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ABSTRACT

This program analysis is part of the interim report on the National Home Start Evaluation. Home Start, a federally-funded 3-year (1972-1975) home-based demonstration program for low-income families with 3- to 5-year-old children was designed to enhance a mother's skills in dealing with her own children and to provide comprehensive social-emotional, health and nutritional services. One focus of the report is the examination of selected program-wide implementation features that seem especially important for future use in planning and operating home-based alternatives to Head Start. The first chapter of the report serves as an executive summary of the most important findings of the report. Other chapters include information on methodology; data collection and analysis and on the three major Home Start program dimensions: Home Start families and staff; the program, and services to families. (Author/NS)

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NATIONAL HOME START EVALUATION

Interim Report V:

Program Analysis

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FOREWORD

Purpose and Organization

The purpose of the National Home Start Evaluation is to assess the impact of the program on enrolled parents and children. The data presented in this volume were collected during the spring of 1974 to describe services being provided to families and to determine the extent to which projects are meeting the National Home Start Guidelines. In addition, the data were used for a preliminary cost-effectiveness analysis presented in a separate volume.

One focus of the report is the examination of selected program-wide implementation features that seem especially important for future use in planning and operating home-based alternatives to Head Start. This analysis is presented primarily to assist Head Start projects in their efforts to implement home-based options as part of the Innovation and Improvement Program.

The Program Analysis volume is divided into five chapters. The first chapter serves as an executive summary of the most important findings of the report. The second, Methodology: Data Collection and Analysis, discusses the spring data collection effort in detail. The last three chapters concentrate on the three major Home Start program dimensions:

- Home Start Families and Staff, which presents general characteristics of the projects, such as the stability of both staff and families, population characteristics and staff/family match in terms of ethnicity, age and educational background.
- The Program, which describes both Home Start staff time use and home visitor supervision.
- Services to Families, which examines the actual home visit and referral services provided for participant families.

While each chapter emphasizes the findings and issues presented in the Executive Summary, details also are given on the rationale for addressing these areas, the methodologies for collecting data and other related findings which give a more complete picture of the Home Start Program.

Background

In the Spring of 1972 fifteen Home Start projects began operation, and a sixteenth project began a year later. The primary focus of Home Start, as stated in the Home Start Guidelines, has been to "enhance the quality of children's lives by building upon existing family strengths and utilize parents as the major educators of their own children." To accomplish these goals, each project has been funded for about \$100,000 per year to provide Head Start type comprehensive services to approximately eighty families with at least one child between the ages of three and five.

In the most recent quarter Home Start served 1150 families and 1443 focal children. The average focal parent is 31 years old, has four children, has not graduated from high school, and does not work outside the home. A total of 179 staff members, of which 114 are home visitors, serve the 1150 families. The average project employs a director, seven or eight home visitors, and one to three specialists who assist home visitors in familiarizing participant parents with available community resources. A home visitor usually is older than the mothers she serves, is a mother herself, and has completed high school and some college. She is from the same community as the families she serves and is of the same ethnic background. Once a week she visits each of her families for nearly an hour and a half. The content of the visit is primarily child-oriented and includes both school readiness for the child and educating the parent about the child.

Previous Reports

From March 1972 to March 1973 projects were involved primarily in making the program operational; documentation of the initial planning and implementation stages is found in descriptive case studies written about each of the local projects (Interim Report I). The first Program Analysis volume (Interim Report II) showed that most projects had reached a satisfactory operational level. At that time, there was some concern that the number of tasks that the home visitors were expected to perform was not commensurate with their low salaries and limited training. It was also suggested that more systematic and concentrated approaches to soliciting community involvement be initiated.

During the second year, data collection and analysis focused on two implementation issues: the actual dynamics of the home visit and the spending patterns of projects. The analysis of home visits pointed out strengths in the child treatment and in the social atmosphere which was created. However, there was concern about the adequacy of the parent treatment. A major recommendation of Interim Report III was that

the national office seek to strengthen the home visit's focus on the parent as the primary educator of the child by providing technical assistance in training and supervision.

In Interim Report IV a marked increase was noted in the amount of parent involvement. The home visit was found to be adequate, provided that some Home Start activities were maintained by the parent between weekly visits.

This report continues to examine services to families as specified in the Home Start Guidelines. In addition project stability and success in matching staff with family are presented, as are staff time-use and home visitor supervision. The results of the summative evaluation and the cost-effectiveness analysis are reported in separate volumes.

EXECUTIVE SUMMARY

Introduction

Major findings about Home Start family and staff characteristics, the Home Start program and services to families are presented here for easy access by national program administrators. Following the finding in each section is a list of Future Issues which should be addressed in the next phase of the Home Start evaluations. The sections also include a review of the data sources which support the listed findings.

In order to provide a framework for reviewing the findings listed below, the relevant sections of the National Home Start Program Objectives are included here: They are:

- To involve parents directly in the educational development of their children;
- To help strengthen in parents their capacity for facilitating the general development of their own children;
- To demonstrate methods of delivering comprehensive Head Start type services to children and parents ... for whom a center-based operation is not feasible.

Home Start Families and Staff

Data used in identifying the following findings and future issues came from the Home Start Information System, the Home Visitor Background Questionnaire and the Parent Interview, which is a part of the Summative Measurement Battery. Information about programs was collected from all sixteen sites; the one-to-one home visitor/parent match data were obtained from the six summative sites only.

Major Findings

- Length of Program. At present Home Start is a program serving families for a one- rather than a two-year period. Over 60% of Home Start families left the program during the second

quarter of Year II, ending September 30, 1973. Only about one-fourth of the families who were in the program at the end of the quarter ending June 30, 1974 had been enrolled for over one year. As there are no recommendations in the National Home Start Guidelines about the length of family enrollment, local projects may be following the Head Start model to determine the length of family enrollment based on the availability of public kindergarten.

- Length of Program Year. Home Start projects on the average serve families for the duration of the school year, rather than a full twelve-month period. This is because (a) families want their children to be out of the program for the summer months; (b) Home Start staffs need to spend time recruiting new families; or (c) projects close down partially or completely during this period.
- Staff Size. Rural projects on the average have larger staffs than urban sites and serve a larger number of families. In addition to having more home visitors, rural sites also have more specialists. The home visitor case-load, however, is essentially the same in urban and rural communities.
- Staff/Family Ethnicity Match. The ethnicity match between home visitors and focal children is extremely high, although some projects could make minimal changes in the ethnic composition of their staffs as future staff attrition allows. This match is in accordance with the National Home Start Guidelines which specifically state that local staffs should be sensitive to the cultural ethnic backgrounds of participant families. Overall, about 40% of both Home Start families and staff are members of minority groups.
- Staff and Family Stability. Stability of staff employment is remarkably high for the local Home Start projects, while stability of family enrollment is relatively low. On the average about one fifth of the currently-enrolled families leave the program each quarter, while only one eighth of Home Start staff have left over the entire seven-quarter period.

Future Issues

- Determining Program Length. Since there are no National Guidelines relating to program length, Home Start may be viewed as a one-year program, a two-year program, or one which varies according to the availability of community kindergartens. Information needs to be collected regarding the availability of kindertarten programs in the Home Start communities to determine whether Home Start is following the Head Start guidelines for serving families for one- or two-year periods. An analysis of the summative data should be conducted to determine the impact that the project has on families during their second year of participation.
- Relationships Between Family and Staff Turnover. Family turnover patterns should be further studied to determine whether high staff turnover is in any way related to family turnover. An analysis also should be conducted to assess the impact of stable project leadership on both family enrollment and staff employment stability. Since family turnover is so high and staff turnover is relatively low, other factors may be crucial in families' decisions to leave the program. Staff turnover, however, may have a significant effect on family terminations.

The Program

This section describes the shape of the Home Start projects by defining how project staff members divide their work-weeks among various kinds of tasks. Information supporting the following findings and future issues was derived from the Director/Specialist Time-Use and Home Visitor Time-Use Questionnaires which were administered at all sixteen sites.

- Home Visitor - Family Contact. In-home contact between home visitors and families is the principal method by which children and parents are affected by the Home Start program. Home visitors spend about 20 hours a week in home visits, working with an average caseload of 12 families. They spend an additional eleven hours per week in family support activities such as home visit preparation, referrals, parent meetings and follow-up.
- In-Home Monitoring of Home Visitors. The sufficiency of the amount of in-home monitoring of home visitors has been a topic of major concern among national program administrators. Data indicate that on the average, directors and specialists

accompany each home visitor on a family visit once a month. In projects where in-home monitoring is less frequent, either because of small staff or an administrative decision, staff members spend more time helping home visitors prepare for their home visits either by discussing individual families or providing materials and ideas for the home visit.

- Training, In-Home Time Tradeoff. An increase in the amount of in-service training a home visitor receives results in a decrease in the amount of time spent in the home with families. It appears that the home visitor has a relatively fixed amount of time to spend on family contact and training and an increase in one takes time from the other.
- Specialist Time-Use. Because a specialist's job is less rigidly defined than that of a director or home visitor, there is interest in determining how specialists spend their time in general, and what effect their presence has on Home Start families in the project. On the average, specialists spend more time with families and less time on administration than do directors. However, because their jobs are so individual, there is wide variation in how much time specialists actually spend with families. Specialists in non-summative sites reported spending a higher proportion of their time in direct contact with families than those in summative sites.

Future Issues

- Types of Supervision. In response to general concerns about in-home monitoring of home visitors, an analysis of the various kinds of supervision staff members give home visitors should be performed. One alternative to in-home monitoring is having administrative staff provide extensive aid and discussion outside the home, as well as actual materials and curricula for the visit. Since this model is already used in some sites, it should be studied carefully.
- Impact of Less Training. Because of the trade-off discussed above between home visitor training and in-home contact time with families, the

impact of less training on the quality of the home visit and summative outcome data needs to be investigated. It may be possible to determine a range of time within the week in which training is most effective.

Services to Families

The following conclusions were obtained primarily from the Home Visit Observation instrument, which was completed in the summative sites for over a hundred home visits. The Home Start Information System, and the Record of Home Visit Activities are additional sources of information.

Major Findings

- Reinforcement of Home Start Activities. In interim Report IV, May 1974, it was reported that the Child Treatment was adequate "if one presumes that some of these activities recur in the home between weekly visits." Data collected this spring during home visit observations indicate that an effort is being made to encourage the parent to reinforce the home visit. During most home visits observed, there was some discussion of Home Start activities performed since the last visit and to be addressed before the next one.
- Home Visit Content. The content of home visits emphasizes the educational nature of the Home Start program. Although the home visit is primarily child-oriented, two of the most common content areas address the child's education from different points of view: school readiness for the child and educating the parent about the child.
- Home Visit Interactions. The two major interactions during a home visit are between the home visitor and focal parent and between the home visitor and the focal child. Each type of interaction takes place for about one-third of the visit. Concern has been voiced in earlier reports that home visits were too child-oriented and were not sufficiently involving the parent. The current findings, however, indicate that the home visitor interacts with the parent as much as with the child. In addition, the parent, child and home visitor are involved in three-way interactions for a significant portion of the time. When the home visitor and child are

interacting, the parent frequently observes the activity, a mode which is quite conducive to learning about the needs of the child.

- Nutrition. There is little emphasis on nutrition during the home visit. Only a very small portion of home visit time is devoted to discussing either parent or child nutrition.

Future Issues

- Effect of Home Visitor Background. Home visitor background has been analyzed to describe the overall profile of the home visitors and to provide home visitor/parent match data. This information should also be studied to find out if the background of the home visitor has any effect on the content emphasis or activity modes of the home visit.
- Effect of Family Time in Home Start. It is possible that the shape of the home visit changes as a family spends more time in the Home Start program. Family enrollment data should be combined with home visit observation data to determine what impact the length of time a family has been in the program has on the shape of the home visit. A similar study should be made of the length of time the home visitor has been with the family.
- Nutrition Education. As mentioned above, there is currently little emphasis during the home visit on nutrition issues. A more complete study should be done to discover how home visitors are attempting to help parents provide better nutrition for their families, what the successes and failings of these methods are and what alternative means might be provided to accomplish the goal of improving the nutrition practices of Home Start families.

METHODOLOGY: DATA COLLECTION AND ANALYSIS

In the spring of 1974 a major effort was undertaken to obtain the data needed for this volume. Included in this effort were the design of data collection instruments, the training of persons for site visits and instrument administration, the collection of data from sixteen Home Start projects, data reduction and a computerized analysis of the data using both statistical packages and custom-written programs. The major objectives of the data collection effort were:

- To obtain information about project changes in order to update the project case studies, with particular emphasis on project successes with families and problems the projects encountered during the past year. Case studies can be found in a separate volume of this report.
- To study selected program-wide implementation issues, such as project stability, family enrollment, staff organization, utilization of time by home visitors and other staff, supervision of home visitors, home visitor background and characteristics and match data about home visitor and focal parent age, educational background and ethnicity.
- To assess the adequacy of the Parent/Child treatment, both during the home visit, in terms of content, interactions and activities and between home visits, in terms of continued parental support of activities and utilization of community resources.
- To collect information about actual project expenditures for the past eight months (October through May), considering both U. S. Office of Child Development grants and levered resources. Information regarding costs are reported in the Cost Effectiveness Analysis volume.

Data Collection Instruments

Information for this volume was obtained primarily from four data collection instruments: the Home Visit

Observation Instrument, the Record of Home Visit Activities, the Home Visitor Background Questionnaire, and the Staff Time-Use Questionnaire. To collect information about the dynamics of the home visit, on-site personnel accompanied each home visitor in the six summative sites on visits with up to three randomly selected families. The observers recorded major characteristics of the visit, such as the person the home visitor interacted with most often, the activities conducted, the materials used, the content of activities and the duration of the visit. Information also was collected to determine whether parents conduct activities suggested by the home visitor with their children between home visits. Previous program analysis reports stated that the home visit treatment was adequate provided that the focal parent reinforced the Home Start activities between home visits. To verify the relative accuracy of the Home Visit Observation Data, home visitors were asked to keep records of home visit activities on three home visits to each family involved in the summative evaluation.

In the six summative sites, data on home visitor effectiveness also were collected to determine whether perceived effectiveness by supervisors had an effect on parent and child outcomes or changed the nature of the parent/child treatment in the home visit. An attempt also was made to link perceived effectiveness to such home visitor background characteristics as previous employment experience or educational background. Since no relationships were found among perceived effectiveness, home visitor background, parent and child outcomes or parent/child treatment, no data will be presented on this topic in the report.

In addition to the information collected during the site visits, data from the Home Start Information System also were used to describe changes in the overall program staff, families and services over cumulative three-month intervals. The Information System contains data on both summative and non-summative sites on a project level.

Figure II-1 shows the instruments that were used during the spring data collection effort. It states the general purpose of each instrument and indicates the sites in which the instrument was administered: summative, non-summative and Head Start. Copies of the instruments can be found in the volume entitled Program Analysis: Instruments. A brief discussion of data quality and problem areas with each of the instruments used during the spring is in Appendix A of this report.

FIGURE 11 - 1: SPRING 1974 DATA COLLECTION INSTRUMENTS

	Purpose	Quantitative	Qualitative	Head Start
<p>II. Case Study and Project Update</p> <p>A. Director Interview</p> <p>B. Home Visitor Followup Interviews (2)</p> <p>C. Parent Followup Interviews (2)</p>	<p>Narrative information regarding project changes, "exciting" project elements and efforts that are making a difference were obtained, using these instruments. The Director also identified and discussed two family success stories. Home Visitors then were asked to describe the success story. Parents also were interviewed about their involvement in Home Start and the project's impact.</p> <p>Data were used to update the project case studies.</p>	X	X	-
<p>III. Costs</p> <p>A. Actual Expenditures and Levered Resources</p>	<p>Instruments were designed to collect information regarding levered personnel and non-personnel resources, payroll data (including fringe benefits and travel allowance) and contractor/consultant services for the eight-month period Oct. through May.</p> <p>Data were collected in order to determine cost per focal child, focal parent, children (0-5 yrs.) and family for the entire program on the basis of OCD dollars and dollars levered in the community. The data also were used in an analysis of a line-item and functional budget for the program. Specific payroll information obtained were used to determine the cost of providing certain types of services to families.</p>	X	X	X
<p>Time Use Data</p> <p>1. Home Visitors</p> <p>2. Directors and Specialists</p>	<p>These questionnaires were used to determine how Home Visitors, Directors and Specialists spent their time during the last week (or period) and how they spend their time on the average.</p> <p>Data were used to determine the amount of time spent in direct services to families and in other indirect service areas.</p>	X	X	-
<p>Head Start Data</p>	<p>Head Start projects were interviewed regarding the project's annual budget, number of full- and part-time staff, number of children enrolled, average daily attendance, and other specific information regarding center operations. Data were used to determine the per-child cost in Head Start.</p>	-	-	X
<p>Home Visitor Effectiveness</p> <p>A. Interview(s) with Home Visitor Supervisor</p>	<p>The instrument was designed to obtain a ranking of Home Visitors in terms of their effectiveness in eight different areas. The data were analyzed to determine if perceived effectiveness had any impact on child and parent outcomes.</p>	X	-	-
<p>Home Visitor Background (self-administered)</p>	<p>Home Visitors provided information regarding their age, number and age of children, educational background, previous job experiences, socio-economic index, length of time with the project, and number of families served.</p> <p>Data were used in the demographics section of the report in analyzing Home Visitor Effectiveness, differences in family treatment patterns, variations in salaries and to determine the match between Home Visitor and family age, ethnicity, and education.</p>	X	X	-
<p>V. Record of Home Visit Activities (self-administered)</p>	<p>Records of Home Visit activities were completed on three visits to each of the Home Start test families. On the record, Home Visitors indicate the amount of time spent during the visit on five types of child activities and six parent activities. Home Visitors also recorded information regarding referrals, amount of preparation time for the visit, the extent of focal parent involvement, location of the visit, and if anyone accompanied the Home Visitor and for what purpose.</p> <p>The record was designed to obtain information regarding the time-use pattern for Home Visitors while they are in the home. These time-use data supplement Home Visit Observation Data and were used to study variations in family treatment, to determine the cost of delivering specific services, and to link in-home time-use patterns to child and family outcomes.</p>	X	-	-
<p>Home Visit Observation Instrument</p>	<p>A maximum of three families per Home Visitor were randomly selected to be observed on a regular home visit. The instrument was designed to determine major interaction patterns, the amount of time spent on various child and parent activities, and to produce evidence of home visit continuity. The instrument also provides data on the location of the visit, behavior patterns of the three major participants in the visit, planned activities and materials used. The data were used in analyses of time-use patterns, variations in treatment, cost of delivering specific services and to again link in-home time-use patterns to child and family outcomes, such as the same as the Record of Home Visit Activities.</p>	X	-	-

Site Visit Staff

Much of the data presented in this volume were collected during site visits to all sixteen Home Start projects. Included was information about:

- case studies
- actual project expenditures and levered resources
- staff time use
- Head Start
- home visitor effectiveness
- home visitor background

The site visits were conducted by twelve experienced field staff members, most of whom had previously visited Home Start projects. Nine were Abt Associates employees¹, and three were from the High/Scope Educational Research Foundation.² Field visits to summative sites lasted approximately 4-1/2 days while the non-summative site visits took only 3-1/2 days.

Training

Field staff were trained in the administration of the site visit instruments in a two-day training session which was held in Cambridge, Massachusetts. No training was provided for the Home Visitor Background Questionnaire and the Record of Home Visit Activities since both instruments were self-administered by home visitors. To ensure that the Record of Home Visit Activities was completed systematically in all six summative sites, Home Start Project Directors were asked to train their staffs, using materials prepared by Abt Associates, Inc.

Field staff also were not trained in the Home Visit Observation Instrument since the data were obtained by on-site community interviewers responsible for summative data collection. Home Visit Observation Instrument training was an integral part of a six-day training session for on-site community interviewers which was held in Clinton, Michigan. Approximately two days of training were devoted to the Instrument. Training techniques used included observation and scoring of video-taped home visits and rehearsed scenarios.

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Data Reduction and Analysis

Because of the magnitude of the data which were collected and the complexity of the computations which were made, the analysis required for this report could not have been performed without substantial computer support. Therefore, data from the instruments were coded at Abt Associates and were translated to a machine-readable format through keypunching. Both processes were carefully monitored to reduce the amount of error. Coding was spot-checked for accuracy throughout and all keypunching was verified. Two computer facilities were used to perform analysis: the CDC 6400 at the Smithsonian Astrophysical Observatory (SAO) in Cambridge, Massachusetts, and the IBM 360/67 at the University of Michigan. To compute the relative amounts of time spent from information recorded in the Home Visit Observation and Staff Time-Use Instruments, special programs were written using Fortran IV. In addition, many crosstabs, frequency counts and regressions were run using either the Statistical Package for the Social Sciences (SPSS) at SAO, or the Michigan Interactive Data Analysis System (MIDAS) at the University of Michigan. It should be noted, however, that even though the analyses are numerically accurate, the varied processes which are reported in this volume cannot be easily quantified. Hence, the figures which are presented should be interpreted as giving only a general description of the Home Start program, and not as a statistically accurate statement.

Terminology

In this report, project refers to the individual sites, while program refers to the National Home Start Program. Focal parent and focal child are those members of the enrolled family who participate in the home visit. Most often the focal parent is the mother who is at home and not working. While the family may contain several children, there is always one child who is the focus of the treatment and who is therefore considered the focal child. At times in this volume we have omitted the term focal and used just parent or child.

For referencing purposes, figure applies to those charts which are located within the body of the chapter; a figure usually appears directly after the page on which it is first mentioned. Tables are in a separate section located at the end of the volume.

III

HOME START FAMILIES AND STAFF

Introduction

The purpose of this chapter is to provide the reader with an overview of the size and shape of the Home Start Program so that subsequent chapters on the Program and Services to Families, as well as the Cost-Effectiveness Analysis volume can be placed in their proper context. The chapter has been divided into three sections:

- (1) Home Start Profile, which discusses family and focal child enrollment and staff employment. The purpose of these analyses is to assess the extent to which projects are meeting the National Home Start guidelines and to determine program stability in terms of family and staff turnover. This section also raises questions to be addressed in future analyses as to whether Home Start should be viewed as a one- or two-year program.
- (2) Focal Parent and Home Visitor Characteristics, which cites major differences in age, formal schooling, etc. and provides a context for the subsequent discussion regarding ethnicity and age match between the major service providers and the service recipients.
- (3) Match Data for Focal Parents and Home Visitors, which compares data on ethnicity to determine whether staff were recruited with a sensitivity to the cultural background and needs of participant families.

Information about focal parent characteristics and one-to-one match data are presented in this chapter for the six summative sites only. Whenever possible, a comparison is made between the summative and non-summative sites. The primary reason for this comparison is that the focal parent/family information used in these analyses was obtained only from a randomly selected number of families in the six summative sites and in some ways does not permit any generalizations to the National Home Start Program level. The non-summative data presented are based primarily on the Home Start Information System Reports which only provide an "overall" profile with no data on individual families or staff.

Data Sources

Information about home visitors and staff was obtained from the Quarterly Home Start Information System Report and from the Home Visitor Background Questionnaire which was completed by all home visitors. Focal parent data were obtained from the Quarterly Information System Report and the Parent Interview which is part of the Summative Measurement Battery.

Home Start Profile

Figure III-1, the "Home Start Profile At a Glance," presents information about the major participants for the entire Home Start Program: staff, home visitors, families and children. In the table, data from the most recent Home Start Information System reporting period (quarter ending June 30, 1974) are compared with data from the four previous quarters.

There is a high degree of stability in the sixteen programs. For all participants, the maximum difference in totals and averages is 23%. These differences can be attributed to an increase in family and focal child enrollment during the last two reporting periods of Year II (quarters ending 12/31/74 and 3/31/74). The maximum difference in the six summative sites was 25% and in non-summative projects 20%. Overall, the average number of focal children is higher for the six summative sites than for non-summative sites (93 vs. 77).¹

On the average, rural projects² serve a higher number of families (86 vs. 69) than urban projects and have larger staffs (13 vs. 9). The difference in staff size is primarily the result of the overall lower wages which are paid to home visitors in rural areas, enabling projects in these areas to hire additional specialist or administrative staff.³ It is interesting to note that although rural projects employ a slightly higher number of home visitors, the home visitor family caseload is essentially the same for urban and rural projects.

¹In the determination of the average number of focal children in the six summative sites, West Virginia data was excluded because of the unusually high number of focal children the project enrolls with support from a supplemental grant. At-A-Glance Profiles are presented for both Summative and Non-Summative sites in Tables III-1 and III-2.

²In the analysis of regional variation, the following project clusters were used. Urban: California, Kansas, and Ohio. Rural: Alabama, Arkansas, North Carolina, Tennessee, Texas-TMC, Utah and West Virginia. The remaining six projects cannot be considered truly urban or rural because they serve both urban and rural families or because they are atypical projects in other ways.

³See Figure IV-3 for the number and types of director/specialists employed by each of the projects.

Figure III-1

HOME START PROFILE Most Recent

Previous Quarters

AT-A-GLANCE SPRING 1974 16 SITES	Year III ¹ Quarter I (6/30/74)
# of Total Staff	179
Average	11.2
Range	7-15
# of Home Visitors	114
Average	7.3
Range	2-14
# of Families	1,150
Average	72
Range	38-135
# of Families/ Home Visitor	10.1
Range	6-20
# of Focal Children	1,443
Average	90
Range	51-206
# of Children (0-5)	2,220
Average	139
Range	60-206
# of Children (0-18)	3,381
Average	211
Range	131-585

Year II Quarter IV (3/31/74)	Year II Quarter III (12/31/73)	Year II Quarter II (9/30/73)	Year II ² Quarter I ³ (6/30/74)	Maximum Difference
189	189	185	176	7
11.8	11.8	11.6	12.6	11
8-17	9-16	8-18	6-17	
114	116	111	104	10
7.3	7.3	6.9	7.4	7
4-11	4-11	3-10	4-10	
1,274	1,232	1,106	1,042	18
80	77	69	74	11
58-143	51-149	26-157	47-98	
11.2	10.6	10.0	10.0	11
8-15	7-15	6-16	8-16	
1,639	1,502	1,330	1,265	23
102	94	83	90	19
62-256	53-234	27-222	48-143	
2,452	2,366	2,099	2,008	18
153	148	131	143	14
92-256	83-234	51-222	66-167	
3,599	3,473	3,077	2,952	18
225	217	192	211	14
143-731	146-651	138-411	160-429	

¹ No data reported for this Quarter from Texas-TMC and Arizona; data from previous Quarter used to avoid

² No data reported for this Quarter from Texas-TMC; data from previous Quarter used to avoid serious distortion.

