathered with parents. They are simple to use and do not involve extensive note-taking or process recording. When filled out after discussion with a parent or group of parents and brought for discussion to the peer group, they serve as a record of progress for both parents and staff (see forms following).

### **Assembling Staff Binders**

Each member of the peer group should receive a three-ring binder specifically for the group sessions and to keep all their paperwork together. These items should be in the binders before their distribution to staff:

- Staff-completed forms from workshop, Exercise #10 (Choosing Hard-to-Engage Parents for the Peer Group Intervention);
- Handouts from the workshop exercises;
- Results from the workshop;
- Any personal notes taken during the workshop exercises;
- Blank Individual Family Intervention Plan forms;
- Blank Group Intervention Plan forms; and
- Blank paper for personal notes.

Label each binder with staff person's name and title.

### **Deciding How Process Notes Will Be Taken**

In addition to filling out the forms, it is beneficial to take process notes during each peer group session. Rotate the note-taking job among the staff to ensure that everyone in the group has practice in this skill. The notes must be confidential within the group and kept by the facilitator in a locked area. Their usefulness is primarily as a reminder to the group of particular issues that were discussed and how they were resolved. These issues might include barriers to the successful implementation of the peer group, feelings and problems of individual staff, positive or discouraging interactions with other staff or targeted parents, service delivery issues, etc. These notes should also contain a summary of all important decisions made by the group. A brief review of the highlights of these notes at the beginning of each peer group meeting helps focus the group and clarify the direction for that session.

### **Running the Peer Group: Facilitator Guidelines**

In the first two meetings of the peer group, key concepts covered in the workshop should be reviewed and discussed in-depth. In addition, the list of parents generated in Exercise #10 should be reviewed to clarify which parents were selected for individual and group strategies.

Each subsequent peer group meeting should follow a similar format and include the following:

- Greetings to staff and a reminder to have notebooks and updated information accessible;
- Review of confidentiality issues;
- Brief review of notes from previous meeting;
- Discussion of pressing problems of individual group members in relation to peers or parents;
- Discussion of individual parent plans (focus on strengths, needs, goals, frustrations, obstacles, and successes);
- Recording of information on the Individual Family Intervention Plan;

- Discussion of group plans;
- Recording of information on the Group Intervention Plan;
- Review of tasks and goals for next meeting; and
- A closing.

## Ten Ongoing Tasks of the Peer Group

### 1) Reviewing Key Concepts

Concepts learned from the staff development and training workshop should be reviewed throughout the life of the peer group as the need arises or as a concept applies. In this way, staff learn how they might use the concepts to analyze and problem-solve with parents when working on strategies to engage and involve them.

### 2) Strengthening Parent-Staff Relationships

Addressing the relationship between staff and parents is an integral part of the peer group process. At each session, time should be devoted to discussions of how to strengthen and deepen this relationship, using the understandings and knowledge acquired from the workshop experience. Partnering with hard-to-engage parents may take extra energy, but the rewards for both the staff member and the parent are worth the effort and should be continually encouraged.

### 3) Collaborating with Parents to Develop Individual and Group Plans for Involvement

As staff members work together in the peer group, discussion should include how staff has collaborated with parents about ideas for enhancing the participation of individual parents and of groups of parents with similar barriers to involvement. Their work with parents should reflect their understanding

#### Task 4 – Responses from Head Start

##### Case examples of Strategies With Individual Families

- A severely visually impaired parent who would eventually become blind came to class meetings but avoided helping in the classroom. A careful analysis of her possible feelings and needs led to more empathetic support, including validating the mother's feelings, remaining calm and non-judgmental, and trying to find common ground. This in turn, helped her find an avenue of involvement that was more comfortable for her.
- One day a mother happened to notice what was on the children's menu for lunch and expressed an interest in staying. The worker seized this opportunity and invited her to stay. Thereafter, the worker made sure that this mother always read the menu and the worker encouraged her to stay for lunch as often as she liked. This led to an interest in being a "VIP" parent, taking a trip with the children, and other involvement with Head Start.
- A poignant example was the case of a young mother with five children. After trying several times to speak to the mother about her personal goals and getting no "meaningful" response, the staff member became disappointed and discouraged – she felt she had been unsuccessful in reaching the mother because the mother's only goal was to win the lottery. An analysis of this mother's situation led to an understanding that she had been robbed of her teenage years by too early motherhood and that her aspirations were that of a less mature person.
- A decision to buy the young mother a lottery ticket as a concrete statement of non-judgmental acceptance led to a breakthrough in her "tough" exterior. She cried, saying that she had never had anyone care enough to do that for her. From that point on the staff member's and parent's relationship flourished. Slowly over time, the staff member was able to speak to the parent about other, more realistic personal goals and eventually, near the end of the Head Start year, the parent enrolled in a combination GED/Nursing program. While the mother benefitted a great deal from this relationship, it is interesting to note that the Social Services staff member was also affected. She expressed real pride and pleasure in a job very well done, building her own self-esteem and professional sense of efficacy.

of how to move away from the traditional "helper-helpee" model to one of mutual relationship-building. This would include evidence of staff-parent discussion of parental goals, feelings, and needs and evidence of joint decision-making.

#### **4) Enhancing the Participation of Individual Parents**

Plans for enhancing the involvement of individual parents should be discussed in the peer group. These plans are based on staff's work with the parent and discussions in the group. Any cross-component team discussions outside the peer group should be shared. Goals may then be tailored to specific challenges faced by the parents and staff. In keeping with the Head Start philosophy of staff/parent partnership, staff and parents work closely in an ongoing process of building relationships outside the peer group.

#### **5) Developing Group Plans to Enhance Involvement**

During the peer group, additional life events/experiences and barriers common to groups of parents will probably emerge. In these cases, plans for enhancing the involvement of those parents will be developed by the peer group. For example, if several parents express the need for English as a Second Language training, then that problem could be addressed with that group of parents, discussed in the peer group, and, if possible, implemented for them as a group.

In other cases, if a number of parents have a similar barrier, the peer group could develop an intervention for them that then would be implemented with the individual parent. For example, parents who are not available because of employment or job training, or where there are cultural barriers to overcome, would become part of a group with similar issues, but staff would work with them individually.

Where necessary or possible, include discussions with cross-component staff teams and parent bodies (such as class parent committees or delegate agency policy councils). Stress staff confidentiality when discussing the life events and barriers of other parents.

### **Task 5 – Responses from Head Start**

#### **Group Strategies to Engage Parents**

- **Note Home to Mom**

A personal note from the Head Start child is sent home inviting a parent(s) to visit or volunteer in their classroom. An RSVP is attached for the child to bring back to class.

- **Parent of the Month Bulletin Board**

A "parent of the month" bulletin board honors the parent who has "volunteered" the most for that particular month. The peer group staff considered not only the frequency of involvement in Head Start activities, but also the quality of the parent's involvement, including phone contacts and activities that the parent might have done while at home.

- **Parents on Call Committee**

Staff formed a group of highly involved parents who were available for other parents to contact with questions, problems, and issues.

- **Parent Recognition Board**

Parents who increased their participation in Head Start, as judged by staff, were recognized with a photo and brief statement on a bulletin board that was prominently displayed at the Head Start center.

- **Parent-Toddler Day**

A special workshop was arranged to interest and reach the hard-to-engage mothers with younger children from 18 months to 3 years of age. An information packet that focused on toddler health and behavior was given to the parents and the children received a "certificate of completion" for their first day at Head Start.

- **Pony Express**

A systematic method of keeping in touch with working parents through special communications from teachers and family workers.

- **Family Album**

A special album was put on display with photos of a particular family and a brief description of history and/or special times in the family's life. This activity was an especially good starting point of involvement for some parents, since it was concrete, time-limited, and drew the parent into sharing some proud moments about her family.

### **6) Sharpening Family Management Techniques**

At each peer group session, have staff members make brief presentations to the group about their work with the parents targeted for individual intervention. In doing so, they should summarize general information about the parent's strengths, needs, and goals; life events or barriers to participation; and the planned action that was or will be taken to enhance involvement. In addition, any problems in reaching the stated goals should be addressed. At each session, plans should be refined, clarified, and developed for continuing the work with individual parents to build staff/parent relationships, help parents meet family and personal goals, and enhance their Head Start participation.

