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ABSTRACT

The central objective of the Childhood and Parenting Research Program was to assist member states of the Appalachia Educational Laboratory in determining ways to work with families to foster the development and educational progress of children. To achieve this objective, research, reporting, analysis, and dissemination activities were conducted in 9 "scopes" or activity areas. In the form of objectives, scopes were defined as the following: (1) complete regional parenting surveys, including base sample and model parenting program surveys: (2) complete family case studies of the Home-Oriented Preschool Education (HOPE) follow-up study: (3) prepare a position paper on planned actions in field settings: (4) prepare an integrated report of the HOPE follow-up study: (5) write an account of procedures found to be most useful in the assessment of rural Appalachian families: (6) derive field measurement batteries from HOPE follow-up study measures: (7) complete preparation of the developmental theory of parenting and refine the theory's main propositions based on experience with the Indirect Parent Interview: and (8) disseminate results: and (9) interpret findings of the surveys to the Childhood and Parenting Task Force as well as to local and state educational agencies in the region. Activities conducted within each of the scopes of work are summarized in the initial section of this final report, and work done in scopes 1 through 8 is reported in detail in the appendices. (Author/RH)

Childhood and Parenting Research Program

FINAL REPORT

NIE CONTRACT 400-80-0101, Project A-3

Edward E. Gotts, Alice M. Spriggs, and Mary Snow

Appalachia Educational Laboratory, Inc.
Charleston, West Virginia 25325

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CHILDHOOD AND PARENTING RESEARCH PROGRAM

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Overview

The Childhood and Parenting Research Program was undertaken under a grant from the National Institute of Education in June, 1978, for an eighteen month period. The first eighteeen months under the grant were used to locate samples, recruit staff and select instruments which could be used in the major data gathering activities of the Program. All major data gathering activities of the Program were also commenced under the grant and most of them were completed prior to the onset of the present contract period which began December 1979. The central objective of this research has been a twofold one: (1) to assist A.E.L.'s member states in determining and selecting effective courses of individual and collective action to foster children's development and educational progress by working with families and (2) to develop a knowledge base, theoretical framework, evaluation and research tools, and the necessary field contacts to permit the first objective to be achieved. The present final report covers activities conducted during the initial year of the contract and reviews as many activities from the period of the grant as are necessary to make the report intelligible. For additional information on the activities of the grant period, the reader is referred to a final report available from the Education Resources Information Clearinghouse as ERIC Document Number ED 183 293.

Further background perspectives are reported by an overview abstract of the study published in Research Relating to Children, 1978-1979, Bulletin 42. 42-MA-1 "A Longitudinal Study of Relationships Between Parental Characteristics and Children's School Outcomes in Central Appalachia."

Scope of Work

The work conducted from December 1979 through November 1980 consisted of the following scopes of work:

ONE. Complete Regional Parenting Surveys, including base sample survey and survey of model parenting programs, data coding and analyses, and report of findings.

TWO. Complete family case studies of HOPE Follow-Up study, including study of younger siblings.

THREE. Prepare from findings of ONE, a position paper on planned actions in field settings, showing the generalizable nature of what could emerge from such actions.

FOUR. Deleted from FY80 work by agreement with NIE.

FIVE. Based on the analyses of the HOPE Follow-Up Study data, prepare an intergrated report of the Study's findings.

SIX. Write up from ONE and FIVE the procedures found to be most useful in the assessment of rural Appalachian families.

SEVEN. Derive field measurement batteries from HOPE Follow-Up Study measures studied in FIVE.

EIGHT. Complete preparation of the developmental theory of parenting (Appendix K of proposal) and refine the theory's main propositions based on experience to date with the Indirect Parent Interview.

NINE. Disseminate results of FIVE through SEVEN.

TEN. Disseminate results of ONE.

ELEVEN. Interpret findings from ONE to Task Force and regional LEA's and SEA's through carefully designed, brief written communications.

TWELVE and THIRTEEN. Deleted from 1980 work by mutual agreement with NIE. This work is to be conducted in 1981.

Summary Report

The design of the final report calls for examining in this section in a particular schematic order the various scopes of work as to the general purposes, procedures and outcomes of each. Much more detailed information on the individual scopes of work appears in a series of related appendices, as described below. This design will allow the reader who wishes to have a comprehensive overview of the entire program of research to examine it in this summary section and then to turn for more detailed information to those particular appendices which are of interest. The design will also allow us to disseminate as individual and separate pieces the reports contained in each of the appendices, to meet the needs of particular groups who do not require the entire report.

Scope of Work ONE consists of two parts: The Base Sample Survey, as described in Appendix A and a Survey of Model Programs, as described in Appendix B. The case studies performed in conjunction with the HOPE Follow-Up Study (Scope of Work Two) are described in Appendix C.

A position paper (Scope of Work THREE) was developed based on findings from the overall research program plus a special literature review conducted in 1980 plus results of a major regional needs assessment also carried out in 1980. The position paper examines actions which should be undertaken

in regional settings to improve the effectiveness of school/family relations. This position paper appears in Appendix D.

Major findings from the HOPE Follow-Up Study (Scope of Work FIVE) are reported in Appendix E. Appendix F contains a report based on Scope of Work SIX, regarding procedures found to be most useful in the assessment of the needs and outcomes of programs among rural Appalachian families. Recommended field measurement batteries for specific purposes (Scope of Work SEVEN) are considered in Appendix F.

The HOPE Follow-Up Study used a developmental framework for conceptualizing the parental role in relation to child-rearing. Specifically, a special interview was developed to examine this aspect of the parental role. Appendix G contains the results of Scope of Work EIGHT's examination of this special interview as to how effective it was in measuring a developmental dimension of the parental role.

Scopes of Work NINE, TEN, and ELEVEN all call for dissemination activities. These are included in the main body of this report together with an account of internship support, training, and technical assistance activities of the Research Program which have assisted in the dissemination effort as well as in A.E.L.'s institutional objective of promoting educational equity. The organization of the summary report is as follows: (a) the base sample survey portion of the Regional Parenting Surveys is examined first; (b) the Model Parenting Programs study is next described; (c) the HOPE Follow-Up Study's findings are reported; (d) an overview is provided of the Family Case Studies and of a special study of younger siblings; (e) Scopes of Work SIX and SEVEN are reported together and their implications for the assessment of family needs and for the evaluation of

family-oriented programs are examined; and (f) the dissemination, training, internship, and technical assistance activities of the Research Program are summarized. Once more the reader is referred to the appropriate appendices as cited earlier for more detailed information on each of the subparts (a-e).

Regional Parenting Surveys: Base Sample Survey

Purpose. The purpose of the Base Sample Survey has been to obtain current information about the experiences and need of parents in A.E.L.'s seven member-state region. This includes knowledge of the varied life circumstances of families and the degree to which parenting programs and services are known, utilized, and desired by parents. Information was also sought regarding the social networks of parents and their relationships to sources of advice and help. Particular emphasis was placed on inquiry regarding the role of public schools and such community resources as the medical profession for providing assistance to families.

Scope. Random samples of parents in twenty-four counties across five states have been interviewed. The states involved in this portion of the study are Kentucky, Ohio, Tennessee, Virginia, and West Virginia. The total number of interviews planned is 1,160 of which the major portion (920) are interviews with parents of third graders. For comparison purposes, 120 interviews of parents of kindergarten students and 120 interviews of tenth-grade students are being conducted. Parents are also being sampled in Alabama and Pennsylvania by use of a special questionnaire which parallels the interview form used in the preceding five states. This procedure will permit comparisons to be made between the interview and questionnaire approaches to obtaining similar information on family needs

and support systems. Completion of this Scope of Work has been somewhat delayed because the data gathering phase required additional funds beyond those available under the contract. Eventually additional funds were provided by action of the A.E.L. Board from Laboratory reserve funds. N.I.E has accommodated this delay by allowing A.E.L. to complete various coding and data analysis activities in the first part of fiscal year 1981. Accordingly, the findings reported in Appendix A are for a portion of the overall sample, as will be indicated later.

In the same local districts from which random samples of parents were selected, a survey was conducted of programs and services available to parents in each locale. Some of this information from the survey was then incorporated in the form of specific interview questions in the overall parent instrument. Thus, the parent interview was customized to each community in which it was used.

Methods. Information about parenting experiences and needs has been sought directly from parents themselves by means of personal interviews. Counties were selected randomly from within the major categories: Appalachian Rural, non-Appalachian Rural, and Urban.

The parents interviewed in each of the selected counties are a random sample of all parents of children in the particular grade level (in most cases, third grade) in that county. The random nature of the sample was essential in the design of the study in order to insure that the whole range of family and parenting situations would be represented. This means that within the total sample there has been an equal chance for representation of parents from two parent, single parent, and extended family arrangements; for parents of normal and handicapped children; for parents of differing

socio-economic circumstances; and so forth.

Because of the necessity to maintain a good rapport between the parent respondents and the interviewers, local residents were hired and trained to serve as interviewers in each of the school district sampling areas. It was they who carried out the survey of local programs and services, selected the random sample according to A.E.L. specifications, contacted and interviewed parents, and returned completed interview protocols to A.E.L.'s offices. All data collection procedures have followed the guidelines set up in a protection of human subjects review process. Thus, parents who participated did so on the basis of informed consent. All records have been maintained to assure their confidentiality.

Procedure. Initially all public school superintendents within the selected counties were contacted. Their cooperation was requested in (a) obtaining random samples of parents and (b) in locating local interviewers. In many instances, the superintendent designated a contact person within the school system to work out the necessary details with A.E.L. staff.

An all-day training session for local interviewers was held in a central location in each of the five states. Following this, the local interviewers conducted practice interviews and engaged in a telephone conference with A.E.L. staff for supervision and feedback before proceeding with the remainder of their work. Only after this preliminary work did the interviewers begin mailing letters to parents and setting up appointments for actual interviews.

Data Analysis. Data are being analyzed in several ways: by state, by overall region and by the previously mentioned major categories across

states, namely Appalachian Rural, non-Appalachian Rural and Urban. In addition to descriptive reports dealing with geographic areas and sub-regions, there are also to be intense analyses of subgroups representing differing family and parenting situations, for example, by demographic characteristics, by types of social networks used, etc.

Findings. Interviews have now been completed for 100 percent of the sample for Virginia and West Virginia. These results are reported in Appendix A. Data collection has gone particularly well in view of the quite varied field conditions and the general design of the study which calls for A.E.L. preparation and support of local residents as interviewers at great distances from our offices.

It is already possible to observe some impact of the study apart from the knowledge generated. The interviewers have almost uniformly commented about the fact that they have learned things about their own communities that they did not previously know. These new insights have been both into community resources available and into the quite varied conditions of local families. Parents responding to the interviews have frequently expressed to the interviewers that the experience of participating in this process has caused them to reflect upon a variety of family-related issues that they had not thought about previously. The cooperating local education agencies have expressed interest in receiving the results of the interviews with the parents in their compiled form and several have also been interested in the survey of community services. In accordance with the study's plan, findings will be made available in descriptive summary form to assist schools, agencies, organizations, and state level planners who desire to use this information in planning programs and services for parents or for modifying

existing programs and services.

It appears that the purposes of the study will be accomplished, based on the kinds of information being provided both by community agencies and by the parents interviewed. The parent interviews are particularly rich in the information that they provide regarding parent-teacher and parent-physician interactions. Parents have indicated both how successful they feel these interactions are and how they could be improved. Such information is of considerable value in planning ways to improve school/family relations. Another particularly rich area in the parent interview data is in their definition of "good mother" and "good father." Insights from these definitions can be beneficial to schools and other agencies for determining whether their approach to working with parents is effective or whether it is at cross purposes. Data from the parents further indicate the sources of information and help on which they rely, including the relative importance of these various sources to them.

It is interesting that, although parents express various dissatisfactions with schools in the interviews, they mention the school first as a resource to which they look not only for help with their child's academic development but also for assistance with social and emotional difficulties that the child may experience. They also tend to view schools as highly influential in determining the child's future -- perhaps as influential upon the child's development as they themselves as parents are.

In addition to the foregoing areas, Appendix A also discusses the code books used to extract information from the parent interviews; presents the general approach to identifying dependent and independent variables within the data; and affords an overview of the highlights of findings for the two states for which data are now complete.

Regional Parenting Surveys: Model Parenting Programs

Purposes. The purposes of the survey of Model Parenting Programs are: (a) to seek an understanding of the reasons for the favorable impact of these programs on parents and children; (b) to determine how transferable particular model programs might be to another population or locale; and (c) to be able to provide the information from a and b to those interested in inaugurating parenting programs or in improving upon existing programs.

Procedures. Programs for study were selected based on recommendations of the Childhood and Parenting Task Force (a regional group which works together with the staff of this A.E.L. Research Program), members of the A.E.L. Board, advisors in local education agencies, and through prior contacts that A.E.L. Programs staff have with programs throughout the A.E.L. region. Programs were selected to represent the various categories of a taxonomy of parenting programs and services that was previously developed and reported by A.E.L. staff in the report to N.I.E.: Review of Major Programs and Activities in Parenting (Charleston, WV: A.E.L., Inc., 1979). That taxonomy is reproduced here as Table 1. An effort was made to obtain programs representing each of the major categories within the classification.

A.E.L. staff developed an open-ended interview. Most interviews were conducted by telephone by one of two staff members. A small number of program surveys were conducted in person, particularly at the stage that the interview itself was being developed and checked for adequacy. The interview was conducted in a manner that allowed considerable latitude to the program personnel to express in their own terms and in their own order of priority those things which they thought to be important to

TABLE 1

Parenting Program Classifications[1]

I. Primary Focus on Parents

A. Parent Groups to Meet Parents' Own Needs While Dealing with Parenting Issues (Examples: Parents Without Partners; Transactional Analysis; AEL Parent Discussion Guides)

B. Training/Educating Parents to be Coordinators of Forces and Resources in Their Children's and Their Own Lives (Examples: voucher system; The National Parent Federation for Day Care and Child Development)

C. Parent Training for New (Parenting) Roles Outside the Home (Examples: ACYF efforts to prepare parent paraprofessionals; parents as tutors; home visitors; classroom aides)

II. Parental Skills Focus: General

A. For Adults

1. General Parent Education (Preventative/Developmental) (Examples: Child Study Association of America; parent "education" programs)

2. General Parenting Training (Preventative/Developmental) (Examples: Florida model; Verbal Interaction Project)

3. General Parent Education (Corrective/Ameliorative) (Examples: foster parent training)

4. General Parent Training (Corrective/Ameliorative) (Examples: TADS four Training Parents to Teach Models; Heber's Wisconsin program)

B. For Children

1. General Pre-Parent Education (Preventative/Developmental) (Examples: Exploring Childhood Curriculum, if non-experiential; Family Life Curriculum)

2. General Pre-Parent Training (Preventative/Developmental) (Examples: Exploring Childhood Curriculum, if experiential; peer tutoring)

3. Teen-age Parents (Corrective-Ameliorative) (Examples: NACSAP-related efforts; Florence Crittenton services; school law changes)

[1]From Gotts, E. E., Spriggs, A. M., & Sattes, B. D. Review of Major Programs and Activities in Parenting. Charleston, WV: Appalachia Educational Laboratory, 1979.

III. Parental Skills Focus: Specific

A. Parenting Programs Having Specialized (Limited) Goals (Preventative/Developmental)
(Examples: ECS child abuse prevention effort; prenatal classes; school entry orientation)

B. Parenting Programs Having Specialized (Limited) Goals (Corrective/Ameliorative)
(Examples: Parents Anonymous; neglect and abuse "hot lines;" crisis nursery)

IV. Parent Linkages to Institutions/Parent Involvement

A. Home-School Communications Development
(Examples: parent-school conferences; Sprigle's "learning to learn" emphasis on home-school understanding)

B. Parent Involvement in a Non-Central Supportive Role (Involvement-1)
(Examples: fund raising; volunteers in non-instructional aide roles)

C. Parent Involvement in Governance and Advisory Functions (Involvement-2)
(Examples: P.L. 94-142 provisions; Institute for Responsive Education; Parent Advisory Councils under E.S.E.A. or E.S.A.A.)

D. Collaborative Relations of Parents and Programs (Involvement-3)
(Examples: cooperative day care or nursery school; "contracting" systems between parents and schools)

V. Specific or Limited Assistance to Families

A. Parenting Programs to Complement or Supplement Family Roles/Functions (Preventative/Developmental)
(Examples: day care services; Infant Education Research Project, E. Schaefer; CDS Consortium efforts in child care)

B. Parenting Programs to Complement or Supplement Family Roles/Functions (Corrective/Ameliorative)
(Examples: protective services; foster care; homemaker services)

VI. General or Extensive Assistance to Families

A. Restructuring Society to Support Families (Preventative/Developmental)
(Examples: "technological cradle;" family advocacy; call for family impact statements on public laws; family policy formulation)

B. Comprehensive Family Support and Protective Systems (Corrective/Ameliorative)
(Examples: Parent-Child Centers; Child and Family Resource Program; intensive casework services; Home-Based Services, U. Iowa Clearinghouse type)

comment upon regarding the services offered. Nevertheless, the following areas were covered at a minimum in each of the interviews: goals and objectives of the program, population served, program type, services offered, staffing pattern, source(s) of funding, inter-agency cooperation, potential for replicability, and special requirements for replicating the program elsewhere. In addition a wealth of factual information of varied sorts was obtained. Because of the considerable diversity of directions which the individual interviews took, it was necessary afterwards to summarize them into a more uniform format to achieve some degree of comparability and to facilitate finding particular items of information. It is in this latter form that they appear in Appendix B.

Findings. Somewhat over twenty programs were studied in this manner. Their focuses ranged from pre-parenting for teenagers to parenting classes for adults, direct involvement of parents in various cooperative capacities in educational settings, early interventions with parents of handicapped children, support system programs, involvement of parents of school age children in federal title programs, Head Start, extended-day programs initiated by parents, and so forth.

Of the programs surveyed, a majority are serving rural families; however, some urban programs were also examined. Virtually all of the programs are serving educationally disadvantaged populations or are serving them in conjunction with other families in the same communities. The programs studied are in all of A.E.L.'s seven member states.

A thread that could be detected running through all of the successful programs is that behind them there is a major commitment made by a key person or persons. A second thread is that the successful programs involve people who are not working in isolation as a program but who are

working in collaboration with other agencies in their respective communities. The programs studied may also be called "Model" on other grounds. This is true in the sense that many of them are already in the process of being replicated and are giving technical assistance to others who are attempting to replicate what they have done. It is also instructive to note that those programs which appeared to be most successful had staff who were quite ready to cooperate in giving out information about what they were doing. Their enthusiasm, interest, and dedication could readily be sensed in the interviews. Other findings plus a summary of each program studied appear in Appendix B.

Regional Parenting Surveys: Uses

Results from both the Base Sample Survey and the Survey of Model Parenting Programs will first be widely disseminated to practitioners in A.E.L.'s region. In addition, results of these two surveys provide a data base for planning additional research which will follow in the area of school/family relations. These findings will enable A.E.L. and others in the region (a) to carry out indepth focused studies; (b) to contribute to the evaluation of parenting programs and services; and (c) to provide input to policymakers in the region. In the instance of the Model Parenting Programs, a further use will occur. Additional studies will be performed in selected programs from among this group to determine the perceptions of both the parent clients and the program staff as to the particular elements within their programs which are responsible for their success. This analysis will assist A.E.L. to develop recommendations for how to strengthen programs. Further studies of these programs are also planned to determine not only with whom they are successful but which

populations either do not seek their help or find that these types of services do not meet their particular needs. Such inquiry can provide a basis for planning services to meet presently unmet needs of special populations of parents. Finally, knowledge from the Regional Parenting Surveys will permit A.E.L. to provide valuable consultation and technical assistance to state and local educators who are seeking to develop more effective programs for improving school/family relations.

The two preceding sections have described studies which were designed, as noted, to guide future planning for work in the Childhood and Parenting Research Program, as was the HOPE Follow-Up Study. They were, therefore, to form together the basis for a position paper on planned future actions (Scope of Work THREE). When A.E.L. became involved in a major regional needs assessment study in 1980, it became possible for staff to include in the sampling design needs statements on childhood and parenting for validation. Such a validation procedure was conducted in all seven states. Analyses of these new data were added to what had been learned from the other scopes of work, thereby providing a new consolidated data base for the position paper. Subsequently a special committee of the A.E.L. Board invited a further more specifically focused position paper. The result of this overall process (Appendix D) is a position paper calling for A.E.L.'s future work to focus on the building and improvement of school/family relations. This emphasis for future research and development was clearly endorsed as a priority regionwide by separate needs validation studies done in each of A.E.L.'s member states.

HOPE Follow-Up Study

Purposes. The HOPE Follow-Up Study was designed to measure child-rearing practices, attitudes, styles, and resources of families, and to identify the empirical relationships between these and child outcomes measured in terms of school progress and social competence; and to establish whether the HOPE experiment (1968-1971) had had enduring effects that were still detectable when revisited in 1978-1980. The design of the original experiment also made it possible to inquire whether parents had been changed by the experience of receiving home visitation, and, if so, what areas of behavior specifically had changed.

Sample. Three-hundred forty-two children ages 11 to 15 years, including approximately equal numbers of boys and girls representing all social, racial, and ethnic variations prevalent in southern West Virginia were included in the sample. These were children who, with their families had participated in Home-Oriented Preschool Education (HOPE) from 1968 through 1971. All parents and a smaller representative sample of younger siblings were also sampled in the study. All analyses were to focus upon correlated data from within family units. All family units could be identified as having been selected at the time of their initial participation in the program on a random, representative basis, and, further, assigned randomly either to a community control group which had available a television signal only, or to one of two experimental conditions which had in common for the family unit that they involved weekly home visitation by a paraprofessional who focused on issues of child development and preparation of the child for school. A smaller and representative subsample from this larger sample also participated in the family case studies described in the next major section of this final report.

An initial feasibility study was conducted in 1975 by A.E.L. to determine how many of the children could be located in the Fayette, Mercer, Raleigh, and Summers County School Systems of southern West Virginia. Over half of the original sample could be located at that time. Records were kept on any children who could not be located if it was known whether they had moved away or for what other reasons they were not now in the school. The next stage of the sampling commenced in the school year 1977-1978 at which time A.E.L. contacted the families of all of those children who were found still to be enrolled in the school system of the four counties. With additional assistance from the school systems at that time, it became possible to locate several children who had moved from one place to another within the four-county area. A small number of additional children and their families were identified subsequently in the process of performing the study, when the fact that they had participated became known through contacts with relatives or other third parties. Attempts were then made to include these families in the follow-up sample as well. The net result of the sampling was that all families which could be located at the end of the approximately ten-year interval were invited to participate in the follow-up study as indicated below.

Procedures. For the children, school records were collected including grades in subject areas, school attendance, standardized achievement and ability testing, and indications of whether a child had been in a special class placement or had been held back in grade. In addition, the children's teachers completed the School Behavior Checklist to determine each child's style of coping and the presence or absence of indications of internal

emotional or social conflicts. Children also were interviewed by a local person who was specially trained by A.E.L. for these purposes. Each child whose parents gave consent for an interview completed a direct self report type interview dealing with educational and vocational aspirations, feelings of personal control, attitudes toward family life, associations with various persons and groups inside and outside the home, and so forth. Children also were interviewed with the Tasks of Emotional Development (T.E.D.) Test (H. Cohen & G. R. Weil, Brookline, Mass.; T.E.D. Associates, 1975).

School data were summarized across occasions over time to form composite variables for school attendance, achievement, ability, and teacher grades. The School Behavior Checklist was scored in the standard manner referenced in O. G. Johnson (Tests and Measurements in Child Development: Handbook II. San Francisco: Jossey-Bass, 1976) to reveal scores for coping and non-coping syles of dealing with the interpersonal environment of the school plus symptoms of personal disorganization, depression, and anxiety. The direct or self report child interview was scored largely in keeping with its derivation from earlier research performed by Fels Research Institute in Yellow Springs, Ohio, with the help of consultation from the original investigators in those studies of student achievement and aspirations. Factor analyses by A.E.L. revealed that the direct child interview produced essentially those factors which had been built into it from the earlier Fels work. The T.E.D. Test was scored according to the standard scoring system developed by Cohen and Weil. Moreover, in collaboration with the test's developers, A.E.L. applied a new scoring system and validated it first based on the original normative data from Cohen and Weil's standardization sample.

A direct or self report interview was designed for completion by parents in the HOPE sample. This instrument drew upon well-known research from the Fels Research Institute, Kohn's measure of parental values, the Home Environment Scale from the High/Scope Educational Research Foundation (based on dissertations by Dave and Wolf), an adaptation of Pumroy's Maryland Parent Attitude Survey, a new sex-role scale based on the work of Brogan and Kutner (Journal of Marriage and the Family, Feb. 1976, 38, 31-40), an extensive demographic section, and specific questions dealing with child and family health and with the child's personality. Parents were also interviewed by local interviewers in their homes using an indirect measure of parenting skills which presented to the parents a series of child development situations in picture form and requested that they answer a series of standard questions about each picture while telling a story about it. The rationale for this latter instrument is further discussed in a later section of this report that deals with the developmental theory of parenting. Both the direct and indirect parent interviews were scored in accordance with their original sources based on the rationales with which they had been constructed.

In addition to the foregoing data and the data which are mentioned later for a subsample of families in the case studies and in the younger sibling study, extensive preschool test data were available on the children from the period of their program participation in 1968-1971. These latter data are still in the process of being recoded into form to allow comparisons between them and the later data from the children and families. Therefore, the longitudinal aspects of this study will be reported subsequently.

All child interviews and parent interviews were conducted without the interviewer being aware of the group to which the child or parent had originally been assigned. Special arbitrary code numbers were further assigned to these cases so that persons performing scoring of the completed protocols would be unaware of the groups to which the individuals might have belonged. The somewhat over 100 teachers who completed the School Behavior Checklist were also unaware of whether the children had been in HOPE in an experimental or control condition or had not been associated with the program at all. The children's school records were devoid of information regarding their program participation, and we, accordingly, assumed that their school careers were not directly affected by reputational information regarding their participation or non-participation.

The follow-up study design includes within it a number of methods for checking on the potential effects of attrition on the continuing representativeness of the overall sample. Some of the checks on the potential effects of attrition still need to be made before final reporting of all results. The N.I.E. has agreed to allow A.E.L. to perform these additional analyses during the first part of Fiscal Year 1981. What can be said at this point is that special coding procedures have been used to identify those families which did not participate because they had moved away or for other logistical reasons versus those who did not participate because they were actual refusals. These groups will be separately analyzed and compared with the actual participants in the interview portion of the follow-up study by examining preschool test data available on them plus by examining school records which were picked up in early 1975. It appears, therefore, that the overall data available

will be sufficient to reach conclusions about the representativeness of the sample that completed the interviews.

Of the 342 children whose school records were located beginning in 1975, 48 represented younger siblings of children within the overall sample (i.e., in some families more than one child had participated either in the experimental or the control group; in no instance were children from the same family assigned to different groups). This means that there were 294 family units potentially available for sampling if they could be located. Of the foregoing, 215 family units participated voluntarily in various aspects of the follow-up interview study. This means that there are 79 family units which were eligible to be included but which for some reason were not. Of the 79, 33 represent actual refusals. The remaining 46 are families where death of a parent, removal to another location out of state, and other logistical reasons account for the nonparticipation. The 215 participating families include 163 experimental families and 52 control group families, with experimental families outnumbering control familes about three to one. Among the 33 refusals, however, 22 were experimental and 11 control, revealing only a two to one differential between the groups. It is, therefore, apparent that there was a slightly higher refusal rate in the control group than in the experimental group relative to their respective sizes in the overall available follow-up sample. As was indicated earlier, the possible significant effect of such a desparity upon the overall study will be explored subsequently.