³ Data for California not included in this Quarter.

14

23

24



● Project Enrollment¹

Figure III-2 presents the enrollment of both families and focal children for the sixteen Home Start programs. Four projects had reached or exceeded the enrollment requirement of 80 families at the end of the last quarterly reporting period. Five sites had an enrollment ranging from 66 to 77 families, while Nevada and Houston, Texas show the lowest enrollment figures with less than 50 families. Massachusetts, North Carolina and Alaska previously received special permission to serve fewer than 80 families. One project, Alaska, doubled enrollment since the last report.

There was a 12% decrease in the number of families enrolled in the program since the last quarterly reporting period. The major reason for this drop in family enrollment was that a large percentage of focal children left the Home Start program at the end of May or in early June prior to entering kindergarten or first grade in September, 1974. This suggests that the Home Start program year is parallel to the regular school year and serves families for less than twelve months. Many projects use the summer months for recruiting new families, while a few curtail program operations or close down completely during this period.

As indicated above, one of the major reasons for families leaving the project was that the focal child reached kindergarten or first grade age. This was especially true in Houston, Texas with almost half of the families leaving for this reason and in Nevada which reported that 18% of the focal children were ready for kindergarten or first grade. A substantial increase in family enrollment is expected during the quarter ending September 30, 1974, unless projects are planning to serve fewer families in anticipation of the conclusion of the Home Start Demonstration Program in June of 1975.

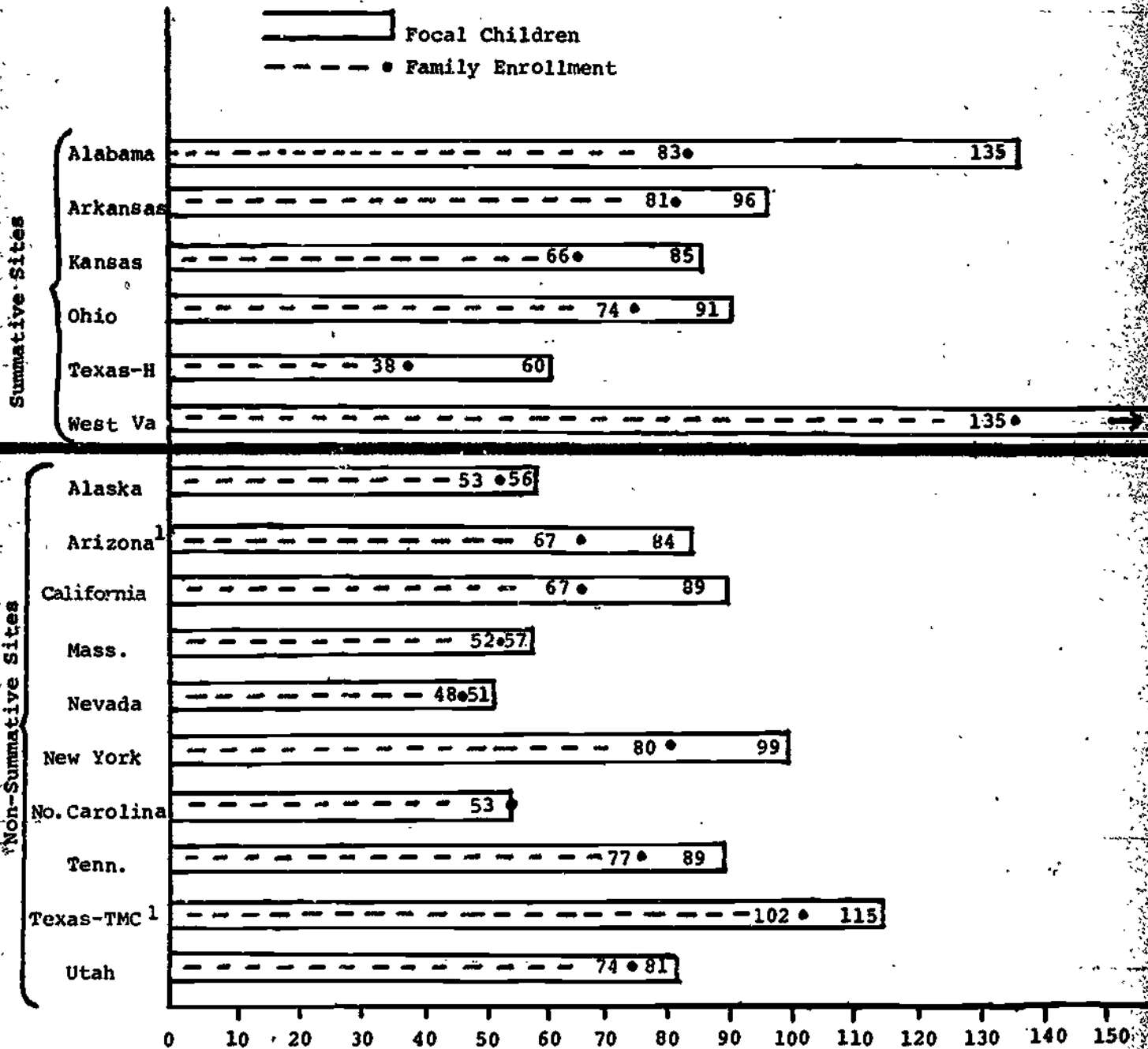
As Table III-3 (second column from the right) shows, family turnover is highest during the second quarter of the Home Start program year (July 1 through September 30). During this period, 65% of the families enrolled in urban projects and 60% of the rural families left the program. In only three projects, family turnover totaled less than 50%; three had a turnover of from 50 to 59%; seven from 60 to 69%; and two projects from 70 to 82%. This suggests that Home Start is currently a program serving families for a one- rather than a two-year period. The finding is supported by data reported in the Information System which show that about one fourth of the families enrolled at the end of the quarter ending June 30, 1974 had been program participants for over one year. The range among projects is between 8% and 55%. It should be noted, however, that of all families who left the

¹Arizona and Texas-TMC are not included in this discussion because of insufficient data.

FIGURE III-2

FAMILY AND FOCAL CHILD ENROLLMENT

Quarter Ending June 30, 1974



¹ Figures presented here were reported for previous quarter.

project during the quarter ending June 30 (182)¹, 39% had been enrolled in the project from 15 months to 2 years.

An examination of the National Home Start Guidelines shows that the National Office did not specify to local projects whether families were to be served for a one- or two year period. Those ten projects which were not involved in the summative evaluation are presumed to have followed the Head Start model for family enrollment.² Head Start projects serve families for either a one- or a two-year period depending on the presence (and availability) of public kindergarten projects in those communities. Although no information is presently available on the presence of public kindergarten projects in the sixteen Home Start locations, this issue will be studied further in subsequent reports to determine whether projects located in communities with no kindergarten tend to serve families for longer periods of time.

● Program Stability

As Figure III-1 shows, the overall program profile has remained relatively stable over the last five quarters. Stability of family enrollment and staff employment varied considerably, however, from project to project. The following discussion focuses on these two issues in more detail.

● Family Turnover

An analysis of previous information system reports for Quarter III of Year I through Quarter I of Year III, covering the period 12/31/72 through 6/30/74, shows that an average of 13 families or 18% of the total number of families served, leave each of the projects every quarter.³

Although the quarterly turnover rate is the same for rural and urban projects (12), urban projects terminate a higher percentage of their families (19% vs. 15% in rural sites). This is the result of an overall higher average enrollment in rural sites. Family turnover in summative and non-summative sites differs only slightly (18% vs. 19%). An analysis also will be conducted to determine the impact the program has on summative families during the second year as compared with the first year they were program participants.

¹Arizona and Texas-TMC data were not included here since no quarterly reports were received on time for these two projects.

²The six summative projects were not able to follow these recruiting guidelines because of the evaluation design which specified the amount of time families had to be enrolled in the project.

³The number of families that left the Texas-TMC project were not included in this analysis because of insufficient data.

Major reasons why families leave the project as reported in the quarterly Information System reports are: (1) child entering kindergarten or first grade (31%), (2) moving from service area (25%), and (3) other (23%). Other reasons noted were: parent was dissatisfied with the project or disinterested (11%); parent became employed or increased income above Home Start guidelines (8%); and family illness (1%). The percent distributions for the termination categories are approximately the same for urban and rural projects.

Family turnover in each of the Home Start projects is presented in Table III-3, which shows the average number of families that left the program each quarter and the percent of families that left the program calculated from total family enrollment. Also shown is an adjusted turnover figure which averages family turnover for all quarters except the second quarter of year II, in which most of the turnover occurs. The adjusted turnover figures indicate what happens in an average quarter during the school year. The last two columns on the right hand side of the page present the turnover figures for Quarter II, Year II and the adjusted quarterly range.

● Staff Terminations

In contrast with the findings presented in the previous section, Home Start projects are remarkably stable in terms of staff employment, with overall staff turnover for fifteen projects¹ totaling only 12%, or an average of 9 for each project over the seven-quarter period. Rural sites show a slightly higher staff turnover than urban sites (13% as compared with 12%), and on the average, terminate more staff members since the staff is larger. Staff turnover for each of the Home Start projects is presented in Table III-4.

Focal Parent and Home Visitor Characteristics

Presented here are brief profiles of the program recipients, the focal parents, and the major service providers, the home visitors. The profile data are followed by a discussion about the educational background of focal parents and home visitors. The information is presented to provide a context for subsequent discussions regarding ethnicity.

¹No information included for Texas-TMC because of insufficient data.

²Data was obtained from the High/Scope Educational Research Foundation Parent Interview collected in the Spring of 1974.

● Focal Parent

In the spring of 1974, 192 focal parents were interviewed at the six summative sites. It was determined that the average focal parent is 31 years old, has four children, and has completed tenth grade. Only one quarter of the parents had completed high school, 1% had completed exactly one year in college and 2% had completed two or more years in college. About one of every five focal parents were working at the time they were interviewed. No important differences in family characteristics were found between urban and rural sites or between summative and non-summative projects.

● The Home Visitor¹

The "average" home visitor is a 34 year old female and has been with the Home Start project for 17 months. She serves an average of 12 families who are visited once a week. The home visitor caseloads range from 8 in West Virginia to 15 in Arizona.

Two thirds of the home visitors were employed prior to joining the Home Start project, primarily holding jobs in some way related to their work as home visitors. Although only 12% had a position working with children before they became home visitors, 80% have a family of their own. About one fourth of the home visitors have children between the ages of 0 and 5. As is shown in Figure III-3, the Home Visitor Profile, 6% of the home visitors worked with parents as Parent Coordinators for such programs as Head Start, or as Welfare or Social Service Aides. Another 15% worked in positions related to health and nutrition.

The average home visitor had completed high school and spent some time in college. Only 14% did not complete high school; 6% are college graduates; and another 6% hold graduate degrees. At the time of the interview almost half of the home visitors were continuing their education by attending classes or courses which were not part of the Home Start in-service training program. This is in response to the National Home Start Guidelines which encourage local projects to provide career development opportunities for staff in terms of training and upward mobility.

¹A total of 111 home visitors completed the Background Questionnaire, or 97% of the total number of home visitors employed in the program on June 30, 1974.

FIGURE 111 - 3

HOME VISITOR PROFILE

	ALABAMA	ALASKA	ARIZONA	ARKANSAS	CALIFORNIA	KANSAS	MASSACHUSETTS	NEVADA	NEW YORK	NORTH CAROLINA	OHIO	TENNESSEE	TEXAS-DAKOTA	TEXAS-TNC	UTAH	WEST VIRGINIA	TOTAL
TOTAL # of HOME VISITORS INTERVIEWED	6	4	8	8	6	5	6	7	7	7	5	5	6	9	7	15	111
Average Age of Home Visitors	27 (22-35)	30 (24-42)	27 (21-39)	48 (25-55)	32 (23-44)	35 (23-46)	41 (28-57)	39 (30-58)	40 (23-58)	34 (22-41)	42 (34-55)	31 (26-36)	29 (24-37)	23 (18-34)	38 (22-48)	35 (19-59)	34 (27-48)
% of Home Visitors with Children	66.7%	100%	75%	100%	66.7%	80%	83.3%	100%	71.4%	100%	100%	100%	83.3%	11.1%	85.7%	60%	80%
Average # Home Visitor's Own Children	2	3	2	2.5	3	4.5	3	4	5	2	5	2	3	1	5	4	3
% of Home Visitors with Children 0-3 years	50%	75%	50%	0	17%	20%	0	43%	0	29%	40%	0	67%	11%	14%	20%	27%
Average Length of Time with the Project	17 mos. (07-24)	11 mos. (04-22)	22 mos. (04-39)	22 mos. (02-30)	14 mos. (10-17)	21 mos. (12-28)	23 mos. (02-30)	14 mos. (08-22)	09 mos. (06-16)	15 mos. (08-26)	24 mos. (11-28)	18 mos. (11-27)	12 mos. (03-22)	17 mos. (02-26)	19 mos. (06-27)	19 mos. (01-40)	17 mos. (09-24)
Average # of Hours Worked Last Week	41 (40-44)	41 (40-45)	40	42 (40-53)	40	40	40 (38-35)	41 (40-46)	35	40	40	38 (20-50)	40	43 (40-45)	44 (34-55)	43 (40-50)	41 (35-44)
Average # of Families in Home Visitor Caseload	13 (06-19)	11 (05-17)	18 (15-20)	10 (08-11)	12 (11-15)	13 (08-16)	9 (02-11)	10 (09-12)	11 (09-13)	12 (09-13)	11 (10-12)	15 (14-16)	11 (09-12)	10 (05-12)	10 (06-12)	8 (06-12)	12 (08-18)
Average # of Home Visits Made Last Week	13 (06-18)	6 (03-09)	8 (04-19)	10 (07-12)	11 (10-13)	9 (04-11)	7 (05-09)	8 (05-13)	11 (09-12)	11 (08-13)	10 (08-12)	16 (12-19)	16 (10-24)	14 (06-24)	10 (06-13)	9 (06-12)	11 (06-16)
EDUCATIONAL BACKGROUND																	
% of Home Visitors with Some High School	0	2	1	0	0	1	0	1	1	0	2	0	2	1	0	4	15.4 (13.9%)
% of Home Visitors who Completed High School	1	1	6	1	0	1	3	2	2	7	2	1	3	3	1	6	38.4 (34.6)
% of Home Visitors with Some College	4	1	1	7	3	3	0	4	2	0	1	4	1	5	4	4	44.6 (40.2%)
% of Home Visitors with College Degree	1	0	0	0	2	0	0	0	2	0	0	0	0	0	1	0	6.4 (5.8%)
% of Home Visitors with Post Graduate Degree	0	0	0	0	1	0	3	0	0	0	0	0	0	0	1	1	6.1 (5.5%)
% of Home Visitors Taking Courses	1	2	4	4	5	0	0	6	3	7	2	2	0	8	5	1	30.3 (27.4%)
PREVIOUS EMPLOYMENT																	
% of Home Visitors who were Previously Employed	3	3	4	8	3	3	6	3	4	4	5	3	5	5	4	12	74.8 (67.4%)
% of Home Visitors who were Teachers	0	0	1	1	0	1	0	0	0	0	0	0	0	0	1	2	5 (4.5%)
% of Home Visitors who Worked with Children as Aides, Babysitters, etc.	1	0	1	1	0	0	0	0	0	2	1	0	1	3	2	4	13.5 (12.2%)
% of Home Visitors who Worked with Parents as Social Service Aides, Parent Coordinators, etc.	0	0	0	3	0	1	0	0	0	0	1	0	1	0	0	1	6.9 (6.3%)
% of Home Visitors who Worked in Health Field	0	0	1	2	2	0	2	1	0	0	1	0	1	0	0	0	10.7 (9.7%)
% of Home Visitors who Worked in Nutrition Field	1	1	0	0	0	1	0	0	0	1	0	0	0	0	0	1	5.7 (5.2%)
% of Home Visitors who Worked in Another Job Related to Home Start	0	0	0	1	0	0	1	1	0	0	0	0	0	1	0	1	4.2 (3.8%)
% of Home Visitors who Worked in a Job Unrelated to Home Start	1	2	1	0	1	0	3	1	4	1	2	3	2	1	1	4	28.9 (26.1%)

Most of the percentages do not sum to 100% for such categories as educational background and previous employment. This is the result of a high incidence of missing data for some of these categories.

FIGURE III-4

HOME VISITOR/PARENT EDUCATION PROFILE

6 Summative Sites Spring 1974

Sites	% of Families Served by Home Visitor with:		
	Higher Education	Same Education Background	Lower Education
Alabama	12%	88%	--
Arkansas	0%	97%	3%
Kansas	7%	78%	15%
Ohio	19%	65%	15%
Texas-Houston	19%	62%	19%
W. Virginia	<u>21%</u>	<u>71%</u>	<u>8%</u>
TOTAL:	13%	77%	10%

● Home Visitor/Focal Parent Education

Figure III-4 shows that, as anticipated, most home visitors received more educational training than focal parents. While a number of home visitors have backgrounds similar to those of the families they serve, overall they received more training than focal parents, both in terms of formal schooling and courses provided as part of the pre- and in-service training and career development programs. 77% of the families are served by home visitors who have received more education than the focal parent while only 10% of the families are served by less-educated home visitors. Table III-5, which shows an overall education profile for the entire program, supports the findings that home visitors are generally more educated than the families they serve.

Home Visitor/Focal Parent Match

● Ethnicity

The National Home Start Guidelines specifically state that local staffs should be sensitive to the cultural background and needs of participant families. To determine the extent to which local projects are trying to achieve a cultural/ethnic match between home visitors and families, three types of ethnic match data are presented here. Figure III-5 shows the ethnicity profile of focal children and staff (including both home visitors and other staff) for the entire Home Start program. This is followed by a discussion of match data on a project-by-project basis using family-staff ratio figures regarding ethnicity. The information presented in Figure III-6 is based on the Home Start Information System report for the quarter ending June 30, 1974. To confirm the project by project ethnic match findings, one-to-one match data are presented for home visitors and families who were involved in the summative evaluation. The one-to-one match data provide only limited information about the six summative projects.¹ The figures presented in this section are based on the ethnicity of focal children, which is assumed to be the same as the focal parent.

Figure III-5 shows the ethnicity of focal children and staff for the entire Home Start program. 41% of the focal children and 37% of the staff are members of minority groups.²

¹ Ethnic data was obtained only for families involved in the summative evaluation. A random sample of families were selected for participation, excluding most Spanish surname families who did not speak sufficient English to participate in the summative evaluation.

² Ethnic data presented here includes data from previous quarterly Information System reports for Arizona and Texas-TMC.

FIGURE III-5

ETHNICITY FOCAL CHILDREN-STAFF

ALL SIXTEEN PROJECT

6/30 1974

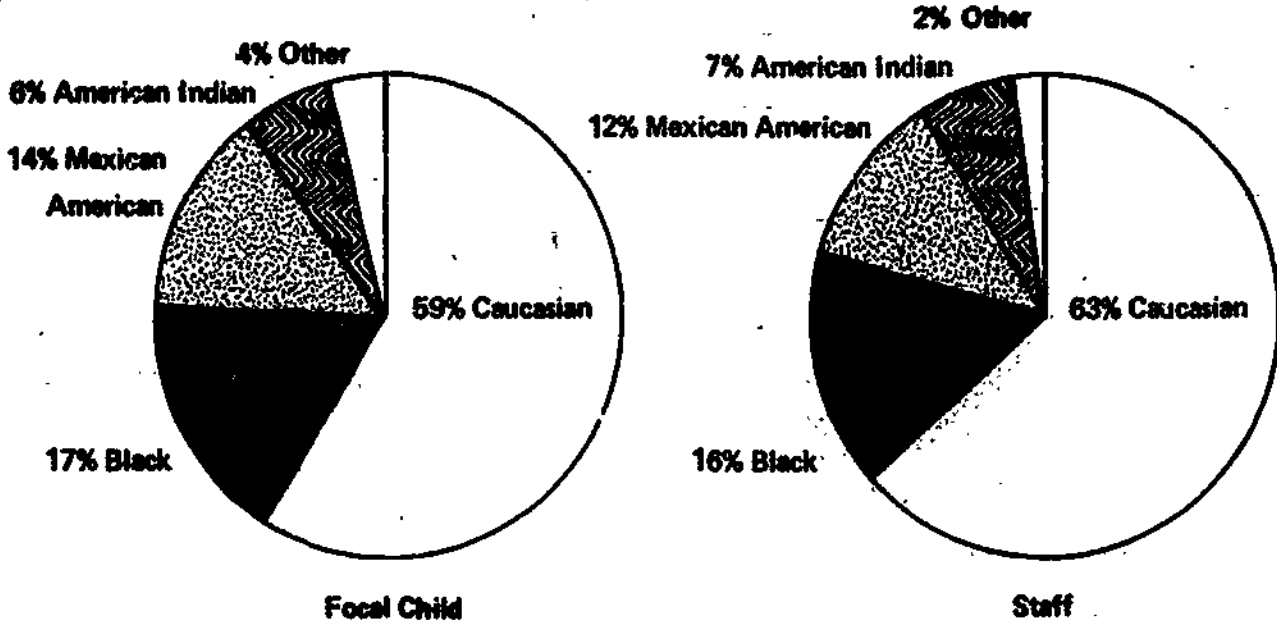


Figure III-6 shows ethnic match data for the summative and non-summative sites. Match data on a project-by-project basis are presented in Table III-6 to illustrate the extent to which the National Home Start program and local projects are sensitive to the cultural backgrounds of the families they serve. Match data are based on the quarterly Home Start Information System and were computed as follows. The first two columns show the child enrollment and the total staff as of 6/30 1974. The third column, staff "match", is calculated by multiplying the number of children in each ethnic group by the staff/focal child ratio and rounding off to the nearest whole number (since any adjustments would require changing one or more staff members). The boxed number in the fourth column is the absolute change that would be required to achieve a match.

In the summative sites a change in the ethnic composition of six staff members (11%) would produce a perfect one-to-one match. Five of the sixteen Home Start projects show a perfect match in terms of the ethnic composition of staff and families. It should be noted, however, that three of the five projects serve families of one ethnicity only.

FIGURE III-6

STAFF/FOCAL CHILD ETHNIC MATCH:
SUMMATIVE VS. NON-SUMMATIVE SITES

6/30 1974

	<u>Focal Children</u>	<u>Staff Current</u>	<u>"Match"</u>	<u>Staff Change to Match</u>
<u>Six Summative Sites</u>				
Subtotal:				
Cauc.	410	40	39	+1
Black	201	23	21	+2
Mex-Amer.	43	5	7	-2
Puerto Rican	17	1	2	-1
Amer. Ind.	1	0	0	-1
Other	1	0	0	0
	<u>673</u>	<u>69</u>	<u>69</u>	<u>6</u>
<u>Ten Non-Summative Sites</u>				
Subtotal:				
Cauc.	443	72	68	+4
Black	40	5	4	+1
Alaskan	20	2	3	-1
Amer. Ind.	88	12	12	-1
Mex-Amer.	152	16	20	0
Polynesian	9	1	1	-4
Oriental	7	2	1	-1
Other	11	0	1	-1
	<u>770</u>	<u>110</u>	<u>110</u>	<u>12</u>
Total:				
Cauc.	853	112	107	+5
Black	241	28	25	+3
Mex-Amer.	195	21	27	-6
Amer. Ind.	89	12	12	0
Alaskan	20	2	3	-1
Puerto Rican	17	1	2	-1
Polynesian	9	1	1	0
Oriental	7	2	1	-1
Other	12	0	1	-1
	<u>1,443</u>	<u>179</u>	<u>179</u>	<u>18</u>

While project directors might consider changing the overall ethnic composition of their staffs when replacing current staff or hiring additional staff, there are several factors which constrain projects from achieving a perfect ethnic match between staff and families based on family-staff ratios.

- (1) The primary reason for an imbalance in ethnic match is that home visitors are assigned to serve enrolled families in a certain geographic area. Since families are recruited on the basis of need, rather than ethnicity, an ethnic imbalance is likely to occur unless home visitors start serving families scattered throughout the area. This would be impractical because of the transportation costs involved and the increased time required for transportation. The amount of direct services to families then would be decreased and meaningful parent involvement in the project would be more difficult.
- (2) The relatively high turnover of families in each of the local Home Start projects should also be considered. A perfect match during one quarter may change completely as new families are recruited.

Since the Information System data present only a partially accurate picture of ethnic match, information will be collected during subsequent site visits about the ethnicity of all families in each home visitor caseload.

This information will be used to determine whether the home visitor has the same ethnic background as the majority of the families she serves. This is suggested as an appropriate guideline for staff/family ethnic match.

Figure III-7 presents the one-to-one match between home visitors and focal children in the six summative sites. Also shown is the percentage of Caucasian families served by a minority home visitor and the percentage of minority focal children who are visited by a Caucasian or other minority home visitor. On the right-hand side of the graph, an ethnicity profile for the six sites is presented for home visitors and focal children who were involved in the summative evaluation only.

There is a high ethnic match (85%) between home visitors and summative focal children in the six summative projects, ranging from 61% to 100%. Kansas shows the lowest one-to-one match of all six projects, although the overall ethnic profile of all focal parents and home visitors is fairly balanced. The primary reasons for this match imbalance were pointed out in previous discussions.