### **7) Communicating and Listening**

As staff members learn to communicate in the peer group, have differing opinions, problem-solve, and discuss their work with parents, they are also learning how to communicate better with parents. This includes how to put aside their own agendas when discussing goals and values with parents, how to listen for unspoken words, how to read body language, and how to engage parents as partners in the process of building their strength, addressing their needs, and helping them reach their goals. This mutually enhancing process builds self-esteem, confidence, and feelings of empowerment in both staff and parents.

### **8) Building an Effective Cross-Component Team to Work with Families**

As the peer group meets throughout the year, its members should share information with other staff who are involved with hard-to-engage parents — e.g., the educational staff or component heads not participating in the peer group. Ideally, the educational director and health services coordinator would participate in the peer group.

Creating mechanisms for feedback that address the goals and needs of the entire family, particularly the Head Start child, is of primary importance. Special attention should be given to ways in which the educational staff and other staff or consultants, (i.e., health, nutrition, mental health) can reinforce the work of the social services/parent involvement staff, and provide information about any changes observed in the behaviors, attitudes, and feelings of the Head Start child and parents. If other component heads are not part of the peer group, it is even more essential that information be shared at class team meetings. Of course, as is always the case, strict confidentiality of the shared information should be maintained among all staff involved.

### **9) Addressing Staff Stress**

Time during each session should be used to address the stress experienced by staff. A goal of the peer group experience is to be supportive and nurturing in order to build staff's own self-esteem and feelings of job competence. Barriers to successful staff performance should be addressed and solutions generated on an ongoing basis. Frustrations should be aired, even though immediate solutions are not always readily available. Stress-reduction techniques could be emphasized.

### 10) Increasing Staff's Oral and Written Skills

During each session, time must be allocated to strengthen the staff's language, cognitive, and problem-solving skills. For example, teaching the group how to describe a particular issue between a staff member and parent, both orally and in writing, serves several purposes. First, the staff member learns more about oral communication: how to summarize a problem or issue succinctly; how to make oneself understood by choosing words that best describe aspects of the situation; and how to address any challenges to one's presentation from staff who may disagree. Second, the actual issue of the particular parent is being addressed and plans to further engage him/her or change the focus of the intervention could be discussed. Third, creative problem-solving techniques are being generated by the group as they help, support, and challenge one another.

### Task 10 – Responses from Head Start

#### Organizational Barriers to Service Delivery

- Several themes emerged as organizational barriers to effective service delivery. These included insufficient time to complete required paperwork, too high case loads, too much time in the day spent on paperwork and scheduling. Staff felt that their ability to positively effect parents was compromised by this combination of an overwhelming caseload and increasing amounts of paperwork. Further, they felt that organizational features, such as staffing problems, task delegation, and appropriate time management acted as secondary inhibitors to effectiveness.
- Staff also felt that they did not receive the training necessary to effectively work with some of the parents. For example, one family worker described her feelings about working with a parent whom she suspected of substance abuse: "I don't have substance abuser training, so I am going on instinct. This is all I can do until they admit there is a problem, then I can make a referral." Low salaries and poor working conditions were also cited as contributing to barriers to optimal staff performance. Staff also felt these factors made it difficult to retain quality staff.

#### Community Barriers to Service Delivery

- Referral to community resources, a supposed mainstay of their job, was frequently not an option for family service workers. They felt that community resources had diminished and waiting lists for those that remained were so long that they became worthless. They also felt strongly that, even if they were sometimes in a position to use their influence to get community services for their parents, parents would seldom get through the voluminous red tape and processing requirements necessary to get the services. This, they felt, was due to a number of factors including language and cultural barriers, a simple lack of trust on the parent's part, and/or the long distance of the service from the parent's home. This lack of resources further impaired the social service staff's sense of efficacy in successfully doing their job.

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## Endnotes

1. This term and definition were created by the HSRG for the Parent Involvement Project, Part III: The Intervention.
2. See Endnote #6, Appendix A for rationale for this term.



## Appendix A

### Background Information About the Parent Involvement Project Part III: The Intervention<sup>1</sup>

In order to fully understand the “whys” and “hows” of the intervention developed as part of the larger NCJW Center for the Child Parent Involvement Project, some background information is presented below. The intervention was developed by the Head Start Research Group (HSRG), and grew out of the needs and goals of the two Head Start agencies that participated in the Parent Involvement Project and were members of the HSRG.

#### Rationale for the Intervention<sup>2</sup>

Head Start staff frequently experience similar life circumstances as the Head Start parents they serve and are often vulnerable to many of the same stresses. This may be, at least in part, due to the longstanding tradition in Head Start to hire Head Start parents for staff positions. According to Collins (1993)<sup>3</sup>, over one-third of Head Start staff are parents of current or former Head Start children. Many staff members reside in the community served by the Head Start program, have para-professional status, and consequently receive low wages. In order to more effectively work with parents, staff must mobilize all of their resources, including their skills, ingenuity, emotional strength, and resilience; and maximize their professional and personal development. If staff lack an in-depth understanding of their own circumstances, including their conscious and unconscious values and attitudes, they will have less personal and professional resources to work effectively with parents. Unfortunately, there are a limited number of training opportunities in parent involvement for Head Start staff<sup>4</sup>, and most of them do not address the issues raised above. Therefore, the Parent Involvement Project HSRG developed and implemented a staff-focused intervention.

#### Developing the Intervention<sup>5</sup>

During the development of the intervention, staff revealed many concerns, as well as needs and feelings, about themselves, their relationship to each other, and to the parents. In the end, the HSRG reached consensus that major aspects of the intervention would be on staff attitudes, feelings, and interpersonal relationships; on social services/parent involvement staff's ongoing work with parents; and on reaching those parent who they felt were hard-to-engage in the Head Start process.<sup>6</sup>

In order to provide a theoretical foundation for the content of the strategies, the HSRG took several steps including: 1) reviewing research on relevant issues regarding barriers to parent's participation in their child's school experience, the effects of depressive symptoms and demoralization on parents and children, relationship-building with a focus on partnerships as opposed to a “helper-helpee” model for working with parents, and cultural traditions and values that may affect parent involvement in Head Start and public school settings; 2) developing and conducting interviews with Head Start parents to assess potential barriers to their participation in Head Start; and 3) conducting focus groups with social services/parent involvement staff about working with parents: their personal feelings, professional needs, and possible solutions for engaging parents and enhancing their participation.

Results of the focus groups revealed common themes among social services/parent involvement staff: a belief in the uniqueness of Head Start's emphasis on parents and their participation in all aspects of the program; an awareness of the numerous "pulls" on parents' time related to such things as child care, health, and job training and education needs; feeling overwhelmed by the problems parents brought to them and often feeling unable to handle certain situations effectively; and feeling that traditional training did not adequately address their needs for ongoing training and support.

The intervention was designed to help staff better understand and work with parents, especially those whom they perceived to be particularly difficult to engage in the Head Start experience. These strategies were developed to provide them with a deeper understanding of theirs and parents' strengths, needs, attitudes, values, and goals; psychosocial concepts related to child and family development; more appropriate opportunities for enhancing parents' participation; peer support; problem solving; and oral and written skill-building. The overarching aim was to empower both staff and parents.

## Endnotes

1. The intervention upon which the manual is based was conducted through a grant to the National Council of Jewish Women Center for the Child from the Administration on Children, Youth and Families.
2. Portions of the rationale appear in Part I of the final report of the NCJW Center for the Child Parent Involvement Project (Parker, F.L., Piotrkowski, Young, Clark, Peay, Flynn & Baker, 1996).
3. Collins, R.C. (1993). Head Start: Steps toward a two-generation program strategy. *Young Children*, 48(2), 25-33, 72-73.
4. See Appendix C of the ACYF final report of the NCJW Center for the Child Parent Involvement Project for details.
5. See Part III of the ACYF final report of the NCJW Center for the Child Parent Involvement Project for details.
6. The term "hard-to-engage" was chosen by members of the HSRG to describe those parents who seemed to be participating the least in parent activities and experiences offered by the Head Start program. The HSRG preferred that term over "low-participating" which to them had a more negative connotation. In addition, they liked the term "hard-to-engage" because to them it implied a wider range of possible reasons (both positive and negative) behind parents' lack of participation. For example, a parent might be hard to engage because she was in school full-time or in a job-training program, or she might be hard to engage because she felt demoralized and alienated from others or was abusing alcohol. The reasons could also be connected to cultural issues of parents who were new to this country. Therefore, the term "hard-to-engage" was chosen and defined as the parents who did not seem to be engaged in the Head Start experience for themselves (although they might be bringing their children every day) and did not seem to be taking advantage of the parent-related opportunities that were being offered by the Head Start program.