Findings. Extensive school data were available on the experimental and control children as indicated earlier. Over the first six years of school the HOPE children had better attendance records, higher teacher grades in basic skills areas, and were far less likely to have been held back a grade in school. The probability of all of the foregoing findings was less than .01. Not only were the children less likely to have been held back in grade if they were in the experimental group, but retention in grade can be seen to have been reduced dramatically from 25 percent in the control group to 5 percent in the experimental group. This large rate of retention in grade is to be understood in terms of the practices of rural school systems of using this method of handling the placement of handicapped children prior to the more recent enactment of P. L. 94-142. In their junior high years, the experimental children were identified by their teachers as being better organized in their classroom behavior, less likely to be depressed, and as having a more successful adjustment with teachers and peers. On statewide testing results, the HOPE children demonstrated higher ability and higher performance on achievement tests in basic skills areas. Perhaps more impressive is the fact that HOPE children exceeded national norms on ability and achievement, whereas the control children fell below national norms, as is characteristic of children in the rural school systems from which they come. Overall it may be said in terms of their social and emotional development, their academic progress, and their behavior as viewed by teachers that the experimental children in HOPE ten years after their original participation in home-oriented preschool education are coping more successfully with the environment of the school than is true of their randomly assigned control peers.

The parents were also compared on a variety of measures to determine whether the effects of receiving home visitation during the child's preschool years had had an enduring effect upon their parenting behavior. Using a variety of measures from the Fels' research on achievement behavior, it was found that the "academic orientation" of the experimental mothers was highly different from the academic orientation of the control mothers. The composition of rating items making up this variable suggests that in their description of themselves the experimental mothers had higher levels of aspiration, higher expectations, and greater satisfaction with their children's academic achievement. Other measures from the Fels' work were not sensitive to possible enduring effects of the treatment. For example the "vocational orientation" of the parents did not differ between the two groups. This means that their levels of aspiration and so forth for their children's vocation were not different from one another. The Fels' interview also covers areas of self-description of parenting style. None of these self-report measures of parenting style differentiated successfully between the groups. AEL included in this direct interview some specific questions dealing with parental support of learning at home. A statistically reliable difference was found between the groups for this variable, with the experimental mothers having a greater tendency to provide support for learning at home.

Although M. Kohn's measure of parental values orientation has been used extensively, AEL found that it did not work satisfactorily or reliably as a measure of parental values using his scoring system. An alternative scoring system of the instrument was developed based on the correlations among the items within this population. These correlations produced interpretable factors, but these factors did not differentiate between the experimental and the control groups.

AEL had also developed a slight adaptation of the High/Scope Home Environment Scale to determine whether the home was more supportive of learning in the experimental or the control group. This instrument looks at both the material objects in the home that might contribute to learning and to the practices of parents in providing, enriching and intellectually stimulating experiences for their children. On this scale a highly significant difference was found between the two groups, in favor of the experimental families. What may be concluded overall from the foregoing direct interview measures of parental characteristics is that the primary effect of HOPE upon parents who received home visitation has been in those areas which relate most closely to the child's academic development and orientation. On variables which attempted to assess other areas, self report did not provide reliable indications of differences.

A quite different approach to assessing possible changes in the experimental group which may have persisted was AEL's use of an indirect parent interview. This interview, which used a series of pictures of child development situations to elicit stories from parents, was scored in a manner that reveals the problem solving abilities and perceptiveness of parents as these relate to the development and educational progress of their children. It is, therefore, instructive to look at the results using this particular approach in contrast to the self-report approach which has traditionally been used in studies of this type. One variable scored for the stories is "perceptiveness" of parents regarding issues of child development. These ratings reveal that parents in the experimental group were more perceptive of child development issues than were parents in the control group. Subscores had also been developed for parents' perceptiveness at each of five child developmental levels: infancy, toddler, preschool years, elementary school age, and early secondary school age. This

same difference favoring the experimental over the control families was found at each of the five age levels.

A second performance variable scored from the indirect parent interview was a variable called "outcome." Ratings for outcome indicate whether parents have a more positive and long-range perspective on outcomes versus a more negative and short-range perspective on outcomes. Outcomes here refers to the outcomes envisaged by parents of what might happen in the developmental situations examined by parents in stories they told. They were specifically requested in each of their stories to tell how things turned out in the end. If they did not mention this in their story, the interviewer followed up with additional questions to attempt to clarify their perspective on outcome. The outcome variable clearly differentiated between the experimental and the control families for each of the five age levels and for the overall comparison across age levels. Parents in the experimental group consistently viewed the outcomes of child development situations more positively and in longer term perspectives than did parents in the control group.

A third area scored in the indirect parent interview stories was defined as "teaching-learning." The parents had been asked in their stories to comment upon whether there was any teaching, learning, development, or maturing going on in the stories as they saw them. The vast majority of such parental comments dealt with teaching and learning rather than with development and maturing. Remarks specifically dealing with development or maturing were more likely to be made in connection with the transition from childhood into early adolescence by parents from this population. It is, accordingly, accurate to refer to the variable simply as "teaching-learning." On this variable parents from the experimental group exceeded parents from the control group for each of the five age-related subscores and overall score for their

understanding of teaching and learning potentials that exist in child development situations.

The approach used in the indirect parent interview to sampling parental performance in a variety of child development situations may be viewed as a simulated approach to ecological sampling, in the sense that parents were allowed in a variety of simulated situations to reveal how they might react to contexts that vary greatly in the child age and child development challenges that they present for parenting skills. The evidence from the measures obtained from this interview suggest that a more generalized effect occurred for the experimental parents. It appears that they learned not only skills relative to thinking about preschool age children, but that the treatment effectively expanded their overall perceptiveness, the positiveness of outcomes which they anticipate, and their understanding of teaching and learning potentials of varied child development situations from infancy through early adolescence. These kinds of more generalized effects can probably be attributed to active learning processes in which these parents subsequently engaged once they had learned general strategies for thinking about their children's development and learning as they participated in the HOPE process when their children were preschoolers. That is to say, it should not be inferred that these extensive generalized effects occurred automatically. Instead it is believed that they would have occurred because the parents themselves had learned to take a more active role in exploring and learning about what was going on as their child grew up. It seems probable also that the generalization of effects to the period of infancy and toddlerhood would have resulted from a combination of reflection and from the fact that some of the parents had younger children for whom they had subsequent opportunity to extend and apply their new ways of thinking about child development as they came along

from younger ages, including infancy.

In summary, it appears from a variety of both child and parent indicators that participation in HOPE had enduring effects upon the families who received home visitation in comparison with the control group. Some questions remain regarding possible differential rates of attrition between the groups and so forth. Further analyses will be completed during the early part of 1981 to clarify any possible limitations to the conclusions that have just been stated. See Appendix E for further details on the HOPE follow-up study.

Family Case Studies

The Family Case Studies was an intensive investigation using observational methods in homes of family interaction patterns, communication, styles of child rearing, and family processes which evidence themselves in structured sampling situations. All families selected to participate in the Family Case Studies had already participated in all aspects of the interview study of parents and children. In addition, the Family Case Studies explored the status of younger siblings of children who had participated in Project HOPE, to determine whether effects of the program had been extended by the parents to them as well as to the HOPE children. Because the number of younger siblings in families in the Family Case Studies was fairly small, it was necessary to sample additional younger siblings whose families were not in the Family Case Studies. A more complete report of the Family Case Studies appears in Appendix C.

Purpose. The Family Case Studies were conducted to provide more in-depth information on a representative subsample of the families who had participated in the larger HOPE follow-up study. Moreover, since the other primary data gathered on the parents all were obtained by interview, it was important to

obtain data of a different sort based on direct observations of the parents' interactions with their children and spouses. This study also contained within it plans to assess the temperament of the target children and of any younger siblings who had not participated in HOPE but who might be of school age. The information on child temperament is to be used subsequently in various causal analyses to rule out differences in the children that are attributable to underlying biological variations but which might erroneously otherwise be attributed to parental practices. Finally, the younger siblings were to be studied to determine whether the parents had applied the things they learned by participation in HOPE to their younger children as well as to the target children.

Procedures. All family case studies were carried out by a single interviewer who had previously had contact with the families selected. All families were pre-selected according to demographic stratification variables that had been found in the "Index of Favorability" analyses to most significantly differentiate between families whose children were coping and non-coping. Because experimental families outnumbered control families about two to one, they were included in the Family Case Studies in about this proportion. The person conducting the individual family case studies was unaware of whether the families were experimental or control or of the exact principles of stratification whereby they had been pre-selected.

After a list of families meeting the necessary stratification criteria had been assembled, the field worker contacted families and asked if they would be willing to participate in a further stage of the study. They were told that for this portion of the study, which would take an entire day and possibly part of an evening, that it would be necessary for all or nearly all members of the family residing in the household to be present during at least parts of the day.

Families whose schedules could not easily accommodate this were included by the field worker conducting several of the studies on weekends. Families which could not meet these criteria for inclusion at any time were eliminated from further consideration for this study. In this manner 28 families representing the experimental group and 12 families representing the control group were studied during 1980.

Immediately after scheduling a visit and prior to its commencement, the field worker would completely study all of the existing data on the family that was about to be visited. This meant that the child's school records, interview records and parent interview records were all reviewed immediately preceding that visit. The purpose of this review was to re-familiarize the worker with information which might be important to functioning effectively as a participant-observer in the family situation and to eliminate possible duplication of information sought during this occasion. This review, furthermore, served together with the data collected and observed during the visit as the basis for completion of standardized ratings immediately following each of the visits. By following this procedure families were not needlessly burdened with questions and areas of inquiry for which sufficient information for completing the ratings already existed. Because the information available and the information needed varied for each family, and because each family's circumstances differed from those of other families, each case study was somewhat different. It is for this reason that they are called family case studies rather than the family case study. Despite the highly individualized nature of the studies, it was possible to make them comparable by completing certain standardized ratings as described below.

Consultations were held by telephone with Dr. Diana Baumrind, Director of the Family Socialization and Developmental Competence Project. These discussions

established that AEL's data base would be sufficient following the one-day visits for completion of the standard ratings that have been used in the longitudinal study conducted by her. To achieve maximum comparability she provided the as-yet unpublished adolescent version of the parent behavior rating form. The rating scales examine parental authority in terms of directiveness, parental influence, and maturity expectations. Besides parental authority, three other major domains were explored in the ratings: traditionality, rationality, and affection. These major domains were divided further into dimensions in the same manner as was parental authority. Multiple rating items also relate to each of the individual dimensions. Ratings were completed both for the seventeen dimensions that relate to the four major domains and for 82 different parenting behavior rating items. Analysis of the ratings indicated that five major factors accounted for the variance in the seventeen dimensions. Seven additional scales accounted for the variance detected in the 82 behavior rating items.

Each family in the case studies was also rated with the AEL Supplemental Family Ratings. These supplemental ratings provided seven additional dimensions on which the experimental and control families could be compared. A rating was also available for each mother from completion of the Shure and Spivack problem solving tasks. In addition to the foregoing types of quantitative data, a summary statement was prepared on each family to indicate how the family viewed itself as a unit in relation to the rest of the community of which it is a part. These were not prepared in the manner of clinical case reports, but rather in the manner of biographical statements which might have been articulated by a family member who was attempting to describe and characterize the fundamental attributes of the family.

By agreement with the NIE, further descriptive materials on the case studies methods will be prepared in the early part of Fiscal Year 1981 at no additional cost to the government. The procedural descriptions will be sufficiently complete to permit others who are interested in replicating the case studies to do so.

Findings. Nine dimensions of child temperament have been studied by Thomas, Chess and Birch (Temperament and Behavior Disorders in Children. New York; New York University Press, 1968). These were assessed using a questionnaire form developed by Dr. Richard Lerner. Moderately high to high internal consistency coefficients were obtained for eight of the nine dimensions. Since temperament represents a biologically-based substrate of behavioral style, it was not anticipated that children would be affected in these respects by the treatment. This appears to be the case, inasmuch as the experimental and control groups were not different on any of the temperament scales. It is conceivable, nevertheless, that the manner in which the temperament scales come together to form secondary factors could be reflective of the incidence of behavior disorders. In order to evaluate this possibility, the items of the Lerner scale were factor analyzed and the experimental and control groups were compared on these fourteen factors. While the factors generally reflect the nine temperament dimensions, the dimensions do in fact come together in ways suggestive of differing patterns of adaptation to environmental circumstances. For three of the fourteen factor comparisons (a number of results exceeding chance) significant differences were found between the experimental and control groups of children. These findings suggest that the experimental children have adopted a more active style of interacting with the environment, in the sense that they would rather be doing things than sitting around. In this connection it is easier to distract them from something

that they are doing and to engage them in a new activity. A second difference was that the control children tended to be very sound sleepers in the morning while the experimental children tended to be up and ready to go. On the other hand, the control children were described by their mothers as more reactive to new situations and physical stimuli.

The AEL supplemental ratings produced interpretable factors on the following dimensions: good communcation; uncrowded living conditions enhancing interpersonal proximity; quality of relations with own parents; parent relations with own parents affecting relations with own adult siblings; comments on folk superstitions; mutuality in the family; and stance regarding parental sexual taboos. While all of these were clear factors, the experimental and control parents did not differ on any of them. The parents also did not differ on the Shure and Spivack problem solving scores. In this last connection the mean parental score for the problem solving situations was 16.715, with a standard deviation of 6.982. This mean suggests that these parents would tend to handle these types of child problems by providing a simple "because" when refusing the child's wishes or when attempting to redirect the child's behavior.

Parents in the experimental and control groups were compared on the seven scales derived from the Baumrind ratings. The first scale reflects a component of parental authority which was labeled "firmly directive." Experimental parents were higher on this scale than control parents. The second scale was labeled "traditionality." On it the experimental parents were once more significantly higher than the control parents. Finally, experimental parents were higher on Scale 7 which was labeled "Affection and Responsiveness to Child." The groups did not differ for the following scales: parental control; clarity of parental role expectations; intellectual stimulation and control in child rearing; and supports and encourages maturity. It is interesting, nevertheless, to note that

the means of the experimental parents were higher on all of the preceding variables. Given the small number of parents being compared in the study, it seems likely that with larger sample size all of these differences would have reached statistical significance.

In summary, the case studies have added further information to that obtained by comparing the experimental and control groups for the larger sample using the various interview and school data sources. The case studies have suggested that there are differences in the children in their general styles of adaptation. Parental ratings using scales derived from Baumrind's work reveal other differences between the two groups of parents. In work to be carried out in early 1981 at no additional cost to the government, relationships will be examined between the sets of variables derived from the case studies and the variables available from the larger family study. These analyses will be used to clarify the nature of the overall differences between the experimental and control groups. Attempts will be made in those analyses to infer which aspects of parental behavior have been responsible for particular child outcomes. Data on a small sample of younger siblings are still preliminary at this point. They suggest that some of the kinds of differences observed between the experimemtal and control children are present also in their younger siblings. Because of the small size of the younger sibling sample, however, it is premature at this time to reach conclusions about these differences without first completing more complex types of analyses which will control for other possible sources of the differences observed. These additional anlyses are a part of the work agreed upon by AEL and NIE to be conducted early in 1981.

Recommended Methods of Studying Rural Appalachian Families

This section of the report considers Scopes of work SIX, SEVEN and EIGHT. The discussion will proceed first to methods for studying rural Appalachian families. After that the potential of these measures for serving together as field measurement batteries will be considered.

Procedures for Studying Rural Appalachian Families. Even though, as has already been noted, the various scales derived from the direct and indirect parent interviews were not equally successful in detecting changes in parental behavior over time, correlational analyses show that virtually all of the scales derived from these two interview procedures have interesting and interpretable correlational relations with individual child measures. If one's purpose is to conduct research on rural Appalachian families, then it is clear that both the direct and indirect parent interviews have much to commend them. But if the purpose of using the instruments is a practical one having to do with the measurement of program outcomes, then it appears that only selected subscales from the direct parent interview are of value, whereas the entire indirect parent interview would appear to be of value. Thus, if one were selecting the most useful scales from a direct parent interview for practical evaluation purposes, the achievement orientation interview items, items having to do with parental supportiveness of the child's learning at home, and those dealing with the quality of the home environment would recommend themselves. The demographic section of the direct parent interview would in any event be useful for inclusion for statistical control and analysis in almost any type of application.

Other considerations beyond sensitivity to treatment effects and relationships between variables should influence the decision of whether to use or not to use these particular instruments. The direct parent interview requires somewhat more parent time to complete than the indirect parent interview. If

only those portions of the direct interview which were found to be useful in the present study were retained, the two instruments would require about equal amounts of parent time for completion, i.e., about 45 minutes each to be administered. This is a substantial amount of parent time, but if the approach taken for evaluation purposes is one of sampling parents rather than of administering the interviews to all parents in the program, then the procedure is reasonably efficient and cost effective as a means of determining program effects. If the purpose rather than evaluation is the assessment of parent needs for purposes of planning, then the instrument from this group which appears to be most appropriate is the indirect parent interview. This interview lends itself well to describing what the needs of individual parents are for particular kinds of experiences which would improve their skills for perceiving more accurately the social and cognitive developmental means of their children at various age levels. Because the indirect parent interview is divided into five subsets, each of which provides reasonably reliable scores on important indicators, it would be sufficient to administer only those sections of the indirect parent interview which related to the age of child on whom the particular educational program was focusing.

Scoring and coding costs are another consideration which should affect decision making regarding the use of instruments of this variety. Within the direct parent interview the amount of effort involved in scoring and coding is extremely variable. Attention here can be focused on those parts which have proved to be most useful in the present study of Appalachian parents. The Fels measures require considerable time for scoring. Yet, if one wishes to measure the important variable of parent academic orientation, then this is the procedure which would need to be followed. In contrast, the scoring of the home environment scale is much more straightforward and objective, requiring

less time. The demographic section of the direct parent interview is virtually pre-coded at the time of response and simply needs to be analyzed. Scoring of the indirect parent interview is more time-consuming than scoring of the direct parent interview. Thus, while the indirect parent interview provides generally more useful indicators for a combination of parent needs assessment at the individual level and for program evaluation, the operational use of the measure requires a greater investment in interview scoring and interpretation. AEL has sufficiently worked out the computer data processing procedures for both of these instruments, including checking all necessary item reliability statistics, that people who wish to use them would find this aspect of the work to be little problem if they have access to computer facilities.

The interview measures used in the Regional Parenting Surveys appear at this time to be very promising instruments to use in research activities where the purpose is to understand more about what communities offer and the kinds of needs which individual families have. These research values of that parent interview point also to one of its practical values, namely, that it provides a way of looking at entire communities when one is in the process of planning for a program which is intended to increase school-family involvement around the learning of the child. Coding of this parent interview is accomplished in two stages. First the more closed-ended questions are coded using one code book. After that the more open-ended questions are coded using a second code book. Even though this coding process is time consuming, by careful selection of a smaller representative, random sample to whom the interview was administered, it would be possible to determine much about a particular community for purposes of planning how to improve school-family relations and how to increase the schools' involvement with other agencies that would be helpful to families.

The methods used in the case studies themselves are extremely demanding in terms of study time and would prove impractical for any typical field uses except for purposes of fundamental research on families or for providing clinical assistance to individual families which have very special needs. An exception to this is the temperament questionnaire used within the family case studies. This is a measure that can easily be completed by parents on their own and provides information useful not only for research purposes but for understanding individual learning styles and problems of particular children.

Among the child measures used in the larger study, the indirect child interview or TED Test is a valuable clinical instrument which is useful for research and for the assessment of needs of individual children. The utility of this instrument has been considerably increased through the application of the new scoring systems developed by AEL. Even though the instrument has been available for about ten years now and is widely used in school systems, there has continued to be the need for the kind of an overall scoring system which has now become available for use with the TED through this research. Administration time for the TED is modest (i.e., about 15 to 20 minutes per child); scoring can be completed by psychometrists and school psychologists who have received appropriate instruction; and scoring time is relatively modest for an instrument which provides the richness of clinical information that this one does.

The direct child interview AEL developed to parallel the parent interview measure is both easy to administer and to score. Administration time is approximately 15 to 20 minutes per child. Information from this interview deals with areas of academic and vocational significance that are well suited for research and for individual guidance and counseling purposes. Finally, the

School Behavior Checklist is an instrument which can be completed for an individual child in about 15 minutes by a teacher or in the group form can be completed for an entire classroom in only about an hour. As a screening device the School Behavior Checklist is extremely powerful for detecting both academic and other difficulties which the child is experiencing in the school environment. Its validity has been shown relative to a wide variety of other indicators of child school progress.

In summary, AEL has developed and tested a variety of parent, community and child measures which together are useful for both research and program planning as well as for individual needs assessment and clinical planning in some instances. The next subsection of this report examines ways in which these instruments can be used in combination to accomplish particular purposes as field batteries. For additional information on the psychometric properties of these instruments, see Appendix F to this report.

Recommended Field Measurement Batteries. For research purposes the measures used in the HOPE Follow-Up Study, the Family Case Studies, and in the Regional Parenting Surveys appear to be psychometrically acceptable and valid. For purposes of evaluating the effectiveness of programs designed to increase the involvement of parents in their children's learning, a parent-child battery consisting of standard cumulative record data from the school plus the indirect parent interview, the TED Test, and the School Behavior Checklist would appear to provide in-depth appraisal at a reasonable cost if sampling of cases is used rather than administration to all program participants. Selected subscales from the direct parent and child interviews may also commend themselves within a program evaluation battery if there is a direct correspondence between the program objectives and the strengths mentioned earlier for the direct interview instruments. A third purpose for field measurement batteries was considered:

assessment of needs and measurement for planning individual programs. If the purpose of the needs assessment is for planning a program that will serve a community, then a combination of three measurement approaches can be recommended: the instrument Learning to be a Better Parent is valuable for identifying content areas in which parents wish to receive instruction and assistance through the local education agency; the parent and community survey instruments used in the Regional Parenting Surveys can be used to determine community resources available and to assess any of a representative subsample of parents from the population to be served; and the indirect parent interview, for relevant portions of it, can be used with a representative sample of parents to determine some of the particular areas of parenting skill with which the population requires assistance. The last of these instruments can be used together with the TED Test to assess the needs of individual families and children for whom special kinds of programs will be delivered on a more individualized basis. See also Appendix F in this connection.

Measuring Parental Generativity. The indirect parent interview was designed with an additional purpose in mind besides its potential for research, evaluation, and assessment uses. This instrument was intended to permit the testing of a developmental notion of parenting skills which suggests that parents may require different skills for being effective in rearing infants, toddlers, preschoolers, school-age children, and teen-agers. This overall group of skills for fostering the development of children is called generativity. The specific measures of variables such as perception, outcome, and teaching-learning for each of the five age levels may be viewed as components of the overall generativity required if children are to experience optimal development. The usefulness of the indirect parent interview for testing this conception of parenting skills that vary depending upon the developmental

level of the child may best be judged by examining the psychometric properties of the component subscores that together make up the overall generativity score. From this vantage point it may be seen that the interview allows reliable measurement of parental skills for dealing with children at each of the five age levels and, moreover, provides insight into the specific skill functions that may be measured for each of the age levels. For more on this conception of parental skills as being differentiated into components related to child developmental level, see Appendix G.

Dissemination, Technical Assistance, Training, and Internships

Dissemination. A vital activity during the past year in dissemination has been maintaining contacts with members of the Childhood and Parenting Task Force to keep them informed of progress with the work. They will be provided with copies of this overall final report and requested to provide AEL staff with suggestions about which parts of the overall set of findings they would find most useful for distribution in short abstract form.

A number of publications and presentations were disseminated throughout the year from December 1979 through November 1980. This commenced with the presentation of an invited paper "Legislated Roles of Parent Involvement and Current School Practices," to a conference held in Washington, D.C. This paper will be published in 1981 as part of a state-of-the-art publication by the National School Volunteer Program. A special session was organized and presentations were made in February to the annual convention of the American Association of School Administrators on methods of measuring parent needs and program outcomes. A research presentation was made in March 1980 on the HOPE Follow-Up Study to the Southeastern Psychological Association meeting. A presentation on the characteristics of rural Appalachian families was made to the Kanawha

Valley Community Council in May. In June a session was chaired on "Family Research/Parent Training." The entire scope of the childhood and parenting research program was presented by a research panel in June 1980 addressing the topic "Distinguishing Characteristic of Appalachian Children and Families: Some Findings and Needs for Further Study." Finally in June 1980 at the first annual conference on Appalachian families and children AEL led a study group on "Needs for Research on Educational Policy in Appalachia."

Members of the AEL staff participated in July in a Families as Educators Conference sponsored by the NIE, along with representatives of other Labs and Centers. AEL shared some of their study findings at this time. In September a special presentation was made on AEL's interviewing techniques to a group at the West Virginia State College. Another presentation was made on child and family health and health education to the Pennsylvania Association of School Administrators in September. AEL presented procedures and findings from its work with families to the Second National Parenting Conference in October 1980 in Richmond. A similar presentation was made at that time to the Virginia State Kindergarten Association. In October a special invited conference was held of West Virginia state educators in Charleston. Essential findings from the childhood and parenting research program were presented at that time together with their implications for pre-primary and primary education. A final dissemination activity of this sort was a colloquium held in November at the West Virginia University for persons from the Departments of Education, Sociology and Anthropology.

Staff publications during the year have included a review of Dr. Jane Mercer's System of Multicultural Pluralistic Assessment (SOMPA) Kit in the Journal of School Psychology. A paper was published in Childhood Education, 1980, 56, 228-234 titled "Long-term Effects of a Home-oriented Preschool Program."

Another article appeared in Children in Contemporary Society, 1980, 13, 43-48, called "The Appalachian Child." A publication on "Society, Education, and Values" appeared in Thresholds in Education, 1980, 6(2), 11-13. The HOPE research was further featured by Linda Shallaway in "Country Schools: Forgotten But Not Gone," in Educational R & D Report, Fall, 1980, 3(3), 6-10. A chapter was prepared for publication in a new volume edited by A. W. Child and G. B. Melton, Rural Psychology, New York: Plenum Press, in press, The chapter is titled "Home-based Early Intervention." Another report on HOPE and related research was accepted for publication in the Journal of Special Education and is in press. This article is titled "The Training of Intelligence as a Component of Early Intervention: Past, Present, and Future." As was mentioned earlier the paper prepared and presented for an NIE conference, "Legislated Roles of Parent Involvement and Current School Practices," is being published in Alexandria, Virginia: National School Volunteer Program. Finally AEL worked together with Abt ASsociates to prepare a description of a recent adaptation of HOPE to fit the primary level. This work appears in Abt's final report to the U. S. Office of Education, E. C. Proper and R. G. St. Pierre, A Search for Potential New Follow Through Approaches, Cambridge, Massachusetts: Abt's Associates, December 1979. This section describes what is called Home-Oriented Primary Education (HOPE-II).

Technical Assistance. Some advisement and materials were provided to the Ohio State Department of Education for planning and emphasis on parent involvement for their special Year of the School. Information and consultation was given to a local education agency in Eastern Kentucky to assist them in planning a school/home effort to reduce drug and alcohol abuse by children in the community. Various materials were provided on a complimentary basis to the West Virginia Central Child Care Board, to the Family Services Center and

to the area YWCA. Technical assistance was also rendered to the Kanawha Valley Community Council in conducting an area-wide needs assessment of family serving agencies.

In support of three regional conferences sponsored in Tennessee by the state education agency AEL provided consultation and materials to approximately 600 participants, 200 of whom participated in conferences in each of three regions of that state. Some surplus field test materials were provided to the State of Pennsylvania to be placed in home daycare resource centers statewide to increase the level of proficiency of care providers in dealing with issues of child development and learning. A joint activity was carried out with Metropolitan Pittsburgh Public Broadcasting, the Pennsylvania Department of Education, and the Pennsylvania Department of Welfare to make the publication AEL Visits Mr. Rogers Neighborhood available for use in home daycare centers in Pennsylvania. AEL's role in this collaboration was to provide advice and technical assistance, and to secure the permission and cooperation of the publisher of the "Aids to Early Learning" for these usages. The resulting product will be used to improve the quality of home daycare services, including after-school services for school-age children.

During the past year staff from the Childhood and Parenting Research Program spearheaded the planning and coordination of the First Annual Conference on Appalachian Families and Children. This Conference was sponsored jointly with the West Virginia State College in June 1980. Scholars, educators, and service providers from throughout Appalachia attended the Conference to present papers and participate in research symposia and discussion sessions. As a result of this process definite plans have been made to hold a second annual conference in Knoxville, Tennessee in summer 1981 under sponsorship of the University of Tennessee-Knoxville. Plans have also been made tentatively for

a third annual conference to be held in 1982 under joint sponsorship of Western Carolina University and Appalachian State University. This annual conference provides an important regional vehicle for the exchange of information and ideas on family life and on methods of promoting effective relations between families, schools, and other institutions within the region.