Figure III-7

HOME VISITORS/FOCAL CHILDREN ETHNIC MATCH

6 Summative Sites Spring 1974

Site	% One-to-One Match	Caucasian Families Served by Minority H.V.	Minority Families Served by Caucasian H.V.	Minority Families Served by Other Minority H.V.	ETHNIC PROFILE							
					Caucasian		Black		Mexican American		Other	
					Foc. Child.	H.V.	Foc. Child.	H.V.	Foc. Child.	H.V.	Foc. Child.	H.V.
Alabama	75%	3%	22%	--	50%	69%	50%	31%	--	--	--	--
Arkansas	90%	10%	--	--	97%	87%	3%	13%	--	--	--	--
Kansas	61%	25%	14%	--	50%	39%	46%	54%	4%	7%	--	--
Ohio	97%	--	--	3%	25%	25%	69%	72%	3%	3%	3%	--
Texas - Houston	85%	--	--	15%	--	--	56%	70%	44%	30%	--	--
W. Virginia	100%	--	--	--	100%	100%	--	--	--	--	--	--
Average	85%	6%	6%	3%	56%	56%	36%	38%	7%	6%	1%	--

¹ The ethnic profile presented here for focal children is not representative of all the children served by these projects. This is primarily caused by the elimination of Spanish-surname families who do not speak sufficient English to enable them to participate in the summative evaluation.

In general the ethnic match is extremely good for home visitors and focal children throughout the Home Start program. In fact, Home Start shows as much or more sensitivity to the cultural/ethnic backgrounds and needs of families as other human service programs in the country.

Summary of Findings

A summary of the major findings and issues for future study that have been identified in this chapter are presented here:

- Only one-fourth of the Home Start projects are meeting the enrollment requirement of 80 families. This is primarily the result of a large number of families leaving the program during the quarter ending June 30 because the focal child was entering kindergarten or first grade in the fall. An increase in family enrollment is expected during subsequent quarters.
- Home Start projects on the average serve families for the duration of the school year, rather than a full twelve-month period. This is because (a) families want their children to be out of the program for the summer months; (b) Home Start staffs need to spend time recruiting new families; or (c) projects close down partially or completely during this period.
- Data show that Home Start is a program serving families for a one- rather than a two-year period. Only about one-fourth of the families who left the program during the quarter ending June 30 had been in the program for over a year. This may be the result of local projects following the Head Start model for determining the length of family enrollment based on the availability of public kindergarten in those communities.
- Stability of staff employment is remarkably high for the local Home Start projects, while stability of family enrollment is low.

- Rural projects on the average have larger staffs than those in urban sites and serve a larger number of families. The home visitor caseload, however, is essentially the same in urban and rural communities.
- The ethnicity match between home visitors and focal children is extremely high, although some programs could make slight changes in the ethnic composition of their staffs as future staff attrition allowed.
- The educational profile of home visitors and focal parents shows that home visitors received more training - only a small percent of the families are served by home visitors with less education than the focal parent.

Future Issues

- Information needs to be collected regarding the availability of kindergarten programs in the HOME Start communities to determine whether Home Start is following the Head Start guidelines for serving families for one- or two-year periods. An analysis of the summative data also should be conducted to determine the impact that the project has on families during their second year of participation.
- Family turnover patterns should be studied further to determine whether high staff turnover is in any way related to family turnover. An analysis also should be conducted to assess the impact of stable project leadership on both family enrollment and staff employment stability.
- Additional data regarding the ethnic match of home visitors and families in their caseload need to be collected to determine the extent to which projects are achieving ethnic match.
- An analysis should be conducted to determine whether younger home visitors have a different impact on families than those who are older or the same age as focal parents.

IV

THE PROGRAM

Introduction

This chapter is concerned primarily with the average weekly time use reported by the project director, specialists and home visitors. In each case, a general picture of how the staff members spend their time is presented, followed by a discussion of variations at the site or individual level. The discussion will focus on the following aspects of staff time use:

- Who takes the major responsibility for administration of the project?
- What effect does the number of staff members have on time-use patterns?
- What is the impact of specialists on the direct services provided to families?
- What is the impact of specialists on the home visits in their projects?
- How much in-home monitoring of home visitors are staff members providing and are other types of home visitor supervision being substituted?
- What is the effect of increased home visitor training on the amount of time home visitors spend with families?

Staff Time Use: Preliminaries

Before presenting the findings of the time use data analysis, it is important to point out certain problems which exist with the data collection.

Staff members were asked to record the number of hours in their average work week, as well as the number of hours they spent per week on various tasks such as financial planning, parent meetings, etc. The sum of the time spent on tasks seldom equalled the number of hours in an average work week. One reason for this discrepancy is the difficulty inherent in self-estimates of time spent on job tasks - especially when no week is really "typical." Another reason for the discrepancy is that some

tasks occur not weekly, but monthly, or even during one concentrated period during the year (such as recruitment). In order to obtain a complete picture of how staff members spend their time, the hours spent on these tasks was divided by the appropriate number of weeks and considered on a weekly basis.

The figures presented in this section include both the number of hours in an average work-week and the total of all time spent on job tasks. Percentages were calculated on the basis of the total task time, rather than the work-week time.

Project staff have been divided into three main groups - directors, specialists, and home visitors. The director group also includes assistant directors; specialists include nutritionists, nurses, and other health workers, education specialists, home visitor supervisors, psychologists and social service coordinators.

Director Time-Use: Overall Profile

The function of the director as administrator becomes clear when director time-use is viewed at the Home Start level. Directors on the average spend close to half their time on administrative duties, which include financial planning, enrolling families, public relations, obtaining donated resources, etc. In addition, there are two categories, family support and staff training, on which each of the directors spends close to 20% of the time. Training staff includes both preparation for and attendance at staff training sessions; family support includes aiding home visitors in planning home visits, referrals, parent meetings and driving time to meetings and referrals. About half of the time spent in family support is used to help home visitors prepare home visits. In-home contact and staff supervision each account for only about 5% of the directors' time.

Table IV-1 (page 85) shows the average percentage distribution of time across these five categories for all 16 sites, including separate averages for summative and non-summative sites, as well as overall averages. Also included are hours worked per week as reported in the Time-Use Questionnaire and hours per week as calculated by summing the five time-use categories. Figure IV-1 shows graphically the average time percentage distribution contained in the last line of Table IV-1.

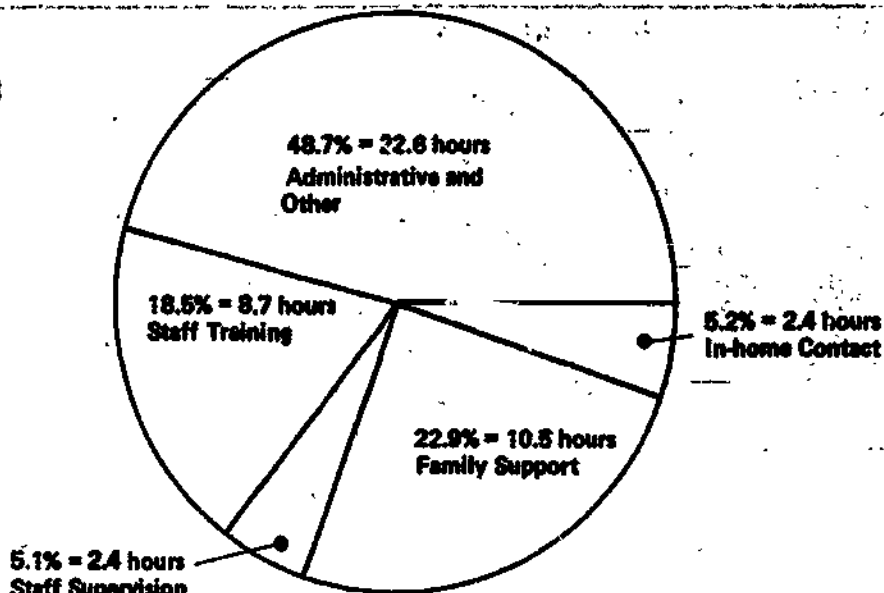
Specialist Time-Use: Overall Profile

The overall profile of a specialist's week differs from that of a director primarily in two of the five time-use categories. In-home contact takes up considerably more time, accounting for 16% of a specialist's time, on the average. The extra time spent working directly with families comes primarily from the administrative category, which decreases from about half for

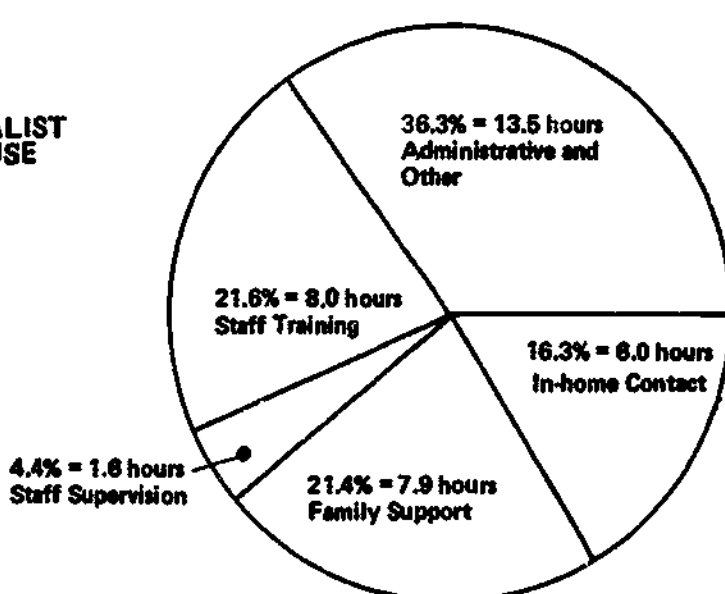
FIGURE IV-1

TIME-USE/DIRECTORS AND SPECIALISTS

**DIRECTOR
TIME-USE**



**SPECIALIST
TIME-USE**



DEFINITION OF CATEGORIES

- Administration and Other:** Enrollment, finance, public relations, obtaining levered resources preparing evaluations, planning and attending conferences
- In-home Contact:** Direct services to families
- Family Support:** Helping home visitors prepare visits, referrals, meetings with parents driving families to referrals or meetings
- Staff Supervision:** Accompanying home visitors on visits to supervise
- Staff Training:** Preparing and attending staff training sessions

directors to just over a third for specialists. This heavier emphasis on direct service to families is expected from specialists, who have specific skills and knowledge in areas such as health, nutrition and education which can be directly imparted to the participant families. Although the percentage of time spent on family support (referrals, parent meetings, helping home visitors prepare visits) by directors and specialists is comparable, specialists spend fewer hours working with home visitors to prepare home visits and more on referrals and parent meetings.

Table IV-2 shows specialists' time-use across sites in the same format as Table IV-1 for directors. Figure IV-1 contains pie-charts of both director and specialist time-use overall and illustrates the similarities and differences in how these two classes of staff use their time.

While approximately six hours per week are spent in direct family contact, many specialists spend a larger portion of their time performing tasks which make the home visitors more effective in their contact with families. This includes such jobs as researching, ordering and organizing materials for home visitors to take with them, maintaining resource files, developing educational curricula and preparing materials for staff training meetings. In addition, specialists often spend a considerable amount of time making referrals and keeping and reviewing records of the Home Start families and children.

Director Time-Use: Variations Across Sites

There is a wide range among sites in percentage of time spent in two categories: administration and family support; all other categories are fairly constant across sites. The percentage of directors' time spent in administration is highest in Alabama (over 60%) and lowest in Kansas (25%). Family support occupies almost no time in Texas-Houston but takes up over half of the director's time in Kansas. Figure IV-2, which lists the sites in descending order according to time spent on administration and ascending order according to time spent on family support, suggests that a decrease in administrative time usually corresponds to an increase in family support time. In all sites above the horizontal line, directors spend more than half their time on administration and less than one quarter of their time on family support. Below the line the situation is reversed. The number of directors per site also is included in the table.

Some of these variations can be accounted for by the number of staff members employed at each site. In both Texas-TMC and Kansas, where administrative time is lowest and family

FIGURE IV - 2

PERCENT OF TIME SPENT
ON ADMINISTRATION AND FAMILY SUPPORT

In Descending Order of % Time Spent on Administration			In Ascending Order of % Time Spent on Family Support	
Site	% Adminis. & Other	Number of Directors	Site	% Family Support
Alabama	65.0	1	Texas (Houston)	3.4
Ohio	62.0	2	Arkansas	5.4
Texas (Houston)	60.8	1	Arizona	8.0
North Carolina	60.0	1	North Carolina	8.2
Tennessee	59.4	1	Ohio	17.3
Arkansas	56.0	2	Tennessee	18.8
New York	55.8	2	Alabama	20.0
Arizona	52.8	1	New York	23.3
West Virginia	47.2	2	California	27.2
Utah	42.8	1	Texas TMC	27.2
California	42.2	2	West Virginia	27.3
Alaska	41.3	3	Massachusetts	27.6
Massachusetts	41.1	1	Utah	30.3
Nevada	36.6	2	Nevada	31.1
Texas TMC	33.2	1	Alaska	33.9
Kansas	23.3	1	Kansas	56.2

support time comparatively high (especially Kansas, where it is over 50%), there is only one staff member -- a director -- who must perform all the administrative duties. In both sites, the director apparently decides to spend less time in administration and more in more family-oriented activities -- family support or in-home contact.

Specialist Time-Use: Variations Across Sites

Twelve of the sixteen sites have at least one staff member who is a specialist in some field such as nutrition, health or education. The number of specialists per site ranges from none (4 sites) to 6 (Arkansas). The most common type of specialist is a medical person, usually a nurse; 8 of the 16 sites employ such a specialist. Seven sites have either an educational specialist or educational aide, while three have nutritionists. Figure IV-3 shows the presence of different types of specialists by site.

Note that of the three urban sites -- California, Kansas, and Ohio -- only California has a specialist. Except for Texas-TMC and West Virginia, rural sites have two or more specialists -- ranging as high as five in Utah and six in Arkansas.

Some of the specialists did not spend a full work-week on Home Start, and many were shared with Head Start. Table IV-3 lists the number of hours each specialist reported working per week, as well as a site total of "specialist hours" and a site total of "director and specialist hours." Arkansas, as well as having the highest number of specialists, has the greatest number of specialist hours -- 146 per week -- and the largest number of director and specialist hours -- 221 per week. The lowest number of director/specialist staff hours is in Kansas, with 40 per week; the effect of this on the director's time-use was discussed above.

There is more variability in the specialists' time-use than in that of the directors. Time spent on in-home contact, for example, varied from almost none in Arkansas (also the site with the most specialists) to one-third in North Carolina; percentage of time spent on administration ranged from half in Arkansas to under a fifth in Alaska. These variations do not seem to be correlated with the number of specialists, the number of specialist hours or the total number of staff hours.

The presence or absence of particular specialists seems to have no impact on the content of the home visit, as reported in the Record of Home Visit Activities. For example, of the six summative sites, Kansas is highest in percentage of time spent on health and nutrition (both parent and child) and has no specialists at all. Alabama and Arkansas, which follow closely behind, both employ nutritionists and Arkansas also has

FIGURE IV-3

PRESENCE AND TYPES OF SPECIALISTS BY SITE

<u>Summative Sites</u>	<u>Dir.</u>	<u>Educ.</u>	<u>Educ. Aide</u>	<u>Health</u>	<u>Nutrition</u>	<u>H.V. Super.</u>	<u>Soc. Ser.</u>	<u>Psych.</u>	<u>Total Spec.</u>
Alabama	1		2		1				3
Arkansas	2	2		1	1	2			6
Kansas	1								0
Ohio	2	1							1
Texas (Houston)	1			1			2		3
West Virginia	2			1					1
<u>Non-Summative Sites</u>									
Alaska	3		1	2					3
Arizona	1					2			2
California	2								0
Massachusetts	1						1		1
Nevada	2	1		1			1		3
New York	2								0
North Carolina	1			1			1		2
Tennessee	1	1	1	1					3
Texas (TMC)	1								0
Utah	1	1		1	1		1	1	5

35

47

48

a health specialist. Educational specialists similarly appear to have no consistent impact on time spent on educational areas such as school readiness and teaching the parent to educate the child.

There is a significant difference in specialist time-use between summative and non-summative sites. In an effort to ascertain how much specialists were actually providing families with concrete information and aid, time spent on in-home contact, making referrals and driving families to referral appointments were combined. This category showed much heavier use in non-summative sites than in summative sites: in non-summative sites, specialists spent about a third of their time on the average on family service compared to half that (about 1/6) in summative sites. Some of this extra time apparently came from staff supervision, which was generally lower in non-summative sites. Figure IV-4 shows direct family service time for specialists in all sites.

Of all Home Start jobs, the position of specialist is most individual, since each specialist has different responsibilities. For example, one educational specialist spends no time in direct contact with families and almost none with home visitors. Her time is spent primarily in curriculum design. On the other hand, one health specialist spends over half her time in direct contact with families and another sixth making referrals; an educational aide spends half her time working directly with families. Still other specialists -- especially home visitor supervisors -- reach families by helping home visitors prepare their home visits for over a quarter of their time. Because of these wide variations, no generalizations about specialists can be made even at the site level.

Monitoring of Home Visits

An issue which has been of special concern to the national program director in the Office of Child Development has been lack of evidence that regular supervision in the home is being provided for home visitors. The Director/Specialist Time Use Questionnaire provided specific self-report information regarding: (1) the amount of time per week directors or specialists normally spend accompanying home visitors to the home for purposes of supervision, and (2) the number of home visitors that were supervised each week. In both summative and non-summative projects, Directors/Specialists report that the average home visitor is supervised once a month. These figures are based on the total number of Home Visitors that are supervised weekly. No information was obtained to determine whether the amount of supervision provided differed significantly from home visitor to home visitor. It might, for example, be possible that home visitors who recently joined the Home Start project staff receive more frequent supervision than others who have been with the project for longer periods of time.

FIGURE IV-4

SPECIALIST TIME USE - WEEKLY BASIS
 "DIRECT FAMILY SERVICE TIME"
 Direct Contact + Referral Time + Referral Drive Time.

16 Sites Summative	Hours per Week	Percent of Total
Alabama	9.7	23
Arkansas	1.4	5
Kansas	- -	- -
Ohio	4.3	11
Texas-Houston	8.6	19
West Virginia	4.9	16
Average Summative Site	5.8	15
Non-Summative		
Alaska	10.2	42
Arizona	8.1	15
California	- -	- -
Massachusetts	10	28
Nevada	4.2	18
New York	- -	- -
North Carolina	29.6	49
Tennessee	11.4	28
Texas TMC	- -	- -
Utah	4.8	24
Average Non-Summative	11.2	29
All Sites Average	8.9	23

There is wide variation in the amount of supervision provided at each of the fifteen projects.¹ Figure IV-5 shows the frequency of supervision of each home visitor reported by the fifteen projects. The column on the far right of the figure shows a wide variation in the total amount of time that is spent weekly by all staff on supervision.

Data obtained from the Record of Home Visit Activities, which was completed by home visitors following visits to families involved in the summative evaluation, indicate overall agreement with these findings. In fact, in five of the projects home visitors report they are accompanied more frequently on home visits than Director/Specialists indicate. No accurate information is available, from the Record, however, to show how frequently home visitors were accompanied on the home visit for supervision purposes. Home visitors in Houston, Texas reported that they had not been accompanied at all on any of the visits (68) on which Records of Home Visit Activities were completed, while Director/Specialists indicate that supervision is being provided once a month. This discrepancy is easily explained by the fact that Home Visit Activity Records were only obtained for a sample of home visits, and the data, therefore, may give a slightly distorted picture of the situation if the home visits recorded were atypical.

In-home monitoring of home visits is only one way in which staff can supervise home visitors. Another is to help them prepare materials for their home visits or discuss the family situation. In Kansas, where home visitors are accompanied on home visits for supervision purposes only once a year, the director spends over half of her time providing such aid to home visitors. In Arkansas, Arizona and Tennessee, on the other hand, where in-home monitoring is most frequent, relatively little time is spent helping home visitors prepare visits -- less than three hours a week per project staff member. Future analysis will consider further the various modes of supervision.

Home Visitor Time Use Profile

The home visitors in each of the sixteen projects are the major providers of services to families, with the home visit being the primary service delivery mechanism. In addition to providing in-home services, home visitors are a major link between the family and agencies in the community which provide a variety of family services. Other services which the home visitor provides include transportation for families to and from both parent meetings and appointments.

¹Alaska data were not included in this analysis because it was not clear from staff responses whether or not they accompanied home visitors for supervision purposes.

FIGURE IV. - 5
MONITORING OF HOME VISITORS¹

Project	Once a Week	Twice a Month	Once a Month	Every Two Months	Twice a Year	Once a Year	Reported # of Hours per week spent on supervision
ALABAMA			X				2
ARKANSAS	X						24
KANSAS ²						X	-
OHIO		X					7
TEXAS-HOUSTON			X				10
WEST VIRGINIA				X			3
ARIZONA	X						16
CALIFORNIA					X		0.25
MASSACHUSETTS					X		1
NEVADA		X					2
NEW YORK		X					1
NORTH CAROLINA ³				X			2
TENNESSEE	X						11
TEXAS-TMC			X				4
UTAH			X				2
TOTAL PROGRAM	3	3	4	2	2	1	8

¹A number of the Directors and Specialists interviewed indicated that they would like to increase the amount of Home Visitor supervision. No data is included here for Alaska because it was not clear from staff responses whether or not they accompanied the home visitors for supervision purposes.

²Home Visitors in Kansas are supervised on a yearly basis. The low amount of supervision provided is primarily the result of a recent change in directorship and the total lack of other administrative or specialist staff associated with the program. Texas-TMC is the only other project with only one administrative staff member.

³This number is based only on time data from the director. Two specialists on the project also report spending large amounts of time accompanying home visitors, but it is not clear if this is for supervision or not, so the times are not included. If, in fact, the specialists are monitoring home visitors, the supervision rate would be twice a week.

Presented in this section is a general profile of how home visitors spend their time. For analysis purposes, the home visitor week is divided into five major task areas: travel, in-home, family support, training and other activities. In addition to showing the time distributions for those major task areas, some findings are reported here on specific home visitor activities.

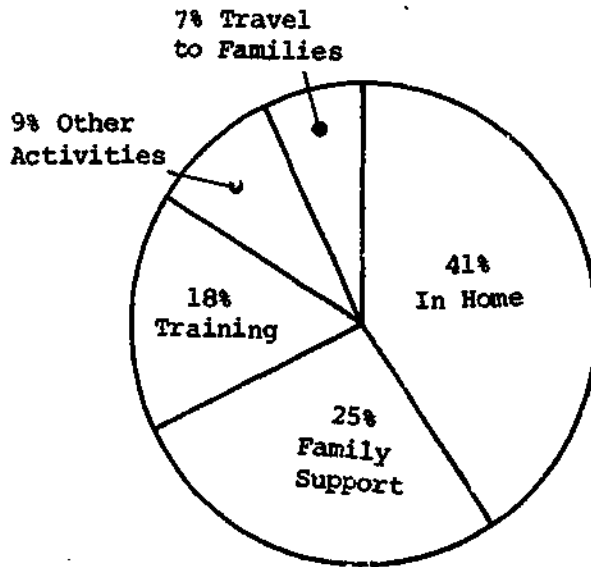
Since so much of the home visitor's time is spent in the home with families (41%), a more detailed profile of in-home time is presented in Chapter V: The Home Visit, which shows how the home visitor allocates her time among a number of specific parent and child content areas.

The Time Use data show that home visitors report that their work week averages 45 hours, ranging from 35 hours in Alaska to 56 hours in Tennessee. The average time per week worked as reported in the Home Visitor Background Questionnaire is slightly lower (by 4 hours) than that reported in the Time Use data. In the six summative sites for which Time Use Data is available on all home visitors, the difference amounts to only one hour.

The pie graph in Figure IV-6 shows how Home Visitors on the average spend their time in the five major task areas. Home Visitor Time Use profiles for each of the sixteen projects are presented in Table IV-4.

FIGURE IV-6

HOME VISITOR TIME USE



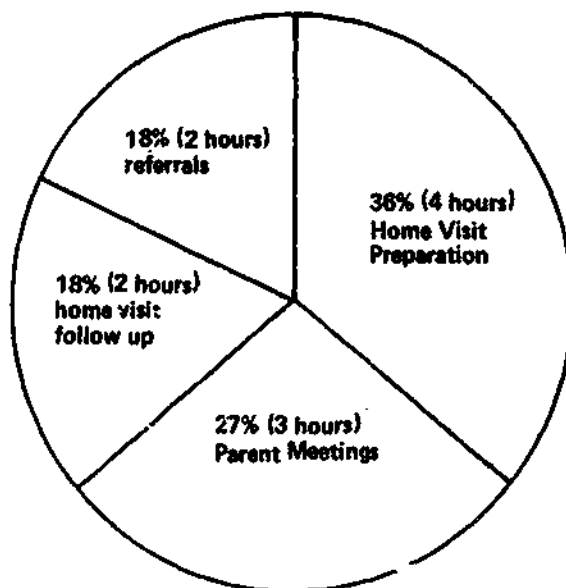
Time spent with Families in the home	41%	19 hours
Time spent in Family Support Services, such as home visit preparation time, time spent on referrals, follow-up, parent meetings, and driving families to meetings and referrals	25%	11 hours
Time spent in Training, including driving time to and from training conferences	18%	8 hours
Time spent on Other Activities, including the recruitment of families, public relations, volunteer recruitment and training, and time spent obtaining in-kind or leveraged resources for the project	9%	4 hours
Time spent on Travel to and from the homes of families	7%	3 hours
	<u>100%</u>	<u>45 hours</u>

Home Visitors report that their caseload consists of 12 families and that they make an average of 11 home visits per week, indicating that each week one family per home visitor was not visited. In general when a home visit was missed, the family was not at home or had other commitments at the time the home visit was scheduled.

An average of 19 hours is spent weekly by each home visitor on home visits, or 1.6 hours per family. Table IV-5 shows the average hours spent per week in the home and the average number of hours spent per family for each of the sixteen projects. An additional 11 hours per week is spent providing support services to all of the families. Time spent on specific family support activities is presented in Figure IV-7.