## Appendix B

### Three Parent Surveys

Learning more about the parents in your program near the beginning of the Head Start year can help you plan and develop parent involvement. You already know many things about them through the registration form, income eligibility form, and Head Start Family Intake Form. These forms provide factual information about the family, but may not provide you with as in-depth a picture of the parents — their strengths, goals, and needs — as you would like.

It also might be helpful for program planning to learn about the parents' perceptions of their involvement with Head Start, after they have completed a year of the program. You may want to learn about some of the factors that might have made it hard for them to be as involved as they would have liked. Three parent surveys in this appendix can be used at the beginning and/or the end of the Head Start year to learn more about the parents in your program. The three surveys are:

- *Parent Goals and Aspirations Survey (A and B);*
- *Parent Life Events/Experiences as Potential Barriers to Head Start Parent Involvement Survey (A and B); and*
- *Benefits of Head Start Parent Involvement Survey.*

Brief summaries of survey results are also included here. This research was conducted from 1990-1994 at two Head Start agencies in New York City (see endnote below).

#### ***Parent Goals and Aspirations Survey (Form A and Form B)<sup>1</sup>***

**Form A** is designed to be used at the beginning of the Head Start year. It focuses on parents goals, hopes, and expectations and how they think Head Start might be able to help them. If you use this survey, it should provide information for you and the parent to use to develop an individualized family plan for the coming year. **Form B**, designed for use at the end of the Head Start year, will help staff assess with parents whether goals and expectations have changed over the course of the year and how much they felt the Head Start experience helped move them closer to their goals.

Administering both forms and using them comparatively with the parent may open discussion about changes the parent experienced over the course of the Head Start year and about future goals and plans after Head Start. In addition, the combined results of parent's answers on **Forms A** and/or **B** (with names deleted to ensure confidentiality) may aid staff and parents in their end-of-year program assessment and future program planning.

If two parents are present at either point in time, both may be asked to fill out the form. However, please be careful to match the **Forms A** and/or **B** with the particular parent who filled them out, before comparisons are made between the "before" and "after" Head Start experience.

#### **Guidelines for Administering Survey (Form A) at Beginning of Head Start Year**

This survey may be incorporated into your regular family intake procedure or may be completed by the parent with a staff member in a private, individual interview. The survey takes approximately

10 minutes to complete and should be administered as a confidential interview. Begin by explaining to the parent the purpose of the survey — saying, for example:

*The purpose of this survey is for us together to understand where you would like to see your life going in the next 2 - 10 years and how you think Head Start can help you attain your goals. I am going to ask a series of questions, which you can respond to as we go along.*

Read each of the six questions to the parent one at a time and record all responses on Form A. You may use this survey as a jumping-off point for developing an individualized plan with the parent about involvement in Head Start during the coming year.

### **Guidelines for Administering Survey (Form B) at End of Head Start Year**

This survey should be completed by the parent with staff in a private, individual interview. The survey takes approximately 10 minutes to complete and should be conducted as a confidential interview. Begin by explaining to the parent the purpose of the survey — saying, for example:

*The purpose of this survey is for us to assess your year at Head Start, to understand how your goals may have changed and to hear your feelings about if and/or how Head Start has helped you to move closer to your goals. I am going to ask you a [or the same] series of questions [we discussed at the beginning of the year], which you can respond to as we go along.*

Read each of the six questions to the parent one at a time and record all responses on Form B. Answering these questions may open discussion about changes the parent experienced over the Head Start year and about future goals and plans after Head Start.

### **Guidelines for Using Forms A and/or B for Staff Development, Training, Program Assessment, and/or Future Planning**

Compile data from **Form A** and **Form B** separately, blacking out individual names and other identifiers. (Duplicate copies of the surveys with the parent's name may be kept in the parent's confidential file). These data can be compiled by question, coded for similar types of answers, and discussed with staff and parents to assess the parent involvement program, where there is need for change,

#### **Responses from Head Start**

##### **Parent Goals and Aspirations Survey, Form B**

When this survey was conducted at the end of the Head Start year with mothers who had been surveyed at the beginning of that year, their responses yielded one potentially important change in their view of possibilities available to them. Their hopes and plans for higher education tended to increase—from 39% of the mothers reporting that they expected to continue their education beyond high school or GED at the beginning of the Head Start year to 47% expecting to do so by the end of their involvement in Head Start. Additionally, while mothers nearly unanimously reported, both before and after Head Start, that they wanted and expected to work 10 years hence, 58% reported that a major benefit of Head Start was allowing them the time to pursue educational and job training goals. Forty-six percent felt that Head Start provided them with motivation and information that enabled them to begin the process. Mothers also reported that Head Start helped with parenting skills (36%), and that ongoing emotional support and counseling with social services staff helped with personal difficulties (27%).

and how the program for the coming year could be strengthened. Remember that each new group of parents coming into Head Start is different, but certain common themes may emerge from year to year. These themes could be incorporated into the program.

### ***Parent Life Events/Experiences as Potential Barriers to Head Start Parent Involvement Survey ( Form A and Form B )<sup>2</sup>***

This is a two-page interview that lists 33 common life events/experiences that may be potential barriers to a parent's participation in Head Start. These events in parents' lives were categorized under personal, family and friends, community, and the Head Start center.

In Form A, used when a Head Start year begins, the life event/experience is first rated as present/absent in the parent's life and then rated on the degree to which the parent sees it as a potential barrier to participation in Head Start over the course of the year. In Form B, used when a Head Start Year ends, the life event/experience is first rated as present/absent in the parent's life and then rated as to the degree to which the parent sees it as an actual barrier to participation in Head Start over the course of the year.

Following the questions, parents also are asked to comment on parent involvement in Head Start.

#### **Guidelines for Administering Survey (Form A) at Beginning of Head Start Year**

This survey may be incorporated into your regular family intake procedure or may be completed by the parent with staff in a private, individual interview. The survey takes about 15 minutes to complete. It should be administered as a confidential interview. Begin by explaining to the parent the purpose of the survey — saying, for example:

*The purpose of this survey is for us to understand the kinds of life events and experiences that presently exist in your life so that we can better understand the kinds of activities, supports, and resources you may need from Head Start and how we can work together to better assist you in meeting your goals. For each question, please tell me whether or not you are currently experiencing this particular event. After we go through the entire list of items, we will go back and address only those where you answered "yes." I will then ask you to tell me whether or not you think that each of these events or experiences will make it harder for you to participate in Head Start over the course of the coming year.*

Read each of the 33 items to the parent. After each one, ask the following question:

*Are you currently experiencing this in your life?*

For all of those to which the answer is affirmative, ask:

*Do you feel that this event or experience will make it harder for you to participate in Head Start over the course of the year?*

**Note:** participation refers to parent activities, not just bringing a child to the Head Start program.

Finish the survey by asking the following question:

*In what ways do you think that parents can get involved in this Head Start program?*

Record all responses on the survey form.

### **Guidelines for Administering Survey (Form B) at End of Head Start Year**

The survey may be conducted with the same parents at the end of the Head Start year as a program assessment and planning tool. The Survey takes approximately 15 minutes to complete and should be administered as a confidential interview. Begin by explaining to the parent the purpose of the survey — saying, for example:

*The purpose of this survey is for us to understand how the life events and experiences you had over the course of this Head Start year made it harder for you to participate in parent activities. We are asking you these questions so that we can better understand what makes it hard for parents to fully participate. Your name will not appear on this survey and your answers will be combined with the answers of the other parents who complete this survey. You may stop at any time.*

*For each question, please tell me whether or not this particular event or experience happened to you during the course of this Head Start year. After we go through the entire list of items, we will go back and address only those where you answered "yes." I will then ask you to tell me whether or not you think each one made it harder for you to participate in Head Start this year.*

Read each of the 33 items to the parent. After each one, ask the following question:

*Did this life event or experience happen to you during this Head Start year?*

For all of those that are answered "yes" by the parent, ask:

*Do you feel that this event or experience made it harder for you to participate in Head Start this year?*

**Note:** participation refers to parent activities, not just bringing a child to the Head Start program.

Finish the survey by asking the following questions:

*In what ways do you think that parents have become involved in this Head Start program over the course of this year?*

and,

*What if anything do you think Head Start could do to increase or improve parents' participation?*

Record all answers on the survey form.