Training. Training was provided in Winter 1980 to YWCA staff members in the Central West Virginia area in methods of using empirically-based approaches to promoting the development of children in daycare both during the day and in after-school hours. A summer fellow of the Southern Appalachian Leadership Training Program was provided training for her work in a remote rural area of Martin County, Kentucky as a lead teacher. Instruction covered areas of home-oriented methods and the use of the Mr. Rogers Neighborhood series in conjunction with school outreach to rural parents. Brief training and consultation was carried out with personnel at Eastern Kentucky University to assist them in work with high illiteracy parents. An ongoing training and technical assistance activity is being carried out with the Morehead State University Developmental Studies Project to help high-risk rural students remain and succeed in the University. The special assistance being provided in this instance is in the area of measuring student characteristics which predict which students will have particular difficulties adjusting to life in the university. Such students generally come from isolated rural communities and in the university environment suffer a kind of culture shock when they are no longer in contact with the members of their extended family system on whom they have come to depend for emotional support and assistance in adapting to new circumstances. Finally, at the request of the U. S. Department of Education, a short-term training experience was provided for the head of primary and secondary programs for one of the major states in Nigeria.

Internships. As a part of its ongoing efforts to promote educational equity in the region, the Childhood and Parenting Research Program selects and provides fellowship and internship experiences throughout the year. The amount budgeted allows for either one intern or fellow to serve continuously through the year or for more than one person to serve for shorter periods of time. Dr. Linda Higginbotham completed a one-year postdoctoral fellowship with the Program during early 1980. Her experiences at AEL enabled her to move into a research and evaluation position with one of the universities in Eastern Kentucky. Because the needs assessment was going on throughout 1980, a number of shorter term internship experiences were provided. In one of these arrangements a former Lab Summer Intern from the Pennsylvania State University was assisted through a short-term internship arrangement to carry out a dissertation study which related quite closely to the ongoing work of the Research Program. A side benefit of this arrangement was that it promoted a strong collaborative relationship between faculty members at the Pennsylvania State University and staff at AEL. Another equity intern who practices school psychology was appointed during Summer 1980 to provide her with specialized experiences in the use and scoring of some of the AEL child and family measures. A Charleston area educator was also provided internship experiences in the scoring of AEL indirect parent interview. She will be able to use these new skills in family-oriented work. A final internship appointment was made of another Pennsylvania State University doctoral candidate who wished to gain additional skill in the analysis of the types of data collected in the Regional Parenting Surveys.

AEL also supports summer equity interns out of institutional funds. During Summer 1980 three of AEL's summer equity interns selected experiences with the Childhood and Parenting Research Program. Staff provided experience

in curriculum development oriented to school/family relations to a teacher from Alabama. A special education consultant from one of the large Intermediate Units in Pennsylvania received an internship experience in scoring and interpreting the various child and parent instruments as these might be useful for understanding the circumstances of socially and emotionally handicapped. This particular intern has since been appointed to a similar position in the Pennsylvania State Education Agency where she will have further opportunity to use the new skills developed. Finally, a doctoral student in school administration from the University of Tennessee-Knoxville received internship experiences in the Regional Parenting Surveys methods of interviewing families and in the methods used to study model parenting programs.

In addition to the training and internship experiences described in the two preceding subsections, AEL provided training in interviewing and coding methods to a large number of persons in the region during the past year. Most of these received subsequent work experience with pay in their local communities to carry out work that was part of the overall AEL Research Program. A total of 51 females received training in various interview mthods. Of these five were minority and 48 non-minority. Ten males received experience in interviewing of whom one was minority and nine non-minority. There were thirteen females trained in scoring and coding the various instruments, of whom one was a minority person. The same type of training was given to six males of whom one was minority.

Of the interns whose experiences were described earlier, the five interns appointed within the Research Program were all female and two were minority. All three of the summer interns appointed on a labwide basis who selected to work within the Research Program, were females and one was a minority group member.

A final note is in order regarding inter-institutional relationships which have been developed during the past year. The regional Annual Conference on

Appalachian Families and Children has been mentioned as a vehicle for increasing inter-institutional collaboration. It was, furthermore, possible to develop during the past year collaborative relationships involving faculty from the Morehead State University, Marshall University, the West Virginia College of Graduate Studies, West Virginia State College, West Virginia University, the University of Virginia, and the University of Tennessee-Chattanooga. An extra-regional collaborative activity was carried out with T.E.D. Associates of Brookline, Massachusetts in connection with AEL's refinement of new scoring procedures for the T.E.D. Test. Progress in these areas is important to AEL's efforts to serve as a linking mechanism within its member states.

APPENDIX A

Regional Parenting Surveys: Base Sample Survey

Preliminary Report

Deliverable ONE

SCOPE OF WORK # ONE
BASE SAMPLE SURVEY
REGIONAL PARENTING SURVEYS

PRELIMINARY REPORT

Mary Snow

I. INTRODUCTION

Review of Research Design

The revised research design of the Base Sample Survey called for 1200 personal interviews with random samples of parents to be conducted in 24 counties of five states. Since then one county school system reversed its earlier decision to participate; therefore, the final numbers will be 1160 interviews in 23 counties in the states of Virginia, West Virginia, Kentucky, Tennessee and Ohio. Major categories for the selection of the sample and for the analysis are Appalachian Rural counties and Urban counties. For comparison purposes, and in order to provide a more representative picture for individual states, some non-Appalachian Rural counties are also included. Most of the interviews (920) are with the parents of third graders. However, in three counties additional interviews were obtained with the parents of kindergarten and tenth grade students (240). These were included to allow us to obtain some idea about how much the age level of the child affects the parents' attitudes, sources of information, etc.

Current Status

At present data collection is complete in two states, Virginia and West Virginia. This consists of a total of 400 interviews. Data collection is proceeding well in Ohio, the last state in which the study was initiated. Two counties are complete and three are approximately one-half complete. A

major effort has been made this fall to move the data collection in the two remaining states, Tennessee and Kentucky. In Kentucky interviews are complete in two counties and interviewer replacements in the three remaining counties have resulted in satisfactory, regular progress. In Tennessee it was necessary to train, or have a previous interviewer train, new people in three counties. This was judged necessary as the earlier interviewers were either not working or were proceeding much too slowly. Early indications are that these replacements are committed to completing all the interviews in those counties as quickly as possible. However, because the holiday season is now upon us, we expect the remaining data collection will go into January.

Meanwhile, two coding procedures are being used with the data. Code Book I covers the coding of those responses which either were pre-coded or which are clear and relatively easy to code. This code book was developed first and has been used with the 400 Virginia and West Virginia interviews. This first wave of coding has also been accomplished for all other completed interviews received by the lab. The total number at present is 862.

Code Book II covers the coding of the open-ended questions and some coding of indexes. This Code Book has been developed with the help of our coders and is now in its final revised form. The nature of the corresponding data required that more time, thought and training be built into the development of the Code Book II and in the coding itself, which is now beginning.

The data from West Virginia and Virginia has been coded (Code Book I) and key punched, and preliminary computer results (consisting of frequencies and percentages) for each item have been obtained. The second part of this report will consist of a discussion of these preliminary results. It should

be very clear, however, that this report represents only the very first stage in the analysis of the Base Sample Survey. Coding of all 1160 interviews using Code Books I and II is expected to be completed by March. The final report will be based on an analysis of the total sample data.

The Analysis

The next step will be to develop indexes of dependent and independent variables and to run these against each other. Some initial possibilities for dependent variables are (1) an index of Parental Access to Help; (2) an index of the Perceived Needs of Parents; (3) an index of Aspirations for Child; and (4) an index of The Degree to which Parental Responsibility is Shared. Some of the independent variables will be:

(1) Region of Residence (Appalachian Rural, Urban or Non-Appalachian Rural); (2) Household composition (number of adults, number of children, number working, etc.); (3) Previous Experience Raising Children; (4) Demographic Characteristics (education, occupation, religion, etc.); (5) Definitions of "the good mother" and "the good father"; and (6) Social Network (type, intensity).

A multivariate analysis using Lazarfeld's elaboration model is planned. Depending upon the results of these analyses, other techniques and tests of significance will be run for particular parts of the data.

II. HIGHLIGHTS OF PRELIMINARY RESULTS FOR VIRGINIA AND WEST VIRGINIA

This report is concerned with 400 cases from four Appalachian Rural counties and four Urban counties.

Family Composition, Present Parenting Situation

Characteristics of Respondents, Type of Family Structure

As our only criterion for an eligible respondent was to be at least one of the adults holding a major responsibility for raising the sample

child, it was theoretically possible to draw a wide range of different types of persons, e.g., natural mother or father, stepparent, adoptive parent, foster parent, grandparent, depending upon the family circumstances. However, as expected, most of our respondents (93%) were natural mothers of the sample child. However, in 17% of the cases the father or stepfather chose to participate as the second respondent. Three percent of the interviews were with the father alone.

The majority (78%) of parent respondents are part of a nuclear family, either from a first marriage or a second. Overall, single parent families make up 11% of the sample, and extended families another 11%. The biggest difference between the Appalachian Rural and the Urban families is in the number of single parent families, which is only 5% for the Appalachian Rural families, but 22% for the Urban families. The number of divorced parents is also higher among the Urban sample (18%), than among the Appalachian Rural sample (3%).

Work Status

Overall, 48% of the mothers in our Virginia and West Virginia sample are working outside the home, either part-time or full-time. Adding to this the percent of women who are looking for work, we find that 50% of these women can be considered to be in the labor force. When broken down by region, the figures are 45% of the Appalachian Rural women and 51% of the Urban women are in the labor force. Conversely, 48% of the Rural Appalachian mothers say they have no occupation, while only 29% of the Urban mothers say this is the case.

Previous Experience Raising Children

Results for the total sample show that 35% of the respondents say they have had previous experience raising children. But again, there are rural-urban differences. Among the Appalachian Rural respondents 41% claimed such experience, while among the Urban respondents 24% replied in the affirmative.

Care Arrangements and Pooling Arrangements for Sample Child

The percentage of parents who use some kind of care arrangement when they have to be away is around 80% for both rural and urban respondents. The difference is in whether the care arrangement is used regularly and often or seldom. This type of breakdown is as follows:

Care Arrangement	Rural Respondent	Urban Respondent
Regularly Used	28%	51%
Seldom Used	51%	31%

The most common types of care arrangements reported were, in order of magnitude: (1) neighbor, friend, babysitter; (2) family member other than grandparents; and (3) maternal grandparents. Again, there are differences by region, with Rural parents using family members most often, and Urban parents using the neighbor, friend or babysitter most often.

Pooling arrangements are not common, only 11% of all the parents report using pooling arrangements. But among Urban parents 19% use such arrangements, whereas only 7% of the Rural parents do so.

Other Adults in Sample Child's Life

The great majority (88%) of the 400 parents interviewed said that there is at least one other adult (besides self and spouse) whom they

entrust with some responsibility for the sample child. In fact, the highest single percentage (41%) named three such persons. Who are these other adults? Total results show that the maternal grandparent is the most likely candidate (42% Total, 41% Rural, 44% Urban), with relatives other than grandparents coming in second (35% Total, 43% Rural, 21% Urban). These are followed by older siblings (27% Total, 27% Rural, 26% Urban), and then by paternal grandparents (25% Total, 29% Rural, 19% Urban). Differences by region can again be observed. Relatives other than grandparents and paternal grandparents are more likely to be entrusted with some responsibility by Rural parents than by Urban ones. And among Urban parents workers in schools, clinics, scouts, etc. are more likely to be named (14%) than among Rural parents (9%).

When asked whether there are adults (other than the parents) that the sample child is emotionally attached to, the percentage of parents replying in the affirmative is very high (90%). When asked who these persons are, the most frequent response was relatives other than grandparents (48% Total, 51% Rural, 42% Urban), followed by neighbor, friend, babysitter (33% Total, 28% Rural, 42% Urban). Next most frequently mentioned were a maternal grandparent and then a paternal grandparent.

Thus, according to these results we can assume that the great majority of children are significantly influenced not only by their parents, but by other adults. These "other adults" either share some of the responsibility for the child or they have a special relationship with the child, or both. These "other adults" are most likely to be relatives, but those entrusted with responsibility are not generally the same relatives that the child is most strongly attached to.

Special Problems as a Parent

In answer to the question, "Do you feel you have special problems as a parent?", the total results for the Virginia and West Virginia sample indicate that 22%, or slightly over one-fifth, responded "yes". The picture changes, however, when we look within the regional categories. Only 16% of the Appalachian Rural parents feel that they have special problems, whereas 32%, or almost one-third of the Urban parents feel that they do. Further interpretation of these results will be possible after the second wave of coding is completed; the above question was followed by an open-ended question asking the parents who replied "yes" to explain their special problem(s).

Social Network: Formal Contacts

School Contacts

When asked about the frequency of their talks with the sample child's teacher, the most common response was two to six times within the past year (52% Total, 48% Rural, 59% Urban). 23% have talked very frequently (7 to 12 times a year or more), while the remaining 25% talked infrequently (once a year or not at all).

Responses to the question "In general, how helpful have your talks been with teachers or other school staff?", tended to be favorable. 55% of the parents said these talks were "very helpful", and 35% said they were "somewhat helpful". Urban parents were somewhat more favorable than Rural parents. ("Very Favorable", Rural 50%, Urban 64%).

However, the responses to the next question, "Could such talks..... be made more helpful?", indicate that parents feel there is room for improvement. 46% replied "Yes", 22% "Don't Know", and 31% "No". These

results were similar across the regions, with the exception that the Urban parents again were slightly more positive.

Greater understanding of these responses will be possible after the second coding is completed. We will then learn about parents open-ended responses to why they rated their talks with teachers as they did, and how they think such talks could be made more helpful.

Other Organizations Child Participates In

63% of the parents reported that the sample child participated in one or two organizations other than the school. The most frequently mentioned type of organization was a church-related one. Probably of most interest here are the number of children who have no organizational participation outside of school. They constitute 28% of the total sample children. But when looked at by region, it is found that 36% of the Rural children have no such membership, whereas only 14% of the Urban children have none. This no doubt reflects the transportation problem, as well as the probable smaller number of such organizations available to Rural children.

Medical Contacts

Virtually all respondents said they have at least one medical contact, and 27% have as many as three medical contacts. The most commonly named type of medical contact was the General Practitioner (70%). Although many other types of health practitioners and facilities were mentioned, most do not begin to rival the prominence of the G.P. The one exception is the Pediatrician, who is named almost as often as the General Practitioner, but only by Urban parents.

Most respondents (over 80%) consider themselves and their spouses to be in good or excellent health. Over 90% consider the sample child to have good or excellent health. The most commonly mentioned health problem experienced by the sample child was an accidental injury or fall (39%).

72% of all respondents had talked to someone in the medical profession about the sample child at least once during the past year. 18% had talked four or more times, while 24% had had no such talks.

When asked "In general, how helpful have you found your talks with doctors concerning (the sample child)?", 61% replied that they were "very helpful", while 30% replied "somewhat helpful". Again, Urban parents tended to be somewhat more positive than Rural parents.

But when asked whether such talks could be more helpful, 42% responded "yes", 26% said "don't know", and 30% said "no".

As was true of parent-teacher interaction, we expect to learn much more about the meaning of these responses after the open-ended questions are coded. Parents were asked <u>why</u> they rated their talks with doctors as they did, and also <u>how</u> they think such talks could be made more helpful.

Access to Channels

Preparation for Parenthood

Slightly over two-thirds of the respondents said they did <u>not</u> have a clear idea of what it would be like to be a parent before they had children. 41% said they had had a course in school which provided some type of training for parenthood. However, only 30% felt this course to have been useful. More about the type of course and the reasons respondents feel this experience was or was not useful will be available later.

Slightly over 50% of these parents said there were things they wish they had known before becoming a parent. And over 80% wish to pass on information to their child to help him or her be better prepared to be a parent. Later reports will discuss what kinds of things parents say they wish they had known and what kinds of things they would like to pass on to their children.

77% of all the parents agreed that "in today's world everyone needs some kind of help in rearing children". There are only small differences here by region (Appalachian Rural parents 74%, Urban parents 83%). The second wave of coding will reveal who these parents say are their most important sources of advice and help in rearing the sample child.

Specific Situation Contacts

Respondents were presented with a series of descriptions of specific child-rearing situations and asked where they would turn for help if faced with these situations. The results are as follows:

For a growth and development problem, the first source of help named was most often the doctor (72% Total, 75% Rural , 66% Urban). A few respondents would turn first to books or to family members. The next source of help also tended to be the doctor or whoever he recommended (38% Total, 42% Rural, 32% Urban). Some would turn next to family members or books or the school.

For a health problem the doctor is almost unanimously the first source of help for both regions (94%). In response to "Where would you turn next", the doctor is still the most favored source (73% Total, 75% Rural, 67% Urban). The difference between where to turn first and where to turn next can be accounted for by an increase in "don't knows" for the second question.

For a social-emotional problem, the highest percent of parents would turn first to the school (36% Total, 43% Rural, 23% Urban); family, minister, the child and the doctor are all mentioned by smaller numbers of parents. When asked where they would turn next, more parents would still name the school or some member of school staff, more than any other single source (24% Total, 29% Rural, 18% Urban).

In the case of a learning problem or questions about opportunities for higher education, the school is undeniably the first source of advice and help. For a learning problem, 92% would turn first to the school. For a question about higher education, 74% would turn first to the school. When asked "Where they would turn next", the highest percentages in both cases would still turn to someone on the school staff. For learning problems, 48% name the school; for a higher education question, 38% name the school. Sources named by smaller numbers are the doctor or a college.

Thus, it appears that parents look to the medical profession and to school personnel as extremely important sources of help and advice. This is true for both Rural and Urban parents.

Attitudes and Aspirations

Aspirations

One series of questions relates to the aspirations the parents hold for the sample children. As regional differences are small, only the totals will be reported.

Results for educational aspirations reveal that 50% of the parents want their children to go to college, 23% want them to graduate from high school, and 21% want them to "go as far as they wish".

In regard to occupational aspirations, 60% of the parents want their child to do "whatever he or she wants", 23% would like their child to have "some sort of profession", and 5% mentioned a trade.

Personal qualities desired for the child as an adult will be discussed in future reports, as they are included in the second coding procedure.

When asked "how much will all of your hopes for (child's) future be influenced by.....?", highest ratings were given to the influence of the respondent, the spouse and the schools. 77% of the respondents said that they themselves could influence the child's future "a great deal", 72% said their spouse could influence the child's future "a great deal", and 73% said that the schools could influence the child's future "a great deal". Other influences were mentioned, e.g., peers, church, government, but none were rated as being nearly as important as these three.

Sources of Information

Social Network - Informal Contacts

The great majority of parents (58% Total, 65% Rural, 70% Urban) said that they talk to other parents often (everyday, several times a week, or once a week). Almost all respondents believe it is helpful to talk to other parents (71% Total, 95% Rural, 85% Urban).

When asked how many relatives or very close friends they are in touch with regularly, there were clear differences by region. 40% of the Rural parents are regularly in contact with 6 to 10 such persons, while only 26% of the Urban parents are in regular contact with this many persons. Conversely, 29% of the Rural parents are in regular contact with 1 to 5 such persons, while 41% of the Urban parents are in contact with this relatively small number.

Over 80% of all respondents reported that there is some person among their relatives and close friends with whom they particularly like to discuss the sample child or child-rearing in general.

Media Contact

Responses to the questions asking about the media as sources of information and help indicate that they are not, on the whole, as frequently used as personal contacts. Responses are similar across the regions.

Of the different types of reading material asked about, magazines appear to be the most popular. 45% said that they had read an article related to child-rearing in a magazine in recent months. However, only 33% remembered what the article was about. 30% reported having read a book related to child-rearing, 26% a newspaper article, and 20% a pamphlet or newsletter in recent months. In every case, smaller percentages remembered the subject matter and still fewer had discussed it with anyone else.

Television is evidently a more common source of information than reading material. 48% of the parents remembered seeing a program about children and parents in recent months.

A majority (56%) of the respondents believe that reading material could be made more helpful to parents. 68% believe that television and radio programs could be made more helpful to parents. Their specific suggestions for improvement will be dealt with in future reports.

Knowledge of Local Programs and Services

Parents were asked about different types of programs and services and whether any of them were available in their county. Respondents who replied "yes" were then asked to tell about the particular program or agency. Later we will be able to match names and descriptions of programs volunteered by respondents with the known programs available.

Probably more interesting than those who said "yes" or "no" to these questions are the number who said they "didn't know". 51% of the respondents did not know whether there was a program for those interested in becoming more effective parents, 37% did not know if there were organizations that provide for parents own needs (job-training, interests, etc.), and 29% did not know whether any kind of preparation for parenthood was available locally. Respondents evidently are most familiar with agencies or organizations that provide assistance to families facing difficult situations; only 12% answered "don't know" to this question.

Parents were then given the names of specific programs in their county which were taken from our survey of local programs and services. The majority of respondents had heard of the majority of these programs and services; however, less than half claimed any knowledge or familiarity with the majority of them.

Demographic Information

Finally, a demographic profile of our Virginia and West Virginia respondents will be presented.

Education

The parents in this sample were most likely to report high school graduation as their highest level of schooling (47% Total, 53% Rural, 35% Urban). However, the Urban respondents are much more likely to have gone on beyond high school, to college, or even to a post-graduate level. Those who have achieved an educational level beyond high school make up 20% of the Rural parents, but 41% of the Urban parents.

Few respondents are currently attending any school. However, an interesting result is obtained when we shift from "Are you or your husband

going to school at the present time?", to "Do you or your husband plan to go back to school in the future?". The percent of respondents replying "yes" jumps from 6% for the earlier question to 26% for the second question. This is true for both rural and urban respondents. The percent of spouses who plan to go to school in the future is also higher than in the present, but the difference is not nearly so dramatic as for the respondents.

	Going to School Presently	Plan to go Back to School in Future
Yes, Respondent (Total)	6%	26%
Yes, Respondent (Rural)	3%	23%
Yes, Respondent (Urban)	10%	32%
Yes, Spouse (Total)	4%	9%
Yes, Spouse (Rural)	5%	9%
Yes, Spouse (Urban)	4%	8%

Religion

Almost all respondents state that they have a religious preference (89% Total, 88% Rural, 91% Urban). Most (75%) are Protestants. 48% of the Rural parents attend religious services once a week or more; 34% of the Urban parents attend this often.

Race

Of this West Virginia and Virginia sample, 93% are white, 6% are black, less than 1% are Asian, and less than 1% are Hispanic. Once again, there is a difference by region.

	Appalachian Rural	Appalachian Urban
Black	1%	16%
Asian		.5%
Hispanic		.3%
White	99%	83%

Organizational Membership

In regard to the organizations of which the respondent and the spouse are members, the most striking finding is the high percentage of each who belong to no organization. By region, Rural parents are even more likely to belong to no organization than is true of Urban parents. Urban parents are also more likely to belong to a greater number of organizations than the Rural parent.

Organizational Memberships of Respondent

Total Number of Organizations	Total	Appalachian Rural	Appalachian Urban
0	33%	37%	26%
1	28%	31%	23%
2	21%	21%	19%
3 or more	15%	9%	26%

Organizational Memberships of Spouse (Father)

Total Number of Organizations	Total	Appalachian Rural	Appalachian Urban
0	43%	45%	40%
1	28%	33%	19%
2	13%	14%	11%
3 or more	13%	9%	22%

Respondents were more likely to belong to a PTA/RTO or Parent Advisory Group than any other single type (49% Total, 42% Rural, 61% Urban). The next most common type of membership was church-related (22% Total, 20% Rural, 25% Urban).

For the father, the most common type of organizational membership was a Union, Business or Professional Association (27% Total, 25% Rural, 34% Urban). The next most frequently mentioned memberships were the PTA/PTO/ Parent Advisory and the Lodge or Civic Association. Urban and Rural parents responded similarly when asked how often they attended meetings of these organizations. Approximately 39% attend some organizational meetings frequently, once a month or more.

Respondents were then asked whether any of the organizations they belong to "provide an opportunity to get advice or talk over concerns about the sample children". 42% of the Rural parents and 44% of the Urban parents replied "yes". More specific information about just which organizations and in what ways their programs are helpful will be available later.

III. CONCLUSION

Perceived Needs

A very important final question asked, "Is there any particular kind of help for parents that is not available locally, but which you feel is needed?" Overall, 32% of the parents interviewed responded "yes". When examined by region, it is clear that Rural parents are more likely to feel the need for help that is not available than is true for Urban parents: 39% of the Rural parents responded "yes"; only 29% of the Urban parents did so. Those who replied "yes" were then asked to explain what is needed. This information will be analyzed later.

Interviewers

The tail sheet contains information about the quality of the interview from the perspective of the interviewer. Some interesting studies of interviewer attitudes and affects could be carried out with these data. Of particular interest will be the explanation of those interviewers (32%) who said the interview contained "unusual" features.

Concluding Statement

In conclusion, this preliminary data analysis suggests significant differences between the parenting situations of Rural and Urban parents. It is also evident that any real understanding of these preliminary results will only be possible after the analysis of the corresponding open-ended questions.

SURVEY OF MODEL PARENTING PROGRAMS

Alice M. Spriggs & Paul D. Mays
Division of Childhood and Parenting

FINAL March 1981

Appalachia Educational Laboratory
P. O. Box 1348
Charleston, West Virginia

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REGIONAL PARENTING SURVEYS: MODEL PARENTING PROGRAMS

Alice M. Spriggs and Paul D. Mays

Overview

The Division of Childhood and Parenting, Appalachia Educational Laboratory (AEL), conducted a study of model parenting programs located throughout the seven member states. This study was conducted as a part of AEL's Regional Parenting Surveys which is a major component of the Childhood and Parenting Program. This report summarizes the purposes, procedures, and findings of the study in descriptive form. Dissemination plans and uses of the study are also described.

Purposes. The purposes of the Model Parenting Program studies are: (a) to identify, screen and study programs in the Appalachian states that deal with parenting, (b) to determine the goals of the programs, the populations served and the extent that other community agencies are involved in order to understand the reasons for the favorable impact on parents and children, (c) to determine how transferable certain programs might be to another population or locale, and (d) to provide information to those interested in replicating/adopting existing programs or in improving upon existing programs.

Procedures. A variety of programs related to parenting are now operating. The Community Resources catalogue for any given city in the Appalachian Region describes programs that are either totally or partially designated parenting or parent education programs. The smaller communities and rural areas have far less to offer. However, some form of assistance to parents, though it may be strictly printed information, is available from the State Department of Health and the State Department of Welfare in each of the states.

As a result of reviewing community resource guides, contacting key personnel in agencies, consulting with the DC/P Task Force, the AEL Board,

program directors formerly associated with AEL, and reviewing information gathered as part of the Regional Parenting Surveys, it becomes evident that the existing programs serve many different groups with varying needs and that programs have very diverse goals and objectives. It would be impossible to assess all the programs in operation. Therefore, an attempt was made to categorize programs using the parenting program classification (see Attachment I).

Once the major listing of programs by categories had been developed, additional consultation with the Task Force and AEL Board was carried out to provide AEL staff more detailed information about the designated programs. This information, along with geographic location, was then used to narrow the original list of 90 potential programs to be interviewed to approximately 30.

An open-ended interview was developed by AEL staff and field tested with various kinds of programs in the local area to check for adequacy, flow of information and suitability of language and questions (see Attachment II). This was done primarily to insure that interviews would not have questions that might appear to solicit confidential information or be an invasion of privacy.

After the questionnaire was finalized, two divisional staff conducted the interview either by on-site visits or by telephone. Each interview involved an initial contact that included a description of the study and a request for the contacted program to participate in the complete interview. An appointment was then set up for the indepth interview, which lasted approximately one-half hour. The interview allowed considerable latitude for the program personnel to express in their own terms those things which they thought to be important to their program and contributed to its success.