FIGURE IV-7

FAMILY SUPPORT SERVICES



Home visit preparation time consists primarily of planning activities and obtaining or preparing materials for the home visit. Included in the category "Parent Meetings" is all time spent by home visitors arranging and/or attending parent meetings and time spent providing transportation for families to facilitate their attendance. Follow-up time with families consists of time spent in between visits to remind the family about meetings and/or appointments or to check back with families regarding specific items introduced during the home visit. Referral time includes the time spent making arrangements with service agencies and providing transportation to and from appointments.

Variations Among Sites

The overall profile of the home visitor's week does not differ for urban and rural sites. The time use profile is the same for all five task areas, including travel.¹ In the six summative sites, home visitors on the average spend slightly more time with families than in non-summative sites although the difference is not significant.

There is a strong relationship between the percentage of time spent on in-home family services and the percentage of time spent on staff training. As the in-home services time increases, the time spent on staff training decreases proportionately. In subsequent Evaluation Reports, an attempt will be made to determine whether a decrease in the amount of staff training provided has an impact on the quality of the home visit and whether it affects summative evaluation child and parent outcomes.

Summary of Findings

This chapter has presented both overall profiles and individual variations in time-use for directors, specialists and home visitors. The following emerge as important points:

- Home visitors spend about 20 hours a week working with an average caseload of 12 families. They spend an additional eleven hours per week in family support activities such as home visit preparation, referrals, parent meetings and follow-up.
- An increase in the amount of in-service training a home visitor receives results in a decrease in amount of time spent in the home with families. It appears the home visitor has a relatively fixed amount of time to spend on family contact and training and an increase in one takes time from the other.
- Directors and specialists accompany home visitors on family visits for supervision once a month, on the average. In projects where in-home monitoring is less frequent, either because of small staff or administrator's decision, staff members spend more time helping home visitors prepare for their home visits either by discussing individual families or providing materials and ideas for the home visit.

¹It had been anticipated that home visitors in rural projects would spend a greater portion of their time on travel than those in urban projects.

- Although directors are the prime administrators of Home Start programs, specialists also take on a large administrative load.
- The administrative staff have at least minimal -- and in many cases considerable -- direct contact with families. When only one director/specialist staff member is present in an entire project, she/he assumes greater responsibility for family support activities, thus decreasing the percentage of time spent on administration.
- On the average, specialists spend more time with families than do directors. However, because the jobs are so individual, there is wide variation in how much time specialists actually spend with families.
- Specialists in non-summative sites reported spending a higher proportion of their time in direct contact with families than those in summative sites.
- Rural sites employ more specialists and administrative staff, on the average, than urban sites.
- The presence of specialists appears to have no effect on the content of home visits in the project.

Future Issues

- Specialist Time Use Data need to be reconsidered to determine if specialists are performing administrative tasks which could better be done by directors, leaving them free to spend more time on issues related directly to their specialty.
- An analysis should be conducted of the various ways in which staff members supervise home visitors to determine the effects of different combinations of in-home monitoring and aid in preparing home visits.
- The impact of less training on the quality of the home visit and summative outcome data needs to be investigated to determine a range of time per week in which training is most effective.

SERVICES TO FAMILIES

Introduction

The Home Start program is designed to demonstrate alternative ways of providing Head Start type comprehensive services to families that either cannot or do not want a center based pre-school program. The primary objective of Home Start is to involve parents directly in the educational and general development of their children through the home visit, a regularly scheduled period during which a trained home visitor meets in the home with both the focal parent and the focal child. By meeting with the family on a regular basis, the home visitor is able not only to help the parent in becoming a better educator of and provider for the child, but also to identify those community resources which the family might utilize and to assist the family in obtaining the requisite services.

This section of the report examines the home visit in order to answer two basic questions:

- What happens during the average home visit in terms of
 - Interactions between the home visitor, the focal parent, and the focal child
 - Parent and child content areas which are emphasized during the visit (school readiness, health and nutrition, etc.)
 - Activity modes which take place (tells, does, listens, ignores, etc.)
 - Tone of the home visit (alert, confident, defensive, etc.)
- What services are provided to families as a result of the home visit?

A detailed analysis of the home visit process is presented first. Information about special services which are provided outside the home visit then is reported. Finally, some general conclusions about Home Start program support of services are made.

Data Sources

Data on home visit interactions, activities, and content were obtained from the Home Visit Observation Instrument, which

F

was recorded for 110 families in the six summative sites by trained observers who accompanied home visitors on visits with those families. The reliability of the observers had been tested during the course of data collection (see Appendix B), and the observers had previously visited the families to become generally acquainted. When the home visitor was asked "Do you think my being along on this visit affected the way you, the parent, or the child behaved?", 81% responded "no". In addition, estimates of time spent in nine primary child and parent content areas were made in the Record of Home Visit Activities by home visitors following three successive visits with each summative family. Figure V-1 illustrates the correspondence of results from both data sources; the primary difference between the two instruments is that observers reported a greater emphasis on school readiness and less emphasis on health and nutrition than did home visitors.¹ The overall patterns, however, are quite similar and suggest that both methods of data collection are accurate for the purposes of describing the major "shape" and content of a home visit.

It should be noted that the description of the home visit which was presented in Interim Report IV was based on the frequency of interaction patterns, content areas and activity modes. For this report observers noted the length of each activity recorded during the home visit. This time then was assigned to the interaction patterns, modes and contents of activities, thus giving a more accurate picture of the dynamics of the home visit.

Information on referrals which were initiated during the home visit was reported for the six summative sites in both the Record of Home Visit Activities and the Home Visit Observation Instrument; data on referrals initiated and accomplished at all 16 sites were obtained from the Home Start Information System. Additional information about project support of referral service delivery is available from the Home Visitor and Director/Specialist Time Use Questionnaires, which record the typical weekly schedule of each staff member, including time spent both on referrals and on in-home services.

The Home Visit

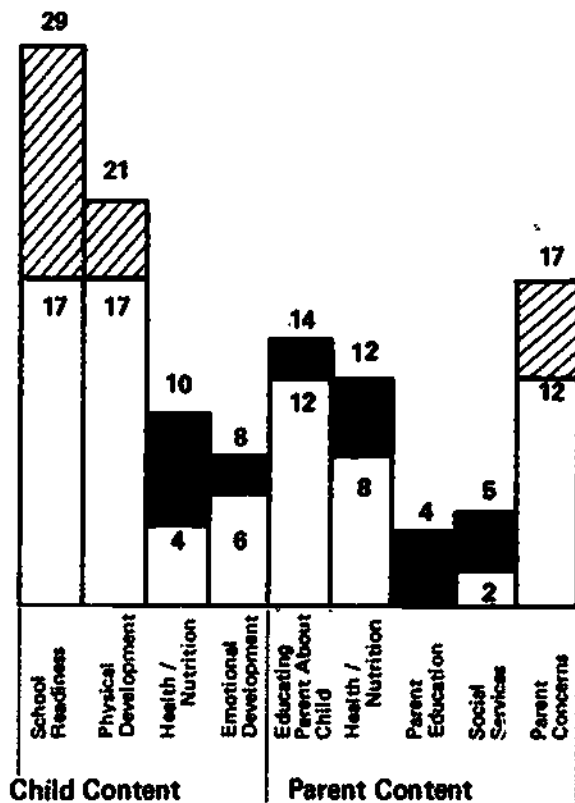
Preliminary Concepts


The following description of the home visit reports general findings at the Home Start national program level and at the local site level for each of the six summative sites. Basic interaction patterns, content areas and activity modes are described first and are followed by a description of participant attitudes and behavior. The data then are examined


¹It is reasonable to suggest that because the home visit observers are also summative testers, home visitors probably do spend more time on school readiness when observed.

FIGURE V-1

HOME VISIT CONTENT AREAS
(Average for Six Summative Sites)



 % Greater on Home Visit Observation

 % Greater on Record of Home Visit

to determine the overall dynamics of the home visit: who is doing what, with whom, and why. In addition, to preserve the richness of variation between home visitors, major findings about interaction patterns and content of home visits are included for each home visitor in Tables V-12 to V-18.

During the home visit numerous combinations of activity, content and participants are possible. To simplify the description of a home visit, four child and five parent content areas have been identified:

- Child Content

- School readiness, including basic concepts, language, music, knowledge about the environment, and some fine motor skills
- Physical development, including gross motor and fine motor skills
- Health and nutrition
- Social-emotional development

- Parent Content

- Educating the parent about the needs of the child
- Health and nutrition
- General parent education
- Social services, including employment, legal services and welfare
- Parental concerns, including socializing and interpersonal problems

In addition, four interaction patterns and five activity modes are reported:

- Interactions

- Home visitor with focal child
- Home visitor with focal parent
- Focal parent with focal child
- Home visitor with focal parent and focal child

● Activities

- Involved activities (telling, explaining, showing, doing, praising, blaming)
- School-oriented activities (reading, singing)
- Inquisitive activities (asking)
- Passive activities (listens, watches)
- Uninvolved activities (ignoring)

An example of the Home Visit Observation Instrument, from which these data were obtained, is shown in the volume Program Analysis: Instruments (page 126).

The Typical Visit

Most home visits occur once a week and last nearly an hour and a half. During this time observers recorded nearly ten activities which, on the average, lasted for seven minutes. The discrepancy between the visit length as reported by home visitors both in the Record of Home Visit Activity (83 min.) and to the observer (87 min.) and the total length of observed activity time (67 min.) suggests that nearly 20 minutes are spent arriving for and departing from the visit.

Before arriving at the home, the home visitor usually had spent nearly half an hour preparing for the visit, and in over three quarters of the activities which took place during the visit, the home visitor had brought child activity materials with her. In over half the visits the home visitor recorded that the parent participated all of the time while in the remaining visits the parent participated half or some of the time. When asked why various content areas were being presented during the visit, the home visitor indicated primarily two reasons for addressing child content areas:

- the child likes to do it; e.g., he wants to learn his colors
- the child needs to do it; e.g., he has trouble with his colors and needs to learn these things for school.

The parent content areas, however, were not addressed for any special reason. In order to estimate the extent to which parents continue to educate the child between home visits, the observers recorded any mention of activities done since the last visit and of activities to be undertaken before the next visit. The results suggest that home visitors emphasize continuing home visit activities. In 60% of the visits observed, there was reference to things the mother had done since the last visit, and in nearly 90% of the visits there was a discussion of things to be done before the next visit.

Interaction Patterns

The interaction patterns which occur between home visit participants can be viewed in two ways:

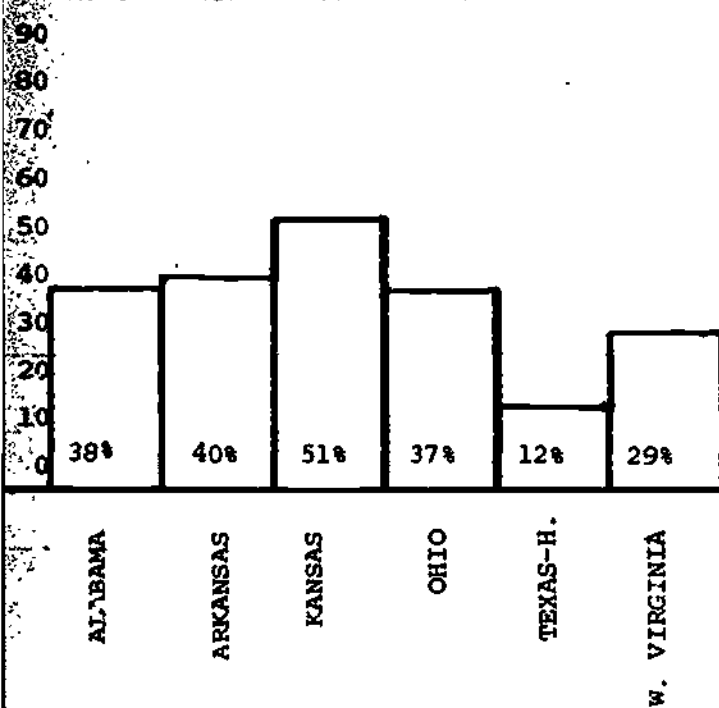
- Person-to-person (home visitor with focal parents, etc.)
- Dominant/non-dominant (home visitor in charge, etc.)

Figure V-2 illustrates the four primary person-to-person interactions which were observed between home visit participants in the six summative sites. The home visitor-focal parent and home visitor-focal child interactions each occurred for about one-third of the home visit time, and the focal parent-focal child interaction occurred less than 20% of the time. The pattern differs only in Texas-Houston, where the focal parent-focal child interaction took place far more often than the home visitor-focal parent interaction. The fact that the home visitor divides her time equally between the focal parent and the focal child replicates the results reported in Interim Report IV, which noted that home visitor-focal parent and home visitor-focal child interactions occurred with the same frequency. This suggests that, as recommended in the Home Start Guidelines, home visitors continue to focus on the parent as well as on the child.

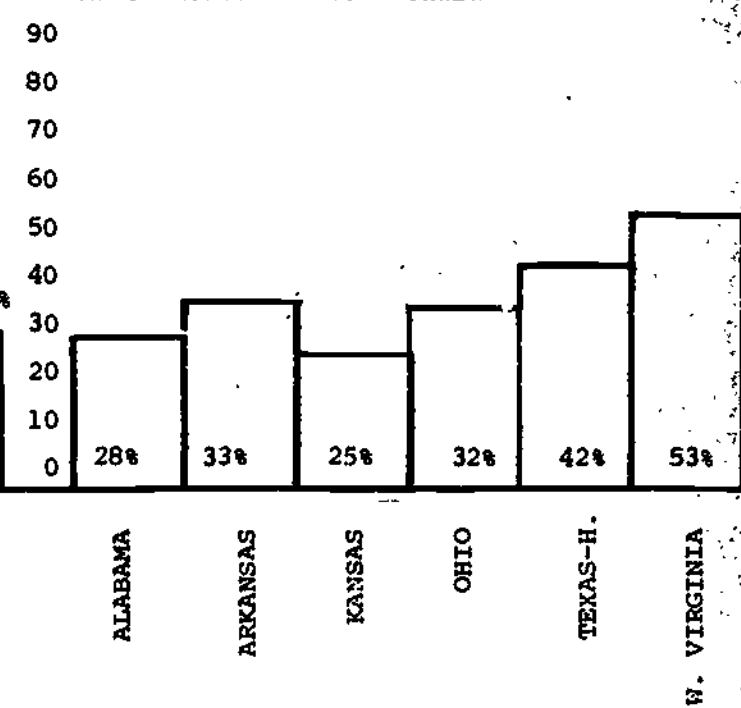
Figure V-3 shows dominance patterns for each of the summative sites. In four of the sites--Alabama, Arkansas, Ohio and West Virginia-- the home visitor is dominant more than half the time. In Kansas, however, all three participants are equally dominant, and in Texas-Houston the focal child is dominant more than any other person. The fact that the focal parent is less likely to be dominant does not imply that she is less involved in the home visit, but rather that she is less apt to take charge of an activity during the visit.

FIGURE V-2

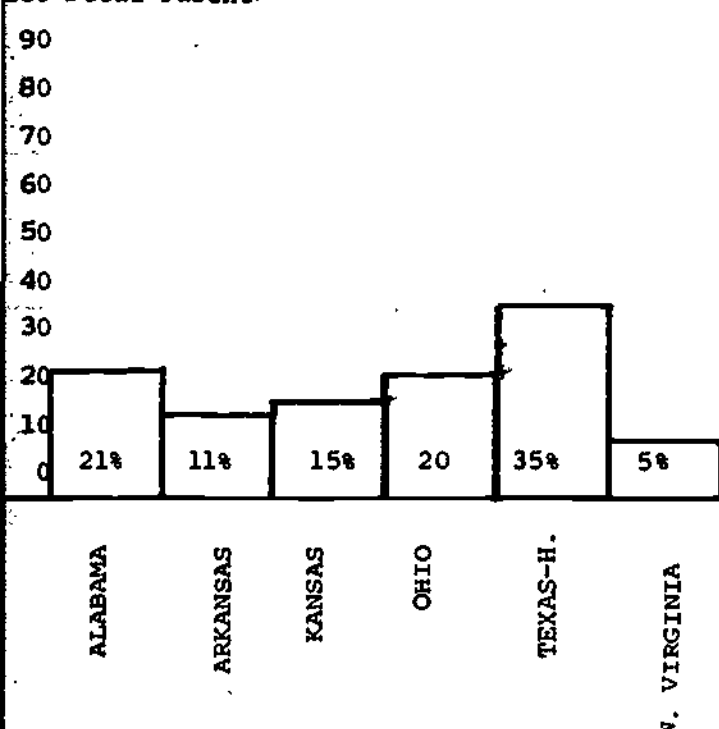
100 Home Visitor- Focal Parent



100 Home Visitor - Focal Child



100 Focal Parent- Focal Child



100 Home Visitor- Focal Parent - Focal Child

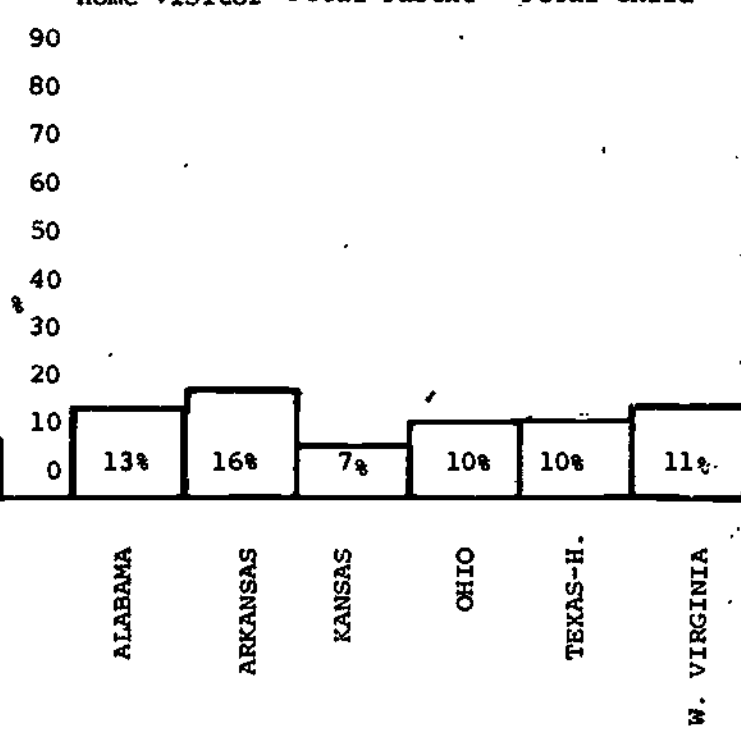
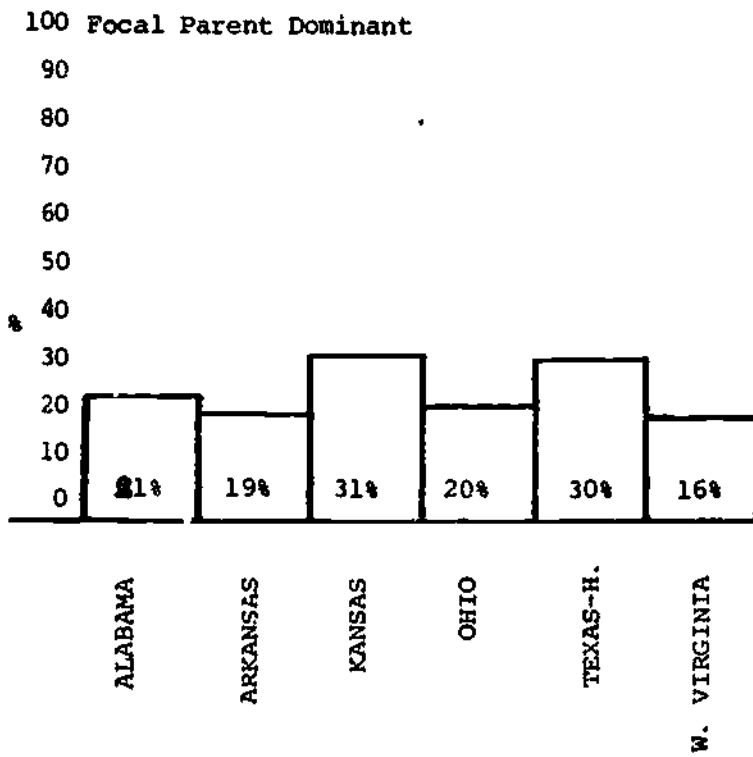
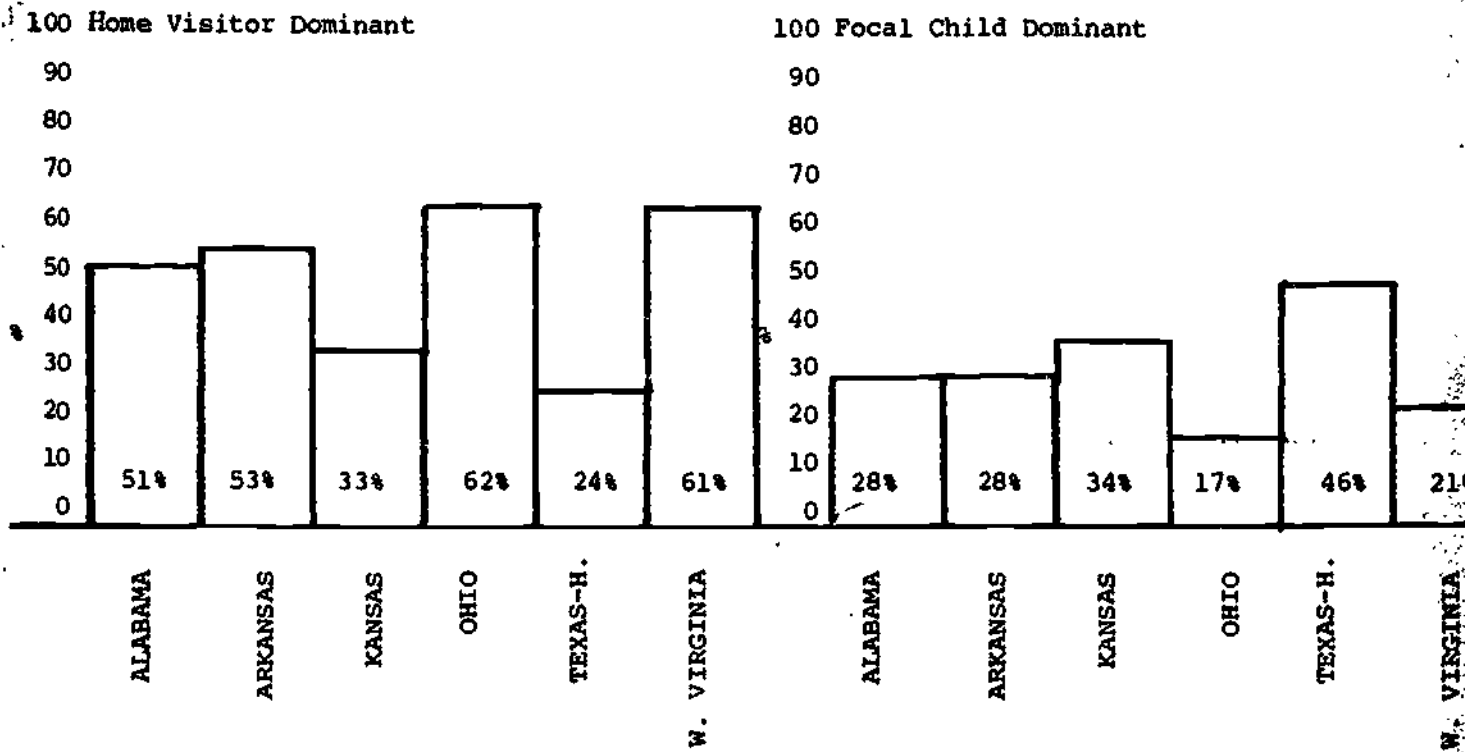


FIGURE V-3



65

52

Content of the Home Visit

Both the home visitor and the observer recorded information about time spent in various content areas in the six summative sites. Figure V-4 presents the results from the two instruments on a site-by site basis. An analysis of the information in the table indicates that Home Start is a program which emphasizes both educating the child and educating the parent about the child. Across all sites the most dominant child content areas are school readiness and physical development, which consists primarily of fine motor skills such as cutting and pasting, and the most frequently cited parent content area is educating the parent about the child. An examination of the data for each of the six sites shows that the school-oriented child content areas are consistently emphasized in Arkansas, Kansas and Texas, while in Alabama, Ohio, and West Virginia more time is spent on parental concerns than on educating the parent about the child. Although health and nutrition are second for time spent in Alabama and West Virginia and third in the remaining sites, it should be noted that teaching the parent about nutrition, an area which is emphasized in the Guidelines, is addressed only 4% of the time across all sites.

Figure V-5 and V-6 presents the actual percentages of time spent in child and parent content areas as recorded on the Home Visit Observation Instrument. Averaged across all sites, more than half of the recorded activities emphasized child content, while one third were parent-oriented. Child content ranged from 51% in Arkansas and Kansas to 90% in Texas-Houston. It is interesting to note that the Texas site, which has the highest proportion of child content areas, is typified by home visits in which the child is the dominant person, and most of the interactions between participants include the child.

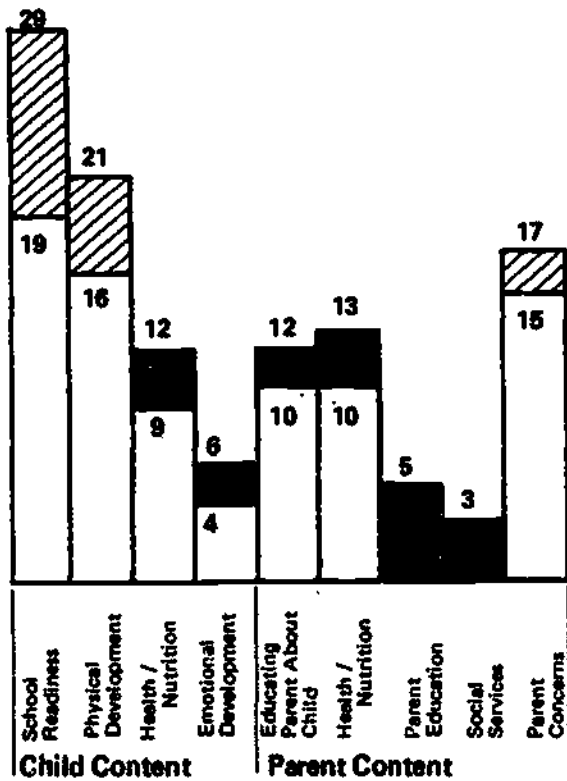
Home Visit Activities

Various activity modes which were recorded by the observer for the three participants in the home visit are illustrated in Figure V-7. It is evident that the home visitor and the focal child are more actively involved than is the focal parent. The focal child, however, is far more likely to ignore or be uninvolved in the activity and is less likely to ask than are the adult participants. On the other hand, the focal child tells, explains, does, etc. more than either the home visitor or the focal parent -- not an unexpected finding for a pre-schooler. The most frequent activity mode for the focal parent is listening or watching. It is evident that the parent is a less active participant in the home visit, but she may be learning by observing the activities of the home visitor and child and by listening to the home visitor.