### **Guidelines for Using Forms A and/or B for Staff Development, Training, Program Assessment and/or Future Planning**

Collect the data from **Form A** and **Form B** and keep them in separate piles. Blacken out parents' names and other identifiers. (Duplicate copies of the surveys with the parent's name may be kept in the parent's confidential file). For **Form A** (administered at the beginning of the Head Start year), staff may use the information to determine the percentage of particular life experiences/events present among the parents at their agency, as well as the percentages of parents who see those events as potential barriers to participation. This information may be used in the general planning of the parent involvement component for that coming year.

**Form B** may be tallied in a similar way and discussed with staff and parents to assess the strengths of that year's parent involvement program, how well the component addressed the most prevalent barriers, where there is a need for change, and how the program for the coming year could be strengthened. Remember that each new group of parents coming into Head Start is different. Therefore, the following years' parents may or may not have similar life experiences and barriers to involvement. However, certain common themes may emerge. These could be incorporated into your program.

### ***Benefits of Head Start Parent Involvement Survey<sup>3</sup>***

This survey probes parents' perceptions of the benefits of their involvement in Head Start for themselves and their families. This survey was designed to be used with parents at the end of the Head Start year to give them the opportunity for feedback about their Head Start experience. It may also provide staff with a broad overview of program effectiveness and be a tool for modifying the parent involvement component.

### **Guidelines**

This survey may be completed by the parent with staff in a separate individual interview. The survey takes approximately 10 minutes to complete and should be administered as a confidential interview. Begin by explaining to the parent the purpose of the survey — saying, for example:

*The purpose of this survey is for us to understand what you think about the benefits of Head Start in general and the benefits of different types of parent involvement to you and your family. Some parents may feel they benefitted very little from participating in Head Start and other parents may feel they benefitted a lot. We are interested in how you feel. This information is confidential, but in addition, your name will not appear anywhere on this survey. Only your answers combined with other parents' answers will be used, so that we can work to improve our parent involvement program.*

*I am going to ask you a series of questions which you can respond to as we go along. For the first 12 questions, tell me how much (not at all, a little, some, very much, or does not apply to you) you or your family benefitted from Head Start.*



After going through the first 12 questions, say:

*Now here is the next question: Compared to other Head Start parents, do you feel that you participated more, less, or about the same in Head Start activities?*

After this question, say:

*In the final set of 5 questions, you will be telling me about your overall feelings about Head Start. Please respond to each question with: not at all, a little, some, or very much.*

Read each question to the parent one at a time and record all responses on the survey form. Discussion with the parent about any question or answer should be recorded at the bottom of the survey. These "open-ended" responses may provide additional useful information for program planning.

### **Guidelines for Using Survey for Staff Development, Training, Program Assessment and/or Future Planning**

Collect the data from this survey, then calculate the frequencies of the responses and the percentages for each question. This information may be used with staff and parents to assess the strengths of that year's parent involvement program. Again, certain themes around a particular aspect of involvement may emerge that could be useful for future program planning.

**Note:** This form may be modified to list other Head Start experiences at your particular agency.

### **Responses from Head Start**

#### **Benefits of Head Start Parent Involvement Survey**

Mothers' reports of their involvement in Head Start indicated a nearly unanimous positive experience. This included an overall rating of Head Start as both a learning experience and pure enjoyment (76% reported "very much"). Ninety-eight per cent reported benefiting, of those, 75% reported the highest possible benefit ("very much"). In addition, they considered the benefits to extend beyond benefits to themselves and their child, with 87% of the mothers reporting benefits to other family members. Below are mother's responses of the benefits of different types of parent involvement activities and experiences:

<b>Benefits</b>	<b>%</b>
Parent/teacher meetings were rated as very beneficial	78
Classroom meetings were rated very beneficial	70
Meetings with the social services staff were rated as very beneficial	67
Workshops were rated as somewhat to very beneficial	72
Volunteering in the classroom was rated as somewhat to very beneficial	88
Volunteering for special events was rated to be somewhat to very beneficial	83
Volunteering in the office or kitchen was rated somewhat to very beneficial	39

Fewer mothers participated in policy activities (66 %) than most of the other activities and experiences listed, but almost three-quarters (71%), felt those activities were beneficial. They almost unanimously perceived Head Start to be beneficial to their enrolled child (one mother reported no benefit), with 88% of the mothers rating the experience as very beneficial.

## Responses from Head Start

### *Life Events/Experiences as Potential Barriers to Head Start Parent Involvement Survey*

#### **How frequent are the life events and experiences in the lives of Head Start mothers?**

The most frequent life experience reported by mothers was often feeling sad, "down," even depressed during the Head Start year (47%). Over 44% of the mothers reported working, attending school or volunteering outside Head Start. Over one-third of the mothers reported having a baby or toddler at home, having a schedule which conflicted with Head Start activities, and lacking heat, hot water, or electricity during part of the year. Twenty-five to 30% of the mothers reported having a child with a learning or physical disability, or behavior problem. Some of the life events tended to occur together, such as life experiences concerned with working and going to school and those concerned with the parent's psychological well-being and health of family members.

#### **Are the life events and experiences related to levels of involvement?**

Mothers' responses varied greatly on the number of events experienced, with an average of between five and six. Mothers reporting more life events/experiences were much less involved in Head Start. Eight of the 22 life events were linked with less participation, including having a conflicting schedule, working or going to school during the day, having a baby or toddler at home, having a child with health problems, moving during the Head Start year, and experiencing a flood, fire, or other disaster. Two life events were linked with greater involvement: feeling shy; and being without heat, hot water or electricity.

#### **Do parents perceive these life events as barriers to involvement in Head Start?**

Of the 22 life events, 20 were perceived as barriers to involvement by at least one parent. The most frequently perceived barrier, among those who indicated that the event applied to them, was having a schedule that conflicted with Head Start activities (84%). Although almost half of the mothers reported often feeling "sad, down, even depressed;" nevertheless, only one-third of them felt that those feelings hindered their participation.

#### **How can parents be involved in Head Start?**

Parents' ideas of how they could be involved were consistent with the Head Start Program Performance Standards (USDHHS, 1975): 1) direct involvement in decision making in program planning and operations; 2) participation in classroom and other program activities as paid employees, volunteers or observers; 3) activities for parents which they have helped to develop; and 4) working with their children in cooperation with Head Start staff. The mothers also mentioned several activities that related to other parents or staff, such as "socializing" or "meeting new parents," and having supportive relations with staff.

#### **How can the Parent Involvement Component be improved?**

The most frequent suggestion made by parents for improving Head Start parent involvement was for more self sufficiency related activities, such as ESL, GED, and other skill-building training experiences. Although these results represent a small sample of Head Start parents, anecdotal evidence support these findings.

## Endnotes

1. Parker, F.L., Piotrkowski, C.S., Peay, L., and Clark, B. (1992). *Parent goals and aspirations survey (A and B)*. New York: National Council of Jewish Women Center for the Child. These surveys were used in the NCJW Center for the Child Parent Involvement Project. They were developed by the Head Start Research Group (HSRG).
2. Parker, F.L., Piotrkowski, C.S., Peay, L., Clark, B., and Yoshikawa, H. (1991). *Parent Life Events/experiences as potential barriers to Head Start parent involvement survey (A and B)*. New York: National Council of Jewish Women Center for the Child. This survey is part of the *Barriers to Head Start Parent Participation Survey* that was used for the Parent Involvement Project.
3. Parker, F.L., Piotrkowski, C.S., Clark, B., and Peay, L. (1992). *Benefits of Head Start parent involvement survey*. New York: National Council of Jewish Women Center for the Child.

**PARENT GOALS AND ASPIRATIONS SURVEY - A**  
**(BEGINNING OF HEAD START YEAR)**

Please answer the following questions.

1. Ten years from now, would you like to be working in a paid job?

Yes

☐

No

☐

2. If yes, what job would you like to be doing?

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3. Ten years from now, do you expect to be working in a paid job?

