

Caregiver Engagement Initiative Research to Practice Brief Report

Brazelton Touchpoints Center Research and Evaluation

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Introduction

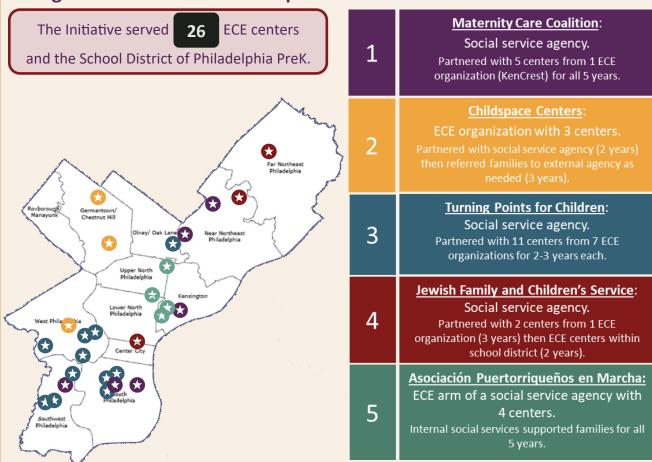
The William Penn Foundation funded implementation and evaluation of the Caregiver Engagement Initiative in 2017:

- 5-year partnership with 5 organizations serving diverse groups of families with children age 0-5 years across greater Philadelphia.
- Organizations selected evidence-based parenting curricula to implement in-person with families in early childhood education (ECE) settings.
- Required: 1) ECE organization and social service agency partnership; 2) participation in evaluation.
- 879 parents across 26 ECE centers and the School District of Philadelphia PreK participated in parenting initiatives in 5 years.
- 20 facilitators implemented parenting curricula.
- The COVID-19 pandemic began during the course of the Initiative, and organizations began implementing parenting groups virtually.



- The evaluation was the first cross-curricula study exploring the successes and challenges of implementing parenting groups in real world ECE organization settings. Prior evaluation studies were typically focused on one parenting curriculum and/or conducted in controlled research settings.
- Evaluation demonstrated that participation was highly beneficial for children, families, ECE organizations, and social service agencies.

Organizations and Partnerships



The Caregiver Engagement Initiative (CEI) consisted of 5 partnerships between ECE organizations and social service agencies. Two primary organizations were ECE organizations; one nested within a social service agency and one with external social service supports. Three primary organizations were social service agencies that partnered with ECE organizations to support the delivery of parenting curricula to their centers.

Social service collaborations allowed ECE organizations to:

- support families with skilled group facilitators,
- learn from experienced facilitators, and
- create a safe space for families to freely express concerns and gain support from an outside organization.

Collaborations enabled both partners to pool resources, as each partner organization contributed staff time, funding, perspectives, and connections. However, there also were challenges, including the need for extensive coordination between partners and high staff turnover.

Evaluation Methods

Organization Leadership and Facilitators

The evaluation examined the process of implementation and outcomes of participation for parents, facilitators, and organization leadership. Process evaluation activities with organizations included regular implementation support and feedback on successes and challenges.

Facilitators also tracked session attendance, completed post-session surveys, and participated in focus groups and interviews with organization leaders.

Parent Pre-Survey

-Family Demographic info -Parental Distress* -Parent-Child relationship^



Parents

Parent Post-Survey

-Group Satisfaction -Parental Distress* -Parent-Child Relationship^

Parenting group attendees completed surveys as indicated above. Parents enrolled in participating ECE centers who chose not to attend parenting groups completed surveys at the beginning and end of ECE program years. Both groups of parents participated in focus groups.

*Parent Stress Index 4 (Abidin, 2003); ^Child-Parent Relationship Scale (Pianta, 1992)

Implementation Findings

Choosing a Curriculum

Organizations were required to choose a curriculum from the Office of Head Start Compendium of Parenting Interventions (<u>acf.hhs.gov</u>). Organizations considered the following when choosing a curriculum:

- the focus and goal of the curriculum,
- curriculum topics in the context of the population of families and children they hoped to serve (e.g., teen parents, families in transitional housing, immigrants, children with specific behaviors),
- how the curriculum aligned with their existing parent engagement goals, and
- number of sessions in the curriculum.