Conclusion. It was possible to complete interviews with twenty of the potential candidates. The programs studied range from pre-parenting for middle school and senior high school students to parenting classes for adults with children of various ages and stages of development. Program foci range from comprehensive child development to providing specific child rearing information to adults. The extent of community resource involvement and the funding sources vary greatly. These variations are intended to indicate the variety of types, audiences, community resources and funding sources of programs now operating.

Information obtained from the interviews was synthesized and written into brief narratives (see pp. 6-57).

Programs surveyed served both urban and rural families. The majority of the programs serve adults who are interested in being better parents or parents who have young children in a program with a mandated parenting component. Thus, the parent education is directed toward the adult and is most often developmental or preventative in nature as opposed to corrective or ameliorative. Federal funds are the most common source of revenue for the programs studied, especially those programs for young children with a parenting component. However, the majority of the programs serving adults operate either on a voluntary contribution basis or with community resources and minimum fees to participants. The composition of persons attending the programs vary. The federally funded programs are targeted to serve educationally disadvantaged families. The parenting groups are more often attended by middle income families and indicate difficulty in getting others to attend (see Attachment 3).

Programs serving school age students or prospectiye parents are funded by state funds or local school systems. The programs are offered

as part of the regular curriculum and tend to be the responsibility of the assigned teacher. However, support and endorsement of the courses are evident at the administrative level.

While programs are unique, certain commonalities that attribute to their success are evident. These include: (1) a key person(s) has made a major commitment to the program, (2) programs are working in cooperation with other agencies, (3) programs have multi-goals in order to meet the needs of a variety of people, (4) flexibility is exercised in the use of curriculum, location of courses, format of presentations and other program aspects in order to interest and involve participants, (5) cost effectiveness such as cooperative purchasing and shared facilities allow more offerings per budget dollar, and (6) if school based, an experiential component that includes child care is necessary for maximum learning to occur.

Many of the programs studied are already being replicated and are providing technical assistance to others who are attempting to replicate the model. Others do not have the staff or funds to provide on-site technical assistance but will provide printed information or telephone consultation with interested program personnel.

Dissemination and Uses. The Model Parenting Programs report will be disseminated to the Task Force members and to state and local personnel who are working with parenting programs in the AEL region. The report will serve as a basis for additional studies. Selected programs will be studied in more detail to determine the perceptions of both the parent clients and the program staff as to the particular program elements that contribute to their success. Inquiries will be undertaken to determine which populations do not use these programs or find that the programs do not meet their needs. This information will serve as a basis for planning services to assist those populations of parents with unmet needs.

Finally, knowledge from the Model Parenting Program Surveys will be used along with the Regional Parenting Surveys findings to provide consultation and technical assistance to state and local educators who are attempting to develop programs for improving school/family relations.

CHILD DEVELOPMENT PROJECT OF THE CABIN CREEK MEDICAL CENTER

Dawes, West Virginia

The Cabin Creek Medical Center is a primary health care clinic designed to provide comprehensive health services to residents of the Cabin Creek, West Virginia area. The Center operates four "special projects" designed to meet the special needs of a specific group of people. One of these is the Child Development Project.

The Child Development Project was the first special interest developed into a program format and implemented by the Cabin Creek Health Association. This occurred because of a particular concern by the board of directors about the health and welfare of children in the area.

In the summer of 1976, the Child Development Project sought and obtained funding from the Robert Wood Johnson Foundation. The overall goal of the project has been to provide comprehensive medical and educational services to preschool children. These services have been provided within the medical center and in the home. The project was initially envisioned as an outreach project for children under the age of two but was later extended to include children under the age of six and their families. Future goals include expanding the program to include children up through age eleven and working with area schools to increase their services to children.

The services now provided are: (1) home services to participating children including social services, health education, infant stimulation, and developmental screening, (2) immunization tracking, (3) coordination of Well Child Care Day which provides developmental screening and health education for children, and (4) provision of educational materials on parenting, child development and other related topics.

The Child Development Project staff consists of a child development specialist, a community outreach worker and a part-time registered nurse. The child development specialist must have a master's degree in child development or a related social services field. The community outreach worker is a local person who is trusted in the community. She accompanies the nurse on home visits and also makes home visits to provide developmental experiences and educational materials to the child and the family. The nurse is provided by WVU School of Nursing.

This programs serves both children and adults in a developmental/preventative way. While the children are the most direct object of certain services such as health care, the parents are provided educational services at the same time.

The principal source of funding for the project has been a three year grant from the Robert Wood Johnson Foundation. The grant period having come to an end, the CCHC has contracted with the WV State Department of Health to continue this project. The proposed plan to provide these services is to employ a services coordinator/tracker for not only child development but all other coordination tracking.

The Clinic works in cooperation with many agencies, including Shawnee Hills, WIC (Women, Infants and Children), Family Services, and the Crippled Children's Program with the Department of Welfare. Funding is provided by the National Health Service Corps, United Mine Workers Insurance, WV Dept. of Welfare, WV Dept. of Health, Medicare and the Robert Wood Johnson Foundation.

Replication of this type program is possible. However, such a program is very costly and outside funding is necessary because the program is service delivery and not self-supporting. The funding that made this project possible was private foundation monies for implementation and services. The program has been successful enough to receive a contract from the WV State Dept. of

Health. The Cabin Creek Medical Center provides comprehensive care to a very rural area and the Center fills a variety of needs in the community.

Source:

Margaret Light, Administrator
Cabin Creek Health Center
Dawes, West Virginia

CONCERNED PARENT INFORMATION MEETING

AND PARENT ADVISORY COMMITTEE

Saegertown, Pennsylvania

Concerns of parents, teachers and the principal have led to the formation of two groups, the Concerned Parent Information Meeting and the Parent Advisory Committee, at Saegertown Middle School. The school had had a PTA that folded from a lack of interest and disagreement with the PTA's philosophy. However, the parents wanted to be involved in the school's operation and offer the school support. Therefore, a group of teachers and parents committed to the school formed a committee and set up guidelines for parent and community input to the school.

Out of committee's planning evolved two groups: (1) an Advisory Committee and (2) a Concerned Parent Information Meeting. The Advisory Committee is limited in membership to one parent per township, five faculty representatives and the principal. This group meets once a month, serves in an advisory capacity to the principal and plans the Concerned Parent Information Meeting which is held later in the month. The Concerned Parent Information Meeting is open to the public but is primarily attended by parents with children in the school. Each meeting deals primarily with an area of interest or concern to parents. Some of the topics dealt with thus far include transportation, grading system, curriculum, and familiarization with the faculty. The group also provides resources to the school. For instance, career education and non-traditional work role programs are planned and provided by the group. Parents come to the classes and discuss their occupations or occupations within their career area, serving as a resource to the school and as a role model to the children. Members of the group also serve as aides in the school, organize and chaperone after school parties and serve on committees to involve parents in the program.

One of the future goals of the program is to involve parents in daily classroom activities.

The overall goal of the program is to provide a supportive and united parent-school relationship that will provide the best possible educational climate for the children in the school. The program is viewed as developmental, one from which the ramifications will be seen at a later time.

This program has been in operation for just over one year and is still in the formative stages. However, the program resulted from the perceived need by a number of parents and faculty that home-school support is beneficial to all involved parties. All persons involved participate on a volunteer basis. A crucial feature is the time involved and the willingness to give time to the program. One or two very committed individuals are needed in order to successfully carry out this type program. Cooperation and commitment from the principal of the school are also key elements to its success.

This program, while very new, has been able to bring about parent involvement in an area where it had not existed for years.

The program can be replicated in any school system desiring similar involvement of parents. The key features for replication are described above, i.e., attitudes of school, commitment of time by key faculty and a few parents, and a need and desire of parents to work with the school to provide the best possible support system for their children.

Source:

Donnan Stoicovy, Principal
Saegertown Middle School
Saegertown, PA 16433

EARLY INTERVENTION PROGRAM OF SHAWNEE HILLS COMMUNITY MENTAL HEALTH CENTER

Charleston, West Virginia

The Mental Retardation Component of the Shawnee Hills Community Mental Health operates a Day Training Center for mentally retarded and physically handicapped children. The Early Intervention Program resulted from the recognition that children would benefit if services were provided from the time of birth rather than waiting until the child may have suffered permanent damages.

This program is designed to serve families of developmentally delayed infants from birth to three years old who have physical handicaps, birth defects, seizure disorders, traumas, or have been identified as high risk children such as premature births. Referrals to the program come from physicians, pediatricians and pediatric neurologists. The child is brought to the Center and thoroughly evaluated by a team composed of a speech pathologist, physical therapist, child development specialist and home trainer. The team then develops an educational plan for the child that will be carried out in the home by the parents. The home trainer goes into the home to teach the family how to work with the child.

A preschool class also meets once a week. The objective of the class is to encourage children to communicate and socialize with children of their own age group as well as to help the parent and child overcome the experience of separation from each other, often for the first time. During the preschool class, the parents observe the children on close circuit television in order to learn additional techniques from the teacher.

Another component of the program observed by parents is language group. Its purpose is to give additional stimulation to youngsters delayed in either

receptive and/or expressive language skills. It provides a structural situation which encourages children to use verbal responses during story, time, snack, time, and concept building time.

The program is primarily a training program for parents of handicapped children. The overall goal of the project is to give parents the confidence in themselves that they are going to have to have in order to be the most effective parent(s). This is done by providing parents with the skills and abilities needed to teach the child. By using these skills, the parents will prevent delays and damages that can be permanent or difficult to overcome. Parents are responsible for nearly all the activities recommended by the professionals. Therefore, the program serves children indirectly and is developmental/preventative in nature.

Several professionals with specific expertise are needed to operate the program effectively. The program director should have a master's degree in counseling or special education and the lead teacher a degree in psychology or related area. Other crucial staff positions are degreed people in physical therapy and speech pathology. Very important to the success of the program are the paraprofessional home trainers. These people must be sensitive to the needs of parents and know how to deal with people. The home trainers are hired primarily on their interpersonal skills and extensive on the job training is provided.

The program works cooperatively with the pediatricians, pediatric neurologist and physicians in the area for referral and follow-up services. The referring physician receives a copy of the Early Intervention Program's evaluation and home training plan. The Crippled Children's Center provides a staff person to do audiological (impedance) screening. Cooperation and

sharing of services with other components of the Shawnee Hills Mental Health Center is a regular feature of the program.

The Shawnee Hills Community Mental Health Center, a private, non-profit corporation, is a comprehensive service delivery organization serving citizens of all ages in four West Virginia counties. The families in the Early Intervention Program fall into Title XX eligibility for developmentally disabled.

The program does not have a formal evaluation procedure. Shawnee Hills is now working on program evaluation plans. Quarterly reports indicating numbers of participants, trends noticed and services provided are written to meet federal guidelines. This information is also provided to the funding source.

This program requires the umbrella of an agency for replication. The expertise needed to successfully operate the program is expensive and often must be used by two or more programs in a larger agency in order to afford the staff needed. This program could be replicated by an existing service agency that is operating preschool programs but is not providing services beginning at birth. Some additional staff and sharing of responsibilities would allow for downward extension of already existing programs.

Source:

Kathy Higgins, Director
Early Intervention Program
Shawnee Hills Mental Health Center
Charleston, West Virginia

EXTENDED DAY CARE PROGRAM

Falls Church, Virginia

Falls Church Public Schools, through its Office of Community Education, has operated a before and after school day care program for elementary-age youth for the past five years. The program is designed to provide quality day care for children of working parents. A parents' advisory board helps govern the program. Fees paid by parents on a sliding scale are the sole source of support, although the school provides several services including busing, payroll and purchasing, liability coverage, and general administration.

The program came into existence in 1975 when a City Council-created Commission on Child Care Needs in Falls Church determined through a survey that there was a considerable need for before and after school care of elementary school children. The group entered into an agreement whereby the school system would administer the program with City Council agreeing to pay some start-up costs and to make up any first-year deficits. The program began in October 1975 with one center, 27 students and three counselors. The program now has three centers, 105 students and 10 staff members.

The purpose of the program is to provide quality, supervised before and after school care for elementary age children whose parents are employed outside the home, are incapacitated or are absent from the home due to other circumstances. Handicapped children are also eligible.

The Extended Day Care Program occupies a unique position within the organizational framework of the school system. The schools provide classroom space, use of facilities such as libraries and gyms, busing between schools, insurance coverage, purchasing and payroll services and general assistance from the Office of Community Education. Beyond the many in-kind

services, the program is completely self-supporting through fees.

The program is basically administered by the Extended Day Care Advisory Board, a group composed of two parents from each of the participating schools, including the Catholic school in the community. The Board provides basic policy for the administration of the program, subject to approval of the School Board. In practice, however, the School Board is involved only in special situations and in matters of personnel. Since the School Board is required by law to appoint all school personnel, the Advisory Board refers all personnel appointments to the School Board for approval.

Initially, a head counselor at each center implemented policy and ran the program. As the program grew, it was necessary to hire an administrator as a part-time employee to run the program. This Program Administrator supervises the day care operation on a day-to-day basis and is the administrative arm of the Advisory Board. Each of the three centers has a head counselor (college degree) who runs each particular program. Under each head counselor are one to three other counselors, depending on the number of students. The school principal aids in the coordination of the program with the school in the areas of space utilization and custodial schedules.

The program consists primarily of a combination of recreational activities including free play, organized games and sports, board games, arts and crafts, and special activities such as field trips and parties. Snacks are served in the afternoon. The program also operates on non-major holidays, vacation periods including summer, and other days when schools close--snow days, teacher professional days, etc.

In the summer, the program operates in cooperation with the Recreational Department's playground program. Summer staff is hired separately from the school year program.

In summary, the program is a collaborative home-school effort that grew out of a community need and the actions of some parents. It can be replicated by other communities where there is the commitment by the parents and the school system to meet an ever-increasing need, i.e., before and after school care for elementary age school children.

Source:

Ms. Nancy Beach, Director
Community Education
Falls Church Public Schools
7124 Leesburg Pike
Falls Church, VA 22043

THE FAMILY EDUCATION CENTER

St. Albans, West Virginia

The Dreikurs Family Education Center is a community oriented non-profit organization in Charleston, West Virginia. Its purpose is to help parents find effective ways to develop more positive and satisfying parent-child relationships. The Center is operated totally by volunteer staff who have received extensive training in the Dreikurs philosophy.

The local center began operating about five years ago when Dr. Mansford Sonstegard started the Family Education Center for practicum experiences for graduate students at West Virginia College of Graduate Studies. Dr. Sonstegard has started many groups throughout the country that are based in Adlerian theory.

The goals of the Family Education Center are to enable parents to become actively involved in:

Identifying ways in which they and their children have been interacting together in both effective and ineffective ways.

Learning alternative parenting skills that may prevent minor and typical troublesome situations from developing into more serious behavior problems.

Sharing experiences of common concern to all parents.

Fostering mutual respect, cooperation, responsibility, and self-reliance among all members of their family.

These goals are attained through training as outlined in Children: The Challenge by Rudolf Dreikurs.

The staff consists of a group of M.S. degree counselors and well trained paraprofessional parents. The local staff is trained and assisted by Dr. Mansford Sonstegard, professor of counseling at WVCOGS.

The emphasis at the Center is on preventive measures based on the principals of Individual Psychology as developed by Alfred Adler and Rudolph Dreikurs.

Here, the child is seen as responsible for his actions. Parents as well as children are considered to have rights, and the solution to all family difficulties is found in the law of social living which states that all people are equal. Parents need to know how to motivate the child to cooperate, to respect order, and share responsibilities.

The services provided are for parents of children of all ages and are considered preventative in nature. Parents are actively involved in the 8-10 week courses which meet one time per week. Parents are involved in the following ways:

1. Parents learn to help one another. Personal problems are not discussed, only those problems that are common to most families.
2. Parents, through interviews conducted by a trained counselor with both parents and children, are furnished "specific" suggestions designed to improve not only problems with an individual child, but the relationship between all members of the family.
3. Parents and interested persons come to learn and discuss ideas about children's behavior. Parents learn why kids do what they do--and what to do about it.
4. Follow-up sessions are scheduled, at which time progress is reviewed and further guidance is given if found to be needed.
5. A supervised playroom is maintained for the children of the families that are attending the counseling sessions. Added insight is obtained in this type of setting by observing the interactions between the children and the persons maintaining the playroom.

The primary target audience for the Family Education Center is parents interested in finding effective ways to develop more positive and satisfying parent-child relationships. However, the Family Education Center is of value to persons in the "helping professions" as well - teachers, counselors, youth leaders, ministers, social workers, nurses, or any adult who wants to understand and communicate more effectively with children.

Anyone may attend the family education sessions. Parents are encouraged to attend as observers at least once before scheduling to be counseled. Many

parents gain greater insight into their own family situation by attending the session.

The Center works cooperatively with the Heart & Hand House in South Charleston. The House provides free office space for the Family Education Center. Churches and community centers in the area provide free meeting sites. A fee of $5 is charged to persons attending the classes. This fee covers the courses, materials and child care.

No formal evaluation of the parenting groups is conducted. However, follow-up sessions for participants are held to try to determine what impact the program has made on participants. Also participants tend to attend additional sessions on other issues related to parenting conducted by the Family Education Center.

Similar parenting groups can be started by an interested group of parents. However, the parents need a group leader who is trained in how to deal with groups. It is not important that the group leader have expertise in the material because the idea is that the group learns together and helps learning to occur. Therefore, a group can be established by a person who has developed interpersonal and group leadership skills. This can be accomplished in groups and by consultation with experienced group leaders and/or experts in the Adlerian theory. Most typically group leaders are parents who have an interest in learning more about being a better parent.

Source:

Lee Anne Kenney
Youth Services Office
Hansford Community Center
6th Avenue
St. Albans, WV

THE FAMILY LIFE RESOURCE CENTER, INC.

Huntington, West Virginia

The Family Life Resource Center is a non-profit, multi-faceted organization meeting community needs in Huntington, West Virginia. The Center was founded in 1976 by Eleanor Moser through gifts and volunteer services.

Having positive relations with other organizations in the community has been a key to the success of the program. For example, during the first three years of operation the YMCA provided space to the Center free of charge and Marshall University faculty members serve on the board and act as volunteers.

The goal of the Center is education in the areas of parenting, self-help, and guidance counseling and referral. The Center also serves as an agent for identifying and encouraging exchange of information among various agencies in the community. In addition to these primary concerns, related areas considered to be of major importance include the training of others in establishing family life resource centers, and increasing community awareness of resources which are available for persons concerned with the quality of family living.

The Center has a wide variety of services and programs emphasizing crises prevention through family life education. For example, classes for single parents and adolescent parents are held. The Adolescent Parenting Class emphasizes effective parenting and career development, but also deals with such concerns as meal planning and budgeting. The Single Parent Class is structured around a needs assessment sheet which is completed by every attendee at the first class. After the general session which deals with personal money management, the series is

divided into six sessions which focus on the topics indicated in the needs assessment. In addition, participants are counseled on an individual basis if the topic which they priortized highly was not identified by the group as a whole. Both the Adolescent Parenting Class and the Single Parenting Class emphasize problem solving techniques.

Parenting workshops dealing particularly with parenting skills and practical living skills are held on a regular basis. These classes help participants identify some of the concerns of daily living, whether it be personal inter-relations within the family; finances, being an informed consumer, discipline or the role of emotions in parenting.

The Center has aided in the formation and sponsorship of self-help groups. Examples include Parent Anonymous (dealing with child abuse and neglect), Candlelighters (parents who have children with cancer or have died from cancer), and groups that provide self-help and shelter for battered women.

The Center periodically hold meetings at which members of professional organizations, judges, representatives of social service agencies and others address themselves to various issues such as available resources, project funding, new legislation or other relevant topics.

The Center was highlighted as one of eight examples of innovative family work in a national program package focusing on family life in YMCA's all over the United States. There is an agreement that the Center provides a resource in family life which is quite different from anything offered in the local YMCA and together the two agencies supplement each other and make a substantial contribution to the community. The Center is an agency of the local United Way and has been designated as a demonstration project

for the Appalachian Regional Commission (ARC). The Board of Directors has now appointed a special committee to give leadership to location of funding sources from various government agencies and private foundations.

A program of this type can be replicated in other communities. The key element is commitment from a few dedicated people. This program was started by the formation of a board gathered under the leadership of one individual who not only volunteered her time as an executive but also contributed her own personal professional library as a nucleus of the resources.

The staff of the Family Life Resource Center is available for consultation and training and is preparing a resource package for dissemination on how to establish a family life resource center.

Source:

Eleanor Moser, M.A.
Family Life Resource Center, Inc.
Suite 601
1139 Fourth Avenue
Huntington, West Virginia 25702

FOUST MIDDLE SCHOOL FEED PROJECT OF OWENSBORO INDEPENDENT SCHOOL

Owensboro, Kentucky

The Facilitative Environments Encouraging Development (FEED) Project is one of the Practical Arts cluster courses presented to eighth grade students at Foust Middle School, Owensboro, Kentucky. The course is a nine-week session in child development that includes actual care giving practice in a variety of child care centers.

The program started in 1976 as a unit in the general home economics curriculum that included some work in child care career education. The teacher began researching student contacts with children and learned about the Exploring Childhood materials and the FEED Project. The Foust School was selected by Indiana University in 1976 to become a field test site for the materials.

The goals of this program are to provide students with child development information, an understanding of the responsibilities of parenting, and information and exposure to child development careers. This is done through a combined classroom and field experience approach.

The project is staffed by one teacher who has an Education Specialist (Ed.S) degree, considerable teaching experience and a great deal of enthusiasm for the approach. One teacher's aide was part of the staff during the first four years, but this position has been eliminated with cuts in funds. The same teacher has operated the program the entire time it has been in the school system. The teacher is responsible for all aspects of the programs. She teaches all in-class sessions and is responsible for locating field sites and field site teachers. Each year, approximately 20 field sites are involved in the activities. These include day care centers, Head Start

classes, public kindergartens, church related nurseries, hospitals, and programs for physically and mentally handicapped children. FEED Project students are transported to and from the field site in school buses.

Students who are interested in child care careers and are also prospective parents are the target of the program. The school require that all eighth grade students, who can be scheduled, participate in this exposure unless an extenuating circumstance exists. The program is preventative in nature because the students are not yet parents. Skills, knowledge and attitudes toward parenting and young children will allow the participating students to make more enlightened decisions about their relationships with children.

The selection and retention of field test sites is crucial to providing the experiential component of this programs. The impression made by the teacher and the student determine whether field site teachers participate because there is no additional salary or stipend for the field site participants. Their commitment to the purposes of the project and the small amount of assistance by the students are the only rewards to the sites.

The principal source of funding for the project are the local funds for teacher salary and bus service and a small amount of state funds because it is a vocational program. The funds are adequate for operating the class but the loss of a teacher's aide will negatively impact on the project. No fees are involved because this class is part of the public school curriculum.

The program was originally evaluated by the Indiana University evaluator who published the findings. An IU evaluator is now doing a follow-up study of the students who participated in the original program. These findings have not been published.

The project is very transferable and has been implemented by various other schools. The Foust faculty now have a slide and video presentation that enables them to show what is happening in Owensboro to interested groups throughout the U. S. The program can be placed in a variety of curriculum areas such as social studies, home economics, or career education. It can be offered over nine or eighteen weeks, or modified to meet other time frames. The key to adoption or replication is a dedicated, experienced teacher with considerable enthusiasm for the program. This must be backed up by school administrators and a principal with a great deal of autonomy who are supportive of the project, the teacher and the curriculum.

Source:

Nancy Erickson
Foust Middle School
601 Foust Avenue
Owensboro, Kentucky 42301

GARNET SCHOOL AGE MOTHER'S PROGRAM

Charleston, West Virginia

School age mothers or prospective mothers in Kanawha County public schools have the option of attending their regular attendance school or participating in the the Garnet School Age Mother's Program. Students in the Garnet Program participate in a regular curriculm and are carried in the enrollment of their home school. In addition, students participate in a family living class and a parenting skills class two hours per week.

The program is operated by the Special Education Division, Home Bound Instruction Department of Kanawha County Schools. The primary objective of the program is to provide a regular, continuing education to pregnant teenagers or young mothers. Students receive instruction in all required junior high and senior high school subjects and in electives such as business courses, home economics, and advanced math and sciences. Students normally return to their home school the semester following delivery of the baby.

The program is in its eighth year of operation. The staff consists of one full time lead teacher who teaches English and Social Studies and a full time social worker. The remainder of the staff consists of teachers from other Kanawha County Schools, county health nurses and various resource persons. All teachers are degreed and are employees of the local school system. The program administrator is the Director of Special Education for Kanawha County Schools and the program is funded by the school system.

The program serves approximately 50 students per year, a minority of those eligible to participate. Other pregnant students continue in their home schools or drop out of school.

Garnet staff feel the program has unique features which are beneficial to the enrollees. The babies may be brought to school if the mother does not have anyone to care for the child at home. Uniqueness of the students' situations can be shared and discussed. A positive attitude of staff and other students is supportive to the students. Most of these students have decided to keep the baby, and concrete information regarding child care, nutrition, health, and safety is provided the prospective mothers.

A great deal of information/education included in this program would be beneficial to all teenagers and prospective parents and it is not available to them now in this area.

Source:

George Ann Ferris
Bonnie Wagey
Garnet School
422 Dickinson Street
Charleston, West Virginia

GROWING TREE PRESCHOOL

Webster Springs, West Virginia

The Growing Tree Preschool is a cooperative nursery school in Webster Springs, West Virginia. The program was established by the current director who also serves as the teacher. After determining a need existed in this rural county for children, the director studied a number of programs in Charlottesville, Virginia, and decided that the Parent Cooperative Nursery School was the best model to replicate. The school was originally established in Upper Glade, the population center of the area to be served. However, after one year, it was evident that the majority of the children attending the program were from the town of Webster Springs. The school was moved to a church in the town.

The preschool operates from September through November and from March through May because of severe winter weather. Children age two and older are eligible for enrollment. The school is supported totally by tuition and parent involvement. A criteria for enrollment is a pledge that the parent will participate in the program a specified number of hours each month. A few children may enroll whose parents cannot participate. The parent participation is designed to fulfill two goals:

(1) to allow the preschool to operate with only one salaried employee, thus keeping enrollment fees low; and

(2) to allow the parent to observe child development, and become familiar with and carry out appropriate learning activities with young children so that they may be better teachers of their own child at home.

The program is basically an educational program for children and could be classified for developmentally aged two- to five-year-olds. The teacher

has a master's degree in early childhood education but the program is highly dependent upon the involvement of the parents. Two to five parents participate in the classroom at each session. A home-school newsletter goes to the parent every two weeks. This letter includes a Talk About Page, which describes the current classroom activities and suggests related home activities.

The Growing Tree Preschool is operated by the director in cooperation with a Board of Directors. All financial support comes from tuition. The program is evaluated informally by the director who sends a detailed questionnaire to the parents at the end of each semester. The suggestions are used to make changes or modifications in the program. The program has received a considerable amount of favorable newspaper coverage throughout the area.

The program can be replicated quite easily if the appropriate teacher/director is available. One person trained in child development or early childhood education is required to offer the educational component of the program. This particular director replicated the program in a highly rural area after observing the program operating in an urban area with highly educated parents. Therefore, the approach can be used with a variety of parents.

Source:

Jacque Williams, Director
Growing Tree Preschool
Route 4, Box 20
Webster Springs, West Virginia 26288

HOME BASED EARLY CHILDHOOD PROGRAM OF THE CLINCH-POWELL EDUCATIONAL COOPERATIVE

Tazewell, Tennessee

Education begins at home and parents are the first and most important teachers of young children. This is the basic philosophy of the Home Based Early Childhood Education program developed by the Clinch-Powell Educational Cooperative. It began providing services in 1971 to three, four and five year old children in four rural counties in East Tennessee.

The goals of the home based program are:

(1) to involve parents directly in the full development of their own children,

(2) to help parents strengthen their capacity for facilitating the overall development of their children,

(3) to deliver comprehensive services to children and parents, or substitute parents, for whom a center-based program is not feasible

The program consists of three related components: (1) home visitation, (2) group experience for children, and (3) coordinated curriculum. The home visitation component is considered the most important element of the approach. These visits are conducted once each week in the homes of each child in the program and last approximately one hour. The home visitor delivers materials to the home which consists of: (1) information on how to improve parenting skills and (2) daily educational activities which the parent and child could do together. The home visitor explains the material to the parent, and when needed, demonstrates the educational activities. The home visitor may also provide other services such as referrals to social service agencies, public health nurse, and county welfare agencies.