Yes

☐

No

☐

4. If yes, what job do you expect to be doing?

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5. If no, what do you expect to be doing?

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6. Are you now enrolled in an educational or vocational program?

Yes

☐

No

☐

7. If yes, what program are you in?

\_\_\_\_\_

8. Two years from now, how likely do you think it is that you will be in an educational or vocational program? Check one:

Very likely	<input type="checkbox"/>
Somewhat likely	<input type="checkbox"/>
Not very likely	<input type="checkbox"/>
Absolutely not likely	<input type="checkbox"/>

9. If you could, how far do you think you would continue with educational or vocational training? Check one:

Not at all	<input type="checkbox"/>	
Learn English	<input type="checkbox"/>	
GED	<input type="checkbox"/>	
Some college	<input type="checkbox"/>	
Vocational training	<input type="checkbox"/>	<input type="checkbox"/>
(in _____)		
2 year college degree	<input type="checkbox"/>	
4 year college degree	<input type="checkbox"/>	
Professional or graduate school,		
beyond 4 year degree	<input type="checkbox"/>	
Other training	<input type="checkbox"/>	
(in _____)		

10. Do you think that the Head Start program can help you achieve these goals?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

11. If yes, in what ways?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ 65  
\_\_\_\_\_

**PARENT GOALS AND ASPIRATIONS SURVEY - B**  
**(END OF HEAD START YEAR)**

**Please answer the following questions.**

1. Ten years from now, would you like to be working in a paid job?

Yes

☐

No

☐

2. If yes, what job would you like to be doing?

---

---

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3. Ten years from now, do you expect to be working in a paid job?

Yes

☐

No

☐

4. If yes, what job do you expect to be doing?

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5. If no, what do you expect to be doing?

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6. Are you now enrolled in an educational or vocational program?

Yes

☐

No

☐

7. If yes, what program are you in?

\_\_\_\_\_

8. Two years from now, how likely do you think it is that you will be in an educational or vocational program? Check one:

Very likely	<input type="checkbox"/>
Somewhat likely	<input type="checkbox"/>
Not very likely	<input type="checkbox"/>
Absolutely not likely	<input type="checkbox"/>

9. If you could, how far do you think you would continue with educational or vocational training? Check one:

Not at all	<input type="checkbox"/>	
Learn English	<input type="checkbox"/>	
GED	<input type="checkbox"/>	
Some college	<input type="checkbox"/>	
Vocational training	<input type="checkbox"/>	<input type="checkbox"/>
(in _____)		
2 year college degree	<input type="checkbox"/>	
4 year college degree	<input type="checkbox"/>	
Professional or graduate school,		
beyond 4 year degree	<input type="checkbox"/>	
Other training	<input type="checkbox"/>	
(in _____)		

10. Do you think that the Head Start program helped you toward achieving these goals?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

11. If yes, in what ways?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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# LIFE EVENTS/EXPERIENCES AS POTENTIAL BARRIERS TO PARENT INVOLVEMENT SURVEY

## FORM A (Beginning of Head Start Year)

LIFE EVENT/EXPERIENCE	CHECK IF APPLIES TO YOU	
	IS TRUE FOR YOU	WILL MAKE IT HARDER TO PARTICIPATE
1. The physical space at the Head Start center is not really satisfactory.		
2. I am not very interested in present Head Start activities, or wish different activities were available.		
3. Head Start activities have conflicted with other things I want to do or have to do.		
4. I sometimes feel uncomfortable with Head Start staff.		
5. Head Start staff do not give parents enough recognition for participating.		
6. I have trouble talking with Head Start staff because we do not speak the same language.		
7. I have a baby or young toddler at home.		
8. During the Head Start year, one or more of my children has had a major health problem.		
9. One or more of my children has had a special need (including behavior problems).		
10. One or more adult(s) at home has a schedule which interferes with things at home.		
11. My partner or another important person disapproves of my participation in Head Start activities.		
12. One or more of the adult(s) at home have had a health problem (including emotional health) sometime during this Head Start year.		
13. One or more of the adult(s) at home have had an alcohol and/or drug problem.		
14. Family and friends are more of a drain than a help.		
15. I was without a telephone during at least part of this Head Start year.		
16. I was without heat, hot water, or electricity at least part of this Head Start year.		
17. I had a flood, fire, or other disaster during this Head Start year.		



## LIFE EVENT/EXPERIENCE

	CHECK IF APPLIES TO YOU	
	IS TRUE FOR YOU	WILL MAKE IT HARDER TO PARTICIPATE
18. I moved during this Head Start year.		
19. I was homeless for at least part of this Head Start year.		
20. I do not have reliable, convenient transportation.		
21. I do not have dependable, convenient child care available to me.		
22. During at least part of this Head Start year, I have had major health problems.		
23. I have had some problems with alcohol use.		
24. I have had some problems with drug use.		
25. During this Head Start year, I often felt as though I lacked energy or had little interest in things.		
26. During this Head Start year, I often felt, sad, "down," even depressed.		
27. I often feel self-conscious, shy, or otherwise uncomfortable around other people.		
28. I speak a different language than most other Head Start parents here.		
29. I have some difficulties reading in my native language.		
30. During at least part of this Head Start year, I have worked for pay, had job training, or gone to school.		
31. My hours at school, work, or at job training have been inflexible.		
32. My work, job training, or classes have been in the evening or at night.		
33. My work, job training, or classes have been during the day.		

34. In what ways do you think that parents can get involved in this Head Start program?

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# LIFE EVENTS/EXPERIENCES AS POTENTIAL BARRIERS TO PARENT INVOLVEMENT SURVEY

## FORM B (End of Head Start Year)

LIFE EVENT/EXPERIENCE	CHECK IF APPLIES TO YOU	
	IS TRUE FOR YOU	MADE IT HARDER TO PARTICIPATE
1. The physical space at the Head Start center is not really satisfactory.		
2. I am not very interested in present Head Start activities, or wish different activities were available.		
3. Head Start activities have conflicted with other things I want to do or have to do.		
4. I sometimes feel uncomfortable with Head Start staff.		
5. Head Start staff do not give parents enough recognition for participating.		
6. I have trouble talking with Head Start staff because we do not speak the same language.		
7. I have a baby or young toddler at home.		
8. During the Head Start year, one or more of my children has had a major health problem.		
9. One or more of my children has had a special need (including behavior problems).		
10. One or more adult(s) at home has a schedule which interferes with things at home.		
11. My partner or another important person disapproves of my participation in Head Start activities.		
12. One or more of the adult(s) at home have had a health problem (including emotional health) sometime during this Head Start year.		
13. One or more of the adult(s) at home have had an alcohol and/or drug problem.		
14. Family and friends are more of a drain than a help.		
15. I was without a telephone during at least part of this Head Start year.		
16. I was without heat, hot water, or electricity at least part of this Head Start Year.		
17. I had a flood, fire, or other disaster during this Head Start year.		

LIFE EVENT/EXPERIENCE	CHECK IF APPLIES TO YOU	
	IS TRUE FOR YOU	MADE IT HARDER TO PARTICIPATE
18. I moved during this Head Start year.		
19. I was homeless for at least part of this Head Start year.		
20. I do not have reliable, convenient transportation.		
21. I do not have dependable, convenient child care available to me.		
22. During at least part of this Head Start year, I have had major health problems.		
23. I have had some problems with alcohol use.		
24. I have had some problems with drug use.		
25. During this Head Start year, I often felt as though I lacked energy or had little interest in things.		
26. During this Head Start year, I often felt, sad, "down," even depressed.		
27. I often feel self-conscious, shy, or otherwise uncomfortable around other people.		
28. I speak a different language than most other Head Start parents here.		
29. I have some difficulties reading in my native language.		
30. During at least part of this Head Start year, I have worked for pay, had job training, or gone to school.		
31. My hours at school, work, or at job training have been inflexible.		
32. My work, job training, or classes have been in the evening or at night.		
33. My work, job training, or classes have been during the day.		