Organizations chose the following curricula:

Curriculum	# organiza- tions	# group sessions in manual	# sessions implemented (av. cycle)	Curriculum focus
Adults and Children To- gether Raising Safe Kids (ACT -RSK)	1	9	8	Help parents/caregivers provide safe environments in which to raise children without violence
Incredible Years (IY) Preschool	1	14	12	Build school readiness skills, partner with teachers and child- care professionals
Nurturing Parenting Program	1	16-27	10	Build nurturing parenting skills and reduce abusive and ne- glectful parenting practic- es (family-centered, includes children in groups)
Triple P Positive Parenting Program	2	3 levels: 3-8 sessions each	3-7	Provide positive parenting strategies to build parents' confidence and skills and targeted support for parents of children with behavioral difficulties

Modifying Curricula

Organizations were mindful to implement their chosen evidence-based curriculum with fidelity, but they also discovered some modifications were needed to best support the families they served. Modifications were most often related to:

- Adjusting the number/length of sessions to increase the likelihood that parents would attend all sessions and have access to the entire curriculum.
- Acknowledging and discussing community or national events (e.g., community violence, COVID-19 pandemic).

I couldn't ignore what was going on around us and had to figure out a way of making it relevant to the curriculum that was very strict. I think that would have done a disservice to the parents.

 Acknowledging historical or generational trauma and improving cultural responsiveness.

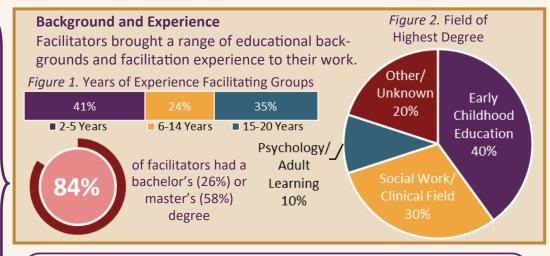
I had to implement different things to make it more relatable and applicable culturally. Even though [the curriculum] is worldwide, it's still missing aspects of that. The format, the explanations are not always as culturally competent as they could be.

- Updating curricula to improve relatability for parents (e.g., discussing social media, cyber bullying, or video game use by parents or children).
- Brainstorming additional parenting strategies when those presented in the curriculum did not seem applicable to participating parents.

Facilitators

There were 20 facilitators who implemented the 4 parenting curricula; 25% facilitated for all 5 years. Half of the facilitators were from social service agencies and the other half were from ECE organizations. Facilitators from ECE organizations were center directors and family service staff. All facilitators attended curriculum-specific training offered by the developers of each chosen curriculum. Some facilitators were previously trained in the selected curriculum with experience delivering that curriculum to families.

Facilitators were the foundation of the Initiative. They were tasked with building trust and rapport with parents. They created a space, tone, and environment where group members felt comfortable sharing and discussing sensitive topics. Facilitators flexibly adapted to the needs and culture of each new group, even when there were 4 or 5 languages spoken by parents within a given group session. Many facilitators emphasized the importance of organically encouraging conversation and collaboration among group members and reminding parents that they are the experts on their children. It was important for facilitators to have comfort with and confidence in their technology skills when leading virtual groups.





Some organizations had pilot groups with staff before implementing with parents to support facilitators who felt they needed more training or experience. While facilitators practiced new skills, staff participants gained knowledge, developed a shared language with colleagues, and learned about the curriculum, which helped them recruit parents to later groups.

Group Composition

Organizations carefully considered who would participate in each parenting group cycle, or a full offering of a curriculum's required sessions. Organizations had many options, as outlined below, and often made similar decisions.

Implementing Across Multiple Sites

Center-specific:

Helps parents build connections with other families and staff at the specific center they attend

Across Centers:

Allows for pooling of resources to serve multiple centers; gives parents a wider and potentially more diverse network with whom to connect

What organizations did:

Center-specific cycles preferred in-person; cycles across centers preferred virtually

Participant Eligibility

Open to all parents:

Supports more families increases breadth of influence: connects families with different needs and backgrounds

Recruiting specific families:

Increases likelihood of reaching families in greatest need of support

What organizations did:

Cycles often open to all

families, but recruitment

specifically focused on

families with greatest need

Open vs. Closed **Participation**

Open participation:

Serves more families in a cycle; creates welcoming space - parents join when they can and invite others to join

Closed participation:

Encourages trust and rapport among group without having to adjust to new members

Number of Parents in **Sessions and Cycles**

Limiting group size:

Ensures groups are small enough to encourage participation and comfort in sharing

Unlimited group size:

More families can be served in a single cycle (note: it is more difficult to manage large groups virtually)



What organizations did:

Most chose open participation; easily encouraged trust and rapport in groups even when new parents joined

What organizations did:

Groups large enough that parents brought varied experiences, small enough to encourage vulnerable sharing



Program Logistics

Determining specific details of implementation required intentionality and creativity. Organizations learned many practical strategies.