Classroom type experiences are provided for the children by a teacher who travels to selected locations to hold one-half day per week classes.

These experiences provide an opportunity for social growth by giving children practice in sharing and working together.

This program came into being in 1971 as a replication/adaption of the Home Oriented Preschool Education (HOPE) approach to early childhood education. The original funding source was the U.S. Office of Education. This money is now supplemented by some Head Start money and state funds. "Captain Kangaroo" was used as the third television component of the program for several years. Staff wrote viewing guides and educational activities to accompany the television program to use at Clinch-Powell and at other sites using the home based approach. This component has been replaced over time by the curriculum materials.

In 1973, Clinch-Powell became a Home Start Training Center with funds from the Administration for Children, Youth & Families (ACYF). Training and technical assistance can be provided to parties interested in replicating the model. These sessions are conducted several times each year in Knoxville, Tennessee. Trainees may receive undergraduate or graduate credit from an accredited Tennessee University for participating in the workshop.

In 1977, the Joint Dissemination Review Panel approved the model as being one which is exemplary and worthy of implementation by school systems and other educational agencies. The program is now a functioning member of the National Diffusion Network.

Source:

Dr. William Locke, Executive Director
Clinch-Powell Educational Cooperative
P. O. Box 279
Tazewell, TN 37879

HOME-SCHOOL-COMMUNITY INVOLVEMENT OF DOTHAN CITY SCHOOLS

Dothan, Alabama

The Home-School-Community Involvement Program in the Dothan, Alabama City School System has reduced the number of student suspensions from 878 in 1976-77 to ten in 1978-79. This success has been achieved by designing an alternative school program that helps children with serious disciplinary problems within the school system.

Prior to 1976, suspension of students with behavior problems was frequently used as a disciplinary measure by administrators in the schools. For the next year, however, the director of instruction, along with teachers and administrators, proposed an alternative program. The new approach was aimed at deterring inappropriate behavior while keeping the offenders in a normal school setting.

The specific goals of the program are:

(1) To modify the behavior of delinquent students in such a way as to allow them to function successfully in the regular classroom,

(2) To provide students with an opportunity to better understand the nature of their personal problems through individual and group counseling,

(3) To enable parents of target students to acquire a better understanding of the child's needs,

(4) To make parents of target students aware of the efforts made in the school program to meet the child's needs, and

(5) To formulate a solution to the student's behavior problem through conferences of all concerned--the parent(s), teacher, counselor and student.

Every student in the Dothan system is eligible for referral to the alternative program, including exceptional students. Regular classroom and special education teachers refer students to the program when they are unable to deal with the student's classroom behavior. The alternative program is centrally located and is housed in a school building adjacent to the system's administrative offices. Parents are responsible for transporting the children to and from school.

Originally counselors worked only with students who were referred to the alternative school. The counseling service has expanded so that each school has a counselor on staff to work with both students and parents. Individual and group counseling is available to all children and parents in the school. However, once the child has been referred to the alternative school, counseling is mandatory for the child and the parent. Parents must participate in an entrance and exit conference. A series of seminars using the Systematic Training for Effective Parenting (STEP) materials is attended by the parents in order to help the parents learn how to deal with their child.

The program also operates an Advisory/Advisee (AA) component in the middle and high school. A highly trained teacher works on a one to ten ratio with targeted students and their parents, primarily with the goal of helping the parents keep the child in school.

At the senior high level, a "Sunshine Call" program is being piloted. This consists of the school calling each parent at least twice a year with an affirmative report about the students. This approach is being very positively received by parents of children in the school system.

The program staff consists of a Project Director, Alternative Teacher and ten Counselors. The Project Director must be skilled in crisis intervention counseling and the Counselors must hold Alabama Elementary Certificates, have experience in elementary teaching and counseling and psychological

training. The Alternative Teacher must be a certified, experienced teacher who is stable, stern and consistent with students. All personnel are hired on the basis of their reputation as disciplinarians and their capability for relating to students, irrespective of their areas of academic certification.

A major reason for the success of the alternative school is the involvement with both the home and community. The program has an excellent working relationship with juvenile court authorities. Children rarely need to be referred to juvenile court. However, when need does arise, court officials are very supportive of the school's recommendations. The program also works closely with the Mental Health Clinic, the Exceptional Child Center and the local hospital. Referral rates demonstrates the program's success. During each school year eighty-three percent of the students referred to the program have not returned. This has been true for each of the four years of existence.

The evaluation of the program has been conducted by the principals and counselors. These have been informal questionnaires as well as statistical figures that document referrals, placement of students, parental participation, etc. The information has been used to meet ESAA requirements and for local planning purposes.

The program can be replicated where the school administration has a commitment to deterring inappropriate behavior while keeping offenders in a normal school setting. Staffing, facility and funds to carry out the project are needed. A project director skilled in crises intervention and the ability to work with a variety of people and agencies is necessary to implement and supervise the project.

Source:

Carolyn Ballard
ESAA Project Director
Dothan City Schools
Dothan, Alabama

METROPOLITAN HOME AND FAMILY LIFE PROGRAM

Columbus, Ohio

The Metropolitan Home and Family Life Program of Columbus, Ohio came into being as a result of the Disadvantaged Act of 1968 which provided funding for agencies to provide special programs for the low income population. The State Department of Vocational Education and the Columbus Public Schools with cooperation from the Columbus Metropolitan Housing assumed the responsibility for developing and implementing the program.

The goals of the program are (1) to enrich the quality of family life, (2) to make parents aware of the importance of their role as the child's first teacher, (3) to help parents develop a positive self-image and to improve the quality of family life for families in the area, and (4) to improve the welfare of infants and toddlers through educating the parents in proper child care.

A variety of courses are provided to the parents in neighborhood centers, community houses and schools throughout the city. At present free classes are offered in family living, sewing, budgeting, nutrition, parenting, furtniture upholstery, foods and fitness, and parent and child interaction. The courses provide information and socialization experience for the participants.

The staff consists of a supervisor who is responsible for administering the program, curriculum development, staffing, and evaluation. The staff includes an infant stimulation coordinator, a public relations/media person, seven part-time teachers, four general educational aides, and four home visitors, also aides. Certified teachers conduct the regular

class sessions and the educational aides provide classroom assistance to the participants. The home visitors go into the home and work with the parents on an individual basis.

A great deal of coordination with other agencies is a strength of this program. The State Department encourages cooperation with children services, family counseling, welfare, community houses, hospitals, and Head Start.

The funding ratio is 90 percent federal and 10 percent local money and is for low income families only. The director does not feel that the budget is adequate because they are unable to expand and the para-professional staff's hours are now being cut back due to an hourly salary increase. Participation of the target group has been very high. The director contributes this to specific factors: (1) the program goes to the people, (2) a highly skilled and extremely empathetic staff that relates well to the participants, and (3) a positive "word of mouth" reputation in the area. The program can be considered both preventative and ameliorative.

Each course offered by the program has a list of specific objectives to be accomplished. The participants are given a pre and post test to determine the extent to which the objectives have been attained. The program is being evaluated by a doctoral candidate at Ohio State University. However, the director discourages this type evaluation because the evaluation involves excessively long and difficult instruments which tend to make negative impressions on the students.

The concept for operating this type program is very transferable. However, the necessary legislation, funding and cooperation of sponsoring agencies requires commitment from many sources.

Source:

Alice Johnson, Supervisor
Metropolitan Home and Family Life Program
Adult Education and School Services Center
Columbus, Ohio 43215

PARENT EDUCATION LEAGUE (PEL)

Lynchburg, Virginia

The Parent Education League of Lynchburg, Virginia is a non-profit, totally volunteer organization of parents supporting parents. The goal of the program is to provide support and education to parents and families through the first 10 years of parenting, including specific support to prospective parents.

To accomplish this goal a monthly program is presented with area professionals who provide information about parenting and answer questions. There is also a monthly newsletter which serves as a community voice for parents. The newsletter contains information about the monthly program, describes family activities that are going on in the community, gives health and nutrition information, and suggests activities for parents and children to do together.

The Parent Education League originated in Lynchburg as a chapter of the International Childbirth Education Association which emphasizes family-centered parenting, including childbirth classes. The local hospital gradually took over these activities and the PEL shifted its focus to emphasize parenting activities for parents of children aged 10 and under.

The services of the organization are designed to serve parents of young children and would be considered developmental/preventative in nature. The organization's membership is composed of middle income range parents. The parents are actually the entire organization. The PEL is organized and operated solely by the members. Members serve in all capacities and are also the recipients of the services. This program is entirely voluntary and all monetary support is provided by $2.00 yearly dues plus fund raising

activities of the organization. A Board of Directors of parents serves as the governing body of the orginization.

The organization cooperates with the local hospital and with the public library and churches. Referrals are received from Family Services, Virginia Baptist Hospital, the YWCA and social service agencies. Programs are held at the library or in local churches. The PEL also houses a library of specific books related to parenting. This is a very popular feature of the program and plans are being made for expansion. The League also cooperates with local agencies to babysitting classes for young teenagers to enable them to do a better job and also exposes them to child development and prospective parent training. The program is considered preventtive because of the population it serves. The hospital shared information about the PEL with new mothers. PEL volunteers teach the Baby Care class at the hospital, a class covering newborn care for expectant mothers.

This program is very transferrable to a similar group of parents interested in cooperatively providing this type service to a community. The commitment and involvement of a few key people are essential to the establishment of a program similar to this. Very little financial resources are needed and the program is totally self-supporting. The program also could be adopted/adapted by a group or agency who are interested in providing a newsletter and regular programs to assisting adults in the role of parenting.

Source:

Melissa McCann, President
Parent Education League of Lynchburg
Box 2322
Lynchburg, Virginia 24501

PARENT OUTREACH PROGRAM

Louisville, Kentucky

The Parent Outreach Program is operated by the Council for Retarded Citizens of Louisville, Kentucky. The program began in 1977 to provide services to parents of mentally retarded children.

The primary goal of the program is to provide support and assistance to parents of mentally retarded children or adults when help is needed. Parents of retarded persons volunteer to share their experiences and useful information with parents who are just beginning to learn about mental retardation. The volunteers can help new parents understand and accept their own feelings about their child. They also can share ways of telling relatives, other children in the family, and friends about the handicap.

Together, parents can explore the potential for mentally retarded persons to develop as a part of society. They can expand their own awareness of the possibilities for persons who are mentally handicapped to be all they can be in a society that is growing in its awareness of the unique role of every human being.

The program is coordinated by a salaried social worker who coordinates the training of parents of handicapped children to become volunteers to work with other parents of handicapped children. At the present time 36 volunteers, including six couples, are actively working with other parents. Volunteers typically serve three or four referrals but some may work with ten. The program has served 120 families in the last three years and numerous other referrals have been received. The program is self-perpetuating in that parents who become involved as referrals are assisted and impressed to the extent that they become a volunteer.

Volunteers are trained by the social worker; the training lasts 6-8 hours and is broken into three sessions. The materials used have been developed by the Louisville group but are similar to the ENCORE materials. Training includes:

(1) Normalization - philosophy that being a child is first and the handicap is secondary;

(2) Program information and listening skills workshops;

(3) In-hospital phase - dealing with a new diagnosis or crisis.

The Program is classified as developmental/preventative because its purpose is to help parents deal with a handicapped child in the most positive and constructive manner possible. Thus, the program is not expected to prevent the handicap but to provide support and encouragement to the parent of the child.

The program is funded by the United Way who supports the Association for Retarded Citizens.

The program has been replicated in other areas of Kentucky including Elizabethtown and Lexington, and in Jeffersonville, Indiana. In order to replicate, a community needs:

(1) Two extremely dedicated volunteers, or

(2) A paid staff person in an interested organization.

The Louisville staff is available to provide training, consultation and resource materials to interested groups or agencies.

Source:

Ann Dancy, Associate Director
1146 South Third
Louisville, KY 40203

PARENT STUDY PROGRAM

Lynchburg, Virginia

The Parent Study Program, inaugurated five years ago by Dr. Kenneth West, is co-sponsored by Lynchburg College and Virginia Baptist Hospital. The program consists of fourteen different ten-week courses that are offered in various locations throughout the city.

The program was brought to Lynchburg by Dr. West who had participated in a similar program in Tallahassee, Florida. He originally taught one experimental class at Lynchburg College. The course was so well received that it was expanded vastly and now has a co-director. The Baptist Hospital, local pediatricians, and teachers began suggesting the program to parents of children.

The purpose of this program is to foster democratic parenting through a method that:

(1) recognizes children as contributing members of the family,
(2) gives parents alternatives in discipline,
(3) involves children in decision making and planning,
(4) offers communication training, and
(5) contributes to chilren becoming independent, self-reliant, responsible, self-confident, friendly, and creative.

The courses which are based on the Dreikurs approach, were originally taught by Dr. West and by graduate students who had taken the course. As the program expanded, parents who had taken the classes became co-leaders and then head leaders of the courses. These leaders were originally totally volunteers but are now paid a small sum for courses taught. This is more for reimbursement of travel costs and copying fees than an actual salary. The courses have been offered free but a fee of $10 is now assessed those who can afford to pay. The program received Title I funds, salary supplement and other benefits from Lynchburg College. The federal grant allows the

program to work with parents of children in special education, low income parents, parents of adolescents, single parents, parent of children in the juvenile court system and with PTA's.

The program is designed for adults who are parents and is both developmental and corrective, depending upon the participants' needs. An emphasis is placed on providing child development information to the participants so that adults will have realistic expectations of children. Communication is also stressed and ways to develop dialogue between parents and children are discussed and demonstrated.

The current director plans to expand the program to include adults who are not yet parents. This will be an undergraduate college course designed for students without children. This is based on the theory that problems of parenting may be prevented. Also the parents may be more satisfied if they have specific knowledge about child rearing and parenting prior to assuming the responsibility.

The Parent Study Program works closely with Virginia Baptist Hospital and with Lynchburg College. Pediatricians make referrals to the program on a regular basis and the Juvenile Court System sends parents to the program.

The program is primarily self-sufficient because the operational costs are low. However, Lynchburg College does provide support for mailings and classroom space, and some staff salary at the secretarial level.

Continuing meetings for "graduates" of the course are held by an organization called ACCEPT. This organization allows parents to continue to work on their difficulties and share their experiences after the course has officially ended.

The program is one hundred percent transferable with the training of a session leader. All of the materials are packaged and the entire concept and approach are incorporated into the material.

Souce:

Dr. Kenneth West
Director
Parent Study Program
Lynchburg College
Lynchburg, Virginia 24504

THE PENNSYLVANIA STATE UNIVERSITY TEACHER CORPS PROJECT

University Park, Pennsylvania

Parent involvement is one of the important components of the Teacher Corps of Pennsylvania State University. The project is implemented in the Keystone Central School District (KCSD). This is a mountainous area of central Pennsylvania with many communities which: (a) are rural and remotely isolated, (b) have limited industries, (c) have a median family income of $6,907, and (d) have substantial unemployment. The communities are also characterized by (1) limited opportunities to employ young and older adults, (2) decreasing achievement rates in school, (3) high drop out rates, (4) increasing juvenile crime problems, and (5) drug, alcohol and child abuse problems. These conditions create a vast number of problems that are educational, community and school-related issues.

The Teacher Corps Project conducted a needs assessment survey of members of the various communities within the school district. Five perceived needs of parenting were identified:

(1) to develop training in parenting methods for high school students and members of the community,

(2) to teach parents how to initiate and support an individualized approach to learning and development with their children,

(3) to encourage more community involvement in the schools,

(4) to improve adult education programs in the community and the school, and

(5) to establish permanent community programs of parenting.

Tentative models and approaches have been developed as possible ways of meeting the five identified needs. The models are:

(1) Classroom Training and Tutoring Program. This program focuses on selecting and training members of the community to serve as tutors

in school classrooms in preschool through grade 12. These include parents as well as retired and unemployed adults trained by school staff.

(2) Home Training and Tutoring Program. This approach involves the selection and training of community members to serve as tutors in the homes of community members. The home visitor would assist parents in helping their own children with school-related projects as well as assisting them in using and developing potentials for learning in the home environment.

(3) Annual Community-School Awareness Dinner Program. This involves annual or semi-annual dinners to provide recognition of the impact made by the home and school working together.

(4) Extended Day Program. This program operates after regular school hours to provide interested children, in grades preschool through 12, with educational opportunities that are supplemental and recreational in nature.

(5) School-Home Resources Program. People within the community that possess specific skills or crafts can be utilized as resources within the school program and could also be incorporated in the extended day program.

(6) Parents as Consultants. This program is designed to train parents to serve as educational and therapeutic consultants to other parents who have similar interests, concerns or problems. These parents then form a resource pool within the home-school community.

(7) Parenting Skills Communication. This model is a modification of a proven parent education training program, the Parents Effectiveness

Training (PET). This approach provides immediate relevancy as well as rapid implementation within the framework of day-to-day parent/child interactions. The program stresses child development knowledge, individual differences, needs of children and adults, and basic listening skills. The program will be recommended for use in adult education classes, high school health curriculum as well as community service groups.

These approaches were designed in direct response to the identified needs of the parents in these rural Appalachian counties. The Teacher Corps staff is currently in the process of implementing the various approaches described above in the Teacher Corps Project. This is being done through close collaboration with the Community Council of the Teacher Corps and the Adult Education Programs in the area. Approaches are instituted on a gradual basis. A great deal of research, planning, and organization precede the start up of each approach. Close follow-up, including modification from suggestions by teachers, parents and community persons, accompanies each approach. While each approach is tentative they represent viable models that address specific needs of members of these communities and highlight some of the potential directions for home-school interaction.

This Project is funded as a component of the Teacher Corps of Penn State University. Therefore, replication of the approach could occur in other Teacher Corps sites if a perceived need for such activities is identified. However, the individual components and/or combinations of such components could be replicated within school systems that are interested/committed to encouraging more community involvement in the schools. However, the commitment must be at the administrative level, either that of a building principal or a central office administrator. The cost of such implementation will vary greatly. Approaches such as one, three, five and six could be implemented at

very little cost. Other approaches, such as two, four and seven would require salaries, facilities, extensive planning and in some cases the hiring of staff to administer and operate the program.

Evaluations and findings will be available from Penn State over the next two to three years regarding the effectiveness of these approaches. Assistance in implementing parts of all the components will also be available.

Source:

Dr. Thomas D. Yawkey
Early Childhood Faculty
Division of Curriculum and Instruction
Pennsylvania State University
University Park, Pennsylvania 16802

PROJECT PLAY

Bristol, Virginia

The Project PLAY Program in Bristol, Virginia is a home-school team approach to educating young children. The program stresses parent and community involvement in its preschool (ages 3-4), kindergarten, first grade and second grade level components.

The objective of Project PLAY (Psychomotor Learning for Academic Yields) is to integrate perceptual motor activities with cognitive activities and thus enhance learning. The program's goals for the parent program are:

(1) to teach parents how to teach their children,

(2) to provide materials to increase learning in the perceptual, psychomotor, and cognitive areas,

(3) to utilize community resources to augment school materials, facilities and personnel,

(4) to offer perceptual-motor activities in which children learn to increase the accuracy and range of their sensory perceptions and discriminations, and

(5) to improve children's conceptual-language abilities and social emotional development.

The project director designs, implements and administers all components of the program and also serves as a disseminator of the program to personnel interested in adopting/adapting the approach. The staff is composed of classroom teachers, home visitors and volunteers.

The preschool educational component is an adaptation of AEL's Home Oriented Preschool Education (HOPE) Project. The children attend class one time per week in a mobile van that travels to their community; a home visitor pays a weekly visit to the child's home where she teaches the parent how to teach the child and leaves suitable learning activities for the child; and parent meetings are held on a regular basis.

In addition to the home-school involvement, the program reaches out to the community for resources. The YMCA provides the facility for the Project's Preschool Swim Program, which is part of the regular curriculum; the local public library, and a Toy Lending Library, is used on a regular basis; senior citizens volunteer in the classroom on a regular basis; and the Bristol Mental Health and Special Services Office provide mental and physical health services on an as-needed basis.

The project received developmental funding from USOE, ESEA Titles III and IV-C. These monies are supplemental by the Bristol Public Schools and the program operates as a component of the public schools. There are no charges to families with children in the program.

The Project has been approved by the Joint Dissemination Review Panel (JDRP) and adoption/adaption criteria have been developed. The Project PLAY staff will provide inservice training in basic program components, techniques for program coordination, inservice activities on the curriculum components, diagnostic monitoring, classroom observation and "hands on" experiences. Schools may adopt/adapt the entire approach or single modules. The program can accommodate 20-60 pupils per teacher, grades K-2. Materials have been developed to accompany all components.

Children receive pre- and post-testing with norm referenced test, criteria referenced tests and curriculum specific batteries. Data indicate that highly significant gains were made by the project participants when compared with a matched group of non-participants.

Source:

Dr. Evelyn Murray, Director
Title IV-C
Bristol Virginia Schools
Bristol, Virginia 24201

REGION III CHILD DEVELOPMENT SERVICES

Huntington, West Virginia

The Region III Child Development Service Office provides a variety of programs and activities for parents and children in a six county area in southern West Virginia. The Office is one of several created by an executive order of the governor in 1972 and funded by state monies. Region III has been able to diversify its funding and now receives monies from the state legislature, Title XX, ARC, the United Way, and donations and fees.

Currently, Region III operates programs providing day care, parent education, identification and education for handicapped children, and training of child care workers. Although the components are interrelated, only the Parent Education Program was included in this interview.

The Parent Education Program serves parents in three counties. Parents interested in promoting their child's intellectual and emotional growth receive training and advice through the service of two parent educators. These parent educators make weekly visits to the home and provide materials and teaching suggestions for parents to use with their children. The parents who participate in the program are usually young parents, single parents and parents who are referred by protective services. A contractual agreement is drawn up between Region III and the parent which obligates both parent and Region III staff to participate in the weekly visitation activities. This contract is reviewed and renewed every six months.

The goals of the Parent Education Program are: (1) to support the family in its child rearing responsibilities, (2) to help parents understand what to expect of their children, (3) to provide materials and training

that will enable parents to be more effective teachers of their children, and (4) to provide outreach services for the family.

The administration of the Region III office has degrees in early childhood education and education administration. The Parent Education Program is staffed by an early childhood teacher and one child development assistant, and is supervised by the day care coordinator.

Services offered by Region III are expanding; and CHILDREN'S PLACE, a new child development center with a comprehensive approach to young children's and parents needs is now open. This center includes a resource center for all parents enrolled in Region III programs. Child-study sessions for parents, a toy-lending library and counselling in the area of parenting are available in the resource center.

Funding for all Region III's activities is broadly based, as indicated earlier. Cooperative efforts with the city of Huntington, Cabell County Schools, Marshall University, the West Virginia Department of Health and Welfare have contributed to the program's growth. An enthusiastic, dedicated administrator has also been a key to its success.

Replication of this program could be carried out under the auspices of other area or regional agencies. One or more of the components could be replicated if sufficient funds, staff and facilities are available.

Source:

Norma Gray, Director
Region III Child Development Services
803 Hal Greer Boulevard
Huntington, West Virginia 25703

URBAN PILOT PROJECT

Cleveland, Ohio

The Urban Pilot Project is a compensatory education project operated by the Cleveland Public Schools and funded by the Ohio State Legislature.

The Project is one of four similar projects developed in Ohio in 1977 to establish a home-school-community liaison for grades K through 12. In Cleveland the Lincoln-West attendance area was chosen as the site for the pilot project because it is a very heterogeneous section of the city containing Blacks, Indians, Orientals, Spanish-speaking persons and other ethnic groups.

The purposes of the project are:

(1) to maintain an effective line of communication between the home, school and community,

(2) to identify students who need agency/educational services and follow through,

(3) to help parents become aware of community services available to them,

(4) to develop student and parent involvement activities, and

(5) to assist with the attendance program.

The project manager holds a M.S. degree. The manager designs the overall program, hires staff, trains staff to work with parents, and conducts parent meetings. The staff includes consultants, teachers, community aides, attendance aides, and a clerk. The primary staff members are community local salaried aides whose duties are:

(1) to identify students who need services,

(2) to make home visits to parents,

(3) to provide community information to parents,

(4) to attend community agency meetings, and

(5) to assist in getting parents involved in school programs and activities.

Parents attend regularly scheduled meetings during the school day. Contacts with employers are made and parents are permitted to leave work for the meetings.

The project staff provides services to the school and the families. Special curriculums have been designed for junior and senior high schools. Elementary teachers receive assistance in developing integrated language arts experiences through conferences and demonstrations. Two mathematics resource centers have been developed and newsletters and handbooks for parents have been prepared.

The program impacts on all involved: the parents, students, community and school. Some of the impacts are (1) easier access to the services of community agencies by parents and students, (2) new teaching techniques and resources for teachers, (3) parental involvement in the education of their children, (4) additional activities for children and parents, and (5) improved attendance in school at the secondary level.

The program is designed to combine rehabilitative, preventive, and developmental programs in a school-family-community effort to test the impact of a maximal educational program for disadvantaged youth.

State legislation and funds are needed to duplicate this program. However, other sources of funding could be sought and used. Commitment by the superintendent and/or school board is necessary in order to plan and implement this type project.

Source:

Joyce M. Fashola
Urban Pilot Project
Paul L. Dunbar School
2200 S. 28st.
Cleveland, Ohio 44113

VENANGO COUNTY HEAD START PROGRAM

Franklin, Pennsylvania

The Venango County Head Start Program has been operating in a rural section of Pennsylvania since 1968. The project's overall goals are (1) to promote a greater degree of social competence in children of low income families and (2) to involve the parent in the child's education. The program has a staff that includes a director, an education coordinator, a health/social service coordinator, a parent involvement coordinator, five teachers, seven teacher aides and one home visitor and various support personnel. The director and education coordinator must hold a college degree in child development or early childhood. Teachers may have a college degree or a CDA. The program provides services to approxiamtely 95 children and their families. These services include: health, mental health, nutrition, parent involvement, education and social services. The program is considered to be developmentally/preventative because the program is developing all aspects of the child and is thus preventing health problems, educational delays, social problems, etc.

The parenting component is one of the most important parts of the Venango County Head Start Program. The program stresses parent involvement and has a high rate of participation. Parents participate by serving as staff persons, paid substitutes in the classroom, and volunteer teacher aides. Parents serve on center committees and on the overall program committee called Policy Council. The parent participation rate on the Policy Council is 50 percent. Parents also participate at the Western Pennsylvania level, the state level and on the national level. The

parents are policy makers and participate in processes involving budget and personnel. The program is mandated to give parents perference in hiring for non professional positions if applicants are otherwise equally qualified. The program is also concerned with career development for the parents. They are encouraged to complete the GED, and the Head Start Program provides payment to parents taking the course.

The Clarion Intermediate Unit provides a speech therapist; the Department of Welfare provides medical screenings and physical examinations. Local dentists provide dental services and the Association for the Blind does vision screenings. The program also works cooperatively with Easter Seals, and Family Services.

The Head Start program is federally funded through Health and Human Services (HHS). HHS provides 80 percent of the funds and 20 percent is local support, which includes volunteer time, space and other in-kind contributions. The program is evaluated on an annual basis by all participants, parents and staff, to determine if the program has met the mandated guidelines. A federal representative evaluates the program once a year.

This program and its goals are similar to many other Head Start programs. This program has been more successful than many with its parent involvement component. Parent involvement extends from minor activities all the way up through the budget decisions. Other Head Start programs can replicate the parent component by indicating a sincere desire for parent involvement, providing the conditions conducive to involvement, and actively training and educating parents to be aware of and informed about their role as a Head Start parent. Specific information and suggestions can be provided by the Venango County Head Start Program.

Source:

Pam Gibbons, Director
Venango County Head Start
1328 Liberty Street
Franklin, Pennsylvania 16323

APPENDIX C

Family Case Studies

of

HOPE Follow-Up Study

Deliverable TWO

Home-Oriented Preschool Education (HOPE) Follow-Up Study: Family Case Studies Procedures and Findings

E. E. Gotts and P. Jones

The HOPE Follow-Up Study is a long-term (approximately ten years) investigation of (a) whether parental skills were enduringly influenced by participation in the experiment and (b) whether parental skills relate in predicted ways to children's school performance, life adjustment, and developmental status (cognitive, social and emotional) during the secondary school years.