34. In what ways do you think that parents have become involved in this Head Start program this year? \_\_\_\_\_

35. What, if anything, do you think Head Start could do to increase or improve parents' participation? \_\_\_\_\_

## BENEFITS OF HEAD START PARENT INVOLVEMENT SURVEY

<b>HOW MUCH HAVE YOU OR YOUR FAMILY BENEFITED FROM:</b>	<b>Not at all</b>	<b>A little</b>	<b>Some</b>	<b>Very much</b>	<b>Didn't do this activity</b>
1. Your volunteering for the classroom?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Your volunteering in the office or kitchen?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Your meetings with Head Start teachers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Your meetings with the Family Service workers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Your volunteering for special events?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Your serving on Head Start policy committees? (such as the Delegate Agency Policy Committee, Center Policy Committee, City Wide Policy Council)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Your attendance at workshops such as Exploring Parenting or Looking at Life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Your attendance at classroom meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Your involvement in outside Head Start, workshops, meetings and conferences?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Your involvement in Head Start related activities or tasks in your home -- with your child, family, or for the Head Start center?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Your doing things for Head Start at home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Your attendance at parent meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Compared to other Head Start parents, did you participate more, less or about the same in Head Start activities? (Please check only one).					

**MORE**\_\_\_\_\_

**ABOUT THE SAME**\_\_\_\_\_

**LESS**\_\_\_\_\_

	Not at all	A little	Some	Very much
1. Overall, how much have you enjoyed being involved with Head Start?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Overall, how much have you learned from being involved with Head Start?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Overall, how much has your <u>Head Start child</u> benefited from your being involved in Head Start?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Overall, how much have <u>you</u> benefited from being involved with Head Start?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Overall, how much have <u>other family members</u> benefited from your being involved in Head Start?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Appendix C

### Male Involvement in Head Start

Since 1987 there has been a growing trend toward involving fathers in the Head Start experience. Recently the DHHS Administration on Children, Youth and Families issued a new Head Start initiative on father involvement based on the premise that increasing the presence of fathers in the lives of their preschoolers will lead to positive outcomes for families. As a result, seven grantees were funded through the DHHS/ACYF (1992-1995) to explore the effects of male involvement in Head Start. The results of the research are intended to help establish new guidelines and expectations for future program development as well as aid in the framing of new policy.

#### Clarifying Terms and Definitions

A broader definition of the term "father" is necessary if these strategies are to succeed. The research of Levine, Murphy, and Wilson (1992) has suggested that even when a father is not officially living in the home, a *father figure* may be unofficially available. Of the 14 Head Start programs studied, Levine et al. found that a man is present — whether a father, boyfriend, or other male relative — in about 60% of the Head Start homes. This revealing finding allows Head Start staff and directors to begin to focus on involving not only biological fathers but any significant male in a child's life. This broadened definition of "father figure" should be acknowledged and incorporated into program expansion efforts as "it allows professionals to be more sensitive to family networks among low-income populations and enhances the chances of program success by tapping into a larger pool of males" (Levine, 1993, p. 15).

Based on existing research on father involvement in Head Start, Fatherhood Project<sup>1</sup> developed a new national training and technical assistance project to help programs initiate father involvement components. This framework calls attention to: 1) the informal or naturally occurring participation of fathers, especially at transition points, in addition to the types of involvement mandated in the Head Start parent involvement guidelines [70.2]; 2) the nature of the father-child relationship that is encouraged rather than the amount of participation by fathers; and 3) the social context of involvement, including the feelings of family and staff who may influence a father's participation (Levine, 1993).

The framework places strong emphasis on "the largely ignored yet [one of the] most important and frequent occasions of parent contact with centers — routine transition points, when parents bring or pick up their children, [as the times that] can become opportunities for engaging them" (Levine, 1993, p. 5). These transition points may provide naturally occurring opportunities for program directors and staff to begin to interest fathers in other types of involvement, while teachers could provide informal parent education (Levine, 1993).

Further, the framework places emphasis on the nature of the father-child relationship, suggesting that it is not the amount of time that a male shares with a child, but the way this time is shared that is important and necessary. The final recommendation suggests intensive training for all Head Start

staff and directors, as social concerns will inevitably become issues in implementing male involvement in Head Start.

Since the Fatherhood Project's framework has immediate and specific implications for the design and operation of programs intending to increase father involvement in Head Start, it should be used as a base for individual program enhancement. [For a thorough review of the literature on father involvement, refer to Levine, J. (1993). "Involving fathers in Head Start: A framework for public policy and program development," *Families in Society*, p. 4-21.]

### **Barriers to Male Involvement**

Before implementing a male involvement component, it is important to understand why men have not been involved in the past, as well as the potential barriers to future male involvement. The results of one study found basic disinterest in the program, lack of responsibility, negative personal experiences, increased crime and prison sentences, drug and alcohol abuse, and fear of exposing inadequacy (Price-Bonham and Skeen, 1979). These results suggest that men may hide behind their work roles and avoid more responsibility as fathers out of fear that they lack the necessary parenting skills.

Many potential barriers to male involvement may concern issues about a program itself, specifically inappropriate design and delivery. While the prominent flaw in programming may lie in the institutional mind set of the program itself, a slightly more obscure imperfection lies in keeping the interest of men alive. Hopkins (1973) discovered that unless activities were of concern to men, they would lose interest: educational toys didn't keep the men engaged because they considered them feminine and juvenile. In addition, male involvement initiatives have not been generally supported by agency management because misconceptions, prejudices, and fears have arisen from staff and parents already involved.

The only survey conducted on father involvement in Head Start (Gary, Beatty, and Weaver, 1987) found that although the majority of fathers (97%), mothers (98%), and staff (100%) felt that the importance of father involvement ranged from important to very important, a disturbing number of staff persons (40%) expressed skepticism about the specific benefits of male involvement in center and child activities. According to Gary et al., staff voiced concern that the involvement of either fathers or mothers could have negative effects due to the many conflicts that may arise between parents.

Head Start mothers may pose a potential barrier to program success by withholding and/or discouraging male participation: "mothers did not tell fathers about, or encourage them to participate in Head Start activities" (Gary et al., 1987). Other potential barriers mentioned in Head Start grantee studies include racism, sexism, feelings of exclusion, timing of scheduling, lack of exposure, societal values, dysfunction, and sexual stereotypes placed on males.

### **Staff Training**

Incorporating males into an existing program requires training of staff, administration, involved parents, and the targeted males themselves. Existing research has shown that programs are more likely to succeed if they are first able to identify the interests and concerns of men prior to address-

ing parenting issues (Levine, 1993, p. 15-16). In Head Start, staff must learn how to encourage and maintain male involvement in the classroom and in other volunteer roles. Males need to be prepared for what they will encounter as volunteers, both from staff and other volunteers. Research suggests that staff attitudes and skills can be critical in involving males; therefore, staff who have ambivalent feelings toward involving men are encouraged to be trained in sensitivity to male issues and needs. Staff can then address both conscious and unconscious feelings of ambivalence that could inhibit male involvement.

Research findings about the importance of informal communication indicate that training should focus on teaching staff how to value and encourage a positive style of interaction between father figures and children, even if that interaction is minimal (Levine, 1993).

### **Training Mothers**

Specific attention to mothers needs to be taken into account when creating a male involvement program, as mothers' attitudes have been found to be a key element in the social context affecting the nature of a father's involvement with his child. Training should address mother's attitudes about fathers' involvement, especially the mothers' ambivalent feelings. Research findings suggest that Head Start mothers need to be trained to value and encourage contact between fathers and staff at drop-off, pick-up, and other opportunities for informal communication (Levine, 1993, p. 16).

### **Training Father Figures**

In order for a parent involvement program to be effective with males, Levine states that "programs need to: 1) increase fathers' sense of competence in a nonthreatening manner; and 2) attend particularly to [male] style[s] of interacting with children" (Levine, 1993, p. 16). Levine believes that once trust is established, staff will be able to accomplish these goals through modeling techniques (either through direct skill-building or play groups that allow men to see other men interacting with children). Levine also encourages discussion groups with males, as this approach "may help men express their feelings about parenting, decrease their levels of stress, and increase their level of social support" (Levine, 1993, p. 16).

The potential benefits to the men, their children, the program, and the community should encourage all Head Start programs to implement a male component within their parent involvement program. Research by the Head Start grantees has found that increasing contact with males in a child's life increases competence and success for the child, family, and the male himself.