Names: What to call a parent group

Choose strengths-based language; use language that is inviting and welcoming (e.g. Family Circle). Facilitators and recruiters found using the word "education" (e.g. parent education group) to inhibit recruitment.

? Scheduling: When during the year and day to schedule sessions

Offer cycles on a regular schedule (e.g. one cycle in the fall, winter, spring). Ask parents what time of day would work best for them; find a time when parents are already at the center (e.g. pick up, drop off); get creative (e.g. a lunchtime session); offer multiple options.

? Translation: How to accommodate language differences in the group

Translate written materials (handouts, presentations) into the languages spoken; have a translator available to co-facilitate; invite parents to bring a friend/family member to translate for them; have a multi-lingual facilitator,

Compensation: How to compensate parents for their participation
Gifts and monetary incentives work well to encourage participation, as do family celebrations, opportunities for quality family time, books/activities for families; choose incentives that are meaningful for families. Consider



Recruitment & Retention

Across all organizations, the most challenging aspect of implementation was <u>recruitment</u>, or encouraging parents to join a parenting group. Despite significant efforts involving multiple strategies, organizations found fewer parents participated than expected. During the third year of the Initiative, organizations focused additional effort on <u>retention</u>, encouraging parents to attend at least three sessions in a cycle. Setting realistic recruitment and retention goals is an essential element of conducting parenting groups.

Strategically choosing a name for programs; carefully scheduling sessions; and prioritizing parents' needs, desires, and availability were important for recruitment efforts. Center staff who had existing, trusting, and supportive relationships with parents (e.g., classroom teachers, parent engagement specialists) and parents who had previously attended and enjoyed groups were the most effective recruiters. Engaging, welcoming, and supportive facilitators who were in tune with parents' needs encouraged sustained participation beyond three sessions, as did incentive structures that rewarded continued participation.

The biggest challenge is trying to get people to the groups. Once they're there, the value is very evident.

Virtual Implementation During the COVID-19 Pandemic

The COVID-19 pandemic began to impact the Caregiver Engagement Initiative mid-Year 3. As happened across the country, participating ECE organizations and social service agencies shut down in-person services, moving to virtual service provision instead. Most organizations then prioritized crisis services. These changes lasted several months until organizations slowly reopened, with many COVID-19 health and safety protocols.

Recognizing the powerful opportunity to support families in crisis, 4 of 5 organizations immediately moved to virtual implementation, with the 5th organization doing so at the beginning of the next program year. Organizations that were mid-cycle when remote services were mandated completed those cycles virtually. Organizations pivoted to virtual service provision quickly. Leadership and facilitators were willing to guide, support, and listen to families, adapting quickly to families' changing needs. The most salient family challenges during this time included the stress and trauma of both the pandemic and increased racism and racial tension. Facilitators also gave more focus to strategies for supporting parents and children working and learning from home.

Participation Families

of parents enrolled in ECE centers were recruited for in-person sessions pre-COVID-19 pandemic

parents attended parenting curricula sessions from Oct 2017 to June 2022

879

Organizations recruited between 10% and 20% of parents with children in ECE centers to join at least one in-person session pre-COVID-19 pandemic using coordinated recruitment strategies and incentives (e.g., childcare, meals, gift cards). Eighty percent of parents were mothers, 11% were fathers, 5% were grandparents, and 4% were other caregivers. More fathers participated in-person pre-COVID-19 pandemic (12%) compared to virtually during COVID-19 (3%).

Parents who chose to participate in groups entered with higher reported anxiety, higher depression and isolation (general distress), more negative approaches to parenting demands, and higher reported conflict in relationships with their children compared to parents enrolled in the same ECE centers who did not participate. Recruitment for parenting groups included focused efforts by ECE program staff to recruit and support vulnerable families. Parents with more need for parenting support also may have been more likely to attend.