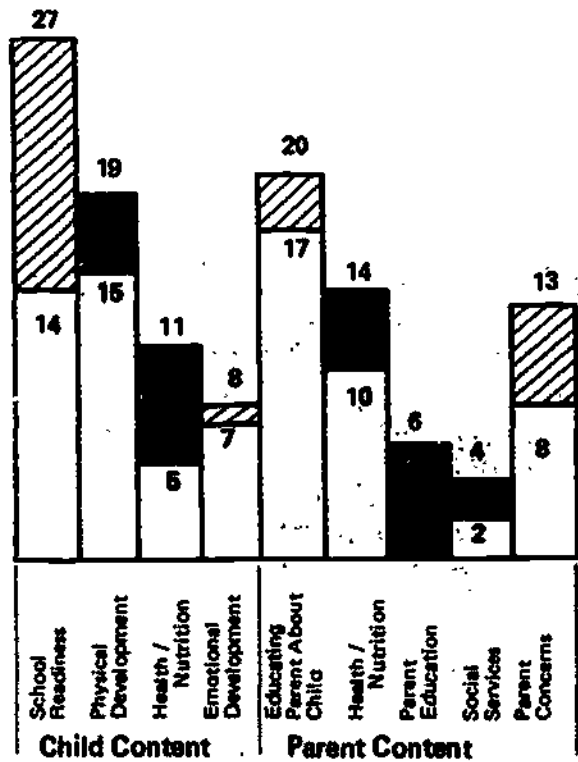
FIGURE V-4 a

HOME VISIT CONTENT AREAS

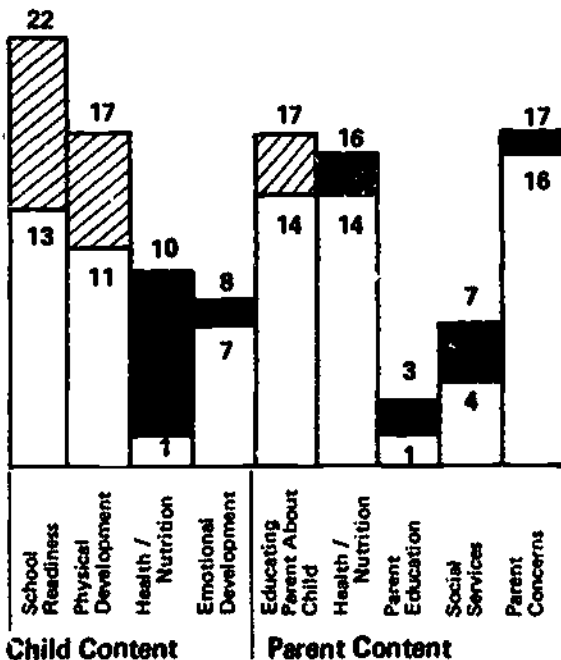
ALABAMA



ARKANSAS



KANSAS



% Greater on Home Visit Observation



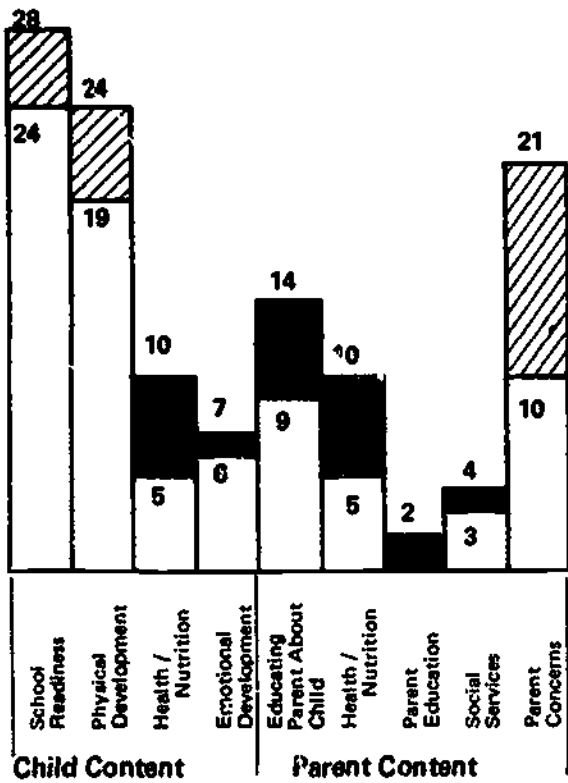
% Greater on Record of Home Visit

67

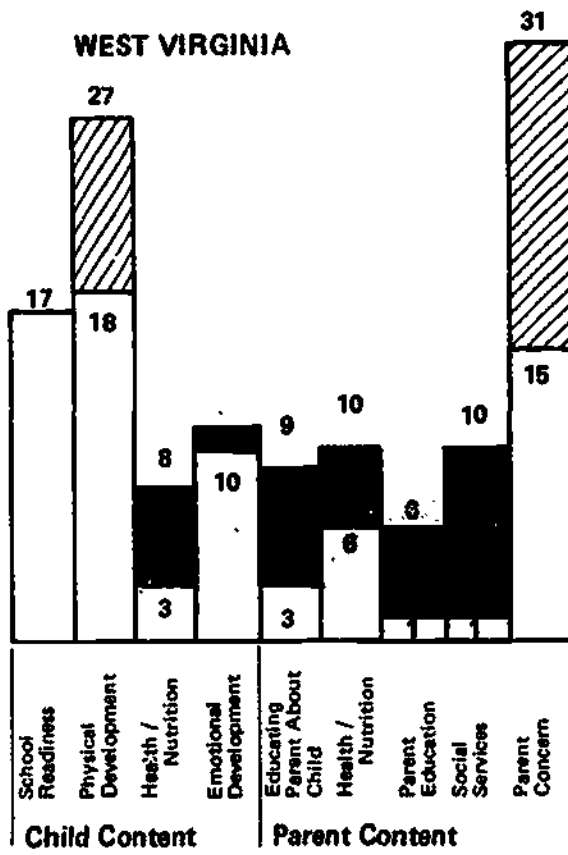
FIGURE V-4 b

HOME VISIT CONTENT AREAS

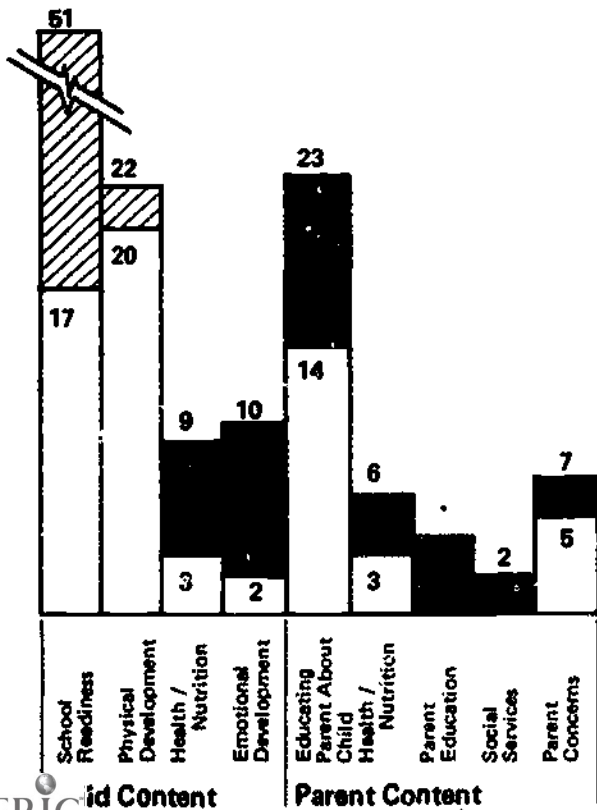
OHIO



WEST VIRGINIA



TEXAS



% Greater on Home Visit Observation



% Greater on Record of Home Visit

FIGURE V-5

	Alabama	Arkansas	Kansas	Ohio	Texas-Kouston	West Virginia	Average Across Sites
School Readiness	17%	21%	19%	30%	39%	18%	23%
Reading Readiness	10%	7%	5%	4%	21%	3%	7%
Physical Development	30%	16%	21%	22%	25%	33%	25%
Health	1%	2%	1%	2%	1%	0%	1%
Nutrition	3%	2%	0%	1%	3%	3%	2%
Emotional Development/ Other	1%	3%	5%	3%	0%	2%	2%

56

FIGURE V-6

	Alabama	Arkansas	Kansas	Ohio	Texas-Houston	West Virginia	Average Across Sites
Educating Parent About Child	6%	22%	17%	8%	5%	2%	10%
Health	5%	5%	4%	5%	2%	2%	3%
Nutrition	10%	7%	4%	0%	0%	3%	4%
Parent Education	0%	0%	1%	0%	0%	0%	0%
Social Services	0%	1%	5%	0%	0%	0%	1%
Parental Concerns	10%	5%	7%	10%	0%	24%	12%
Other	5%	3%	2%	10%	0%	3%	3%

Site Comparison - % Time Spent on Parent Content Areas

57

71

72

FIGURE V-7

<u>Activity</u>	<u>Home Visitor</u>		<u>Focal Child</u>		<u>Focal Parent</u>	
	<u>Time(min.)</u>	<u>%</u>	<u>Time(min.)</u>	<u>%</u>	<u>Time(min.)</u>	<u>%</u>
Tell/Explain	32	51%	32.6	56%	22.1	36%
Read/Sing	3	4%	.9	2%	1.6	3%
Ask	11	17%	1.8	3%	6.2	10%
Listen/Watch	17	27%	12.5	21%	27.8	45%
Ignore/Uninvolved	1	1%	10.4	18%	4.5	7%
Total Time	63.2		58.3		62.2	

Tables V-1 to V-5 present activity data for each of the six summative sites by dominance or non-dominance of the participants as recorded by an observer. Tables V-1 to V-3 sum time across participants, while Tables V-4 and V-5 report dominant/non-dominant time for each participant. For all six sites, the primary mode is active and the secondary mode is passive. The ranges within each mode are remarkably stable, suggesting that the mix of activities is fairly constant from site to site. It is also apparent from the tables that, as one might expect, the dominant person was active. It is interesting to note though that the person who was perceived as non-dominant was actively involved over 40% of the time.

Tone of the Home Visit

After a home visit had been observed, the behavior and attitudes of the home visitor, the focal parent and the focal child were ranked on a continuum from one to seven. In general, the home visitor was observed to be more sociable, more confident and more involved than the focal parent, but the two were equally casual and agreeable. The focal child was as involved as the focal parent but was somewhat more active. For the most part, the only neutral behaviors noted were those of the focal child, who was neither calm nor excited and neither quiet nor talkative. It is evident that home visitors have a clearer

perception of their role and are more likely to behave in a decisive, positive manner, but that both the focal parent and the focal child respond to the visit with generally positive attitudes and behavior.

The Overall Visit

In order to construct a coherent picture of the home visit, the above three descriptors -- activities, interaction patterns and content areas -- must be examined together. In addition, it is necessary to look at a description of the activities of the three participants in a home visit. The answers to questions such as, "What is the parent doing while the child is asking questions?" form an important basis for the following description.

The data reveal a marked split in the pattern of home visits. One part of the home visit focuses primarily on the parent and is composed of focal parent-home visitor interactions. The other distinct portion of the home visit involves the child, who is interacting with either the home visitor or the focal parent. The two portions of the home visit differ in content and activity, as the following discussion makes clear.

Focus on the Parent

Home visitor-focal parent interactions comprise approximately one-third of the visit.¹ As Figure V-8 shows, the home visitor spends over two-thirds of this time telling or explaining and the parent spends equal amounts of time telling/explaining and listening/watching, as well as a smaller portion asking questions.² The child is not very involved in this portion of the home visit. Almost half of the time the child ignores or is uninvolved; another quarter of the time (s)he listens or watches.

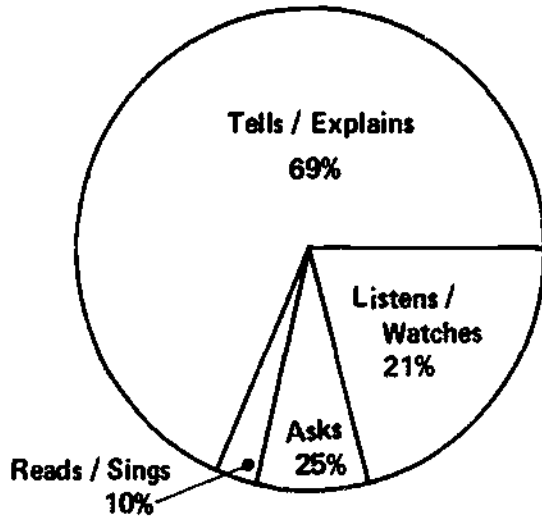
¹In this section, three-way interactions are considered under both dominant interaction pairs; home visitor to focal child and focal parent is considered as both home visitor to focal child and home visitor to focal parent.

²Figures V-8 through V-10 are not comparable to similar charts in the Interim Report IV. The tables there were based on frequency of occurrence of various activities; the present tables report the length of each activity, and percentages are based on the total time reported for the home visit.

FIGURE V-8

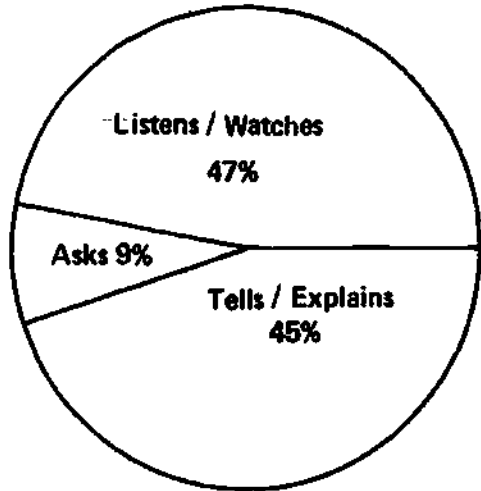
HOME VISITOR – FOCAL PARENT INTERACTIONS

The Home Visitor....



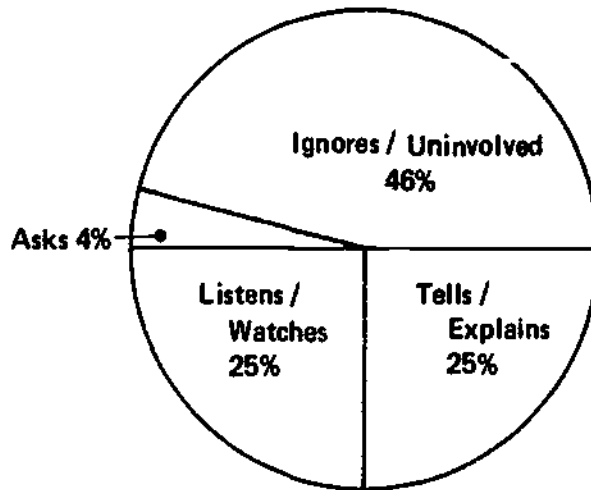
Total: 24 minutes*

While the Parent....



Total: 24 minutes*

And The Child....



Total: 20 minutes*

And the Content Is.....

Child		Parent	
School Readiness	9%	Educating Parent About Child	18%
Physical Development	10%	Health and Nutrition	16%
Health and Nutrition	2%	Parent Education	1%
Emotional Development	6%	Employment	4%
Subtotal	<u>27%</u>	Parental Concerns	<u>35%</u>
TOTAL: 25 minutes*		Subtotal	<u>74%</u>

* Discrepancies due to incomplete reporting on Home Visit Observation instrument

The subject matter of the discussion between home visitor and focal parent is largely drawn from parent content areas. Interpersonal and other general concerns take up about half the time, while teaching the parent to educate the child and parent health and nutrition each take about 15%. All together, parent content areas take up about three-quarters of the time when parent and home visitor are interacting. This is in marked contrast to the heavy emphasis on child content which can be seen in the other four interaction patterns.

Focus on the Child

The other two-thirds of the home visit is concerned primarily with the child and his/her needs and is composed of focal child-home visitor and focal child-focal parent interactions. The reason for considering these two interaction categories together is that most of the time the third person is interacting with the child as well. Approximately two-thirds of the time that the focal child and home visitor are interacting, the focal parent is interacting with the child, and in over 80% of focal child-focal parent interactions, the home visitor's attention is also turned toward the child. This tendency for home visitor and focal parent to focus simultaneously on the child is supported by the fact that over 60% of the three-way interactions are ones in which the child is dominant.

Focal parent-focal child interactions occur for about one-fifth of the home visit time, while home visitor-focal child interactions take place nearly half of the time. A general picture of what happens in a home visit when these interactions are dominant is shown in Figures V-9 and V-10. One of the most noticeable differences between the child-focused and parent-focused sections is the emphasis on child content. Over 75% of the time spent in interactions which include the focal child involves child content areas. In both interactions the most highly emphasized content areas are school readiness and physical development, in that order.

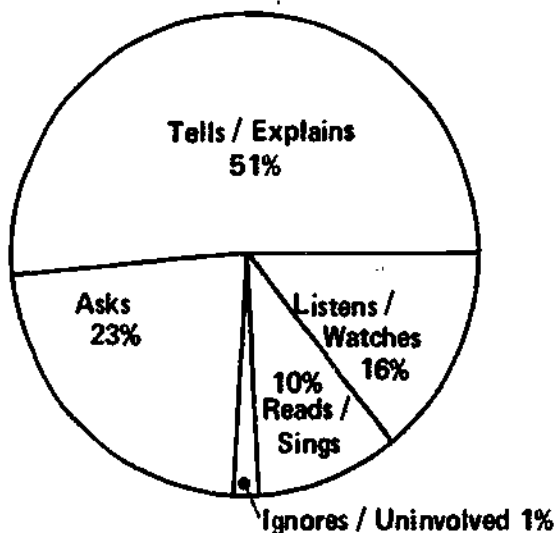
When the home visit is focused on the child the "ignore/uninvolved" time for other participants drops considerably. The parent is seen as uninvolved in about 15% of the home visitor-focal child interactions as compared with 50% for the child in home visitor-focal parent interactions. Not unexpectedly, the home visitor rarely is uninvolved in an activity.

Another indication of the child's involvement and importance in the home visit is his tendency to perform actively even when not perceived as dominant. During home visitor-child interactions in which the home visitor is dominant, the child tells/explains/does nearly two-thirds of the time and in similar

FIGURE V-9

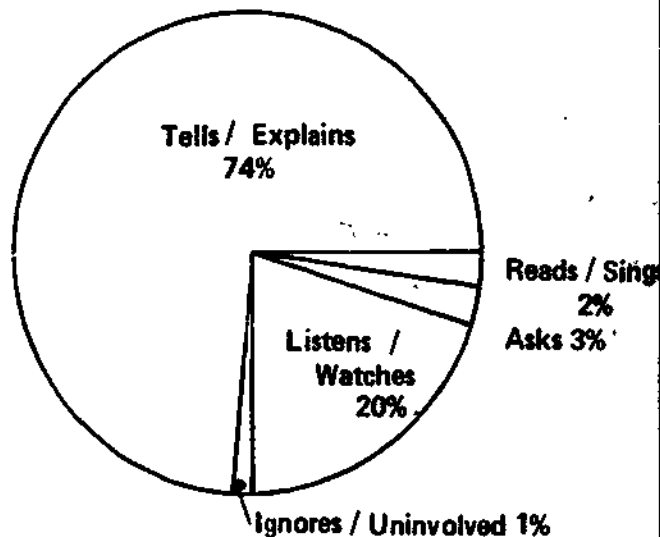
FOCAL PARENT – FOCAL CHILD INTERACTIONS

The Parent...



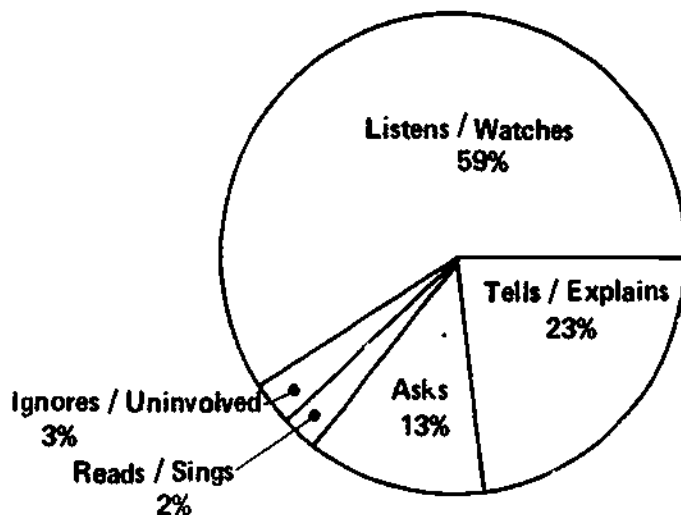
Total: 15 minutes

While the Child...



Total: 15 minutes

And the Home Visitor...



Total: 15 minutes

And the Content Is...

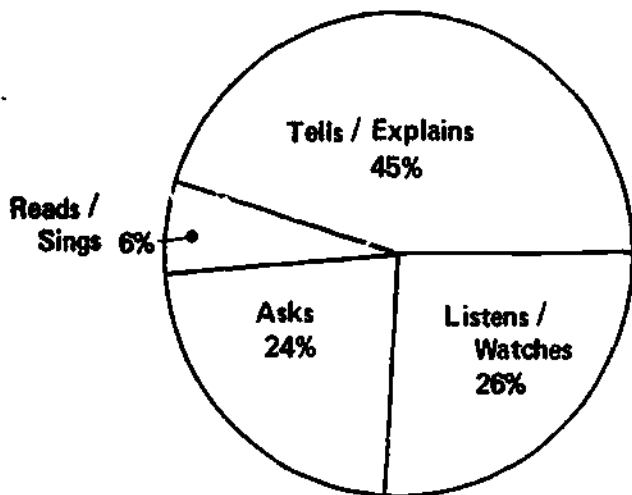
Child		Parent	
School Readiness	42%	Educating the Parent About Child	11%
Physical Development	26%	Health and Nutrition	4%
Health and Nutrition	5%	Parent Education	0%
Emotional Development	4%	Employment	1%
Subtotal	77%	Parent Concerns	7%
		Subtotal	23%

TOTAL: 15 minutes

FIGURE V-10

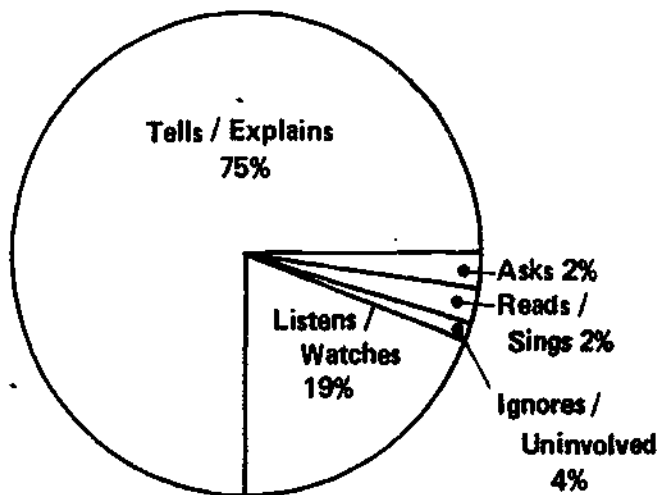
HOME VISITOR – FOCAL CHILD INTERACTIONS

The Home Visitor....



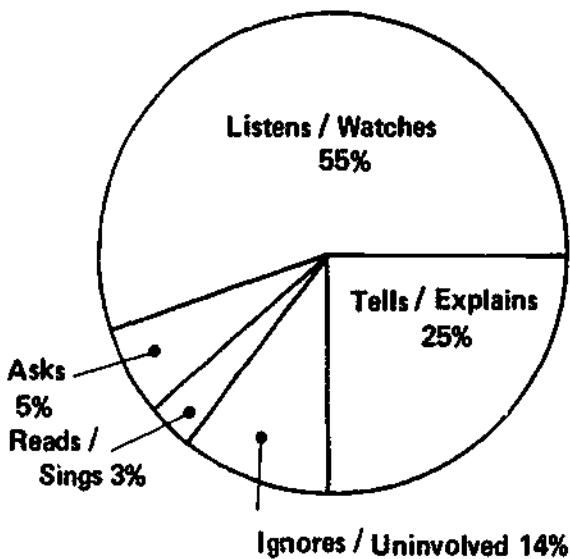
Total: 35 minutes*

While the Child....



Total: 30 minutes*

And the Parent....



Total: 29 minutes*

And the Content....

Child		Parent	
School Readiness	35%	Educating the Parent About Child	6%
Physical Development	30%	Health and Nutrition	3%
Health and Nutrition	5%	Parent Education	0%
Emotional Development	8%	Employment	1%
Subtotal	78%	Parental Concerns	11%
		Subtotal	21%
TOTAL: 31 minutes*			

78

parent-child interactions, is active over half of the time. When the child is dominant, 90% of his time is spent actively achieving, often with both home visitor and focal parent simultaneously. Tables V-6 to V-11 show time breakdowns for interaction patterns taking dominance into account.