The Family Case Studies, which form a substudy within the larger study, have been designed for two purposes: 1) to provide varied observational data by which to cross-validate various interview measures and to verify theoretical interpretations and 2) to provide more indepth information on a representative subsample of families--from which vantage point it may be possible to make richer, more fleshed-out generalizations about the intra-family processes which are associated with child competence.

Sample

As a part of the HOPE Follow-Up Study, 40 families were selected out of a larger sample of somewhat over 200, in a stratified random manner, to represent the original HOPE experimental vs. community control conditions and to represent demographic variations in terms of: sex of head of household, mother's age at marriage, geographic mobility, occupational level (of head of household), size of sib group, family income, educational level (of head of household), number of adult-oriented organizations to which

head of household belongs, number of child-oriented organizations to which head of household belongs, and years family was in the program. These particular demographic variables were preselected through regression analyses for their effectiveness in indexing the "favorability of the family demographic pattern" relative to (i.e., as predictors of) measured child outcome (i.e., as the criterion). Selection was made in AEL's offices so that the field worker would be blind as to the exact reasons that individual families were selected. Whenever a family did not choose to participate, a substitution was made of a demographically similar family.

All families in the case studies had been in either an experimental group (HOPE) or a community control group during the years 1968-1971, when the children were three to five years old. The experimental families had received weekly paraprofessional home visits, which the control families had not. All families had access to an AEL produced television program Around the Bend which was broadcast daily during the school year. Experimental families were, moreover, regularly encouraged by a home visitor to see that their children had an opportunity to view the program. Experimental group parents were themselves invited to view the program with their children and to lead their children in various correlated home learning activities.

Case Study Procedures

The procedures were jointly adapted or devised by the principal investigator and the field worker to assure both a) the practicability of using the procedures under anticipated field conditions and b) the

suitability of the procedures for accomplishing the scientific (i.e., empirical and theoretical) purposes of the studies. Only those procedures were used on which the principal investigator and field worker were satisfied as to the issues of practicability and suitability. A small scale pretesting of the general protocol was carried out with two families, and necessary procedural adjustments were made.

Data had previously been collected from each family by two types of parental interviews and two types of child interviews. Transcriptions of these records were reviewed by the field worker, usually on the day immediately preceding each family study. Extensive criterion school data had also been collected but were not available to the field worker for review. The purpose of reviewing each set of four family interviews was to prepare for the case study by determining what was already known and not known about the family, on the basis of which family interest could be engaged and additional information could be elicited from family members. Another reason for this preliminary review was to permit the field worker to make an individual family determination of how to proceed during the individual family study in order to insure that all necessary data would be available for completing standardized ratings immediately following the case study visit. From the foregoing it can be seen that each case study was tailor made to fit the particular family in question, while assuring that comparable data would be available to complete the same ratings for all families.

In addition to filling in any missing information, the following areas were explored in the course of the case study visit: child temperament, using the scales originally developed by Thomas, Chess and Birch (1968) and adapted to older children and adolescents by Lerner(1980); problem-solving techniques in child-rearing, using procedures developed by Shure

and Spivack (1978 , pp. 216-224); inter-generational influences on parents from their parents, devised by AEL; styles of family communication and levels of moral reasoning, using procedures adapted by Baumrind (1978) from Kohlberg; characteristics of younger siblings of school age, if present in the family; conditions of home; informal aspects of communication (i.e., not in structured situations such as those cited above); superstitions and routines and rituals that are important to the family; how family members pass the time of day; family interaction at mealtime; openness or candor of family members during visit; living arrangements; and nonverbal aspects of communication. The majority of these data were derived from direct observations of the family, who had been instructed to follow their regular routines as much as possible except for the structured sessions in which all family members worked together at resolving moral dilemmas.

Usually on the day following the home visit, after reviewing all new data, Baumrind-type ratings were performed (Attachment 1) using the full protocol of 82 behavioral rating items plus the 17 more global constructs. Baumrind, who performed consultation regarding use of her procedures and adaptations, was satisfied that the types of data and the amount of data available to AEL would permit ratings of this type to be performed. The field worker has since found that it was possible to complete all ratings from the total data set available following the visit.

The field worker also rated the parental problem solving from a transcription of the discussion held around the Shure and Spivack (1978) type stimuli. Ratings were completed on the Supplemental Family Ratings (Attachment 2) form (AEL , 1980). Finally the field worker dictated a case study impression of the family. It is about 1,250 words in length and covers Personal Characteristics of the parent(s) and other family

members; Condition of Home; Interests; Inter-Generational Perspectives; Rituals and Routines; and General Comments.

The overall approach of this narrative is to describe the family from its own perspective (i.e., participant observer viewpoint), identifying how the family conceptualizes itself and its place within the larger community. No attempt is made to enforce comparability across families in this portion of the record, but instead to depict the twistings and turnings of each family's uniqueness and focus by means of an empathic biographical sketch.

The facilitate reference to the other instruments used, AEL's adaptation of the temperament survey (Lerner, 1980) appears as Attachment 3. AEL's assignment of Lerner's items, based on Thomas, Chess and Birch (1968) appears as the final page of that attachment. The essential Shure and Spivack (1978) materials used in the present study appear in Attachment 4.

The authors of this report are preparing additional descriptive materials on the typical procedures followed in carrying out a case study with an individual family (cf. Childhood and Parenting Research Program, Final Report, 1980, pp. 27-33). These will appear as a separate report in early 1981. The report will serve as a field manual for persons who are attempting to replicate the procedures followed in the Family Case Studies. The importance of the present report plus the field manual which will follow is that they will remedy what prior case study reports have generally failed to do, namely, to provide sufficient description of the procedures followed to enable others to replicate them.

Findings

The temperament items (Lerner, 1980) were scored according to the content categories established by Thomas, Chess, and Birch (1968), as indicated on the final page of Attachment 3. Cronbach alpha reliabilities of the nine scales were as follows, after deletion of unsatisfactory items: Activity (.85); Rhythmicity (.89)--items 31 and 54 deleted; Approach (.86)--item 3 deleted; Adaptability (.69); Intensity (.74); Threshold (.51)--item 87 deleted, but still a very marginal scale; Negative Mood (.74)--item 18 deleted; Distractibility (.81); and persistence (.76).

As was mentioned in the Final Report, the experimental and control groups were not expected to differ in the foregoing respects, and they did not. It was considered possible, however, that they might differ on second level factor scales. This possibility was examined by factor analyzing all raw items together, irrespective of their theoretical scale content. This resulted in 14 factors having eigenvalues greater than 1.0.

The fourteen factors were identified as I Slow to warm up (items in descending order of their importance to the factor were 79, -82, 58, 15, -16, 43, -59, 32, -13, 2, -25, -50, -68); II Rhythmicity (47, 64, -71, 51, 70, 85, -67, 81, -21, -9, 77, 89); III Active and distractible (42, 6, 24, -34, 20, 35, 37, 46, 9, -78); IV Persistent and non-distractible (11, 56, 12, 22, 30, 41, -20); V Intense reaction (17, 53, 18, 7, 26, 39, -65, 46); VI Pleasant mood (-66, 55, -27, 68, -65, 62); VII Active, restless sleeper (72, 63, -86, 57, -78); VIII Sensitive to external and insensitive to internal stimuli (28, -63, 87, -76); IX Adjusts to new food quickly (-3, 52, -44, -84); X Not reactive to light, placid (-40, 19, -33, -80); XI High threshold (61, 75, 38, 74, 29); XII Predictable appetite (1, 88); XIII Sleeps in vs. up and ready to go (54, -36); and XIV Reactive to new things (73, -8, 68).

As was noted in the Final Report, some differences were found between the experimental and control child on factors III, XIII and XIV (see pages 31-32). The finding was that the experimental group was higher on factors III and XIII and lower on factor XIV. Together these findings were intepreted as suggesting that the experimental children have adopted a more active style of interacting with the environment, in the sense that they would rather be doing things than sitting around; they are up and ready to go in the morning; and they are less reactive to new situations and physical stimuli.

During the case studies, the mothers completed the problem solving situations (Shure & Spivack, 1978) in Attachment 4 by interview. The responses were scored according to the standard scoring system appearing there. If multiple responses were given, all were rated and an average computed for each of the eight problems. The Cronbach alpha reliability for this instrument was only .60. In this connection it should be noted that the procedure's usefulness has been demonstrated previously with parents of children who were much younger than those in the present sample (i.e., our sample is made up of young adolescents). The experimental and control parents did not differ in their mean scores on problem solving. The overall group mean was 16.715 (standard deviation 6.982), suggesting that these parents tend to handle situations of these types on the average by providing a simple "because" when refusing the child's wishes or when attempting to redirect the child's behavior.

The AEL Supplemental Family Ratings (1980) appear in Attachment 2. They were completed shortly after the field worker completed each case study visit. These ratings were factor analyzed to determine how the individual ratings might best be combined into scales. Seven factors were extracted in this

manner: I Good or effective communication (II. C, II. E, IV, II. D, II. A, III. C); II Uncrowded, uncluttered home (III. B, -III. F, III. G, II. F); III Relations with own parents (I. D, I. B. 1); IV Relations with siblings based on parental example (I. B. 2, I. A); V Mentions folk superstitions (I. E, III. D); VI Mutuality in family (II. B, III. A); and VII Stance regarding parental taboos (I. C, -III. E).

The 28 experimental and 12 control group families did not differ from one another in any of the foregoing seven areas. It is evident that these factors reflect (a) general intergenerational matters between the parents and their families of origin, (b) social class differences and (c) folkways and mores. Adults do not usually change in such areas. Thus, these are areas in which "no differences" suggests that the stratified sampling procedure was successful, even with small sample size, in selecting parents who were properly representative of the larger experimental and control samples.

Data were also available from Baumrind (1978) type ratings completed on the case studies families shortly after each study visit was completed. Ratings were completed for each family on the 82 parental behavior items plus the 17 constructs (Attachment 1) representing four domains: 1) Parental Authority, 2) Traditionality, 3) Rationality, and 4) Affection.

It was important to test for this sample how closely the relationships among the 17 constructs represented the four domains, because Baumrind's prior studies had been conducted with samples drawn from populations differing greatly from those in rural Appalachia.

A principle components varimax rotated analysis produced five interpretable factors from the 17 constructs: I confident exercise of parental influence (I. B. 2, I. B. 3, I. B. 1, III. A. 1); II Affectionate enjoyment of parental role (IV. E. 1, III. C. 1, IV. D. 1, IV. C. 1); III Stimulates

maturity (IV. B. 1, I. C. 1); IV Traditionality (II. B. 1, II. A. 1, I. A. 1); and V Pushes child (I. C. 2, III. B. 1, I. A. 1). Factor I corresponds closely to Baumrind's Parental Authority domain; Factor II resembles the Affection domain; and Factor IV subsumes the Traditionality domain. The Rationality constructs did not come together to form a single factor but instead were distributed across the various factors. Factor V contains a mingling of Parental Authority and Rationality constructs. Factor III mingles constructs of the Parental Authority and Affection domains.

Overall the relationships discussed above suggest that the structure of constructs relative to domains in this Appalachian sample reasonably approximates the domains previously studied by Baumrind. Factor scores from this procedure were, nevertheless, not used to make inferences about possible differences between the experimental and control families. These comparisons were bypassed because, as Baumrind has noted, the constructs are less behavioral and more difficult to rate. It seemed, therefore, that they would be of more value for examining the theoretical domain than for looking at individual differences between families.

To compare the two groups of families, seven scales were formed from the 82 parent behavior rating items. Scale formation was carried out by a rational scaling procedure by examining a special matrix displaying the correlations among the 82 rating items and a) the 17 construct ratings and b) factor scores for the five factors. In this manner the assignment of an item to a scale became a function of the magnitude of its correlations relative to the 17 constructs versus the factor-represented domains. Items which related most highly to a domain were not assigned to scales, whereas those which related most highly to constructs were assigned to scales. This rational procedure permitted the formation of scales comprised of items which most clearly and

differentially represented one of the constructs. The purpose of this was (a) to assign to the less abstract level (i.e., construct rather than domain) while (b) maintaining a clear theoretical linkage to the Baumrind model by retaining only behavioral items which corresponded to the actual constructs from which all items had been generated.

The result of the process was seven construct-related scales composed of behavioral items. The interpretation of the scales then became a matter of content analysis vis-a-vis prior construct identification. The seven scales thus formed were: A) Firmly directive (20, 21, 22, 18, 16, 17, 15, 38, 13)--which most closely resembles I. B Parental influence; B) Traditionality/conventionality (39, 43, 41, 6a, -65, 35, 40, -30, 37, -61)--which most resembles II. B Conventionality; C) Parental control (1a, 2a, 14, 4a, 2b, 8, 4b, 36, 1b, -53, 9, 23, and weakly correlated -52, 23)--most resembling a mix of I. A Directiveness and I. B Parental influence; D) Clarity of parental role expectations (44, 46, 47, 31, -42--and weakly related 7a, -51)--most resembling III. A Intellectual clarity; E) Intellectual stimulation and control in childrearing (3a, 3b, 48, 49, 50, 45, 76, 19, 32, 33, 12, 5a, 56, 62, 5b, 67)--a mix of I. A. 1 Areas of child's life constrained, III. A Intellectual clarity, and III. B Intellectual stimulation; F) Supports and encourages maturity (26, 26, 29, 63, 66, 28)--a mix of I. C. 1 Encouragement of maturity and IV. B and C, Responsiveness and Supportiveness; and G) Affectionate and responsive to child (71, 73, 70, 64, 55, 72, 75, 69, -10)--matching IV, Affection.

The preceding method of rational-empirical scale formation was intended to identify item clusters associated with constructs rather than domains. It allowed, nevertheless, for the possibility that one construct or another might more focally index a domain. See, for example, scale G which matches domain IV but which was actually identified because the items had in common that they

were most clearly related to the dimension IV. D Warmth, suggesting that parental warmth may be of particular value as a marker of the affection domain.

The above-identified scales were submitted to an internal consistency reliability analysis to verify the psychometric fit of the rational-empirical assignments which had been made. The resulting alpha coefficients for the scales were: A (.92), B (.85), C (.90), D (.73), E (.94), F (. 86) and G (.85). The scales, constructed from parent behavior ratings, appeared to be sufficiently reliable for making comparisons of the two family groups.

The 28 experimental and 12 control group families were compared by simple analysis of variance on scores obtained on the seven parent behavior rating scales to determine whether these might reflect enduring effects from the HOPE treatment. The experimental parents differed from the control parents by being higher on scale A, Firmly directive (m = 3.01 vs. 2.65 for items); higher on scale B, Traditionality/conventionality (m = 2.08 vs. 1.72); and higher on scale G, Affectionate and responsive to child (m = 2.71 vs. 2.43). The preceding means were computed to item-mean equivalents to facilitate comparison with the actual ratings which range from 1 to 5 (Attachment 1). It was concluded that HOPE had in fact produced lasting effects in parents on these measures.

While the groups did not differ reliably from one another, the group means for the remaining scales are reported here to describe the actual central tendencies of parents within this population: scale C, Parental control (m = 2.13 vs. 1.86); scale D, Clarity of parental role expectations (m = 1.29 vs. 1.13); scale E Intellectual stimulation and control in child-rearing (m = 2.95 vs. 2.87); and scale F, Supports and encourages maturity (m = 3.12 vs. 3.04).

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Shure, M. B., & Spivack, G. Problem-solving techniques in child-rearing. San Francisco: Jossey-Bass, 1978

Thomas, A., Chess, S., & Birch, H. G. Temperament and behavior disorders in children. New York: New York University Press, 1968.

PARENTS OF ADOLESCENT CHILDREN

Mother Rating Sheet

Parenting Behavior Rating Items

1a____	8____	22____	36____	50____	64____
b____	9____	23____	37____	51____	65____
2a____	10____	24____	38____	52____	66____
b____	11____	25____	39____	53____	67____
3a____	12____	26____	40____	54____	68____
b____	13____	27____	41____	55____	69____
4a____	14____	28____	42____	56____	70____
b____	15____	29____	43____	57____	71____
5a____	16____	30____	44____	58____	72____
b____	17____	31____	45____	59____	73____
6a____	18____	32____	46____	60____	74____
b____	19____	33____	47____	61____	75____
7a____	20____	34____	48____	62____	
b____	21____	35____	49____	63____	

Parenting Behavior Rating Constructs

I A 1	Areas Constrained	____	III A 1	Intellectual Clarity	____
A 2	Restrictiveness	____	B 1	Intellectual Stimulation	____
B 1	Self-confidence	____	C 1	Fairness	____
B 2	Firmness	____	IV A 1	Separateness	____
B 3	Directness	____	B 1	Responsiveness	____
C 1	Maturity Encouragement	____	C 1	Supportiveness	____
C 2	Demandingness	____	D 1	Warmth	____
II A 1	Deference	____	E 1	Enjoys Parental Role	____
B 1	Conventionality	____			

CONSTRUCT I A 1

I. Parental Authority

A. Directiveness

1. Areas of Child's Life Constrained (Constrains vs. Places Few Constraints)

5. Many areas of child's life are severely constrained by parental do's and don'ts. It seems to observer that child can hardly move without coming into contact with a parental regulation or prohibition.
4. Parent regulates many areas of child's life, but not so completely as in #5, so that observer does not experience the claustrophobia and tightness of control present in #5.
3. Parental regulations govern some--but by no means all--of child's life, with considerable freedom being left for child to maneuver on her/his own.
2. Parent regulates very little of child's life, leaving child quite free to act as s/he will.
1. Parent regulates virtually none of child's life, leaving child not only free of constraint, but perhaps even untethered.

CONSTRUCT I A 2

I. Parental Authority

A. Directiveness

*2. Restrictiveness (Seeks to Maintain Control over Adolescent vs. Willing to Relinquish Control as Child Matures)

5. Parent's control of child is characteristically intrusive. Parent's style is marked by nagging and prying. Parent seems not to trust child.

4. Parent is frequently bossy, nagging and prying in her/his control attempts, though not to the same degree as in #5.

3. Parent's style of control is sometimes (or over some issues) intrusive.

2. Parent is seldom bossy, nagging, or prying.

1. Parent's control of child is accomplished without intrusiveness. Parent almost never resorts to nagging or prying. Parent trusts child.

Differentiate from Construct I A 1, which is about parent's attempted control over specific areas of child's life. Construct I A 2, in contrast, rates the manner in which parent attempts to exert control. A parent may attempt to control many areas of the child's life without doing so in an intrusive, bossy or nagging way. Such a parent should be rated high on Construct I A 1 and low on the present Construct.

CONSTRUCT I B 1

I. Parental Authority

B. Parental Influence

**1. Self-confidence (Self-confident as Parent vs. Lacks Self-confidence as Parent)

5. Parent radiates self-confidence and personal potency; seems at ease and sure of self with child; is confident of her/his own ability to set guidelines and standards for child.
4. Parent usually seems at ease and sure of self with child but not as confident as in #5.
3. Parent is often at ease with child but sometimes seems ill-at-ease and unsure of self.
2. Parent tends to lack self-confidence; often ambivalent or vacillating about her/his ability to set guidelines and standards for child.
1. Parent lacks self-confidence as parent, and is usually at a loss as to how to guide child; may have abdicated this responsibility.

The self-confident parent who for ideological reasons refrains from setting standards for child should be rated high on this construct.

CONSTRUCT I B 2

I. Parental Authority

B. Parental Influence

**2. Firmness (Firm Enforcement vs. Lax Enforcement)

5. Parent attaches considerable importance to firm enforcement, letting child know clearly that adults are in charge. Parent will not be coerced by the child and will use power where necessary to enforce directives.
4. Parent exerts firm control and enforces directives, but not as consciously and consistently as in #5.
3. Parent does not make an issue of enforcing directives or appears ambivalent about whether to be firm or lax.
2. Parental control is lax; parent does not make an issue of enforcing directives; child can get her/his own way.
1. Parent cannot enforce her/his directives and child seems to be managing parent, or parent on principle refrains from issuing and enforcing directives.

CONSTRUCT I B 3

I. Parental Authority

B. Parental Influence

*3. Directness (Directly Confronts Child vs. Avoids Direct Confrontation)

5. Parent confronts child directly when child misbehaves and may at times even provoke disagreements with child for their stimulating effect; parent is clearly unafraid of child's anger.
4. Parent usually confronts child directly when child misbehaves; although parent may on occasion gloss over misbehavior, parent is unafraid of child's anger and may occasionally provoke disagreements with child.
3. Parent, in order to avoid provoking child's anger, at times glosses over misbehavior; parent does not enjoy confrontations with child but will risk them for important issues.
2. Parent usually avoids confrontations with child and will frequently gloss over misbehavior.
1. Parent will go to extremes to avoid confrontations with child, including ignoring blatant misbehavior, mockery, etc.; parent may be afraid of child's anger.

By "misbehavior" is meant behavior of which parent disapproves and has proscribed--e.g., smoking, failing to do homework, coming in late, snacking on junk food, etc.

CONSTRUCT I C 1

I. Parental Authority

C. Maturity Expectations

*1. Encouragement of Maturity (Encourages Mature Behavior vs. Indulges and Overprotects)

5. Parent encourages child to do her/his best in all activities in which child engages, and to act responsibly and take responsibility for her/his actions; in general, parent expects--and does not expect less than--age-appropriate behavior from child.
4. Parent encourages child to do her/his best and to take responsibility and act responsibly; however, parent is not so consistent as in #5 and will sometimes be acceptant of less mature and/or responsible behavior.
3. Although parent in general encourages child to do her/his best and to act in an age-appropriate way, parent is also acceptant of less mature behavior and may at times encourage it.
2. Parent tends to demand less of child than child is capable of, and may treat child as if s/he were younger and less capable.
1. Parent makes few demands on child and does not require age-appropriate behavior; parent infantilizes child by indulging and overprotecting child.

CONSTRUCT I C 2

I. Parental Authority

C. Maturity Expectations

*2. Demandingness (Pressures Child to Excel vs. Acceptant of Child's Performance)

5. Parent pressures child to excel in all activities in which child engages and is not satisfied unless child performs superlatively.
4. Parent pressures child to excel in many of the activities in which child engages and is not satisfied unless child's performance is well above average.
3. In general, parent is acceptant of child's level of performance; on occasion or in specific areas parent may pressure child to improve her/his performance.
2. Parent is generally acceptant of child's level of performance and rarely pressures child to excel; where such pressure does occur, it is realistically based on child's capabilities and sensitive to her/his abilities.
1. Parent is virtually always acceptant of child's performance; such demands as parent may make on child are realistic and contribute to child's development.

X. Parent discourages child from excelling at activities.

CONSTRUCT II A 1

II. Traditionality

A. Deference

*1. Deference (Encourages vs. Discourages Deference to Traditional Sources of Authority)

5. Parent requires that child show respect and deference for traditional institutions and sources of authority (e.g., police, teachers, self, other adults); parent is intolerant of any signs of disrespect in the child.
4. Parent encourages child to defer to traditional sources of authority but is not so intolerant of lack of deference as in #5.
3. Parent is not in principle committed to either deference of dissent, and does not systematically encourage or discourage either in child.
2. Parent, while perhaps not in principle opposed to deference to traditional sources of authority, does discourage child from unthinking deference and stresses the need for occasional dissent and even disobedience.
1. Parent is opposed to deference to traditional sources of authority and encourages child to dissent and even to disobey.

CONSTRUCT II B 1

II. Traditionality

B. Conventionality

*1. Conventionality (Values vs. Discourages Conventionality for Self and Child)

5. Parent gives full support to conventional values and lifestyles, insisting on them in child and exemplifying them in self.
4. Parent supports conventional values and lifestyles and encourages them in child, though not with the same insistence as in #5.
3. Parent supports some conventional values and lifestyles and encourages child to at least consider them, but parent may also entertain and encourage child to entertain some non-conventional values as well; and/or parent is not insistent that child hold to conventional ways.
2. Parent is critical of conventional values and lifestyles, may encourage child to consider or experiment with non-conventional modes.
1. Parent is rejecting of conventional values and lifestyles, exemplifies unconventionality in her/his own behavior and strongly encourages child to do likewise.

CONSTRUCT III A 1

III. Rationality

A: Intellectual Clarity

*1. Intellectual Clarity (Self-aware vs. Not Self-aware)

5. Parent is acutely conscious of the meaning of what s/he does, leads a fully examined life, and possesses clearly articulated ideas and ideals for self and child.
4. Parent is in general conscious of the meaning of what s/he does; ideas about self and ideals for child are in general clear and well-articulated or parent is acutely aware of self or of child, but not both.
3. Parent is usually conscious of the meaning of what s/he does; ideas about self and ideals for child are adequately clear and articulated.
2. Parent is often unaware of the meaning of what s/he does; ideas about self and ideals for child are often vague and inarticulate or parent is unaware of self or of child, but not both.
1. Parent is unaware of the meaning of what s/he does, is unaware of own stimulus value and also insensitive to the personal attributes of her/his own child.

The term "meaning" in this item refers to implications for personal identity and self-image and the consequences for self and others.

CONSTRUCT III B 1

III. Rationality

B. Intellectual Stimulation

** 1. Intellectual Stimulation (Provides vs. Fails to Provide Intellectual Stimulation)

5. Parent makes a purposive and vigorous effort to maintain as stimulating an intellectual environment for child as possible, and will subordinate material advantages or own convenience to this end.
4. Parent makes an effort to provide an intellectually stimulating environment, but not so vigorously as in #5.
3. Parent provides a somewhat intellectually stimulating environment for child.
2. Parent provides an environment with little intellectual stimulation for child.
1. Parent makes no effort to provide an intellectually stimulating environment for child.

CONSTRUCT III C 1

III. Rationality

C. Fairness

**1. Fairness (Just vs. Arbitrary Control)

5. Parent's exercise of control is just and fair with appropriate demands being made upon child and punishments matched to infractions; parent is consistent, explicit and rational in her/his exercise of power; parent does not focus on own interests at expense of child.
4. Parent's exercise of control is just and fair and is evenhanded in dispersal of time and material resources, but not so conscious, conscientious or principled as in #5.
3. Parent's exercise of control is usually just and fair, but on occasion or under extreme circumstances parent may be arbitrary or unfair; parent is usually equitable but on occasions may use power to unfair advantage.
2. Although parent attempts at times to have her/his exercise of control be just and fair, it is more often capricious and arbitrary; parent often favors self in interactions with child.
1. Parent's exercise of control is generally arbitrary and capricious, with mismatches between infractions and punishments, and inconsistencies in the demands made upon child; in general, control attempts seem tied more to parent's moods or whims than to any notion of fairness or appropriateness; parent seldom is concerned about equity and generally resolves conflicts of interest so that the balance is in her/his own favor.

CONSTRUCT IV A 1

IV. Affection

A. Separateness

1. Separateness (Liberating vs. Intrusive Love)

5. Parent is responsive to child's bids for physical and/or emotional closeness and may occasionally initiate such bids her/himself; however, parent does not overwhelm child with her/his own emotional needs.

4. Parent is responsive to child's bids for closeness and may initiate such bids her/himself, sometimes more to meet her/his own needs rather than those of the child.

3. Parent is responsive to child's bids for closeness; moreover, parent often initiates such bids her/himself, sometimes without regard for child's readiness for such intimacy--i.e., parent sometimes seems to impose self on child in an attempt to meet her/his own needs for closeness.

2. Parent frequently initiates bids for physical and/or emotional closeness, often without regard for child's readiness for such contact and more often to meet parent's own, rather than child's need for closeness.

1. Parent very often initiates bids for physical and/or emotional closeness, often with total disregard of child's reluctance to engage in such intimacy--i.e., parent seems to overwhelm child and smother her/him with excesses of affection.