### **The Head Start Grantees**

The primary aim of the male involvement demonstration is to gradually integrate the involvement of males into overall Head Start program design. Because Head Start is currently focused more heavily on females, a concerted effort was made to document the need and interest among Head Start programs to incorporate a male involvement component. Goals of such projects included 1) demonstrating approaches for meaningfully involving male family members in Head Start as well as yielding information on the incidence of male participation; 2) designing successful strategies for



involving males; 3) developing approaches for maintaining male interest in the program; and 4) disseminating indications of the impact of male involvement on children and other family members. The grantees were instructed to discontinue the "male only" delineation of male involvement so it is clear to practitioners that parent involvement includes both males and females.

### **PROJECT M.A.L.E. (Men Active in the Learning Environment)**

The Central Nebraska Community Services, Inc. and the University of Nebraska at Kearney (departments of early childhood, nursing, education, and psychology) developed a model program to serve the male population and children of Head Start. The objectives and goals were to have males attend and participate in new training modules with their Head Start children; to have Head Start families attend activity sessions together; and to increase male volunteer hours within Head Start.

To meet these goals, the program has offered incentives — educational tools the entire family can benefit from. These incentives include: 1) a subscription to a parenting magazine for families in which the male participated in at least one training module; 2) educational puzzles and activities for the child if the family participated in at least one activity class; 3) a camera for families in which the male volunteered at least 20 hours in the Head Start center; and 4) a scholarship of \$125 to the male who volunteered the greatest number of hours for all participating centers.

Primary males in the lives of Head Start children in this study included the child's father, uncle, older brother, grandfather, live-in friend of the child's mother, as well as significant others, with participants ranging in age from their early 20s to their mid-50s.

**The Program.** The sessions and curriculum designed for Project M.A.L.E. allowed for interaction between the adult males involved, as well as between the males and their children, and were designed to empower the men by involving them in program planning. Topics focused around issues of male concern, as identified in the program's initial needs assessment questionnaire. Three themes that dominated the curriculum were: 1) literacy - focusing on language interaction, reading to children, and environmental issues; 2) behavior management - focusing on building appropriate behavior, and two different role-play situations; and 3) family - focusing on getting to know family traditions, entertainment, and first aid.

Over a one-year period the curriculum allows for 12 learning modules, beginning with an introduction to Head Start and closing with a wrap-up party in the last session, with two scheduled family activity sessions. These activities, decided on by the males participating, consisted of fun and creative events that focused on engaging parents, children, and siblings. Examples include bowling, family picnics and barbecues, carnivals, and trips to the zoo.

Descriptive evaluations from the participating males suggest that the integration of Project M.A.L.E. curriculum within the Head Start program leads to parents becoming more aware of typical developmental and social behavior of their preschooler. For many of the men this was the first time they had become involved in their child's public education, and the first time they had discussed parenting issues and concerns with other men. In addition, there was some evidence that the men were able to implement at home what they had learned in the trainings. It was valuable for them to see their children interacting with peers, to learn about child development, and to under-

stand the importance of reading to and spending quality time with their children.

Throughout Project M.A.L.E.'s implementation, participants and staff developed a quarterly newsletter featuring project information, activities, and comments from other male participants. This newsletter was distributed to the 17 Head Start centers in the area. In addition, at the end of the project, an awareness/application video for Project M.A.L.E. was produced. This video gives the viewer a better understanding of Head Start and the services provided by Central Nebraska Community Services, Inc. and it reinforces the project's significance. For more information, contact:

**Suzan Obermiller, Head Start Director**  
**Central Nebraska Community Services, Inc.**  
**P.O. Box 509**  
**Loup City, NE 68853**  
**(308) 745-0780**

### **Men's Day: Male Involvement in Head Start**

Operated by the Philadelphia Parent Child Center, Inc. (PPCC), this project has enjoyed great success. At its core lies the essential components that PPCC believes to be integral to the success of a male involvement program: initiatives that build self-esteem; strategies that promote positive male-child interaction; training of participants in positive parenting and child interaction; male bonding and fellowship activities; helping Head Start staff become more open, aware, and sensitive to men and male issues. The project has been structured in four components: male/child interaction, training, male fellowship activities, and expansion. The project's target group is fathers, grandfathers, brothers, uncles, boyfriends, and other men who have a significant nurturing role for the child.

**Direct Involvement.** The direct involvement component offers a "Men's Day," held once a month in each Head Start classroom. The focus of this day is to have men interact with the children in the classroom and to assist the teachers with their daily responsibilities. Activities are determined by both the male participants and the Head Start teachers. Some of the activities include male participation in story time, circle time, dramatic play, free play, and field trips. In addition to "Men's Day," males are expected to participate in the parent involvement activities mandated in 70.2 of the Head Start parent involvement guidelines (i.e. parent meetings, trips, and volunteering). Interaction workshops structured around both men and children are also provided.

**Training and Education.** These approaches are taken from a parenting curriculum called "Looking at Life," with goals focusing on assisting males in exploring the role of parenting while building self-esteem and promoting responsibility. Other educational opportunities include training males as prospective future employees of Head Start by recruiting them in PPCC's Annual Substitute Training Program and the Shared Substitute Program, sponsored by the Delaware Valley Child Care Council. This 10-day program consists of theory and classroom experience. To ensure that participating males have the needed skills for future employment, the opportunity is provided to enroll in Adult Basic Education (ABE) and literacy courses offered by the Center for Literacy onsite at PPCC. The project also sponsors information workshops and seminars on parenting issues that are specific to males.

**Male Fellowship Activities.** In an effort to recruit new males and provide a bonding opportunity for men, several fellowship activities have been organized by PPCC staff. These include events such as movies and trips to educational, cultural, and sporting events. In addition, a basketball team was formed; it proved to be the most highly attended activity. The participating males then became involved in helping to establish a community basketball league consisting of several teams.

**Dissemination.** The project has launched a public relations campaign to promote and encourage male involvement in other Head Start centers. Information on successful strategies and research findings is available through publications, reports, documents, media, radio, press, and a videotape. Collaborative efforts to sponsor activities and workshops specific to males are being initiated with other Head Start programs. For more information, contact:

Pete Baylis, Parent Involvement Worker  
Philadelphia Parent and Child Center, Inc.  
2515 Germantown Avenue  
Philadelphia, PA 19133  
(215) 229-1800, ext. 227

### **Male Involvement Initiative**

The purpose of this initiative is to increase male involvement, improve family unity, and provide positive male role models for Head Start children. Within the program's design lie four initiatives: 1) a computer-based education initiative for Head Start children, combined with a computer-based training program for adults; 2) the development of culturally sensitive classroom and parent materials; 3) training activities focused specifically on male interests and needs; and 4) a weekend sports development program for Head Start children. Outreach efforts helped to identify additional male interests as well. The Male Involvement Initiative continues to celebrate its success.

As a result of a 3-year study, a manual called, How to Get Men Involved was developed to allow replication of this initiative at other Head Start sites across the country. The manual is in a user-friendly format, with detailed instructions. It stresses the importance of the surrounding environment of Head Start centers and explains why male involvement is important to the growth and development of families, children, and communities. Staff involvement and training are viewed as essential to success; strategies and what to expect are clearly stated. The basic philosophy of this initiative is that staff, parents, and the males themselves create the program.

For more information, contact:

Fran Collins, Director  
Cambridge Head Start  
221 Hampshire Street  
Cambridge, MA 02139  
(617) 491-8011

### **The Male Involvement Program**

**The Program.** This program within the Head Start sites in El Paso County, TX recruited males from low-income urban and rural families and from the community at large. In addition to educational and recreational activities, the program also focused on the personal development of males

through mixed-group sessions and small-group discussions. These efforts offered preschool children significant contact with males and enhanced the child's school and family life. The evaluation assessed children, parents, and staff to determine the success of program strategies.

The primary clients of the Male Involvement Program were the Head Start parents who decided to participate in the activities. Although the focus was on the adult male family members, it also included the females who decided to take an active role. The males included fathers, brothers, uncles, grandfathers, and significant others, such as live-in boyfriends. The age range for this group was from 19 years to 65 years, with 99% Hispanic participants and the other 1% Anglo. Another group of clients consisted of males in the community who chose to volunteer their time to interact with children. These clients ranged in ages from their early 20s to late 60s. Most represented were professions such as fire fighters, dentists, police officers, doctors, carpenters, and mail carriers. Although these participants provided a service to the program, they also acquired skills and knowledge from interacting with very young children.