Although the child's health and nutrition is not a highly emphasized content area, it should be noted that it is highest for the interaction pattern in which the home visitor is dominant to the child. This seems to indicate that the home visitor is the initiator in discussions of child health and nutrition and often speaks directly to the child about these topics.

In general, when the home visit focuses on the child all participants are consistently involved, with more emphasis on the child and child content areas, particularly school readiness. The child himself is active during much of this period, spending the majority of time telling and explaining in marked contrast to his lack of involvement in the parent-focused portion of the home visit.

Variations in Pattern

Tables V-12 to V-18 display dominance, interaction patterns and content areas for each home visitor within the six sites and overall site comparisons. Just as the results for the entire Home Start program can be seen as the combination of sometimes widely varying results from six individual sites, so too can the results for each of the six sites be seen as the aggregate of many individuals (home visitors). In some instances the home visitors within a particular site are as variable as the sites. Careful examination of these tables will convince the reader that Home Start is not a monolithic, unvarying treatment; rather, it depends to a great extent on the actions of dozens of Home Visitors, each of whom is unique.

The circles in each line point out the most frequent dominant person, interaction pattern, child content area and parent content area. A home visitor also is designated as parent- or child-oriented based on the time spent on parent vs. child content. The last line reports the overall patterns within a site. Table V-18 combines all the site totals and, in addition, displays totals for the entire program.

It should be noted that in four out of the six summative sites, the home visitor is dominant most often; in three of these four, the home visitor-focal parent interaction pattern occurs most frequently, and child content, especially school readiness, takes up much of the time. Texas-Houston is most consistently child-oriented with the child dominant within a

home visitor-focal child interaction. Child content consumes over three-quarters of the time, a figure considerably higher than the other sites. Kansas shows very closely distributed dominance times, but, although the child is dominant slightly more often, the rest of the pattern indicates heavy emphasis on the parent and especially on parent content areas.

Special Services

In addition to the direct services which are provided during the home visit, other special services may be initiated by the Home Visitor as a result of the home visit. These services consist primarily of referrals to locally available agencies for varying kinds of public assistance such as Medicaid or family counseling and the use of in-home specialists who are available through the Home Start program. This section will examine special services to determine:

- the primary areas in which referrals are made;
- the recipients of referrals;
- program success in accomplishing referrals;
- the extent to which program specialists provide services directly to families;
- the extent to which home visitors support referrals outside the home visit.

The primary source for data about the number, types and recipients of referrals is the Information System, which records all referrals made and received for both summative and non-summative sites. The figures presented in this report are for the last quarter, April 1 to June 30, 1974. Additional information about referrals initiated during the home visit is available in the Record of Home Visit Activity and in the Home Visit Observation Instrument. Reports from the Information System and Staff Time Use Questionnaires are used to indicate the extent to which programs support referral services and provide specialists for in-home services. Program results are reported for all sixteen sites, on a summative/non-summative basis.

Referral Content Areas

In order to compare types of referrals across all data sources, three primary content areas have been identified:

- Health and Nutrition;
- Education;
- Psychological/Social services.

Figure V-11 indicates subject areas of referrals made and received as reported through the Information System. Averaged across all sites, 58% of the referrals made were for health and nutrition, while 37% concerned psychological/social services

There are interesting differences, however, between summative and non-summative sites: in the summative sites, for example, 37% of all referrals made are for psychological/social services versus 21% in the non-summative sites, and in the non-summative sites 25% of the referrals are for educational purposes, primarily for the focal parent, versus 5% in the summative sites. When averages for the six summative sites are compared with the figures for the 42 referrals which were initiated while the home visit was being observed, the referral pattern remains quite stable: 57% of the observed referrals concerned health and nutrition, 29% concerned psychological/social services, and 14% were for educational needs. Similarly, 49% of the 111 referrals recorded in the Record of Home Visit Activity were for health and nutrition, 14% were for education, and 38% were for psychological/social needs. This suggests that both instruments recorded referrals fairly reliably.

Referral Recipients

Figure V-12 provides information about referral recipients by types of referral made and service received as recorded by the Information System. The data indicate that more than half of all referrals (57%) are made for the focal child, over a third (35%) are for the focal parent, and only 8% are for other family members. Figures for referrals received, however, show that the focal child is the recipient of 62% of the referrals. The focal parent receives 4% fewer referrals, and other family members receive 1% less when compared with referrals made. A comparison of the figures for summative and non-summative sites indicates that a higher percentage of referrals is made for the focal child in the summative sites (62% vs. 51%) and for the focal parent in non-summative sites (42% vs. 30%).

Examination of the data for referral recipient by type of referral shows that focal child referrals are primarily for health and nutrition (77%), while for the focal parent the most frequent type of referral concerned psychological/social needs. For the summative sites 96% of the referrals made were received, compared with 71% in the non-summative sites.

FIGURE V-11

Subject Areas of Successful Referrals by Site

6 Summative Sites

	<u>Health/ Nutrition</u>	<u>Education</u>	<u>Psych/Social</u>	<u>Total</u>
Alabama	58	7	51	116
Arkansas	69	3	14	86
Kansas	75	4	74	153
Ohio	52	17	2	71
Texas-Houston	93	15	45	153
West Virginia	573	37	397	1007
Total	709 (58%)	83 (5%)	583 (37%)	1586 (100%)

10 Non-Summative Sites

	<u>Health/ Nutrition</u>	<u>Education</u>	<u>Psych/Social</u>	<u>Total</u>
Alaska	43	86	6	135
Arizona	--	--	--	--
California	36	3	17	56
Massachusetts	30	7	78	115
Nevada	152	1	8	161
New York	100	6	32	138
North Carolina	86	30	20	136
Tennessee	53	0	8	61
Texas-TMC	--	--	--	--
Utah	27	1	7	35
Total	499 (63%)	134 (16%)	176 (21%)	837 (100%)

FIGURE V-1

Referral Recipients by Type of Referral

6 Summative Sites

	<u>Focal Child</u>	<u>Focal Parent</u>	<u>Other</u>	<u>Total</u>
Health / Nutrition	693/69%	198/44%	29/23%	920/58%
Education	47/5%	28/6%	8	83/5%
Psych /Social	265/26%	228/50%	90/71%	583/37%
	<hr/>	<hr/>	<hr/>	<hr/>
	1005 (63%)	454 (29%)	127 (8%)	1586 (100%)

10 Non-Summative

	<u>Focal Child</u>	<u>Focal Parent</u>	<u>Other</u>	<u>Total</u>
Health / Nutrition	430/86%	61/21%	36/71%	527/63%
Education	18/4%	110/39%	6/12%	134/16%
Psych /Social	53/11%	114/40%	9/18%	176/21%
	<hr/>	<hr/>	<hr/>	<hr/>
	501 (60%)	285 (34%)	51 (6%)	837 (100%)

The summative sites show a remarkably consistent trade-off pattern between referrals made and received (a result of the high percentage of completion), while in the non-summative sites referrals are more likely to be received for health and nutrition than for education and by the focal child than by the focal parent.

The Information System also provides data on the number of referrals made and received per family. These figures, together with the ratio of referrals received to referrals made, are displayed for each site in Figure V-13. The average number of referrals received per family is slightly higher among the six summative sites (2.8 vs. 2.2), and the overall 96% referral completion rate for summative sites is consistent with the higher completion ratio per family which is shown for the summative sites. The ratio of referrals received to referrals made per family ranges from 1.00 in Ohio and California to .37 in North Carolina. It should be noted that four of the non-summative sites (North Carolina, Utah, Massachusetts and Nevada) have ratios which are significantly lower than the ratios reported for the summative sites.

Data from the Home Visitor Time Use Questionnaire indicate the extent to which home visitors follow-up on and support referral services. This support is rendered primarily in two ways: making appointments for families and driving families to the appointments. In both summative and non-summative sites home visitors spent approximately 2.3 hours per week (5.5%) in these two referral support categories. The Director/Specialist Time Use Data show that, across all sites, specialists spent 2.7 hours per week (30.5%) on referral services outside of the home. If such services as giving information and materials to families and screening for child disabilities are included, specialists spend an average of 9 hours per week on special services.

Summary of Findings

Although the home visit is a unique and varying experience, certain patterns emerge in an overall analysis. Among the most important findings are that:

- The content of the home visit is primarily child-oriented, but includes both school readiness for the child and educating the parent about the child.
- There is little emphasis on nutrition during the home visit.

FIGURE V-13

Average Number of Referrals per Family:
Fourth Quarter 1974

6 Summative Sites

	<u>Made</u>	<u>Received</u>	<u>Ratio</u>
Alabama	1.5	1.4	.90
Arkansas	1.3	1.1	.83
Kansas	2.6	2.3	.89
Ohio	2.0	2.0	1.00
Texas-Houston	4.4	4.0	.92
West Virginia	7.5	7.5	1.00
<hr/>			
Avg.	3.1	2.9	

10 Non-Summative Sites

	<u>Made</u>	<u>Received</u>	<u>Ratio</u>
Alaska	2.9	2.5	.88
Arizona	--	--	--
California	.8	.8	1.00
Massachusetts	2.8	2.2	.78
Nevada	4.2	3.3	.80
New York	1.8	1.7	.96
North Carolina	6.9	2.6	.37
Tennessee	4.4	4.0	.92
Texas-TMC	--	--	--
Utah	.6	.5	.76
<hr/>			
Avg.	3.0	2.2	

- The two major interactions are between the home visitor and focal parent and the home visitor and focal child. Each interaction consumes about one-third of the visit.
- The focal parent is rarely uninvolved in the home visit, but she frequently listens to or watches the home visitor and the focal child, a mode which is quite conducive to learning.
- The focal child is usually actively involved, but when the home visitor and focal parent are interacting, the focal child is uninvolved half the time.
- The focal child is the primary recipient of referral services.
- More referrals are made for health than for any other area.

These findings suggest that the Home Start Program's Objectives, which are

- To involve parents directly in the educational development of their children;
- To help strengthen in parents their capacity for facilitating the general development of their own children;
- To demonstrate methods of delivering comprehensive Head Start type services to children and parents . . .for whom a center-based option is not feasible

are, for the most part, being met.

It is not possible at this time to specify or describe an "ideal" home visit, or even to make recommendations for changing it. Though the home visit still focuses on the child, it is not clear that more active parent involvement would in fact produce more positive results. Since child nutrition remains an important objective, it would appear that more time should be spent on it, but it is difficult to say how much more and at the expense of what. Since the home visit does indeed meet the Program Objectives, it must be viewed as more than adequate as it exists.

Future Issues

- Does the background of the home visitor affect the content emphasis of the home visit?
- What impact does the length of time the family has been in the program have on the home visit?
- Does the length of time the home visitor has been with the family affect the home visit?
- How are home visitors helping parents to provide better nutrition for their families?

TABLES

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TABLE III-1

AT-A-GLANCE 6-Summative Sites 6/30/74	Most Recent	Previous Quarters				Maximum Difference %
	Year III ¹⁾ Quarter I (6/30/74)	Year II Quarter IV (3/31/74)	Year II Quarter III (12/31/73)	Year II Quarter II (9/30/73)	Year II ²⁾ Quarter I ³⁾ (6/30/73)	
# of Total Staff	69	71	70	69	67	6
Average	11.5	11.8	12	11.5	11.2	7
Range	8-14	9-14	9-14	9-14	6-13	
# of Home Visitors	49	45	45	46	44	10
Average	8.1	7.5	7.5	7.7	7.3	9
Range	6-14	6-10	6-10	6-10	4-10	
# of Families	477	543	537	500	457	16
Average	80	91	90	83	76	16
Range	38-135	74-143	68-149	58-157	47-98	
# of Families/ Home Visitor	9.7	12.1	11.9	11	10.4	20
Range	6-14	11-14	10-15	8-16	9-14	
# of Focal Children	673	800	721	642	597	25
Average	112	133	120	107	100	25
Range	60-206	93-256	83-234	78-222	66-143	
# of Children (0-5)	937	1,137	1,092	1,011	900	21
Average	156	190	182	168	150	21
Range	86-275	141-364	128-338	121-322	97-205	
# of Children (0-18)	1,828	2,218	2,133	2,029	1,818	18
Average	305	370	355	338	303	18
Range	131-585	246-731	209-651	208-411	189-429	

1) No data reported for this Quarter from Arizona and Texas-TMC; data from previous Quarter used to avoid serious distortion.

2) No data reported for this Quarter from Texas-TMC; data from previous Quarter used to avoid serious distortion.

3) Data for California not included in this Quarter

TABLE III-2

AT-A-GLANCE 10 Non-Summative Sites 6/30/74	Most Recent	Previous Quarters				Maximum Difference %
	Year III ¹⁾ Quarter I (6/30/74)	Year II Quarter IV (3/31/74)	Year II Quarter III (12/31/73)	Year II Quarter II (9/30/73)	Year II ²⁾ Quarter I ³⁾ (6/30/73)	
# of Total Staff	110	118	119	116	109	8
Average	11	11.8	12	11.6	12.1	4
Range	7-15	8-17	9-16	8-18	10-17	
# of Home Visitors	65	69	71	65	60	16
Average	6.5	7.0	7.1	6.5	6.7	8
Range	2-11	4-11	4-11	3-10	5-9	
# of Families	673	731	695	606	585	20
Average	67	73	70	61	65	16
Range	48-102	58-102	51-102	26- 79	47- 79	
# of Families/ Home Visitor	10.3	10.6	9.8	9	9.8	15
Range	8-20	8-15	7-15	6-15	6-16	
# of Focal Children	770	839	781	688	668	20
Average	77	84	78	69	74	18
Range	51-115	62-115	53-110	27- 87	48-101	
# of Children (0-5)	1,283	1,315	1,274	1,088	1,108	17
Average	128	132	127	109	123	17
Range	65-186	92-186	84-187	51-165	100-167	
# of Children (0-18)	2,444	2,462	2,381	2,066	2,052	17
Average	244	246	238	207	228	10
Range	136-452	143-452	146-446	138-362	160-333	

1) No data reported for this Quarter from Arizona and Texas-TMC; data from previous Quarter used to avoid serious distortion.

2) No data reported for this Quarter from Texas-TMC; data from previous Quarter used to avoid serious distortion.

3) Data for California not included in this Quarter

TABLE III-3: AVERAGE QUARTERLY FAMILY TURNOVER
(Quarters III - Year I through Quarter I - Year III)

Site	Average Quarterly Turnover	% Turnover Based On Family Enrollment	% ¹ Adjusted Turnover	% Turnover During Qtr.II - Yr.II	Adjusted Quarterly Range
ALABAMA	10	11.7%	5.3%	51.2%	0% - 8.2%
ALASKA	12	24.8%	16.9%	72.3%	6.7% - 33.3%
ARIZONA	7	9.7%	5.5%	31.8%	1.4% - 9.7%
ARKANSAS	11	14.0%	5.6%	66.2%	0% - 12.4%
CALIFORNIA	9	19.8%	13.1%	100.0%	0% - 22.2%
KANSAS	14	19.0%	15.3%	40.0% ²	8.3% - 34.0%
MASSACHUSETTS	10	16.7%	9.0%	61.7%	0% - 19.7%
NEVADA	20	31.8%	28.9%	50.0%	14.7% - 43.8%
NEW YORK	16	22.7%	12.6%	81.1%	1.3% - 43.8%
NORTH CAROLINA	11	17.8%	9.7%	65.5%	0% - 30.0%
OHIO	10	18.7%	11.0%	62.3%	0% - 32.0%
TENNESSEE	12	15.0%	7.1%	60.8%	5.1% - 9.2%
TEXAS - HOUSTON	19	26.6%	19.1%	66.3%	5.0% - 56.6%
TEXAS - TMC ³	--	--	--	--	---
UTAH	9	12.8%	5.6%	60.6%	1.3% - 17.3%
WEST VIRGINIA	24	18.1%	14.0%	53.1%	6.4% - 18.3%
TOTAL PROGRAM	13	18.2%	11.5%	59.0%	---

¹The figures presented in this column exclude the seasonal high termination period (Summer) to show a more accurate picture of average quarterly attrition.

²The figure reported here is for the 1st Quarter of Year II since terminations took place in an earlier quarter in Kansas than elsewhere.

³No information is reported for Texas-TMC because of insufficient data.

TABLE III-4: STAFF TURNOVER BY SITE
 (Quarters III - Year I through Quarter I - Year III)

Sites	Total Staff Turnover for 7 Quarter Period	% Staff Turnover	Quarterly Range
ALABAMA	9	10.8%	0% - 18.2%
ALASKA	13	17.8%	0% - 41.7%
ARIZONA	5	6.8%	0% - 20.0%
ARKANSAS	4	4.3%	0% - 7.7%
CALIFORNIA	2	4.3%	0% - 11.1%
KANSAS	8	12.7%	0% - 40.0%
MASSACHUSETTS	4	6.2%	0% - 12.5%
NEVADA	21	20.4%	0% - 43.8%
NEW YORK	16	21.9%	0% - 41.7%
NORTH CAROLINA	12	15.0%	0% - 43.8%
OHIO	5	6.3%	0% - 18.1%
TENNESSEE	6	7.9%	0% - 36.4%
TEXAS - HOUSTON	15	17.9%	0% - 40.0%
TEXAS - TMC	--	--	---
UTAH	12	9.9%	0% - 17.6%
WEST VIRGINIA	7	9.1%	0% - 23.1%
TOTAL PROGRAM	139 ¹	11.8%	---

¹Total terminations for 7-quarter period or an average of 9.3 per project.

TABLE III-5: EDUCATION MATCH - FOCAL PARENTS/HOME VISITORS

June 30, 1974

	Grades 0-12		High School Graduate		Some College (Incl. Assoc. Degree)		College Graduate	
	FP	H.V.	FP	H.V.	FP	H.V.	FP	H.V.
Alabama	67.3%	-- %	26.0%	16.7%	4.8%	66.7%	-- %	16.7%
Alaska	37.0	50.0	46.3	25.0	13.0	25.0	--	--
Arizona	--	12.5	--	75.0	--	12.5	--	--
Arkansas	81.9	--	16.0	12.5	--	87.5	--	--
California	74.7	--	15.7	--	6.0	50.0	3.6	50.0
Kansas	58.0	20.0	24.6	20.0	14.5	60.0	--	--
Massachusetts	34.6	--	50.0	50.0	15.4	--	--	50.0
Nevada	44.9	14.3	34.7	28.6	20.4	57.1	--	--
New York	81.2	14.3	18.8	28.6	--	28.6	--	28.6
North Carolina	77.4	--	15.1	100.0	7.5	--	--	--
Ohio	85.2	40.0	13.6	40.0	1.1	20.0	--	--
Tenn. ssee	87.4	--	11.1	20.0	0.7	80.0	--	--
Texas-Houston	71.1	33.3	13.2	50.0	5.3	16.7	--	--
Texas-TMC	--	11.1	--	33.3	--	55.6	--	--
Utah	44.3	--	32.9	14.3	16.5	57.1	6.3	28.6
W. Virginia	99.3	26.7	0.7	33.3	--	26.7	--	6.7

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TABLE III-6

STAFF/FOCAL CHILD ETHNIC MATCH BY SITE

6/30 1974

Six Summative Sites		Focal Children	Staff		Staff Change to Match
			Current	"Match"	
Alabama	Cauc.	60	6	5	-1
	Black	75	5	6	+1
		<u>135</u>	<u>11</u>	<u>11</u>	<u>2</u>
Arkansas	Cauc.	91	13	14	-1
	Black	3	1	0	-1
	Mex-Amer.	1	0	0	0
	Amer. Ind.	1	0	0	0
		<u>94</u>	<u>14</u>	<u>14</u>	<u>2</u>
Kansas	Cauc.	41	4	4	0
	Black	38	3	4	+1
	Mex-Amer.	6	1	0	-1
		<u>85</u>	<u>8</u>	<u>8</u>	<u>2</u>
Ohio	Cauc.	12	3	2	-1
	Black	61	7	7	0
	Puerto Rican	17	1	2	+1
	Other	1	0	0	0
		<u>91</u>	<u>-</u>	<u>-</u>	<u>2</u>
Texas-H	Black	24	7	4	-3
	Mex-Amer.	36	4	7	+3
		<u>60</u>	<u>11</u>	<u>11</u>	<u>6</u>
West Va.	Cauc.	206	14	14	0

Ten Non-Summative Sites		Focal Children	Staff		Staff Change to Match
			Current	"Match"	
Alaska	Cauc.	31	4	4	0
	Black	4	1	0	+1
	Alaskan	20	2	3	-1
	Other	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>
		56	7	7	2
Arizona	Am. Ind.	80	12	12	0
Calif.	Cauc.	24	3	3	0
	Black	24	1	2	-1
	Mex-Amer.	23	2	2	0
	Am. Ind.	1	0	0	0
	Polynesian	9	1	1	0
	Oriental	6	2	1	+1
	Other	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>
		89	9	9	2
Mass.	Cauc.	57	9	9	0
Nevada	Cauc.	35	7	7	0
	Black	5	3	1	+2
	Mex-Amer.	4	0	1	-1
	Am. Ind.	2	0	0	0
	Polynesian	0	0	0	0
	Oriental	0	0	0	0
	Other	<u>5</u>	<u>0</u>	<u>1</u>	<u>-1</u>
		51	10	10	4
New York	Cauc.	92	11	11	0
	Black	3	0	0	0
	Other	3	0	0	0
	Am. Ind.	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>
		99	11	11	0
No. Carolina	Cauc.	51	11	11	0
	Am. Ind.	<u>2</u>	<u>0</u>	<u>0</u>	<u>0</u>
		53	11	11	0

		Staff			
		<u>Focal Children</u>	<u>Current</u>	<u>"Match"</u>	<u>Staff Change to Match</u>
Tenn.	Cauc.	85	11	10	+1
	Black	<u>4</u>	<u>0</u>	<u>1</u>	<u>-1</u>
		89	11	11	2
Texas/TMC	Cauc.	1	1	0	+1
	Mex-Amer.	<u>114</u>	<u>14</u>	<u>15</u>	<u>-1</u>
		115	15	15	2
Utah	Cauc.	67	15	13	+2
	Amer. Ind.	2	0	0	0
	Oriental	1	0	0	0
	Mex-Amer.	<u>11</u>	<u>0</u>	<u>2</u>	<u>-2</u>
	81	15	15	-2	

TABLE IV-1
DIRECTOR TIME USE - WEEKLY BASIS

16 Sites Summative	Work- Week Hours	Job Task Hours	% In-Home Contact	% Family Support	% Staff Super.	% Staff Training	% Admin. and Ot
Alabama	40	40.1	4	20	5	6	65
Arkansas	25.5	24.7	6	5	18	14	56
Kansas	40	55.1	5	56	0	15	23
Ohio	48	45.5	4	17	2	14	62
Texas- Houston	40	44.0	8	3	4	24	61
West Va.	47.5	59	7	27	7	12	47
Average Summative Sites	40.2	44.7	6	21	6	14	52
Non- Summative							
Alaska	27	20.8	3	34	2	20	41
Arizona	55	100.1	1	8	8	30	53
California	46.7	51.29	0	27	2	28	40
Mass.	39	35.3	6	28	3	23	41
Nevada	32.5	30.5	18	31	0	14	37
New York	37	44.2	4	23	31	16	56
No. Carolina	47	54.9	6	8	9	18	60
Tennessee	45.5	69.0	0	19	5	15	59
Texas-TMC	60	55.1	10	27	7	22	33
Utah	29	21.8	1	30	1	25	43
Average Non- Summative	41.9	48.2	5	24	4	21	47
All Sites Average	41.2	46.9	5	23	5	18	49

TABLE IV-2
SPECIALIST TIME USE-WEEKLY BASIS

16 Sites Summative	Work- Week Hours	Job Task Hours	% In-Home Contact	% Family Support	% Staff Super.	% Staff Training	% Admir. and Other
Alabama	40	42.9	23	31	0	6	41
Arkansas	24.4	26.5	2	20	.9	21	48
Kansas			NO SPECIALISTS				
Ohio	40	40.6	9	27	12	34	18
Texas- Houston	40	46.5	13	17	6	32	42
West Va.	38.5	30.0	10	16	7	23	34
Average¹ Summative Sites	36.6	37.3	11	22	7	23	37
Non- Summative							
Alaska	32.7	24.3	32	18	0	34	16
Arizona	43	55.2	10	25	8	18	40
California			NO SPECIALISTS				
Mass.	40	35.5	6	25	0	24	46
Nevada	22.5	23.6	15	23	2	11	48
New York			NO SPECIALISTS				
No. Carolina	34	60.5	32	28	2	9	29
Tennessee	34.7	40.5	27	5	6	16	46
Texas-TMC			NO SPECIALISTS				
Utah	20.6	19.7	18	23	2	29	28
Average¹ Non- Summative	32.5	37.0	20	21	3	29	28
All Sites Average¹	34.2	37.1	16	21	5	21	36

¹Averages taken only across sites which have at least one specialist.

TABLE IV-3

DIRECTOR/SPECIALIST STAFF HOURS PER WEEK

<u>Summative Sites</u>	Dir.	Dir.	Dir.	H.V. Super	H.V. Super	Educ. Aide	Educ. Aide	Health	Health	Nutr.	Psych.	Soc. Ser.	Soc. Ser.	Educ. Spec.	Educ. Spec.	Spec. Total	Dir./ Spec. Total
Alabama	40					40	40			40						120	160
Arkansas	33	18		25	21			27		14				35	24	146	221
Kansas	40															0	40
Ohio	41	55												40		40	136
Texas - Houston	40							40				40	40			120	160
West Virginia	50	45						38								38	133
<u>Non-Summative Sites</u>																	
Alaska	48	13	20			41		16	40							97	178
Arizona	55			42	44											86	141
California	47	46														0	93
Massachusetts	39											40				40	79
Nevada	45	20						27				24		16		67	132
New York	37	37														0	74
North Carolina	47							28				40				68	115
Tennessee	45					40		40						24		104	149
Texas - TMC	60															0	60
Utah	29							24		14	9	31		25		103	132

TABLE IV-4

HOME VISITOR TIME USE -SPRING 1974

	Average Hours Worked Per Week ¹	Time in Home	Time in Family Support	Time on Travel to Families ²	Time on Training	Time on Other	Time on Total Travel
Alabama	51.9 (43.2)	50%	21%	7%	5%	7%	12%
Alaska	35.3 (37.4)	54	19	9	10	8	15
Arizona	52.9 (51.0)	35	27	9	23	7	17
Arkansas	35.1 (41.0)	43	25	8	12	12	18
California	50.8 (47.3)	35	25	5	26	9	10
Kansas	43.3 (41.0)	40	25	8	20	8	17
Mass.	51.8 (44.5)	41	30	7	17	5	14
Nevada	48.7 (43.8)	39	28	6	20	8	12
New York	41.5 (36.0)	45	17	5	21	13	8
N. Carolina	46.0 (40.0)	43	22	8	23	4	12
Ohio	37.0 (32.1)	40	22	6	18	15	14
Tennessee	55.7 (41.3)	42	19	6	18	15	5
Tx. - Houston	40.6 (40.0)	39	22	6	25	10	13
Texas - TMC.	40.1 (37.8)	38	23	7	23	10	13
Utah	38.7 (47.4)	28	39	7	20	6	2
W. Virginia	50.8 (40.8)	33	31	8	15	9	21
AVERAGE	45.0 (42.0)	41%	25%	7%	18%	9%	12%

¹Reported in this column are both the total hours home visitors accounted for in the time categories and the total hours the home visitors said they worked last week (presented in parentheses).