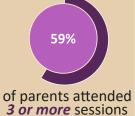
Parents reported a number of reasons for participating in parenting groups, including:

- · wanting to learn parenting strategies,
- learning about setting limits and improving disciplinary practices,
- coping with feelings of isolation and needing to connect with others,
- addressing a desire to not repeat behaviors of their own parents, and
- gathering ideas about what to do with children at home (especially during COVID-19).

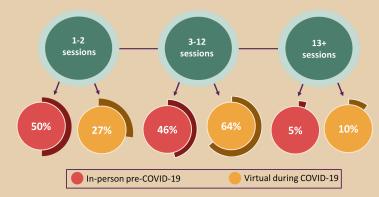
As far as my era of growing up, you do what you're told. It's better that children express themselves so they can be able to come to you...you nurture them, help shape and mold them.

Dosage

Our measure of consistent parent participation was based on guidance from the National Center on Parent Family and Community Engagement¹ that ECE programs should select curricula with at least 3 or more sessions of content. Over half of parents attended parenting groups



consistently. Parents who participated in virtual parenting group sessions during the COVID-19 pandemic (n = 265) were more likely to attend consistently compared to parents who participated in-person pre-COVID-19 (n = 577).



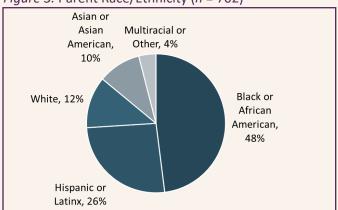
In addition to the convenience of participating virtually, online sessions during COVID-19 occurred in the final 2 years of the initiative after organizations had learned many effective strategies for recruitment, retention, and implementation.

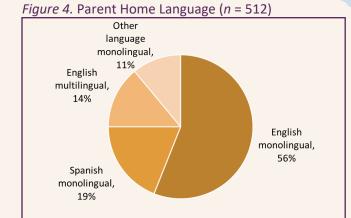
¹Choosing a Parenting Curriculum for Your Program | ECLKC (hhs.gov)

Family Characteristics

Most parents identified as Black or African American (48%) or Hispanic or Latinx (26%). Parents came from diverse cultural backgrounds such that 44% spoke languages other than English in their home.

Figure 3. Parent Race/Ethnicity (n = 702)





You saw parents coming from a variety of cultures. They shared experiences. We learned about each other's cultures, and it seems to be a different type of bonding experience.

- Twenty percent of parents had three or more family risk characteristics (i.e., single parent, no high school degree, unemployed, received at least one type of government benefit) that make it harder to break the cycle of poverty.
- Seventy-five percent of parents who participated in-person pre-COVID-19 pandemic received government benefits such as food stamps, Medicaid, and WIC compared to 50% of parents who participated virtually during COVID-19.

Implementation Findings: Parents

Satisfaction

Parents (n = 475) were highly satisfied with both their overall experience in parenting groups and with individual aspects of curricula and facilitation.



Gains in Knowledge and Skills

Parents explained that their experiences in parenting groups changed them as a parent in a number of ways. Most notably, parents learned new:

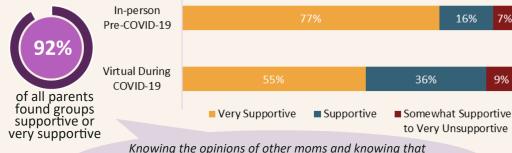
- ⇒ Skills to interact with their child with more patience, more praise, better communication
- ⇒ Strategies for managing conflict with their child
- ⇒ Activities to do with their child
- ⇒ Skills for self-care for mental and physical health

- ⇒ Facts about child development
- ⇒ Skills in creating routines or schedules for their children
- ⇒ Insight and self-awareness of their parenting decisions
- ⇒ Approaches to parenting

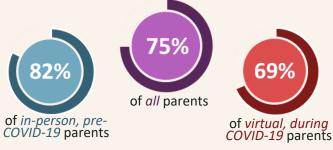
It forces you to think a different way about what you knew or thought you knew about parenting successfully. I think everybody has an idea of what a good parent is, but every child is different, and [my child] challenges us every single day.

Parent Support & Engagement

Parents said pre-COVID-19 and during COVID-19 groups were supportive. They were more likely to say in-person groups pre-COVID-19 were *very* supportive.