CONSTRUCT IV B 1

IV. Affection

B. Responsiveness

**1. Responsiveness (Responsive vs. Nonresponsive to Child's Individual Characteristics)

5. Parent takes considerable and consistent care to tailor her/his treatment of child so that child's unique configuration of characteristics is taken into account, as well as age, stage, and developmental level.
4. Parent's treatment of child takes into account child's age, stage, and development level; parent makes some effort to tailor her/his treatment of child according to child's unique configuration of characteristics.
3. Parent's treatment of child takes into account some aspects of developmental level, but is influenced by a somewhat stereotyped or idealized view of what a child of that age and stage is like.
2. Parent's treatment of child does not adequately take into account child's age, stage, developmental level, or unique configuration of characteristics, but neither is it so stereotyped as in #1.
1. Parent's treatment of child is based on a stereotyped or idealized view of what adolescents are like, and fails to take into account child's actual age, stage, developmental level, and unique configuration of characteristics.

CONSTRUCT IV C 1

IV. Affection

C. Supportiveness

1. Supportiveness (Supportive vs. Nonsupportive)

5. Parent is consciously and conscientiously supportive of child and displays this supportiveness by, for example, showing consideration for child's negative feelings, praising child's accomplishments, and encouraging child in her/his goals; parent gives the impression of being on child's side, of being child's advocate.
4. Parent is generally supportive of child but not so extensively, consistently and/or conscientiously as in #5.
3. Parent is sometimes supportive of child, or parent is supportive of child in some areas but not in others.
2. Parent is seldom supportive of child and seems to have little appreciation for child's feelings, concerns, aspirations, and accomplishments.
1. Parent is not supportive of child and may even be rejecting, e.g., by ridiculing child's feelings, concerns, aspirations, and accomplishments; parent seems to have it in for child.

IV. Affection

D. Warmth

**1. Warmth (Warm vs. Cool)

5. Child is treated with extreme warmth.
4. Child is treated warmly.
3. Parent either alternates between warm and cool, or treatment of child is lukewarm.
2. Child is treated coolly.
1. Child is treated coldly.

CONSTRUCT IV E 1

IV. Affection

E. Enjoyment of Parental Role

1. Enjoyment of Parental Role (Enjoys vs. Does Not Enjoy Being a Parent)

5. Parent obtains great satisfaction from having children, enjoys being with them and exercising the parental role; parenting provides a major source of joy in parent's life.
4. Parent enjoys having children and obtains much satisfaction from parental role.
3. Parent usually enjoys having children and exercising parental role, although at times parenting seems to interfere with parent's ability to meet her/his other needs.
2. Parent occasionally enjoys exercising parental role, but more often finds children an obstacle to the satisfaction of other needs and interests.
1. Parent resents and resists having to exercise parental role, does not enjoy having children, and sees them as a drain on her/his time and energy.

Supplemental Family Ratings, AEL, 1980

(NA = Not Applicable or Could Not Determine)

I. Intergenerational Issues

A. Parental Influences (Avoid - Follow):

N/A Avoid parental practices they dislike
1 For many areas
2 For several areas
3 For 1 or 2 areas
4 Issue not relevant
5 For 1 or 2 areas
6 For several areas
7 For many areas

Follow parental practices they like

B. 1. Current Family Relationships, with own Parent(s):

N/A

5	4	3	2	1
Very Positive	Positive	Neutral or Ambivalent	Negative	Very Negative

B. 2. With own Sibling(s):

N/A Positive with

5	4	3	2	1
All +	Most +	Even Mix of + and -	Most -	All -

Negative with

C. Mention Parental Sex Taboos (Usually re. Avoidance)

N/A Avoid this "mistake" with own children 2
Wish could change, but repeat parents' behavior 1

D. Acceptance/Rejection by Own Parents When Growing Up:

N/A Felt Accepted or Included

5	4	3	2	1
Very Much	Somewhat	Even Mix	Somewhat	Very Much

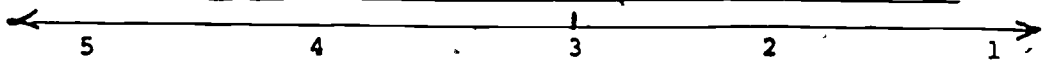
Felt Rejected or Excluded

E. Mention Folk Superstitions or Practices, as Learned from Parents:

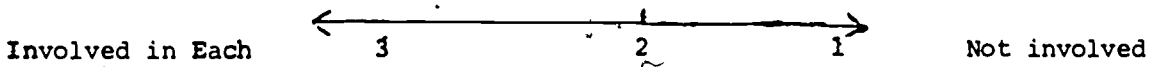
3	2	1
Mention Several	Mention a few	Does not mention

II. Patterns of Communication

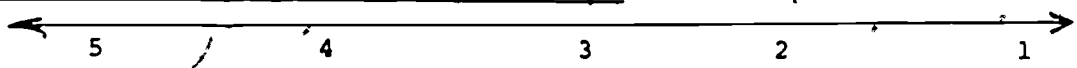
A. Affective Quality of Communication (Communicate Positive Feelings):



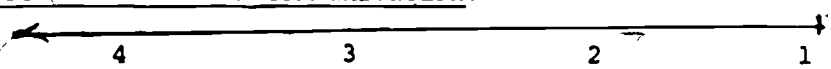
B. Extent of Context for Family Communication:



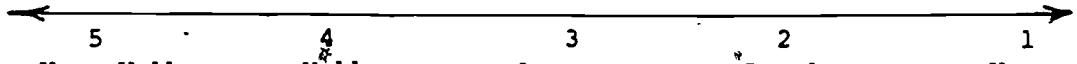
C. Clarity of Communication (Cognitive Aspect):



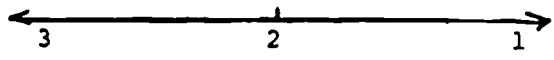
D. Use of Non-Verbal Communication:



E. Really Listen and Hear:

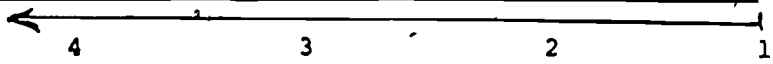


F. Manifest or Tolerate Physical Proximity (Personal Space):

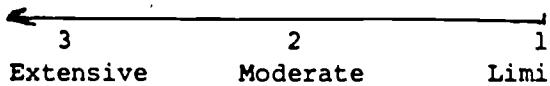


III. Other Qualities of Family and Surroundings

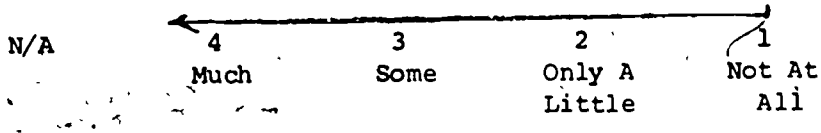
A. Parents Enjoy the Child (Distinguish from Loves/Likes)



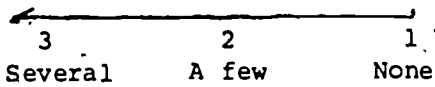
B. Amount of Privacy of Family Members (Based on Available Space plus Privacy-Related Practices):



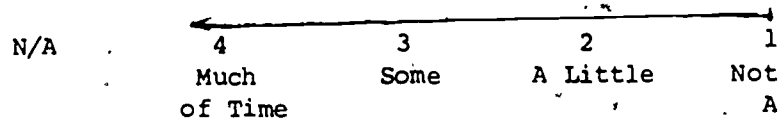
C. Engage in Rituals (Stylized Folkways):



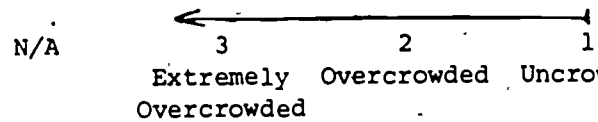
D. Mention Folk Superstitions or Practices (Any sources)



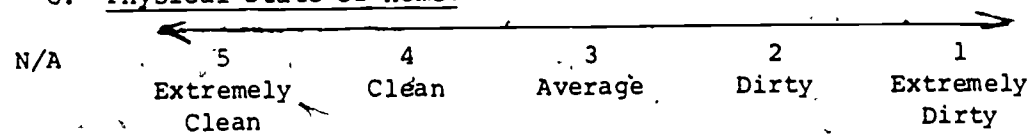
E. Engage in Fixed Routines (i.e., Degree to which Daily Life is Organized):



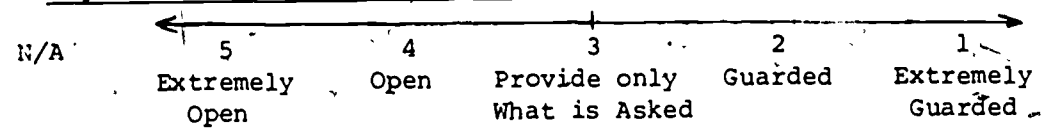
F. Condition of Indoor Space (Furnishings and Gear):



G. Physical State of Home:



IV. Degree of Rapport or Openness to Study:



Name of Parent _____

Date _____

ID # _____

DIMENSIONS OF TEMPERAMENT SURVEY--CHILD OR TEENAGER

ID#: _____

Your Child's Name: _____

HOW TO ANSWER: On the following pages are some statements about how children like your own may behave. Some of the statements may be true of your child's behavior, and others may not apply to him or her. For each statement we would like you to say if the statement is usually true of your child or is usually false or untrue of your child. There are no "right" or "wrong" answers, because all children behave in different ways. All you need to do is answer what is true for your child.

Here is an example of how to answer. Suppose a statement said:

"My child eats the same things for breakfast every day."

If the statement is generally true for your child, you would write in:

"true," because it would be more true than false.

If the statement is generally false for your child, you would write in:

"false," because it would be more false than true.

On the line to the left of each statement write true if the statement is more true than false of your child or write false if the statement is more false than true of your child.

PLEASE REMEMBER THESE FIVE THINGS AS YOU ANSWER:

1. Give only answers that tell what your child is really like. It is best to say what you really think.

2. Now that your child is more grown up, you may not have as much opportunity to observe certain behaviors. For this reason, if you are not sure how your child behaves now, but you can remember exactly how he or she behaved over the early years of growing up, then answer on the basis of what you remember from when your child was younger.

3. Don't spend too much time thinking over each statement. Give the first natural answer as it comes to you. Of course, the statements are too short to say everything you might like. But give the best answer you can. Some statements may seem just like some others because they are about the same things. But, each statement asks about a different part of the way your child behaves. Therefore, your answers may be different in each case.

4. Try to answer every question one way or the other. Try not to skip any.

5. Remember: true = more TRUE than false
   false = more FALSE than true

THANK YOU FOR YOUR HELP!

Child's Name: _____

true = more TRUE than false false = more FALSE than true

---

1. _____ My child gets hungry at the regular mealtimes.
2. _____ My child moves around very little.
3. _____ My child's first response is to accept new foods.
4. _____ Some days my child eats a lot; other days my child eats much less.
5. _____ It takes my child a long time to get used to a new piece of furniture in the house.
6. _____ My child can't sit still for long.
7. _____ If my child gets hurt (he/she) cries out loudly.
8. _____ My child shows pleasure (laughing and/or smiling) at a lot of things.
9. _____ My child wakes up at different times.
10. _____ Loud talking doesn't bother my child.
11. _____ Once my child is involved in a task (he/she) can't be distracted away from it.
12. _____ My child persists at a task until it's finished.
13. _____ My child moves around a lot.
14. _____ My child has regular bowel movements.
15. _____ My child's first response is to keep away from new things.
16. _____ My child can make (himself/herself) at home anywhere.
17. _____ My child reacts intensely when hurt.
18. _____ My child shows anger often.
19. _____ Bright lights don't bother my child.
20. _____ No matter what my child is doing (he/she) can be distracted by something else.
21. _____ There is no set time when my child goes to sleep.
22. _____ My child stays with an activity for a long time.
23. _____ If my child's schedule is suddenly changed (he/she) gets used to it quickly.
24. _____ If my child has to stay a long time in one place (he/she) gets very restless and fidgety.
25. _____ My child usually moves toward new objects shown to (him/her).

true = more TRUE than false false = more FALSE than true

---

26. _____ It takes my child a long time to adjust to new schedules.

27. _____ My child does not show pleasure (laughing and/or smiling) at many things.

28. _____ Noises at night can wake my child up easily.

29. _____ If my child is doing one thing, something else occurring won't get (him/her) to stop.

30. _____ My child does not do any one thing for a long period.

31 _____ My child eats about the same amount for dinner whether (he/she) is home, visiting someone, or traveling.

32. _____ My child's first reaction is to reject something new or unfamiliar to (him/her).

33. _____ Changes in plans make my child restless.

34. _____ My child often stays still for long periods of time.

35. _____ Things going on around my child can take (him/her) away from what (he/she) is doing.

36. _____ My child reacts to soft noises or low whispers.

37. _____ In doing whatever my child does (he/she) makes a lot of noise.

38. _____ My child takes a nap, rest, or break at the same time every day.

39. _____ My child screams out when (he/she) falls.

40. _____ Sunlight bothers my child's eyes.

41. _____ Once my child takes something up (he/she) stays with it.

42. _____ When my child has to be still (he/she) gets very restless after a few minutes.

43. _____ When a person comes toward my child (his/her) first response is to move back.

44. _____ Within one or two tries, my child accepts new foods.

45. _____ My child reacts quietly.

46. _____ My child doesn't keep at an activity when other things are going on around (him/her).

47. _____ My child gets the same amount of sleep each night.

48. _____ My child frowns a lot.

49. _____ My child moves slowly.

50. _____ If meeting a new person my child tends to move toward them.

true = more TRUE than false false = more FALSE than true

51. _____ My child gets hungry about the same times each day.

52. _____ It takes my child a long time to get used to a new kind of food. (He/She) has to eat it many times before (he/she) will accept it.

53. _____ When my child reacts to something (his/her) reaction is intense.

54. _____ It is hard for my child to wake up earlier than (his/her) usual time.

55. _____ My child smiles often.

56. _____ If stopped from doing something, my child will always go back to it.

57. _____ My child never seems to slow down.

58. _____ My child moves away from new people.

59. _____ It takes my child no time at all to get used to new people.

60. _____ My child eats the same amount each day.

61. _____ You can shine a bright light in my child's eyes and (he/she) won't even blink.

62. _____ If watching something, my child will keep at it for a long period.

63. _____ My child moves a great deal in (his/her) sleep.

64. _____ My child seems to get sleepy just about the same time every night.

65. _____ It takes a lot to get my child to react.

66. _____ My child does not seem to laugh often.

67. _____ My child usually can't predict when (he/she) will want lunch or dinner.

68. _____ My child moves toward new situations.

69. _____ When my child is away from home (he/she) still wakes up at the same time each morning.

70. _____ My child eats about the same amount of breakfast from day to day.

71. _____ My child's sleep needs are quite variable, from a few to many hours.

72. _____ My child moves a lot in bed.

73. _____ My child notices odors right away.

74. _____ It seems that when my child feels full of pep and energy, it is at the same time each day.

75. _____ My child does not react to even very loud noises.

true = more TRUE than false false = more FALSE than true

---

76. _____ My child has bowel movements at about the same time each day.

77. _____ No matter when my child goes to sleep (he/she) wakes up at the same time the next morning.

78. _____ In the morning, my child is still in the same place as when (he/she) fell asleep.

79. _____ It takes my child a long time to get used to new people.

80. _____ When my child reacts (he/she) does so with vigor.

81. _____ My child eats about the same amount at supper from day to day.

82. _____ When something new is being given to my child (he/she) moves forward to it.

83. _____ When things are out of place, it takes my child a long time to get used to it.

84. _____ My child does not react (cry out or yell) when (he/she) falls.

85. _____ My child wakes up at the usual time on weekends and holidays.

86. _____ My child doesn't move around much at all in (his/her) sleep.

87. _____ My child never notices odors.

88. _____ My child's appetite seems to stay the same day after day.

89. _____ My child wakes up the same time each night to go to the bathroom.

Tabulation of Apparent Primary Loadings by Content Readings

1. Act.	HI 6,13,24,42,57,63,72	LOW 2,34,49,78,86 (54)
2. Rhy.	HI 1,14,(31),38,47,51,(54),60,64,(69),70,74,76,77,81,85,88,89✓✓	LOW 4,9,21*,67,71
3. Ap/With.	AP 3,25,50,68,82 (16,44,59)	WITH 15,32,43**,58 (33)
4. Adapt.	HI (16),23#,(44✓),(59) (69)	LOW 5,26,(33),52,79,83
5. Intens.	HI 7,17,37,39,53,80 (40)	LOW 45,(84) (10,19,31,61)
6. Thresh.	HI (10),(19),(61),65,75,87 (27,66,84)	LOW 28,36,(40),73 (18,33,46,55)
7. Mood	+ NEG (18),(27),48,(66) — The marked mood items are secondary to threshold.	- POS 8,(65)
8. Distr.	HI 20,35,(46)	LOW (11),(29)
9. Persist. Attn. Span	HI 12,22,41,56,62 (11,29)	LOW 30 (46)

*21 Comment (on routine)
#23 is on example of our item where the potential for a secondary is there, but it seems unlikely.
**43 person (not = new)
✓44 "a few" is better
✓✓ 89 maybe doesn't get up at all (i.e., false for 2 different reasons)
(N) primary loading, but also has secondary
( ) the secondary fits here

Problems Stated by Interviewer

1. One evening _____ was playing outside and you told him before he went that he'd have to come in as soon as it starts to get dark. You call him and he doesn't come.

   Does anything like this ever happen? (If no) Let's make up what might happen if it did. (If yes) What happended right then? What did you do or say when (repeat problem?) What did your child do or say?

   The problems can be of any content wherein the child refuses a request by mother.

   In this and all problems to follow, ask a mother who says such a problem never occurs, "What do you think might happen if such a problem did come up. Just make it up." It is desirable, when possible, to record the mother's responses in dialogue form, such as:

   Mother:
   Child:
   Mother:
   Child:

2. You were shopping and had _____ with you. _____ came running over saying he wanted a toy he saw in the store. You said he couldn't have it. _____ kept saying he wanted it.

   What happened next and what was said or done?
   The problem can be of any content wherein the child wants something mother does not want him to have.

3. _____ was playing with a friend and all of a sudden he grabbed a crayon from that friend. You saw him snatch the crayon.

   What happened next and what was said or done?
   The problem can be of any content wherein the child takes something from another child and mother knows because she saw it happen.

4. You went into the living room and saw _____ climbing on the furniture

   What happened next or what was said or done?
   The problem can be of any content wherein the child is in a situation of potential damage to property or harm to self.

5. One day _____ came into the house very unhappy. He (she) told you another child his (her) age hit him (her).

   What happened next and what was said or done?
   This problem, the content of which is also used in the pretest, is repeated because of the frequency of its occurrence. The problem can refer to any form of attack, physical or verbal.

6. One day _____ was visiting a friend's (relative's) house and he took a toy (or something) home without telling anyone.

   What happened next and what was said or done?
   The problem can be of any content wherein the child takes something from an adult that is not his without first asking.

7. _____ was playing with water in the living room. You didn't want him to play with water in the living room.

   What happened next and what was said or done?
   The problem can be of any content wherein the child is making a mess or is doing something in an inappropriate place.

8. _____ wanted you to read him a story but you couldn't right then. _____ whined and nagged, "But I want it now!"

   What happened next and what was said or done?
   The problem can be of any content wherein the child wants something "now," at a time inconvenient for mother.

Childrearing-Style Scale

Score

100 *Mother guides the child to think of his own solutions to problems, of the consequences of an action, or of how to find out about another's feelings or preferences (requires decision making).*

Examples: Can you think about what you can do about that?

Now what are we going to do about this?

Do you think that's a good idea? (if solution-related)

What might happen if you do that?

Can you think of something else (different) to do?

How can you find out how he feels, what he likes?

Good, that's a different idea.

95 *Mother accepts child's offered solution.*

Examples: That's a *good* idea (go ahead and try that).

O.K., let's do that.

(If child's solution fails and mother elicits another solution from child, score the latter 100.)

90 *Mother allows child to have a say in the solution to a problem by providing a choice of what to have or do (choices suggested by mother).*

Examples: You can't have candy today, but you can choose between _____ or _____.

You decide if you want to hit him back or let him beat you up.

If you don't like your hair this way, tell me and I'll fix it another way.

85 *Mother elicits from child his view of the problem.*

Examples: How hard did he hit you?

Why do you feel so mad about that?

Is that a good idea to (climb on furniture, play with water in the living room)?

Why do you think you need that toy?

How do you know he was angry?

Who hit first, you or your friend?

Do you think that's fair?

80 *Mother elicits from child his or others' feelings in a situation.*

Examples: How does that make you feel?

How do you think I feel when you do that?

How does that make _____ feel when you won't let him play with your toys?

75 *Mother suggests possibilities for child to consider.*

Examples: Maybe he was mad *because* you said that.

Were you bothering him to make him hit you?

Did you hit him first?

70 *Mother articulates child's feelings and/or talks of feelings sympathetically. Mother articulates own feelings, too, with some explanation.*

Examples: You mustn't do that *because* he will get mad.

If you do that, you'll feel sad.

Don't do that again. I'm hurt (disappointed in you).

I don't like it when you do that *because* _____.

Do you think it makes me happy when you do that?

65 *Mother offers real explanation and converses with child.*

Examples: I can't buy that now because I don't have the money for that and the food I have to buy.

If you dirty the walls, it's harder for me to keep your room clean.

60 *Mother gives if-then explanation: She identifies consequences (interpersonal) beyond mere threats.*

Examples: If you hit, you will get hit back and lose a friend.

If you lend a toy, you can't just grab it back. He'll never let you play with his toys.

If you keep snatching toys, someone's going to get hurt.

55 *Mother explains child's action without describing its potential consequences, but does so in a nonthreatening way.*

Examples: You can't go around hitting kids.

If you lend a toy, you can't just grab it back.

50 *Mother models so child can emulate her actions or words.*

Examples: Let's get out the mop and I'll show you how to clean it up.

You need to clean up this mess; I'll show you where to put these things.

45 *Mother makes child aware of others' feelings by rhetorical questioning or statement of child's own feelings.*

Examples: How would you feel if _____ ?

Don't grab. You wouldn't like it if he did that to you.

40 *Mother asks child to explain his problem beyond a mere why.*

Examples: Tell me what happened.

What is the matter?

What does that mean when you say _____ ?

35 *Mother suggests simple solution to the problem or tells the child how she (the mother) will solve it for him.*

Examples: Why can't you both share the toy?

Why don't you write on the paper (instead of the walls).

Tomorrow I'll talk to the teacher (because that boy hit you).

30 *Mother simply asks why the child did what he did or why something happened (to get information and not in anger or exasperation).*

Examples: What did you do to make him hit you?

Why did you hit him?

Why are you doing that?

25 *Mother offers abstract explanation.*

Examples: You have to learn to protect yourself.

Children must learn to share.

Lying is not nice. You must not lie to your parents.

We don't hit friends.

We don't hit children smaller than we are.

Eat your vegetables and you'll grow up like Daddy (be strong like Superman).

Is that what you're supposed to do?

Is that the nice thing to do?

20 *Mother gives relevant simple solution or consequence (noninterpersonal) in a demanding or nonexplanatory manner. Child is not encouraged to explore.*

Examples: Clean it up. Get a sponge.

If you don't eat, you won't get dessert. If you eat, you can have ice cream.

If he hits you, hit him back.

Don't hit him back, tell the teacher.

I told you to write on paper.

I want you to kiss and make up.

Stop jumping on the bed, you'll fall.

15 *Mother explains simple "because" in her behavior.*

Examples: You can't have candy now because we will eat supper soon.

No, you can't have candy because your teeth will go bad.

I can't afford (the candy or toys).

10 *Mother commands with simple explanation.*

Examples: You can't stay up. You have to go to school tomorrow.

You're fussy about your toys, so give it back.

(To interviewer): I give her time to try and then I do it for her.

Put back the candy because it's not the right kind.

Eat it because it's good for you.

Give it back because it's not yours.

You're not supposed to do that.

Wait. I'm sewing a button now (cooking dinner now, and so on).

5 *Mother commands or makes a statement to the child with no explanation.*

Examples: Wait 'till I'm finished.

You'll have to wait.

Give the toy back.

Eat your food.

I told you not to write on the walls.

Go to bed now.

0 *Mother uses threats, name calling, force. Mother does not respond to the child's problem or communicate with the child in solving the problem.*

Examples: Shut up or I'll whoop you.

Don't be a baby.

Just do as I say. Don't back talk.

Never mind what you wanted.

(To interviewer): She just sulks and that's too bad.
(To interviewer): Just let him sulk, he'll get over it.
(To interviewer): I ignore it (when he cries).
(To interviewer): I went to the teacher.
I talked to the other child's mother.

APPENDIX D

Research to Improve School/Family Relations

(Position Paper: Planned Actions In Field Settings)

Deliverable THREE

Research to Improve School/Family Relations

Overview

The Division of Childhood and Parenting, Appalachia Educational Laboratory (AEL), developed a specifically focused position paper describing AEL's future work in the area of school/family relations. This paper provides an overview of the process used to identify and verify the needed research and development activities. It then summarizes the problem, the focus of the research, and its potential impact in the area of school/family relations. The final section describes three major projects and the related work activities.

In early 1980, AEL became involved in a major regional needs assessment study. The Division of Childhood and Parenting was able to determine the status and needs of research and development activities related to families and children by participating in specific components of this study. The first component was a major literature review that documented the characteristics and needs of regional families and the gaps in the present services (AEL position paper Children and Families in Appalachia: The Status, Needs, and Implications for R & D Activities, June, 1980). Specific needs statements were then written by the Division to be included in the validation component of the needs assessment. Additional needs statements were generated in Needs Assessment Conferences in each of the seven states by a variety of participants from education, social service agencies, parents, students and others. These persons also named four persons to serve as validators of the statements. The statements were sent to the identified validators. Analyses of these statements were performed and the Division received prioritized statements (see p. 13). Based upon these statements, the Childhood and Parenting staff prepared a paper describing the problems and the proposed R & D activities that would contribute to the solution of the problem.

Problem Statement

The answers to the question, "Who should educate children and for what purposes?" have evolved along with our society. Two hundred years ago in rural American communities, the family and church assumed the responsibility for socializing and educating children (Lazerson, 1972). The curriculum closely reflected the prevailing culture and beliefs.

As the United States became industrialized, urbanized and professionalized, control of educational programs, hiring practices and policies moved further away from the local community. Professional educators became the leaders in determining school policy, and the role of parents as decision makers declined.

Along with industrialization came economic exploitation of many children--especially those from immigrant families. It was in efforts to improve the life opportunities of immigrant children that the first systematic educational programs involving children and parents were begun (Hill, 1941). With these programs as forerunners, many successful approaches have been found for involving parents in school activities for young children. Research studies report the powerful influence from programs with such parent involvement (Hess et al, 1971; Schaefer, 1972; Evans, 1975). AEL's HOPE Project produced large immediate effects, and more recent evidence shows that the results of that early intervention have persisted into the children's secondary school years.

Despite the many successes experienced in involving parents in preschool programs, there are few examples to which one can point of similar successes at the elementary level. At the secondary level, such efforts are almost unheard of, except in the case of low income families whose children are being served through various compensatory education programs that are federally funded. Because school-home partnerships have not been developed at the elementary and

secondary school levels, little is known of (a) how to go about this; (b) whether such efforts would improve school-family relations and impact favorably on children's learning; (c) what the precise objectives of such programs should be; and (d) the backgrounds of families and the characteristics of schools which should be taken into account in the design and operation of programs. Thus, if the promise and benefits of school-home partnerships in education are to be realized at the elementary and secondary levels in the Region, research will need to be conducted in the foregoing areas about which so little is known.

The possibility of conducting such research now appears to be a matter of fortuitous timing. The American family seems to be undergoing profound change--and if it is not, people, nevertheless, believe this to be the case. Current beliefs about how the family is changing and about how this is impacting on schools are making school personnel more ready than in the recent past to rethink and rearrange the nature of their relations with families. The rumblings of these changes among professionals have been chronicled recently by the Education Commission of the States, the Associaton for Supervision and Curriculum Development and the American Associaton of School Administrators, among others. Families too are feeling pressed upon by the changing times and, consequently, are asking (i.e., as evidenced in all recent Gallup polls) in unprecedented numbers for schools to become involved with them in new ways.