²Travel to and from the home for home visit purposes only.

TABLE IV-5

AVERAGE NUMBER OF HOURS SPENT IN HOME VISITS WITH FAMILIES

	WEEKLY AVERAGE # OF HOURS ON HOME VISITS	WEEKLY AVERAGE # OF HOURS PER FAMILY
ALABAMA	30.8	2.3
ARKANSAS	15.1	1.5
KANSAS	17.2	1.4
OHIO	14.7	1.3
TEXAS-HOUSTON	15.3	1.4
WEST VIRGINIA	19	2.4
SUMMATIVE SITE AVERAGE	18.7	1.7
ALASKA	19	1.2
ARIZONA	18.4	1.0
CALIFORNIA	18	1.5
MASSACHUSETTS	21	2.1
NEVADA	19	1.8
NEW YORK	11.5	1.6
TENNESSEE	20	1.6
TEXAS-TMC	24	1.5
UTAH	15.3	1.6
NON-SUMMATIVE SITE AVERAGE	16.6	1.4
ALL SIXTEEN PROJECTS	17.7	1.6

TABLE V-1

Site Comparison - % Time Spent on Various Activity Modes
Dominant

	Alabama	Arkansas	Kansas	Ohio	Texas-Houston	West Virginia	Average Across Sites
Tell/Explain/Do	74%	77%	75%	80%	69%	73%	75%
Read/Sing	10%	12%	7%	3%	10%	3%	7%
Ask	12%	6%	10%	14%	18%	16%	13%
Listen/Watch	3%	4%	8%	3%	2%	8%	5%
Ignore/Uninvolved	0%	1%	0%	0%	0%	1%	0%
Other	0%	0%	0%	0%	0%	0%	0%

TABLE V-2
 Site Comparison - % Time Spent on Various Activity Modes
 Non-Dominant

	Alabama	Arkansas	Kansas	Ohio	Texas-Houston	West Virginia	Average Acy 35 Sites
Tell/Explain/Do	32%	27%	40%	31%	34%	35%	33%
Read/Sing	1%	1%	2%	0%	0%	0%	1%
Ask	10%	4%	8%	7%	20%	7%	9%
Listen/Watch	45%	57%	32%	56%	39%	42%	44%
Ignore/Uninvolved	12%	11%	17%	7%	7%	16%	12%
Other	0%	0%	0%	0%	0%	0%	0%

TABLE V-3

Site Comparison - % Time Spent on Various Activity Modes
 Non-Dominant and Dominant Combined

	Alabama	Arkansas	Kansas	Ohio	Texas-Houston	West Virginia	Average Across Sites
Tell/Explain/Do	46%	44%	52%	47%	46%	48%	47%
Read/Sing	4%	5%	4%	1%	3%	1%	3%
Ask	11%	5%	9%	9%	19%	10%	10%
Listen/Watch	31%	39%	24%	38%	27%	30%	31%
Ignore/Uninvolved	8%	8%	11%	5%	5%	11%	8%
Other	0%	0%	0%	0%	0%	0%	0%

TABLE V-4

	<u>Home Visitor Dominant</u>			<u>Child Dominant</u>			<u>Parent Dominant</u>			<u>Home Visitor Dominant</u>			<u>Child Dominant</u>			<u>Parent Dominant</u>		
	<u>ALABAMA</u>									<u>ARKANSAS</u>								
	<u>Time</u>	<u>Percent</u>	<u>Time</u>	<u>Percent</u>	<u>Time</u>	<u>Percent</u>	<u>Time</u>	<u>Percent</u>	<u>Time</u>	<u>Percent</u>	<u>Time</u>	<u>Percent</u>	<u>Time</u>	<u>Percent</u>	<u>Time</u>	<u>Percent</u>	<u>Time</u>	<u>Percent</u>
Tell/Explain/Do	15.02	29.8%	13.11	26 %	9.45	18.7%	23.24	40%	14.09	24.2%	7.54	13%						
Read/Sing	4.25	8.4%	.33	.7%	0.67	1.3%	4.84	8.2%	0.0	0%	1.87	3.2%						
Ask	5.34	10.6%	0.0	1.8%	0.58	0%	1.98	3.5%	0.0	0%	1.62	2.8%						
Listen/Watch	0.83	1.7%	0.89	0%	0.0	0%	0.38	.6%	1.71	3%	0.17	.3%						
Ignore/Uninvolved	0.0	0%	0.0	0%	0.0	0%	0.25	.4%	0.44	.8%	0.0	0%						
	<u>KANSAS</u>									<u>OHIO</u>								
Tell/Explain/Do	18.49	28.8%	16.58	25.8%	13.22	20.6%	25.8	51.6%	8.10	16.4%	6.05	12.3%						
Read/Sing	0.84	1.3%	3.22	5 %	0.42	.6%	0.0	0%	0.0	0%	1.29	26 %						
Ask	1.66	2.6%	0.83	1.3%	3.81	5.9%	4.86	9.8%	0.0	0%	2.14	4.3%						
Listen/Watch	0.0	0%	1.33	2.1%	3.83	6 %	0.52	1.1%	0.48	1 %	0.48	1 %						
Ignore/Uninvolved	0.0	0%	0.0	0%	0.0	0 %	0.0	0%	0.0	0%	0.0	0%						
	<u>TEXAS-HOUSTON</u>									<u>WEST VIRGINIA</u>								
Tell/Explain/Do	6.5	14 %	20.11	43.3%	5.47	11.8%	41.50	39.8%	20.87	19.9%	13.97	13.4%						
Read/Sing	1.78	3.8%	0.50	1.1%	2.42	5.2%	1.30	1.2%	0.19	.2%	1.38	1.3%						
Ask	2.81	6 %	0.28	.6%	5.45	11.7%	14.84	14.3%	0.94	.9%	0.43	.4%						
Listen/Watch	0.0	0%	0.75	1.6%	0.33	.7%	6.58	6.3%	0.0	0%	1.58	1.5%						
Ignore/Uninvolved	0.0	0%	0.0	0%	0.0	0%	0.25	.2%	0.56	.5%	0.0	0%						

TIME SPENT ON ACTIVITIES FOR DOMINANT MODE

06



	ALABAMA						ARKANSAS					
	Time	Percent	Time	Percent	Time	Percent	Time	Percent	Time	Percent	Time	Percent
Tell/Explain/Do	6.08	6.3%	13.33	13.7%	11.33	11.6%	10.89	9.6%	10.94	9.8%	8.37	7.4%
Read/Sing	0.33	.3%	0.67	.7%	0	0%	0.42	.4%	0.13	.1%	1.01	.9%
Ask	4.86	5.0%	1.00	1.1%	4.09	4.2%	1.67	1.4%	0.92	.8%	1.63	1.4%
Listen/Watch	12.75	13.1%	10.03	10.3%	20.78	21.4%	14.50	12.8%	14.94	13.2%	34.69	30.6%
Ignore/Uninvolved	0.92	.9%	8.11	8.4%	2.72	2.8%	0.21	.2%	12.10	10.7%	0.67	.6%

	KANSAS						OHIO					
	Time	Percent	Time	Percent	Time	Percent	Time	Percent	Time	Percent	Time	Percent
Tell/Explain/Do	23.92	19.5%	10.36	8.5%	14.95	12.2%	4.34	4.5%	17.09	17.5%	8.95	9.2%
Read/Sing	2.81	2.3%	0.0	0%	0.0	0%	0.0	0%	0.0	0%	0.0	0%
Ask	2.75	2.3%	5.50	4.5%	1.95	1.6%	4.52	4.6%	0.0	0%	1.86	1.9%
Listen/Watch	13.94	11.4%	4.50	3.7%	20.84	17.0%	9.66	10.0%	16.61	17.1	28.00	28.8%
Ignore/Uninvolved	.17	.1%	14.72	12.0%	5.39	4.4%	0.0	0%	5.33	5.4%	1.00	1.0%

	TEXAS-HOUSTON						WEST VIRGINIA					
	Time	Percent	Time	Percent	Time	Percent	Time	Percent	Time	Percent	Time	Percent
Tell/Explain/Lo	6.00	6.6%	15.78	17.2%	9.22	10.1%	12.76	6.2%	35.00	17.0%	23.83	11.6%
Read/Sing	0.0	0%	0.11	.1%	0.0	0%	0.0	0%	0.10	.1%	0.69	.3%
Ask	8.47	9.3%	0.0	0%	9.86	10.9%	9.49	4.6%	0.69	.3%	4.16	2.0%
Listen/Watch	21.95	24.0%	4.33	4.7%	9.11	10.0%	20.44	10.0%	19.13	9.3%	46.95	22.8%
Ignore/Uninvolved	0.0	0%	4.28	4.7%	2.28	2.5%	1.06	.5%	16.55	8.1%	14.72	7.2%

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TABLE V-6

Home Visitor Dominant Interacting With Focal Parent

<u>Activities</u>	<u>Home Visitor Activity</u>	<u>Focal Parent Activity</u>	<u>Focal Child Activity</u>
Tell/Explain/Do	84%	29%	28%
Read/Sing	5%	0%	0%
Ask	7%	6%	2%
Listen/Watch	4%	65%	27%
Ignore/Uninvolved	0%	0%	4%
	Total time = 16 mins.	Total time = 16 mins.	Total time = 14 mins.*

Content Areas

<u>Child Content</u>		<u>Parent Content</u>	
School Readiness	9%	Educating the Parent About the Child	20%
Physical Development	12%	Health and Nutrition	16%
Health and Nutrition	2%	Parent Education	1%
Emotional Development	6%	Social Services	3%
		Parental Concerns	32%
Subtotal	29%	Subtotal	72%
		Total time = 16 mins.	

*Discrepancy due to incomplete reporting on Home Visit Observation Instrument.

TABLE V-7

Home Visitor Dominant Interacting With Focal Child

<u>Activities</u>	<u>Home Visitor Activity</u>	<u>Focal Parent Activity</u>	<u>Focal Child Activity</u>
Tell/Explain/Do	46%	22%	65%
Read/Sing	8%	1%	1%
Ask	21%	4%	2%
Listen/Watch	26%	58%	31%
Ignore/Uninvolved	0%	15%	2%
	Total time = 21 mins.	Total time = 16 mins.	Total time = 16 mins.*

Content Areas

<u>Child Content</u>		<u>Parent Content</u>	
School Readiness	36%	Educating the Parent About the Child	7%
Physical Development	26%	Health and Nutrition	4%
Health and Nutrition	7%	Parent Education	0%
Emotional Development	8%	Social Services	1%
		Parental Concerns	12%
Subtotal	77%	Subtotal	23%
		Total time = 17 mins.	

*Discrepancy due to incomplete reporting on Home Visit Observation Instrument.

TABLE V-8

Focal Child Dominant Interacting with Home Visitor

<u>Activities</u>	<u>Home Visitor Activity</u>	<u>Focal Parent Activity</u>	<u>Focal Child Activity</u>
Tell/Explain/Do	43%	28%	88%
Read/Sing	8%	0%	4%
Ask	28%	8%	2%
Listen/Watch	25%	50%	5%
Ignore/Uninvolved	0%	13%	1%
	Total time = 13 mins.	Total time = 13 mins.	Total time = 14 mins.*

Content Areas

<u>Child Content</u>		<u>Parent Content</u>	
School Readiness	35%	Educating the Parent About the Child	4%
Physical Development	35%	Health and Nutrition	3%
Health and Nutrition	3%	Parent Education	0%
Emotional Development	9%	Social Services	1%
		Parental Concerns	10%
Subtotal	82%	Subtotal	18%
		Total time = 14 mins.	

*Discrepancy due to incomplete reporting on Home Visit Observation Instrument.

TABLE V-9

Focal Child Dominant Interacting with Focal Parent

<u>Activities</u>	<u>Home Visitor Activity</u>	<u>Focal Parent Activity</u>	<u>Focal Child Activity</u>
Tell/Explain/Do	26%	49%	90%
Read/Sing	4%	1%	2%
Ask	16%	25%	2%
Listen/Watch	51%	24%	5%
Ignore/Uninvolved	1%	1%	1%
	Total time = 9 mins.	Total time = 9 mins.	Total time = 9 mins.*

Content Areas

<u>Child Content</u>		<u>Parent Content</u>	
School Readiness	37%	Educating the Parent About the Child	8%
Physical Development	33%	Health and Nutrition	5%
Health and Nutrition	5%	Parent Education	0%
Emotional Development	5%	Social Services	1%
		Parental Concerns	7%
Subtotal	79%	Subtotal	21%
		Total time = 9 mins.	

*Discrepancy due to incomplete reporting on Home Visit Observation Instrument.

TABLE V-10

Focal Parent Dominant Interacting with Home Visitor

<u>Activities</u>	<u>Home Visitor Activity</u>	<u>Focal Parent Activity</u>	<u>Focal Child Activity</u>
Tell/Explain/Do	39%	76%	16%
Read/Sing	0%	0%	0%
Ask	7%	15%	11%
Listen/Watch	54%	10%	21%
Ignore/Uninvolved	0%	0%	52%
	Total time = 8 mins.	Total time = 8 mins.	Total time = 6 mins.*

Content Areas

<u>Child Content</u>		<u>Parent Content</u>	
School Readiness	10%	Educating the Parent About the Child	15%
Physical Development	6%	Health and Nutrition	16%
Health and Nutrition	2%	Parent Education	2%
Emotional Development	5%	Social Services	5%
		Parental Concerns	40%
Subtotal	23%	Subtotal	77%
		Total time = 8 mins.	

*Discrepancy due to incomplete reporting on Home Visit Observation Instrument.

TABLE V-11

Focal Parent Dominant Interacting with Focal Child

<u>Activities</u>	<u>Home Visitor Activity</u>	<u>Focal Parent Activity</u>	<u>Focal Child Activity</u>
Tell/Explain/Do	18%	53%	51%
Read/Sing	0%	22%	2%
Ask	5%	20%	5%
Listen/Watch	72%	5%	42%
Ignore/Uninvolved	5%	0%	0%
	Total time = 6 mins.	Total time = 6 mins.	Total time = 6 mins.*

Content Areas

<u>Child Content</u>		<u>Parent Content</u>	
School Readiness	49%	Educating the Parent About the Child	15%
Physical Development	16%	Health and Nutrition	3%
Health and Nutrition	5%	Parent Education	0%
Emotional Development	3%	Social Services	0%
		Parental Concerns	8%
Subtotal	74%	Subtotal	26%
		Total time = 7 mins.	

*Discrepancy due to incomplete reporting on Home Visit Observation Instrument.

TABLE V-12

SUMMARY - DOMINANT PATTERNS BY SITE

TOTAL SIX SUMMATIVE SITES

TOTAL MINUTES

DOMINANT INTERACTOR

DOMINANT INTERACTION

CHILD CONTENT

PARENT CONTENT

DOMINANT INTERACTOR	DOMINANT INTERACTION	CHILD CONTENT	PARENT CONTENT
% HV DOMINANT	% HV-FC/FC-HV	% SCHOOL READINESS & READING	% EDUCATING PARENT IN CHILD DEVELOPMENT
% FC DOMINANT	% FC-FC/FP-FC	% PHYSICAL DEVELOPMENT	% HEALTH/NUTRITION
% FP DOMINANT	% HV-FC-PP	% HEALTH/NUTRITION	% PARENT EDUCATION
% HV-FP/FP-HV		% EMOTIONAL DEVELOPMENT	% SOCIAL SERVICES
% HV-FC/FC-HV		% TOTAL CHILD ACTIVITIES	% PARENT CONCERNS
% FC-FC/FP-FC			% TOTAL PARENT ACTIVITIES
% HV-FC-PP			

ALABAMA (#1)

51 28 21 (38) 28 21 13

(29) 21 9 4 (63) 10 10 0 0 (17) 37

ARKANSAS (#2)

53 28 19 (40) 33 11 16

(28) 15 5 6 (54) (20) 10 0 2 13 45

KANSAS (#3)

64 33 34 33 (51) 25 15 7

(22) 17 1 7 47 (17) 14 1 4 16 (52)

OHIO (#5)

47 62 17 20 (37) 32 20 10

(28) 24 5 6 (63) 9 5 0 3 (21) 38

TEXAS - HOUSTON (#6)

49 24 46 30 23 (42) 35 11

(51) 22 3 2 (78) (14) 3 0 0 5 22

W. VIRGINIA (#8)

104 61 21 16 40 (53) 5 11

17 (27) 3 10 (58) .3 6 1 1 (31) 42

130

TOTAL SUMMARY

(62)

(49)

28

23

35

(37)

16

12

(45)

4

4

7

(60)

11

8

0

2

19

131

TABLE V-13

STATE ALABAMA

HV #	TOTAL MINUTES	DOMINANT INTERACTOR			DOMINANT INTERACTION				CHILD CONTENT					PARENT CONTENT					
		% HV DOMINANT	% FC DOMINANT	% FP DOMINANT	% HV-FP/FP-HV	% HV-FC/FC-HV	% FC-FP/FP-FC	% HV-FC-FP	% SCHOOL READINESS & READING	% PHYSICAL DEVELOPMENT	% HEALTH/NUTRITION	% EMOTIONAL DEVELOPMENT	% TOTAL CHILD ACTIVITIES	% EDUCATING PARENT IN CHILD DEVELOPMENT	% HEALTH/NUTRITION	% PARENT EDUCATION	% SOCIAL SERVICES	% PARENT CONCERNS	
67	67	72	8	18	67	11	18	2	14	15	6	2	37	22	17	0	1	23	
41	41	29	29	41	52	35	12	0	36	21	6	5	68	8	9	0	0	16	
68	68	43	44	13	28	21	20	0	30	20	9	5	64	8	15	0	0	12	
27	27	41	37	22	17	40	32	11	30	19	5	10	64	7	3	0	0	26	
47	47	54	22	24	27	35	20	18	39	24	13	1	77	5	1	0	0	17	
53	53	48	34	17	24	39	6		33	26	12	3	74	6	11	0	0	9	
50	50	51	28	21	38	28	21	13	29	21	9	4	63	10	10	0	0		

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TOTAL

TABLE V-14

SITE ARKANSAS

HV #	TOTAL MINUTES	DOMINANT INTERACTOR			DOMINANT INTERACTION			CHILD CONTENT					PARENT CONTENT						
		% HV DOMINANT	% FC DOMINANT	% FP DOMINANT	% HV-FP/FP-HV	% HV-FC/FC-HV	% FC-FP/FP-FC	% HV-FC-FP	% SCHOOL READINESS & READING	% PHYSICAL DEVELOPMENT	% HEALTH/NUTRITION	% EMOTIONAL DEVELOPMENT	% TOTAL CHILD ACTIVITIES	% EDUCATING PARENT IN CHILD DEVELOPMENT	% HEALTH/NUTRITION	% PARENT EDUCATION	% SOCIAL SERVICES	% PARENT CONCERNS	% TOTAL PARENT ACTIVITIES
1	72	50	42	9	17	41	15	21	37	22	10	5	74	8	11	0	0	8	27
2	61	25	51	24	33	28	26	13	29	24	2	1	56	17	13	0	0	13	43
3	63	71	13	17	17	62	16	6	41	18	7	10	76	10	8	1	0	6	25
4	42	47	12	42	83	6	0	12	15	10	1	3	29	15	17	1	7	30	70
5	63	57	28	16	38	15	13	35	34	8	7	6	55	27	9	0	0	10	46
6	29	64	12	24	74	12	0	14	11	2	0	3	15	30	17	1	14	22	84
7	63	47	38	16	24	52	15	10	33	25	1	13	72	10	2	0	5	11	28
8	71	64	16	20	71	24	2	3	10	5	7	3	25	48	12	0	1	14	84

TABLE V-15

SITE KANSAS

HV #	TOTAL MINUTES	DOMINANT INTERACTOR			DOMINANT INTERACTION			CHILD CONTENT						PARENT CONTENT						
		% HV DOMINANT	% FC DOMINANT	% FP DOMINANT	% HV-FP/FP-HV	% HV-FC/FC-HV	% FC-FP/FP-FC	% HV-FC-FP	% SCHOOL READINESS & READING	% PHYSICAL DEVELOPMENT	% HEALTH/NUTRITION	% EMOTIONAL DEVELOPMENT	% TOTAL CHILD ACTIVITIES	% EDUCATING PARENT IN CHILD DEVELOPMENT	% HEALTH/NUTRITION	% PARENT EDUCATION	% SOCIAL SERVICES	% PARENT CONCERNS	% TOTAL PARENT ACTIVITIES	
54	54	25	(44)	31	42	(49)	0	9	(37)	3	0	11	(51)	18	6	3	3	19	49	
95	95	23	(66)	11	29	(63)	6	15	(16)	(43)	0	5	(64)	17	12	0	1	6	36	
55	55	18	20	(62)	(63)	6	22	9	23	6	2	4	35	20	(20)	2	8	15	(65)	
53	53	22	28	(49)	62	6	22	9	(28)	5	2	10	45	15	11	1	2	(25)	(54)	
60	60	(50)	16	33	(66)	14	11	8	(24)	2	4	4	34	12	23	2	6	(24)	(67)	
69	69	(55)	15	30	(56)	27	12	5	(15)	(24)	0	7	46	18	11	1	7	17	(54)	
136	136	33	(34)	33	(51)	25	15	7	(22)	17	1	7	47	(17)	14	1	4	16	136	
TOTAL	64																			

TABLE V-16

SITE OHIO

DOMINANT INTERACTOR

	TOTAL MINUTES	HV DOMINANT	F. DOMINANT	FP DOMINANT
HV # <u>1</u>	44	38	0	(62)
HV # <u>2</u>	77	(89)	0	12
HV # <u>3</u>	31	(61)	39	0
HV # <u>4</u>	38	(64)	27	9
HV # <u>5</u>	58	34	(44)	23
HV # <u>6</u>	62	(82)	12	6
HV # <u>7</u>	36	(50)	14	36
HV # <u>138</u>				
	49	(62)	17	20

CONTENTS

TOTAL CHILD ACTIVITIES	EDUCATING PARENT IN CHILD DEVELOPMENT	HEALTH/NUTRITION	PARENT EDUCATION	SOCIAL SERVICES	
62	10	6	0	4	18
80	4	0	0	3	13
71	8	0	0	0	20
56	8	11	0	1	24
54	4	9	0	6	25
59	18	2	0	3	19
48	17	8	0	0	25
		5	0	3	2

TABLE V-17

STATE TEXAS - HOUSTON

HV #	TOTAL MINUTES	DOMINANT INTERACTOR				DOMINANT INTERACTION				CONTENT								
		% HV DOMINANT	% FC DOMINANT	% FP DOMINANT	% HV-FP/FP-HV	% HV-FC/FC-HV	% FC-FP/FP-FC	% HV-FC-FP	% SCHOOL READINESS & READING	% PHYSICAL DEVELOPMENT	% HEALTH/NUTRITION	% EMOTIONAL DEVELOPMENT	% TOTAL CHILD ACTIVITIES	% EDUCATING PARENT IN CHILD DEVELOPMENT	% HEALTH/NUTRITION	% PARENT EDUCATION	% SOCIAL SERVICES	% PARENT CONCERNS
HV # <u>2</u>	45	(59)	3	36	3	(56)	41	0	(39)	24	8	5	(76)	(20)	1	0	0	4
HV # <u>4</u>	31	0	(83)	16	0	(40)	24	35	(60)	31	0	0	(91)	(7)	0	0	0	2
HV # <u>5</u>	49	24	31	(44)	(44)	3	35	17	(39)	0	8	4	(51)	(18)	16	0	0	16
HV # <u>6</u>	17	24	0	(76)	0	24	(76)	0	(53)	12	0	2	(67)	(31)	0	0	0	2
HV # <u>9</u>	60	27	(60)	14	1	(72)	18	10	(56)	30	1	0	(87)	(8)	2	0	0	4
HV # <u>10</u>	76	10	(67)	23	12	39	(40)	9	(58)	26	1	1	(86)	(11)	1	0	0	2
HV # _____																		
HV # _____																		
HV # _____																		
140																		
TOTAL	46	24	(46)	30	12	(42)	35	11	(51)	22	3	2	(78)	(14)	3	0	0	

TABLE V-18

SITE WEST VIRGINIA

	TOTAL MINUTES	DOMINANT INTERACTOR			DOMINANT INTERACTION				CHILD CONTENT					PARENT CONTENT					
		% HV DOMINANT	% FC DOMINANT	% FP DOMINANT	% HV-FP/FP-HV	% HV-FC/FC-HV	% FC-FP/FP-FC	% HV-FC-FP	% SCHOOL READINESS & READING	% PHYSICAL DEVELOPMENT	% HEALTH/NUTRITION	% EMOTIONAL DEVELOPMENT	% TOTAL CHILD ACTIVITIES	% EDUCATING PARENT IN CHILD DEVELOPMENT	% HEALTH/NUTRITION	% PARENT EDUCATION	% SOCIAL SERVICES	% PARENT CONCERNS	% TOTAL PARENT ACTIVITIES
HV # 1	95	25	(51)	24	16	(36)	17	31	10	(19)	0	(26)	(59)	0	3	8	3	(31)	28
HV # 2	95	39	(52)	9	17	(69)	12	3	(27)	(32)	3	2	(54)	4	2	0	0	(34)	47
HV # 3	106	(65)	32	4	9	(51)	4	37	(21)	(30)	0	23	(74)	2	2	0	0	(22)	28
HV # 4	64	(59)	13	28	9	(41)	22	28	(24)	(33)	1	8	(66)	5	3	0	0	(27)	38
HV # 7	89	(82)	0	19	(61)	26	4	10	5	(29)	2	8	44	7	14	0	0	(35)	(54)
HV # 8	109	17	(66)	17	5	(80)	15	0	(13)	(24)	1	31	(69)	1	1	0	0	(28)	34
HV # 10	117	(92)	0	9	22	(70)	0	9	(31)	9	18	4	(62)	2	17	0	0	27	35
HV # 11	103	(100)	0	0	3	(97)	0	0	12	(28)	0	8	48	8	4	0	0	(39)	(51)
HV # 12	110	(39)	35	26	20	(59)	6	35	18	(30)	6	8	(62)	5	3	0	0	(31)	39
HV # 14	125	(88)	12	0	20	(80)	0	0	16	(49)	0	15	(80)	0	4	0	0	(16)	20
HV # 15	130	(66)	32	2	40	(45)	0	15	11	(37)	2	2	(52)	0	8	0	1	(41)	50
HV # 16	129	(66)	3	31	44	(49)	2	5	(24)	5	0	6	35	0	8	0	4	(49)	(61)
HV # 17	90	(66)	0	34	(60)	36	0	4	18	(29)	0	3	(50)	1	4	0	3	(19)	47
HV # 18	100	(65)	10	25	(50)	(50)	0	0	13	(19)	0	13	45	0	8	2	(44)	0	(54)
HV # 19	131	(47)	22	30	(58)	17	9	15	15	(32)	1	7	(59)	15	10	0	(20)	0	47
HV # 20	78	(68)	17	16	31	(66)	0	4	21	(38)	1	3	(63)	0	3	0	2	(32)	37
TOTAL	104	(61)	21	16	29	(53)	5	11	17	(27)	3	10	(57)	3	6	1	1	(31)	47

APPENDIX A

SPRING DATA COLLECTION AND INSTRUMENTS

DATA QUALITY AND PROBLEMS

Introduction

A discussion of data quality and problem areas with each of the spring data collection instruments is presented here to highlight factors which limited the scope of the data analyses to some extent.