Knowing the opinions of other moms and knowing that I was not the only one going through certain situations, feeling understood.



Although we are virtual, we do not know each other personally, we have created a friendship, a connection between us, because we have realized that maybe the problems, the thoughts that I have as a mother, we all have them, and somehow, all mothers go through this.

said they would be at least somewhat likely to continue meeting with one or more parents from the parenting group after the group concluded.

Engagement with Facilitators and ECE Organizations

Participating in groups helped parents build connections and supportive relationships with facilitators and the larger ECE organization as a whole.

It become even more extended family. When you see that person, you put a name to that person...you're talking to them and the things you all shared together. So now you all have something in common. Before all you had in common was you had a child here.

To have a program like this tells me that [the director] cares.

We got involved more in the classroom. I would stay back helping out in my son's classroom. I knew all the kids, I knew the parents... just having the group made me feel more comfortable being here.

At first, I just used to drop my son off, [say hi and leave]. Now since we're in a group, I communicate with the staff more because I'm part of the community more.

Implementation Findings: Facilitators

Satisfaction

Facilitators were also highly satisfied with their experience in sessions.



Facilitators average satisfaction with:



activities

4.9 of 5

Their prep/ teaching

Trust between them & parents

Growth in Facilitators

Facilitators reported that their experiences in parenting groups helped them

grow as a person and a professional, gain confidence

interacting with parents, and refrain from jumping to conclusions about families or parenting without knowing all that families were going through. They also reported learning about their own parenting practices and appreciated the opportunity to learn from parents during the group.

When we do these sessions, we get to know [parents] on a deeper level, and what their needs are and what they go through.

Parent Outcomes: Distress and Parent-Child Relationships

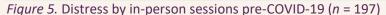
enting curricula.

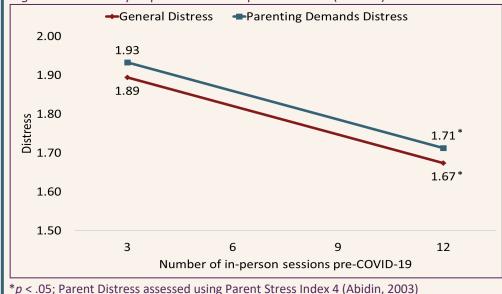
Sample and Analyses

Parents (*n* = 348) included in analyses 1) attended 3 or more sessions of parenting groups, and 2) completed surveys assessing parent outcomes at two time points (baseline and post-sessions). Analyses assessed baseline level and change in parent outcomes by session dosage. Parent outcomes were assessed separately for parents who participated in-person pre-COVID-19 pandemic and virtually during COVID-19.

Stability and Change in Distress by In-Person Dosage

First, we assessed whether parents experienced change in what they brought to the parenting interaction (general distress) and whether the demands of parenting would appear more positive to them and less stressful if they participated in parenting groups. Overall, parents showed low to moderate general and parenting demands distress at baseline (Mean = 1.92 and 1.98 respectively; 1.00 = Low distress; 2.00 = Moderate distress; 3.00+ = High distress). **General and parenting demands distress decreased significantly** for parents who participated in groups in-person pre-COVID-19 (B = -0.08*; B = -0.06*).



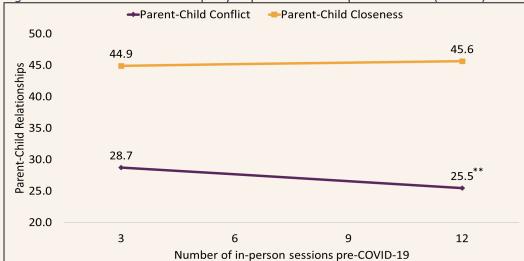


Stability and Change in Parent Outcomes during the COVID-19 Pandemic Change in parent distress and parent-child conflict was promising for parents who participated virtually during COVID-19; however, change was not statistically significant. Parent-child closeness remained strong regardless of participation in parenting curricula. Parents who participated during COVID-19 joined for support and connection during a period of heightened stress and trauma and may have different outcomes than parents who attended pre-COVID-19. Future evaluation of virtual parenting programs is needed.