**Results.** The program helped to create, improve, and enhance a bonding between males and children not only in the Head Start sites but in the home. Males were empowered and trained in areas that would help them become involved in both school and community. The male involvement specialists created a family environment that produced a positive bonding between presenter and participants. This, in turn, allowed freedom and an atmosphere for learning to take place.

Recruitment of community volunteers was one of the main goals of the program. Various agencies united with Head Start to provide activities that would encourage a positive male role model. Participating agencies included the Border Patrol RAD (Robot Against Drugs) and the Police Department DARE (Drug Abuse Resistance Education). These collaborative efforts not only served program goals but also helped children accept these law enforcement agencies as active partners in their communities.

**Special Activities.** The highlights of this program were the children's soccer games. Parents from the different sites came together to support, promote, and cheer their children during these games. The teams were co-ed to ensure that all children had the opportunity to engage in this sport. Many males became their children's coaches.

"Father and Child Night Out" started as an effort to engage males in activities that would enhance their fathering skills. The main goal was to help fathers become aware of the importance of spending time with their children on a one-to-one basis. Activities such as miniature golf and El Paso Diablos baseball games offered occasions for simple, free communication. This component proved to be one that motivated male-child interaction. It was through participating in these activities that the men began to choose between staying out with friends or spending quality time with their children. This decision ultimately had an impact on the lives of the children as male participants prioritized their activities, giving the family more importance.

The education component created meaningful activities to encourage male participation as classroom volunteers. To look "male-friendly," the sites used posters, activities, invitations, and poems that showed males interacting with children. Training sessions on topics such as transition, the developmental milestones of children, and storytelling were of great interest.

Some of the participants acquired the knowledge and experience to implement these concepts in the classrooms as volunteers and were subsequently hired for employment. The total amount of in-kind hours of classroom male volunteers for the year 1993-1994 was 7,332.

In summary, male participation increased, with males attending seminars and group functions more frequently and more actively seeking information on their children's educational growth. They also expressed a desire to further their own academic status. Developmental learning for the child increased during the period of active participation by the male figure. Most significant were better child-rearing practices, enhanced communication within the family setting, and a heightened self-concept for males involved in the program. For more information, contact:

**Margarita Gomez, Coordinator of Special Programs**  
Region XIX Education Service Center  
6611 Boeing Drive  
El Paso, TX 79925  
(915) 774-4600

### **Administration for Children and Families Minority Male New Start Program**

As a result of the DHHS/ACYF Male Involvement Initiative, the Administration of Children and Families (ACF) Region IV staff conducted a telephone survey of 50 Head Start agencies across the country to determine the extent of male involvement programs. Responses indicated that 1) there are few specific and constructive programs to involve males in Head Start; 2) many fathers are interested in working with their children but do not know how and lack the financial resources and/or time; and 3) while fathers may be involved on policy levels, they are not directly involved in their children's education or care.

In response to these findings, a conference was developed by the regional office staff (in conjunction with the U. S. Public Health Service, the Labor Department, and the Georgia Department of Human Resources) for Head Start representatives to share ideas, knowledge, and experiences. Topics of discussion included reasons why men have not been involved and solutions/strategies for the problems identified.

Seed funds were provided (in addition to services and cash in-kind funds) for 10 Head Start pilot projects in the region to help strengthen families. The grantees selected were asked to develop an intensive 16-week training program for males, providing supportive assistance and services; "Men Only" clubs; recreational activities; and nurturing and mentoring services. The original 10 grantees, plus an additional 12 programs, have completed the training, making a total of 22 Male New Start programs currently in action in Region IV at this writing.

**Training Modules.** The curriculum incorporates of 16 training modules that focus on increasing male leadership and job skills, development and intervention programs (e.g., substance abuse training, child development issues, parenting skills, family violence issues, and crime prevention), and organizing activities that men are drawn to. These training modules are regarded by ACF as "strong recommendations," and Head Start centers are instructed to adapt the program according to the individual needs of the agency and its population.

In addition to the training modules, ACF urges 1) coordination and communication with other agencies on minority male issues and solutions; 2) exploring ways to empower at-risk communities to provide community-based programs to enhance the quality of family life; 3) recognizing family strengths and individualities and respecting different methods of coping; and 4) encouraging and promoting parent-to-parent support.

As a result of these strategies, men began to bond together and bring other males to the training sessions after being involved for only a couple of weeks in the program. Overall accomplishments include widespread community outreach by the participating males.

Based on the success of this program, ACF staff developed a Memorandum of Understanding between ACF, Alpha Phi Alpha Fraternity, Inc. (Southern Region), the National Black College Alumni Hall of Fame Foundation, and Region IV Head Start Programs. The focus of this partnership is to 1) increase the participation of fathers and other significant males in Head Start programs and in the lives of their children; 2) develop effective strategies for increasing the resiliency of minority males through the intervention and prevention programs; 3) reduce stereotypical views toward males; 4) offer support and mentoring services; and 5) aid local coordination between family planning and Head Start programs around issues relating to male involvement.

Under this initiative, individual programs can develop their own programs, based on the specific concerns and needs of the children, men, families, and community. This information is drawn from an initial assessment to determine what specifically is needed at each agency. For more information, contact:

Gwendolyn Johnson, Social Services and Parent Involvement Specialist, Family Supportive Services,  
Administration of Children and Families  
Department of Health and Human Services, Administration of Children and Families  
101 Marietta Street  
9th Floor  
Atlanta, GA 30323  
(404) 331-2141

## Other Male Involvement Initiatives

**Getting Men Involved: Strategies for Early Childhood Programs**, by James A. Levine, Dennis T. Murphy, and Sherrill Wilson

This is a comprehensive user-friendly guide to developing a male involvement component within programs. The focus of this guide is on manageable and practical suggestions on how to involve males in their children's growth and development. Although only half of the programs included are in Head Start agencies, the recommendations here are suitable to all programs serving families and communities.

The guide is conveniently divided into four sections: 1) "Rethinking Involvement" - including the benefits of implementing a male involvement component and an assessment of male involvement in your program; 2) "Strategies" - including how to create a father-friendly environment, how to

recruit men to your program, how to operate a male program, and how to sustain male involvement; 3) "Model Programs" - including 14 outstanding existing programs that have incorporated a male involvement component; and 4) "Resources" - an extensive list of children's books that focus on men; additional resources for professionals and parents to inspire further thinking about male involvement; and a short list of organizations to contact. For more information and/or to receive a copy of this guide, contact:

**James Levine, Director**  
**Edward W. Pitt, Associate Director**  
**The Fatherhood Project**  
**Families and Work Institute**  
**330 Seventh Avenue**  
**New York, NY 10001**  
**(212) 465-2044 FAX: (212) 465-8637**

### ***The National Institute for Responsible Fatherhood and Family Development***

Based on the belief that the most effective way to rebuild families and communities is by providing comprehensive nontraditional services to fathers, the National Institute claims that its program model is the most effective way to reach fathers and offer support in creating safe environments for families. Through nontraditional one-on-one support, group support, family outreach, fathering skills, health and nutrition information, medical and housing referrals, and educational and career guidance, males in the program are able to reach their personal goals.

The institute focuses on assisting young men in becoming responsible, nurturing, and resourceful fathers who are able to create and maintain environments that are nurturing and responsive to their children; these goals are reached through empowering the young men served. Believing that mothers, grandparents, siblings, and close family friends play integral roles in the relationship between these young males and their children, the program takes a holistic approach to family dynamics, offering services to mothers and grandparents as well.

For more information, contact:

**Charles A. Ballard, President/CEO**  
**The Institute for Responsible Fatherhood and Family Development**  
**8555 Hough Avenue**  
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### ***The National Fatherhood Initiative***

The National Fatherhood Initiative is dedicated to ending fathers' absence in their children's (and families') lives, in the belief that father absence leads to social decay. This effort consists of a national public announcement campaign, grassroots efforts, and regional leadership summits promoting responsible fatherhood. Information includes a newsletter documenting the initiative's work, current trends in family issues, and political/legislative developments affecting fatherhood; an

“information kit” on relevant fatherhood topics; and a “Community Impact Brochure” highlighting ideas that can be implemented in a community.

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## Endnotes

1. Developed by Families and Work Institute in New York City (see project list in this appendix).

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