Incidence of Missing Data

There was a high incidence of missing data for each of the instruments. Although data were obtained for all projects regarding cost, background, and time use for all appropriate staff, there were a number of items on which no response was solicited or recorded. On the Home Visit Observation Instrument, data were collected on only 82.3% of the families that were randomly selected for observation purposes. The main reasons for the missing observation were the termination of one home visitor from the program and the family being out of the service area for a temporary period of time. Records of Home Visit Activities also were not obtained from the total sample of families. In West Virginia, more than 50% of the Records were not obtained for data analysis.

The incidence of missing data limited the scope of several data analyses.

Problem Areas

Following is a discussion of major problem areas with some of the data collection instruments.

● Costs

A. Actual Expenditures and Levered Resources

One of the major problems with the cost instruments was the lack of clarity regarding what constitutes a "levered resource," resulting in inconsistencies in the data collected. Some projects, for example, reported the provision of Food Stamps to families as a levered resource, while others did not. The confusion regarding levered resources made it difficult, if not impossible, for projects to keep complete and accurate levered resources records. As a result, most of the cost data collected are based on estimates rather than documented levered resources.

Cost data collected at the four Head Start Projects were at best sketchy, primarily because of the size of the projects that are involved in the evaluation.

Cost data collected by field staff were frequently incomplete and required follow-up telephone calls to most of the projects.

More refined decision rules regarding cost data and more detailed collection procedures need to be developed and shared with both field staff and Projects during the fall.

B. Time Use Instruments

An effort was made during the spring to determine both how much time each staff member spent during the last work period and how much time he/she normally spends on various tasks. The format of the questionnaire was complicated both for field staff administering it and for project staff. Rather than asking the staff to specify whether the time spent last period was more or less than usual, and how much more or less, it would have been better to ask how much time the staff member normally spends on the various tasks.

In the majority of sites, staff under or over estimated the time they spent on the various tasks. Considering how difficult this estimating task is, the total time for all tasks combined came relatively close to the actual hours the staff reported they worked. The following is an example of how the actual hours worked and the total of all time on the various tasks combined compared with some of the projects for home visitors.

Total Hours Reported Working	51.9	35.3	52.9	35.1	50.8	43.3
Total Hours Worked	43.2	37.4	51.0	41.0	47.3	41.0

- Home Visitor Background

Generally, the Home Visitor Background questionnaire yielded useful data. Not all home visitors completed the questionnaire consistently, however. One specific problem with the Questionnaire was the categories used to determine the home visitor's educational background. While the categories used in the Questionnaire were consistent with the Home Start Information System, they were different from those used in the Parent Interview.

- Record of Home Visit Activities

One of the major problems with this self-administered instrument was that the time spent on various activities was recorded in terms of a "range" of minutes, rather than actual time. This presented problems in the analysis of the data. Although it is difficult for home visitors to estimate the exact amount of time spent on specific child and parent activities following the home visit, an attempt will be made during the fall to obtain more precise information.

- Home Visit Observation Instrument

Because of the complex nature of the Home Visit Observation Instrument, some community interviewers failed to note the time started and stopped for certain activities or did not indicate a major mode of interaction or major content area of the activity. This resulted in considerable loss of data. In analyzing the Home Visit Observation data, several of the interaction and content categories were combined. To simplify Home Visit Observations both for collection and analysis purposes, the Instrument underwent major revisions for the fall data collection effort, hopefully resulting in better quality data. Data quality of the Home Visit Observation Instrument is reported in Appendix B.

APPENDIX B: HOME VISIT OBSERVATION
INSTRUMENT
RELIABILITY

Introduction

The purpose of this section is to determine inter-judge reliability of the various observers on the Home Visit Observation Instrument. Since no reliability data were collected prior to the spring of 1974 field effort, no comparisons will be made here.

In March of 1974, an Advisory Panel to the Home Start Evaluation staff discussed the necessity of collecting inter-judge reliability data on the Home Visit Observation Instrument. Several methods of reliability data collection were considered including: (a) having two observers accompany the home visitor on a home visit; (b) preparing video-taped home visits and having observers in all sites record their observations; and (c) developing home visit scenarios to be role-played, observed and recorded by observers. The latter method was selected because method (a) could double observer effects on the home visit¹ and method (b) was not feasible because of time and cost constraints. A total of five home visit scenarios were developed -- one to be scored at the training conference for community interviewers and the other four to be observed at periodic intervals during the course of the data collection effort.

The home visit "scenarios" presented a number of problems for observers. First, the home visit scenario had an element of unreality since all roles (home visitor, focal parent and focal child) were role-played by adults. Second, the home visit scenario was considerably different from site to site in terms of the length of time that was spent on various content areas and activities. Overall, the total length of the home visit scenarios was considerably shorter than the average home visit observed in

¹To insure that the observed home visit is as natural as possible, observers are required to have made at least one or two visits to the family prior to observing a visit. Since only one person is responsible for summative data collection for a specific family, it would not be possible for the second observer to get acquainted with the family prior to the observed home visit.

each of the sites. Some of the activities were so short (one minute) to make it difficult to record.

Although all of the home visit scenarios were analyzed, this section will report only the results of one randomly selected home visit (Scenario III).

Total Home Visit Scenario Time

There was some variation in the total time reported for the home visit scenario within sites. 86% of the observers recorded the same amount of time for the scenario (plus or minus one minute); 3% varied by 2 minutes; and 11% varied by more than 3 minutes. The only explanation that can be given is that some of the observers started to record the first activity sooner than others or took longer to complete the last activity.

Dominant Home Visit Patterns

On the Home Visit Observation Instrument, observers record all interaction patterns that occurred during the activity and the content of the activity. At the conclusion of the activity, observers indicate the person who was most dominant during the activity, the most dominant interaction pattern, and the major focus of the activity. To determine inter-judge reliability with and across projects regarding dominant interaction patterns, a model was developed showing what the home visit looked like. For example, the major interaction patterns were rated. If observers were in agreement with the model, each observer was given one point. If the ranking of interaction patterns was reversed, observers were accorded one half point. No points were given if the observer showed a totally different ranking of interaction patterns. Site points were totalled and divided by the perfect ranking in order to obtain a percent of site inter-judge reliability.

Table I shows an overall inter-judge reliability of 76%. The category accounting for the lowest amount of reliability is the Dominant Interactor. Observers were most reliable on the Dominant Interaction Pattern (89% agreement). Observers in Alabama and Ohio showed the lowest percent of agreement on dominant home visit patterns.

Although the inter-judge reliability on the dominant home visit patterns is relatively high, it is important to explain some of the variation in observations since it highlights some basic problems with the Home Visit Observation Instrument.

- (1) Major Interactor: It is frequently very difficult to determine the person who did most of the interacting during the course of the home visit. For example, if the home visitor and focal parent are both actively doing things with the child, either the home visitor or focal parent could be shown as the most dominant interactor. This is the primary reason for the low inter-judge reliability in this area. As is shown in the table, the reliability increases when the interaction patterns are combined (for example, home visitor to focal parent and focal parent to home visitor), disregarding the dominant interactor.
- (2) Visit Orientation (Child or Parent): The variation in how visit orientation is observed and recorded can best be illustrated by the following example:
 - The home visitor shows the mother how to do an activity with the child and explains the purpose of the activity. The focal parent then does the activity with the child. Although it could be said that the parent was learning throughout the activity how to educate her child, only the time home visitor and parent spent discussing the activity and its purpose should be recorded as a parent activity. The time the parent did the activity with the child should be recorded as child activity time. If the content of the activity is not properly noted, a variation in visit orientation among observer results.

TABLE I: Inter-Judge Reliability -- Dominant Home Visit Patterns

	ALA	ARK	KAN	OHIO	TEX	W.VA	% INTER-JUDGE RELIABILITY
TOTAL # OF OBSERVERS	3	5	3	2	3	3	19%
FOCAL PARENT DOMINANT INTERACTOR	2	2	2	2	2	1	58%
HV-FP/FP-HV DOMINANT INTERACTION	2	5	3	2	3	2	89%
VISIT ORIENTATION (PARENT/CHILD)	3	4	1	2	1	3	74%
SCHOOL READINESS	2	4	3	1	2	3	79%
PHYS. DEVELOPMENT	2	4	3	1	2	2	74%
INTERPERSONAL PROBLEMS	2	5	2	1	3	3	84%
NUTRITION	2	4	2	1	3	3	79%
SITE INTER-JUDGE RELIABILITY	71%	80%	76%	71%	76%	76%	76%

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- (3) Major Content Area: Many of the activities in a home visit have more than one focus. For example, a fine motor activity of cutting and pasting shapes and then choosing and identifying shapes and colors could be classified as both a fine motor (recoded for analysis purposes as physical development, combining both fine and gross motor) and a basic concepts (recoded as school readiness) activity. It is frequently extremely difficult to decide which of the two content areas is major. The example used in (2) "Visit Orientation", accounts for most of the discrepancies in inter-judge reliability.

A major difficulty with the Home Visit Observation Instrument is the definition of what constitutes an activity. In the scenario presented here, observers frequently recognized a different number of activities which decreased inter-judge reliability. For example, if two observers regard the first two minutes of the visit as one activity and consider the major content to be Emotional Development, and the third observer records the first five minutes as one activity, with Emotional Development and Fine Motor content noted, the third observer may not have indicated that a substantial amount of time was spent on Emotional Development.

Time Spent on Various Home Visit Patterns

Table 2 presents a more detailed profile of the visit, showing that reliability decreases slightly when inter-judge reliability is determined on the basis of the amount of time that was spent on various content areas and the interaction patterns. A mean time for each category was used for computing the percent of site inter-judge reliability. If an observer recorded the amount of time plus or minus 2% of the mean, she would be given one point. A two-minute range was considered as acceptable on categories with a mean of 10 minutes or less.

Sixty-five percent of the observers are in agreement regarding the amount of time spent on the dominant interaction patterns and child and parent activities. The lowest agreement was reached on the amount of time spent on dominant interaction mode (42%). It is interesting to note that this category was most reliable (89%) when looking at whether or not there is agreement regarding the dominant interaction itself. Kansas shows the lowest inter-judge reliability in time reported at all six sites. This is primarily because one observer recorded the visit as being 40% shorter than the other two observers.

Although inter-judge reliability for the scenario is acceptable, an analysis was conducted of all Scenario data in order to determine whether there were patterns of discrepancies for the various observers. For example, if one observer continuously showed a heavier emphasis on the child in all of the scenarios, the Home Visit Observation data could be adjusted for observer bias. This analysis did not show any consistent discrepancy patterns, however.

TABLE 2: Inter-Judge Reliability in the Amount of Time Spent on Home Visit Patterns

	ALA	ARK	KAN	OHIO	TEXAS	W.VA	% INTER-JUDGE RELIABILITY
TOTAL # OF OBSERVERS	3	5	3	2	3	3	19
FP DOMINANT	2	2	1	1	2	2	53%
HV FP/FP HV DOM. INTERACTION	1	2	1	2	1	1	42%
VISIT ORIENTATION	1	5	1	2	3	3	79%
SCHOOL READINESS	3	2	2	2	2	2	68%
PHYS. DEVELOPMENT	3	3	3	2	3	1	79%
INTERPERSONAL PROBLEMS	2	5	0	0	3	1	58%
NUTRITION	3	5	1	0	3	2	74%
SITE INTER-JUDGE RELIABILITY	71%	69%	43%	64%	81%	57%	65%

Home Visit Observation and Record of Home Visit Profile Comparison

The Home Visit Observation data and the Record of Home Visit Activities (completed by home visitors) were compared to determine whether the two data sources showed major variations in the emphasis of the home visit. As is shown in Chapter III: The Home Visit, Home Visit Observation data and Record of Home Visit Activities data show only a minimal difference in the amount of time spent on the various activity content areas.

Conclusions

The findings reported in Chapter III and the inter-judge reliability of observers discussed in this section indicate that the Home Visit Observation data present a relatively accurate picture of home visit interaction patterns and focus. Inter-judge reliability is, however, not high enough for the data to be used in an effort to describe and explain variations in child and parent outcomes. It should be regarded primarily as descriptive data on the home visits.

SCENARIO III - PREVISIT INTERVIEW

1. WHEN DID YOU START WORKING WITH THIS FAMILY? In August last year
2. HOW FREQUENTLY DO YOU VISIT THE FAMILY? Once a week
3. HOW LONG IS A USUAL VISIT WITH THIS FAMILY? It usually lasts one hour
4. WHAT ARE YOU GOING TO DO DURING YOUR VISIT TODAY? We are going to play two games, one identifying different foods and colors, and the other one is a game where Randy can practice counting and identifying colors.
5. WHY DID YOU CHOOSE THESE ACTIVITIES? Randy isn't eating very well, so we will talk about different kinds of foods and he really needs to practice on colors and counting.
6. DID ANYONE HELP YOU PLAN THESE ACTIVITIES? No
7. HAVE YOU BROUGHT ANYTHING WITH YOU TO TAKE TO THE HOME? Yes - a picture game, stringing beads and cards and a puzzle.

Home Visitor = Ms. Seal
Focal Parent = Mrs. Warner
Focal Child = Randy

Materials needed: String, beads,
cards with pictures
denoting amounts of food

Home Visitor: (knocks at front door. Mrs. Warner answers)

Mrs. Warner: Hi, Mrs. Seal. How are you?

Home Visitor: Pretty good. How about you? (They walk into living room)

Mrs. Warner: Just fine.

Home Visitor: And Randy?

Mrs. Warner: He's been playing with the boy next door, and should be right back since I told the boys' mother what time you'd be here.

Home Visitor: How's his ear? Last time I was here it was hurting him.

Mrs. Warner: Oh, it's just fine. I wanted to tell you about the recipe you gave me. Let's go into the kitchen. (They sit at kitchen table). What a great cake -- and so easy. Randy even ate it - and he doesn't like to eat much of anything.

Home Visitor: I'm glad you liked it. We're trying to put together a book of recipes from all the Home Start mothers. Do you have any you'd like to put in?

Mrs. Warner: Yes - a good one for inexpensive meatloaf. When are you doing this? (Randy enters) Oh, here's Randy.

Randy: Hi!

Home Visitor: Hi, Randy. How's your friend next door?

Randy: Fine. I wanted to stay playing with him. I like him.

Home Visitor: Well, I'm glad you came home. I have some special things to share with you. (To Mrs. Warner) -- By the way, we'll be trying to collect recipes from Mothers during the next month. If you wouldn't mind sharing it I'd love to include your meatloaf recipe and any others you would like to have in the book.

Mrs. Warner: Good. I'll be thinking of some others. Will we be able to get a copy of the book?

Home Visitor: Sure. We'll talk more about it next week when you've had a chance to check over your recipes.

Home Visitor (to Randy) How's your new bike?

Randy: Great. Wanna see it? It's in the backyard.

Home Visitor: Sure - if it's okay with you.

Mrs. Warner: Fine.

(Randy, Home Visitor and Mother go outside)

Randy: Here it is. It's blue.

Home Visitor: Do you know how many wheels it has, Randy?

Randy: Four, I mean three. And you know what those things are in between the wheels?

Home Visitor: I'm not really sure what they're called. What are they?

Randy: They're spokes. My Mom told me that.

Home Visitor: Now I remember. Can you show us how you ride?

Randy: Sure. Watch. (Randy rides up the driveway).

(Pause - watch Randy ride)

Mrs. Warner: (to home visitor) .. Do you know anyone I can talk to about fixing more foods that Randy will eat. He hardly likes anything - and I'm afraid he'll get sick. He just refuses vegetables, and cheese and eggs. He'll eat some kinds of meat - my meatloaf, for instance, but not many that's for sure. He's sure a good boy otherwise, though.

Home Visitor: I think the next Home Start meeting is supposed to deal with meal planning. You know, though, it would be good for you to talk to a nutritionist. She may be at the meeting, which is Thursday night at 7:30. I'll check and call you tomorrow. By the way, I thought we'd play some games with pictures of food today.

Mrs. Warner: Great. It may be good for him to talk about it.

(Randy returns)

Randy: How'd you like my riding?

Home Visitor: You're good, especially for a new bike rider.

Mrs. Warner: He had help from his older sister Anne. Didn't you, Randy.

Randy: Yes, but I learned most by myself.

Home Visitor: (to Randy) I've got a game for you to play. Let's go back inside.

Randy: Okay, but later can I come back and ride my bike.

Mrs. Warner: We'll see how late it is.
(all three go back inside to living room)

Home Visitor: Randy, where should we sit.

Randy: Here on the floor. (All 3 sit)

Home Visitor: Randy, here are some pictures and each one has another one that looks just like it. Can you find two pictures that are the same?

Randy: Hmm. (picks 2 pictures) Yea, here's two pictures of bananas. I don't like bananas very much.

Mrs. Warner: Randy, you like them sometimes, don't you?

Randy: Well, I guess - sometimes.

Home Visitor: That was a good match. Can you find two more pictures that match?

Randy: Hey, here's 2 that are the same. Hamburgers (points to 2 pictures)

Home Visitor: Good.

Randy: And two glasses of (pause) - yuk - milk.

Home Visitor: Don't you like milk?

Randy: No!

Mrs. Warner: He sure doesn't. Not even with peanut butter sandwiches.

Home Visitor: Oh, I like it. It's pretty good.

Randy: Well, then you keep it. Here's one - no - two breads. And two oranges. That was a good game. Any more?

Home Visitor: Well, I thought maybe you could tell me about the colors of all the pictures. How about this one? (points to oranges)

Randy: Easy. They're orange.

Home Visitor: Right! How about the hamburgers? (points to hamburgers)

Randy: Sorta brown. And bananas red - (He points to bananas) no - green, I know my colors.

Home Visitor: Are you sure the bananas are green? (Home visitor points to bananas)

Randy: Yes.

Mrs. Warner: Randy, what's the color of your shirt (points to Randy's yellow shirt)

Randy: My own special yellow shirt.

Mrs. Warner: Aren't the bananas the same color?

Randy: Yes, I guess. Yellow for bananas.

Home Visitor: Good. How about milk. What color is that?

Randy: White.

Home Visitor: Randy, I brought another game. Look (shows Randy & Mother the game). Its stringing beads. Have you ever done that?

Randy: No. We don't have beads here.

Home Visitor: (to Mrs. Warner) - Mrs. Warner, have you ever worked with beads?

Mrs. Warner: No, I don't think so. How does this game go?

Home Visitor: (to Mrs. Warner) - Okay. Here are small cards of foods of different colors and amounts, some string, and a box of beads. Have Randy put on the string a picture and follow with the number of beads represented by the number of pictures and the same color. For example, here, lets string a picture of 3 bananas. Randy, what color is this (points to banana)

Randy: I know that. It's the same color as my favorite shirt. Yellow.

Home Visitor: Good! Yellow. And its 3 bananas. (To Mother) So Randy strings behind the picture the yellow bananas 3 yellow beads. Want to try, Mrs. Warner? (Home visitor removes picture from string).

Mrs. Warner: Sure. (to Randy) Randy. Here's some beads of a lot of different colors; and here's a picture of some bananas. String the banana picture (waits for Randy to do it)

Randy: (Randy strings picture and shows it to his Mother) Is that okay?

Mrs. Warner: Fine. Now count the bananas.

Randy: Three

Mrs. Warner: What color are they.

Randy: Yellow.

Mrs. Warner: Okay. Find the yellow beads and string 3 of them behind the picture of the 3 bananas.

Randy: (Randy begins counting out yellow beads) one, two, three. (He strings beads) How's this?

Mrs. Warner: Good. Okay, pick another card (Randy chooses another)

Randy: It's apples. Red apples

Mrs. Warner: How many?

Randy: (counts softly to self) Six I think.

Mrs. Warner: Good. What are you going to do?

Randy: String it and find red beads.

Home Visitor: That's good Randy.

Mrs. Warner: Here are some more cards. I want to talk to Mrs. Seal now so we'll be back in a minute. Is that all right with you?

Randy: I want to ride my bike now.

Mrs. Warner: First, string 2 more cards and the beads that go with them, then you can bike.

Randy: Okay.

Mrs. Warner: (to home visitor) Let's get a cup of coffee in the kitchen.

Home Visitor: Fine. (both home visitor and Mrs. Warner go into kitchen)

Mrs. Warner: (to stove, turns on stove) I just remembered that I'd been wanting all week to ask you about this. (gets out 2 cups, some instant coffee and spoons). You take yours black, don't you. (Puts coffee in cup)

Home Visitor: How did you remember?

Mrs. Warner: I don't know, but somehow I just did. Anyway, I almost forgot to

tell you about Brad, you know, my husband. He's staying out late at night with the guys and when I ask him where he's been, he just snaps at me. I know he doesn't like his job anymore, but we need the money so bad. If he didn't have that job, we'd starve. He just won't talk to me anymore, not just about his job problems, or being out late, but anything. Just a bit ago we were talking about everything together - we've only been married 4 years.

Then I try to get him to help me with Randy's eating problem and he says that's my problem - and that's not true. And Randy doesn't help 'cause he doesn't get along well with his Father. I just don't know what to do. I'm really at a loss. Oh, the water's ready (pours it into cups). Any sugar?

Home Visitor: No, while I was listening to you talk about your husband, I was thinking about a friend of mine who had a problem that was almost the same. She talked to some people at the Family Counseling Service. They asked her if both she and her husband could come in together. She at first had trouble talking her husband into it, but finally convinced him and they talked to a fellow, I can't think of his name right off the top of my head. Things seem much better now. The place doesn't promise miracles, but just having a third party to talk to may be a big help. Hmmm - good coffee (drinking coffee)

Mrs. Warner: Sounds like a good place, but I'd be pretty surprised if Brad agreed to go. He's awfully stubborn.

Home Visitor: You can talk to him and see how he feels about it. It may take a bit of time to talk him into it. Having the clinic so close is a help. At best he can't say it's too far to go. Let me talk to my friend and see if she can remember the man's name she talked to, or if she knows anyone else there who is especially helpful. Let me make a note of that (she pulls a pad of paper out of her purse, and a pen, and writes a note to herself). I'll call you, let me see, on Saturday, if I find out his name by then. That way, when you talk to Brad, you'll have a name to give him.

Mrs. Warner: Okay, I'll give it a try. I don't think he'll agree. He'll probably say there's no problem and that I'm making up stories in my head. But I have to do something about this, so I'll ask.

(Randy runs in carrying string of beads)

Randy: (to Mother and home visitor) - Look I strung a picture of bananas, apples, cars, houses and cats - and I strung the beads too. It was fun. Did I do it right?

Mrs. Warner: Let's see (checks over string). Sure looks good to me. Mrs. Seal?
(hands them to home visitor)

Home Visitor: (Looking over them) Very good, Randy. No mistakes!

Randy: Thanks. (Looks at Mother) Can I bike now?

Mrs. Warner: Sure.

Home Visitor: Oh, Randy, I almost forgot. I brought you a puzzle that you can use during the week. Here it is (She pulls it out of her bag and hands it to Randy).

Randy: Oh Boy! A puzzle! Can I really use it?

Home Visitor: Sure. Till next time I come. Just take care of it.

Randy: Okay.

Home Visitor: I'll walk outside with you, Randy. I should go to visit another family now.

Mrs. Walker: I'll walk outside too. It's so nice I can't stand to stay inside.

Home Visitor: That's for sure. (All 3 walk to door and go outside.)

Home Visitor: Bye, see you Thursday. Hopefully talk to you on Saturday.

Randy: Bye.

Mrs. Warner: Yes, talk to you on Saturday.