Stability and Change in Parent-Child Relationships by In-Person Dosage Second, we examined whether parents experienced increased closeness and decreased conflict in their relationship with their children if they participated in parenting groups. Overall, parents experienced low to moderate conflict (*Mean* = 28.0 out of 60) and high closeness with their children (*Mean* = 44.8 out of 50) at baseline. Parent-child conflict decreased significantly for parents who participated in groups in-person pre-COVID-19 (B = -1.15**). Parent-child

closeness was strong and remained strong regardless of participation in par-

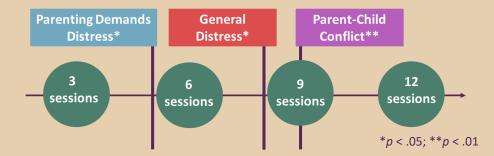
Figure 6. Parent-Child relationships by in-person sessions pre-COVID-19 (n = 197)



Threshold for Change in Parent Outcomes

Finally, we examined whether a minimum number of in-person sessions was required for statistically significant change in parent outcomes. Findings showed that significant decrease in parenting demands distress occurred at about 6 or more sessions, decrease in general distress occurred at about 9 or more sessions, and decrease in parent-child conflict occurred after 9 or more sessions. Organizations implementing these four parenting curricula should think critically about the number of sessions needed to promote change in key outcomes.

**p < .01; Parent-child relationships assessed using Child-Parent Relationship Scale (Pianta, 1992)



Summary of Findings

Overall, organizations funded through the Caregiver Engagement Initiative delivered high quality parenting groups that had positive effects on organizations, providers, and families across greater Philadelphia. The evaluation gave a real world view of parenting curricula implementation in ECE settings.

Families: Parents who participated in parenting groups learned new parenting strategies and built deep connections with facilitators and other parents. Parents who attended in-person groups were less isolated, less stressed by the demands of parenting, and reported less conflict with their children after participating in parenting groups. Parents who participated in virtual groups showed progress toward reducing stress related to the demands of parenting. However, it is unclear whether findings would hold for virtual curriculum delivery. More work is needed in the future to determine the value and impact of virtual parenting curriculum delivery beyond the COVID-19 context.

Facilitators and Organization Leaders: Facilitators and leaders from ECE organizations learned how to successfully implement parenting groups and gained more insight into the experiences of families in their programs. ECE staff who were trained to facilitate parenting curricula built their professional capacity and used the experience to further engage with families in their centers.

Organizations: ECE organizations learned about organizational capacity needed to deliver high quality parenting groups, which is particularly important given the Head Start mandate to provide parenting curricula. ECE leaders also found that offering parenting groups provided an avenue for families to continue to engage and connect with ECE staff beyond their participation in groups.

Social service agencies learned about best practices for partnering with ECE organizations and implementing parenting groups focused on family wellness. Some agencies used their experience and lessons learned in the Initiative to secure new funding for implementing parenting groups.

Evaluators: The evaluation team took a collaborative approach to the evaluation that was effective for building relationships and engaged in process evaluation efforts that supported organizations with implementation. Providing opportunities for organizations to connect as a cohort was important for building a community of learning.

[Evaluators] have been really helpful...[they] have done a really good job compiling and sharing back information in ways that help us understand where we're doing well, where there's opportunities for growth and development, and how we can stretch our own thinking. Being a part of the process has been a highlight, and a learning opportunity for me and my team.

Future Directions

The Caregiver Engagement Initiative provided a wealth of new knowledge and understanding of best practices for implementing parenting groups in ECE organizations. Disseminating findings and strategies for partnerships, implementation, and recruitment and retention to ECE leaders will be important for building capacity for family engagement support.

Virtual implementation continues to be an important, yet not well understood area of family engagement services post-COVID-19 pandemic. Future evaluation work should examine a simultaneous comparison of virtual and in-person parenting interventions and associated family outcomes.

Having family service representatives co-facilitate with agency facilitators helped families feel more comfortable approaching family service reps with needs in the future.

The [parenting group] helped to bridge the gap between parents and the childcare facilities. Families felt more comfortable to come to the office and speak to them, because they now had a more intimate connection to them through the group.

Acknowledgements

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- Turning Points for Children

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- KenCrest Early Learning Centers
- The School District of Philadelphia, Office of Early Childhood, PreK

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The opinions expressed in this report are those of the authors and do not necessarily reflect the views of the William Penn Foundation.