The potential for effecting change in school-family relations is, thus, great. Whether the direction of change will prove to be constructive, however, will depend upon the results and timing of such efforts as the research proposed herein. Certainly one must recognize the potential for totally unwarranted hopes, misperceptions of the school-family partnership, and so forth. Thus, both the promise and the risks of the present situation impart a degree of urgency--for educational research and development seldom has opportunities to be in the vanguard of change and to help shape what is to come.

Focus and Rationale

By way of current and past research at AEL, much knowledge has been gained regarding the characteristics and needs of regional families and of gaps that exist at present in services to them (see AEL position paper Children and Families in Appalachia: The Status, Needs, and Implications for R & D Activities, June, 1980). AEL has also developed family study techniques, including measurement procedures and theory, which have proved useful in the Region. The proposed research is designed to build on (a) that knowledge base, (b) the regionally-tested methods of family study and (c) a network of active contacts with SEA personnel and LEA's in the Region.

In order to address the problem of almost non-existent models of parent involvement at the secondary level and of the underutilized opportunities for school-family partnerships at the elementary level, AEL must launch a research program which first reviews and integrates what is known about parent involvement at the elementary and secondary levels, Project 1 includes this background activity and organizes an advisory body which will represent the K-12 school-family focus of the overall research program. The remaining work can be conceptualized as two separate project strands. Project 2 takes a broad focus in terms of all families, while Project 3 looks at special approaches required by high need families.

Project 2 attacks the problem from several directions in response to the several dimensions which need to be researched: a) types of communication and interaction now occurring between school and families, b) perceptions of what is and what is desired, plus background factors which have influenced these perceptions, c) small changes in schools (i.e., school climate) which would immediately increase parent support and involvement, d) skill preparation and

needs of teachers for working with families, and e) teacher understanding of ways in which family background affects children's school performance. Out of findings from this research, AEL will collaborate with institutions of higher education in the development of inservice and pre-service experiences for school personnel to equip them for establishing school-home partnerships. These experiences will be provided to selected school personnel from collaborating LEA's. Experimental studies will then be carried out in the LEA's of the impacts of their approaches on communication and interaction between families and schools and on family support of schools. The ultimate impact on student behavior and school performance will also be examined.

Project 3 will address the problem with special reference to high need families (e.g., single parents, low income families, etc.). The rationale for focusing separately on these groups is the belief that their needs are different and that the optimal means of involving them in their children's learning may also differ. These considerations suggest that there well may be no existing programs which provide optimal means for involving high needs families. Project 3, therefore, includes provision for experimentation with combinations of existing program elements which together might prove most beneficial to schools in working with high need families.

Potential Impact of Program

Although schools now engage in various forms of family involvement at the elementary level, the nature of these is quite limited in comparison with the potential range of home-family partnerships. At the secondary level significant parent involvement is rare, and when it does occur it is more often the result of isolated individual efforts rather than of institutionalized school programs. Yet there is potential for forming meaningful school-family partnerships.

The proposed systematic research program would provide answers that could help: (1) prepare school personnel to work with families more effectively;

(2) provide new mechanisms for school-family communications; and (3) provide approaches and materials that would assist school efforts in working with high need populations.

The ultimate impact of the entire program would be that improved interaction and communication between families and schools would allow the two social institutions to work together to provide the best education possible for children and youth of the Appalachian Region.

PLANNING A SCHOOL-FAMILY RELATIONS PROGRAM

a. Project Focus and Rationale:

It is evident that the relationships between the school and family are changing. Both parents and school personnel are indicating communication problems, ambivalence in roles;--expressing a need for constructive methods of involvement and support of educational programs. The Needs Assessment Project has documented the need for research activities that will lead to a better understanding of school-family relations. These statements serve as the basis for the long range research activities. However, actual conceptualization and planning for the research must be systematically developed and documented.

The first phase of this work will be a thorough literature review that will serve as the foundation for the additional activities to be carried out. This literature review will document the state of the art of school-family relations at the present time, will indicate research now occurring and identify areas where additional work is needed. Special emphasis will be placed on reviewing literature relevant to school-family needs at the elementary and secondary levels and in high need groups.

Using the literature search as background information, a complete proposal to NIE will be prepared. This proposal will serve as a guide for the work to be performed and will document the objectives, goals, methodologies and possible outcomes for the school-family relations research program

This work must be performed by AEL staff persons with experience in proposal preparation as well as expertise in the area of school-family relations. AEL staff will also seek input in the initial proposal preparation and throughout the project from advisory persons who represent the perspectives of parents, teachers, administrators and students at both the elementary and secondary levels.

b. Project Objectives:

The objectives for this scope of work are:

1. To determine the state of knowledge of school-family relations in the Region.

2. To organize and establish a working relationship with an appropriate advisory group(s).

c. Project Activities: Based on the stated objectives, the following start-up activities will be carried out:

1. A review of the literature will be carried out in order to determine the kinds of research that have or are now being done related to school-family relations. Special attention will be given to research relevant to the Appalachian Region and to research providing findings at the elementary and secondary levels. This research will provide staff with a state of the art understanding of school-family relations, will serve as a basis for planning and proposal writing and will provide documentation that identifies the persons and programs with expertise in school-family relations.

2. An advisory group will be identified and a working relationship developed. AEL now has well established contacts with schools, agencies and communities throughout the Region. Examples include the contacts established through the Regional Parenting Surveys-Base Sample Survey work, the Childhood and Parenting Task Force and AEL's Board of Directors. Working with these established contacts, selection of a group of persons representing the perspectives of parents, educators and students at both the elementary and secondary levels will be completed. The group will need to be sufficiently diversified to represent the interests of "high need" families, varied income families, and varying educational viewpoints but especially those most common to the Appalachian Region.

RESEARCH TO IMPROVE SCHOOL-FAMILY INTERACTION

a. Project Focus and Rationale

The purpose of this project is to promote good school-family relations by finding practical ways to improve the quality of interaction and communication between school personnel and parents. The rationale is that good school-family relations will positively affect children's learning.

There has long been a recognition that the child's family and school experiences influence one another. And certainly parent participation in school affairs has broadened since the 1960's to include working class as well as middle class parents. Yet there are still questions about the roles which family members and school staff should play in the education of children. There are claims by teachers and other school personnel that parents are apathetic, uninterested, do not value education. There are claims by parents that teachers do not really care about their children and that parent advisory boards and other mechanisms for parent involvement are not allowed to make a real contribution, are not taken seriously.

According to Lightfoot, such dissonance is largely due, not to differences in educational values or goals for children, but to misperceptions. Parents and school personnel rarely have the opportunity for "meaningful, substantive discussion. In fact, schools organize public, ritualistic occasions that do not allow for real contact, negotiation or criticism between parents and teachers" (Lightfoot, Sara Lawrence, "Exploring Family-Schools Relationships" AERA, Spring, 1980). With little opportunity to get to know one another as people, teachers and parents often operate on the basis of negative stereotypes of one another. The result is tension, anxiety and distrust.

The purpose of this project is to study methods of improving communication and interaction between schools and families. While a certain amount of dissonance is probably inevitable because of the different kinds of relationships within the two institutions, it is believed that there is much room for improvement. Little is known about how to build optimal relationships between families and schools. This project seeks to begin to fill this gap in our knowledge.

b. Project Objectives:

The objectives of this project are to carry out studies in a sample of typical communities in the Region which will contribute to:

1. Establishing a positive school climate for parent involvement.
2. Preparing school personnel to work with families.
3. Devising new mechanisms to promote school-community interaction and communication including the means to involve parents in children's learning.

An additional objective, dependent upon the accomplishment of the above three objectives, is:

4. Monitoring long-term effects of all these activities on community support for the schools.

c. Project Activities:

1. Study the kinds of interaction and communication currently occurring between families and schools by means of informal interviews and observations.
2. Study the perceptions by teachers, parents, students, and others, of school-family relations in terms of what is and what is desired. Inquire also regarding background factors and past experiences that have influenced these perceptions. Interview random samples of the relevant populations.
3. Hold a series of meetings with parents and school staff to discuss the results of the perception interviews - areas of agreement, disagreement, misperceptions, etc. Parents and teachers could meet separately and then together.
4. Survey parents in order to obtain their suggestions for changes in organizational practices and procedures of the school to which parents would respond positively by becoming more involved. Consider how this varies by community and by background of parents. Hold a workshop with parents, teachers and administrators to explore possible changes in school organization and procedures.
5. Study teachers' formal preparation and inservice education relative to working with families.
6. Inquire into teachers' past experiences of working with families; teachers understanding of the significance of the family in the educative process; and teachers' perceptions of the legitimate roles of parents.
7. Inquire into teachers' understanding of the community, including pertinent characteristics of the population served: e.g., stability of residence, ethnic, racial, educational background, degree of unemployment and numbers of two-job families and single parent families.
8. Drawing on information obtained in 5, 6, and 7 consult with administrators and educators from the nearest institution of higher learning. Plan a series of inservice meetings and experiences to increase teacher skills and knowledge regarding working with parents.
9. Using the results of the studies of school climate and school staff preparation and drawing on suggestions in the literature (e.g., Litwak, Eugene and Henry Meyer's discussions of communication mechanisms in School, Family and Neighborhood, Columbia University Press, 1974) design mechanisms to allow real, meaningful, substantive communication between parents and teachers. Hold a workshop to discuss alternative mechanisms with staff and parents. Conduct experiments to test the effectiveness of these different mechanisms.
10. Develop materials for teachers and parents dealing with what the child has been and is learning at home, what the child is and will be learning at school, and how parents and teachers may reinforce each other.
11. Study the degree of participation in school affairs and support for levy elections before the initiation of any of the above studies and once yearly for the duration of the study.

NATURALISTIC AND EXPERIMENTAL STUDIES OF SCHOOL-FAMILY PROGRAMS FOR HIGH NEED POPULATIONS

a. Project Focus and Rationale:

There are many different methods of involving parents of young children in their children's learning. However, at the elementary and secondary levels, there seems to be less effort made to involve parents, and parent participation is significantly lower. While nearly all parents indicate a desire to be involved their children's learning, a number of factors have shaped both the degree and the kinds of involvements that are possible between the home and the school.

These forces often lead to frustrating experiences for both the schools and families. Parents feel uninformed about and do not understand their responsibilities in the educational process. Some parents feel that schools are too conventional in the methods used for contacting parents. On the other hand, schools feel they are expected to assume additional responsibilities that have historically belonged to parents. Teachers, the persons most directly in contact with the child and the home, feel they have not been adequately trained to work with parents to insure involvement, and that the actual involvement may create additional work in an already overloaded day. Such problems are aggravated among families with special needs when school personnel try to meet their needs.

Thus, research is needed into methods by which teachers and parents can be involved in effective partnerships at the elementary and secondary levels, with emphasis on high need families. Special attention should be given to investigating the kinds of communication patterns and arrangements between the home and school that are successful in the Region. New experimental approaches may in some instances have to be designed and implemented to attempt to meet identified needs. Studies of teacher preparation and inservice education for school personnel will be used to determine the state of the art of formally fostering teacher skills and knowledge regarding working with parents. It may become evident that workshops and inservice materials or activities are needed for school personnelwho vary in their levels of background and responsibility for working with parents--i.e., to provide awareness level information for most personnel; to prepare in-depth and targetted training components for those who already work closely with parents.

b. Project Objectives

The objectives for this scope of work are:

1. To identify and develop an understanding of elementary and secondary level programs that use promising techniques to foster school-family relations among high need populations.
2. To devise and test some experimental approaches to involving parents in children's learning at the elementary and secondary levels; and
3. To develop or adapt materials to effectively involve parents, school personnel and prospective teachers in working together.

c. Project Activities:

The following activities will be carried out:

1. Programs will be identified at the elementary and secondary levels that seem to utilize promising techniques to foster school-family relations with high-risk populations. Such programs will be identified by (a) a review of the literature that documents the important criteria relevant to such programs and by (b) information provided from AEL's contacts in the schools of the Region. Contrast schools may also be identified.
2. Comprehensive data will be gathered regarding such characteristics of the programs as: (a) their settings; (b) goals and objectives of such programs; (c) parent and teacher roles; (d) program methods; (e) advantages and disadvantages; (f) degree of participation; and (g) impact. A descriptive case study type report will result from the findings compiled.
3. It may be learned through literature reviews and case studies that certain high need groups are not receiving adequate school-family interventions because none is available. In such instances, new experimental approaches will be designed and implemented. These approaches will evolve through the studies of existing programs, analyses of the needs of families and of school personnel, consultation with the Program's advisory group, and in collaboration with parents and school personnel in specific local settings. The uniqueness of the Region and the attitudes of the people regarding school-family relations will serve as major sources of direction for the effort (Photiadis, 1977).
4. During the experimental studies, it may be learned that certain materials not now available would be helpful or necessary in order to implement suggested approaches. Other materials currently in use may need to be adapted to the special needs of the Region. Workshops of varying levels of intensity will likely need to be designed for school personnel. The new materials will probably need to be developed with a view to both inservice and pre-service usage.

NEEDS ASSESSMENT DATA RELEVANT TO

SCHOOL-FAMILY RELATIONS

This program has been designed in response to statements of educational need derived from AEL's 1980 Needs Assessment project. The coded designation* of need statements to which the program responds are listed below. Needs statement validation information for Tennessee and Pennsylvania is not complete. Therefore, statements are placed according to the rankings at these state conferences.

First (Top) Quartile Priority Rated Statements

L-107, L-109, K-37, K-5, T-8, P-46

Second Quartile Priority Rated Statements

L-102, L-104, L-106, L-108, L-115, A-19, A-24, T-26, T-35, T-60

Third Quartile Priority Rated Statements

T-54

Fourth (Low) Quartile Priority Rated Statements

*Key to codes: A = Alabama; K = Kentucky; O = Ohio; P = Pennsylvania; T = Tennessee; V = Virginia; W = West Virginia; L = Laboratory

APPENDIX E

HOPE Follow-Up Study Findings

Deliverable FIVE

HOPE FOLLOW-UP STUDY FINDINGS [1]

Edward Earl Gotts

The problems of delivering human services in rural areas are multiple: a) physical isolation, distance, poor roads, and non-existent public transportation; b) scarcity of all manners of complementary resources and services; c) remoteness from institutions of higher education, medical centers and other sources of potential assistance; d) sometimes--apathy, indifference and opposition which arise from rural people's perception that newer ideas, methods, and procedures may disturb or destroy traditional values and patterns of living; and e) a history of neglect of rural needs by state and federal officials who have been decidedly more conscious and responsive to the needs of urban communities. The foregoing problems are magnified in much of rural Appalachia because of its steeply mountainous topography, sparseness of population, severe degree of poverty, and the strength of traditional culture.

Rationale

When the Appalachia Educational Laboratory (AEL) was created in 1966, its initial challenge was to analyze and document the exact nature of regional needs. The foregoing pattern of regional characteristics was confirmed by a major needs study conducted at that time. The Lab's response to this was to plan from then through 1968 for regional interventions which might be carried out by local education agencies, after they had been bonded together into multi-county cooperatives. Such cooperatives were viewed as being capable of increasing the availability of scarce resources and of bringing them to bear upon specific needs. Creating a climate to encourage such multi-county efforts was, therefore, the first step pursued.

The needs assessment identified the preschool child as requiring special attention. This age group's needs when unmet were often later manifested in extreme shyness when they entered school; in reduced verbal interaction in the classroom; and in a high incidence of early school failure (i.e., retention in grade) and poor performance on standardized achievement tests. The Lab, accordingly, decided to focus one of its main efforts on preschool program development--again through multi-county cooperative units.

Geographic isolation and remoteness were to be overcome by the use of: (a) television to reach all homes; (b) mobile instructional facilities which could travel into small communities over almost impassable roads; and (c) selection, training, and use of local paraprofessionals who could visit homes relatively near their own places of residence. The overall approach was to be home-oriented, drawing thereby on the strength of the Appalachian rural family as a support system. These approaches to service delivery were also selected as being cost effective in view of the scarceness of resources. That is, once produced, the television signal could be broadcast at virtually no cost to the local preschool program; a teacher in a mobile classroom could travel during a normal week to as many as eight sites to provide once-a-week half-day group experience sessions, and without the need to construct suitable local preschool facilities in any of the sites; and paraprofessionals could extend services in a highly individualized manner to families at a relatively modest cost.

The rationale for the approach described here may be summarized as follows: it was responsive to rural Appalachian economics and geographic conditions; it dealt with a major identified need, the preschool population's preparation for participation in school; it used media, mobile instructional facilities, and paraprofessionals to deliver preschool services in a cost effective manner; and it drew upon the strengths of the preschool children's

families, making them collaborators in the service delivery process rather than making them suspicious "outsiders." Moreover, it will be evident that the overall approach taken was to prevent early school problems before they occurred.

The AEL Experiment

Home-based early intervention is by no means a new idea (Gotts, Spriggs & Sattes, 1979). Nor is its application in rural settings unique or without precedent (Klaus & Gray, 1968). The intervention reported here was, nevertheless, the first to use as its strategy a particular combination of treatment components: daily television lessons in the home, weekly printed support materials and home visitation to parent and child by a carefully trained paraprofessional, and weekly group experiences for children in a mobile classroom van capable of servicing isolated rural settings. Moreover, the intervention was carried out as a well-designed experiment. The study qualifies, in addition, as a clear instance of a primary prevention experiment.

Nearly ten years have passed since the initial three-year experiment (1968-1971) was concluded in West Virginia. It has since been essentially and successfully replicated in rural settings in four other states ranging from Ohio through Alabama (1971-1973). Two of its replication sites were integrated subsequently into the national demonstration known as Home Start, which has been a variant and option within Head Start since 1975. From 1974-1977, the Appalachia Educational Laboratory (AEL) developed and validated materials to support widespread operation of home-based interventions of this type for families of preschool and early primary age children. Collectively these materials are called "Aids to Early Learning" (Gotts, 1979). From 1978-1980, AEL staff have gathered and analyzed extensive follow-up data on children and parents from the original experiment.

This current work seeks to examine the persistence and pervasiveness of the intervention's effects.

The report next considers the intervention by looking at the rural conditions which led to its design. After that the program is described; its immediate effects are reported; and its long-term effects are examined. Finally the experiment's implications for working with rural parents are considered.

Characteristics of Rural Appalachians

A thorough analysis was made by AEL of regional and sample site demography to determine the extent to which its findings could be generalized to other non-urban[2] settings in the northeast and southeast.

Demographics: Then and Now

The original AEL experiment in Home-Oriented Preschool Education (HOPE) was operated in four counties of Southern West Virginia. The mining of metallurgical coal was and continues to be the major source of employment in these counties. In 1968 the largest urbanized center in the site area had a population of under 20,000. The least rural of the counties had a non-urban population of 63.3 percent at the time of the 1970 census; the most rural had a non-urban population of 86.8 percent (Bertram & MacDonald, 1971).

In 1974-1975 AEL, in cooperation with the U.S. Bureau of the Census, performed a reanalysis of 1970 census individual data records for the non-urban portions of a thirteen-state region of northeastern and southeastern states, including West Virginia, to determine further the characteristics of families of preschool children (Bertram, 1975). This reanalysis was necessary because the Census data had not been compiled previously to examine this particular demographic subgroup. At the same time (1974) AEL interviewed

a seven-state sample of non-urban families, who were matched to represent the 1970 Census for their respective counties. The interviews sought to clarify additional issues that had not been addressed in the Census data collection of 1970 (Shively, Bertram, & Hines, 1975).

The foregoing efforts confirmed that the four-county site of the HOPE experiment was slightly more rural and had somewhat lower parental education and per capita income levels than West Virginia as a whole (Bertram & MacDonald, 1971; Bertram, 1975). Moreover, the West Virginia percentage of non-urban population was 5.5 percent higher (i.e., more rural) than the northeast and southeast average; West Virginia's median years of parental education matched those for the region; and West Virginia had about five percent more families below the poverty level than the regional non-urban average. Together, these facts suggest that the HOPE sample was drawn from an area generally resembling the non-urban portions of the region as a whole, but differred by being somewhat more rural and by having lower per capita income and lower median parental education. Although the 1980 Census had not been analyzed at the time of this writing, there appear to have been no major population shifts over the past decade which would have altered the foregoing basic demographic similarities and constrasts between the HOPE site and West Virginia or the overall non-urban region.

It appears from other comparisons that the isolated rural populations of the thirteen state region studied (i.e., Alabama, Georgia, Kentucky, Maryland, Mississippi, New York, North Carolina, Ohio, Pennsylvania, South Carolina, Tennessee, Virginia, and West Virginia) experience conditions similar to those faced by isolated rural dwellers elsewhere in the United States (Tamblyn, 1973). The HOPE experience and its replications, thus, provide findings that are suggestive for other isolated rural communities in the U.S.

"The initial (HOPE) sample was selected in 1968 by randomly assigning treatments to 3-, 4-, and 5-year-old children and their parents who were living within randomly selected geographic grids in the rural areas. Additional children were added each year (in 1969 and 1970, by these methods) as some of the sample became old enough to enter public schools (or were otherwise lost to attrition)" (Bertram, Hines, & MacDonald. 1971). These methods of selection and assignment were used to insure that the HOPE sample would represent the non-urban homes of these counties in both the community control and treatment groups. It should, nevertheless, be recognized that subsequent busing to consolidated schools brought many of these rural children into contact with children from somewhat urbanized areas.

Inferred Child Rearing Practices

Nearly all of the regional literature has identified a core mythology regarding mountain families and their probable child-rearing practices. There is not at present a data base sufficient to define clearly what these families are like, although the HOPE Follow-Up Study will eventually do much to increase our understanding of these families' methods of child-rearing. These problems of the literature have been discussed in more detail elsewhere (Gotts & Higginbotham, 1980).

Although it is clear that there is considerable diversity of family types in this rural population (Hansen & Stevic, 1971), some generalizations can be made. Unfortunately, these are based on relatively soft data. For example, according to Brown and Schwarzweller (1970) characteristics on which Appalachian families differ from other American families are that they: a) place greater emphasis on family traditions; b) tend to have larger family sizes, although these differences are declining; c) more sharply differentiate the role activities of the sexes; d) are less child centered (i.e., are

less permissive, more directive, and more apt to use physical punishment); e) exert tighter controls over adolescents, resulting in low rates of juvenile delinquency, particularly in the more remote rural areas; and f) are more likely, especially in rural areas having longtime residential stability, to restrict informally the free choice of mates.

These same authors have also commented on characteristics on which these families do not differ from other American families (Brown & Schwarzweller, 1970): a) the fertility rates are declining; b) the family of residence is the conjugal or nuclear family (i.e., parents and immature children, although the extended family continues to be important); c) the conjugal family maintains contact with both sets of in-laws; and d) male dominance is prevalent.

The foregoing observations suggest some of the more general parameters which influence child-rearing. These general parameters have not, however, been rigorously studied; they should, consequently, be viewed as inferences more than adequately researched population characteristics.

The Psycho-Social Interior of the Family

Even less is known empirically of the rural family in terms of pyscholo-gical characteristics and family interaction dynamics. Such areas have been a major focus of AEL's HOPE Follow-Up Study and are reported here. Related findings appear in the family case studies (Appendix C) of the HOPE Follow-Up Study. First, to provide some basis of comparison, we will find it useful to examine the more soft and non-representative but suggestive finding of Looff (1971) from Eastern Kentucky.

Looff's (1971) own review of literature did not uncover any adequate epidemiologic studies for the region. He found, moreover, that there were no in-depth studies of representative samples of mountain families. Whereas his own most in-depth data came from a rural child mental health sample, his

intensive look at the families themselves did provide considerable insight into family dynamics. He also compared the incidence of disorders he encountered plus those which he seldom saw with their rates of occurrence in an urban Kentucky mental health sample--thereby providing further support for some of his hypotheses regarding the impact of family life on child development and psychopathology.

The major family environment themes which he could elaborate from his data as appearing to be interrelated were: a) familism, the stress on interdependence of family member, and an overemphasis on the period of infancy led to an increased incidence of dependency-related psychopathology but also to a reduced incidence in those severe behavior disorders and childhood psychoses which usually result from disturbance of parent-child relations in early infancy; b) family-engendered conflict over growing up and becoming adult in appearance were associated with an increased incidence of pathology among children related to sexual maturation--with their manifestations being distinctly different in girls and boys; and c) in a sizeable subgroup of families, high conflict over verbal communication leading to what Looff (1971) has dubbed the "consolidated school syndrome," i.e., children who became immobile and nonverbal when moved from one room schools to consolidated schools.

Based on the clarity of the data, the HOPE Follow-Up study findings on a representative sample of non-clinic children corroborate strongly Looff's first two hypotheses. It remains to be seen, on the basis of more refined analyses, whether the HOPE findings will support his third hypothesis; such a possibility is not now evident from the raw data, even among the most isolated rural families.

Generalizability to the Region

The preceding discussion has already touched upon the issue of how

generalizable the findings of the HOPE experiment are to the Region. The conclusions can be summarized as follows: the HOPE findings appear to be of potential value for understanding the experience of growing up rural and isolated, in the context of close, extended-family kinship ties, even when there has been considerable exposure to the broader culture through experience in consolidated schools and via television. However, while our studies, from a demographic perspective, suggest that the HOPE results may be generally applicable to non-urban families in a thirteen-state region, we are reluctant to make that inference in a strong form, for the reasons discussed below.

As some of us have reasoned elsewhere, it is not only possible but frequently the rule that social science mythologies and stereotypes about groups of people are generated by a well-meaning overapplication of the method of generalization (Gotts & Higginbotham, 1980). With Photiadis, we are inclined to believe that neighborhood and locale exert a more substantial influence upon the ethos of groups of people than is generally appreciated in our science (Photiadis, 1980). It seems to us that current research trends toward performing community case studies and toward relying more upon qualitative methodologies are serving as correctives to the social sciences' obsession with quantitation and generalization in the face of their longstanding lack of commitment to replication and cross-validation of findings. Thus, it may be possible to generalize with greater integrity when there is less compulsion to generalize at all.

HOPE: An Early Intervention Strategy

The overall approach of the HOPE intervention will first be examined. Then its individual treatment components will be considered in detail. Finally, its status as a primary prevention will be reviewed.

Overview of Program Rationale and Strategy

Background information on HOPE's operation is available from many scattered sources. The most satisfactory single source is an overview manual prepared by Alford (1972). This is one of seven HOPE program manuals, all of which may now be obtained from the same source, the ERIC Document Reproduction Service.

HOPE originally consisted of three components: 1) daily television lessons in the home for the preschool child (3-5 years olds), and printed parent guides to help parents to understand what the child was learning on TV and to follow up with related activities at home; 2) weekly visits to the home from a local, trained paraprofessional who demonstrated to the parents how to teach their children, and who listened, helped "problem-solve," and put parents in contact with community resources relative to family health and social issues; and 3) a weekly one-half day group experience for the child with other children in a mobile classroom under the supervision of a qualified teacher and an aide. A fourth component was added later, i.e., parent discussion groups. The rationale for the original components was discussed earlier.

Contribution of Daily Television Series

The television series and printed support materials were together called AROUND THE BEND. A permanent archive of these materials is now being organized at Marshall University, Huntington, West Virginia. The archive will contain complete documentation on the series' curriculum structure and on the formative evaluation studies which were conducted by AEL in the process of developing it.

Originally the television component was conceptualized as imparting information and providing experience to foster preschoolers' cognitive development. AEL was the first television producer to observe preschool

viewers in their own homes at broadcast time in order to dtermine how they responded to each show. These observations by home visitors were scheduled to provide an age-by-sex cross-section of viewers each day. The observations focused on a) features (segments) which held the children's attention and b) the program's capacity to produce active responding (e.g., verbalizing answers, performing actions, going after suggested materials). This information was immediately fed back from the field site to the production team in Charleston, West Virginia, to enable them to emphasize those program elements which produced active responding and held the children's attention (Miller, 1970). By the end of the first year of production (1968-1969) much progress had been made in achieving such a balance of program features. Over 500 one-half show were produced in the years 1968-1971. The careful formative evaluation paid off: the series was highly effective in promoting active attending and responding by three-, four- and five-year old children and stimulating their cognitive development.

Home visitors eventually began to encourage parents to look in on the show with their children. Parents did this much more than the series' developers had expected, with questionnaire results suggesting that approximately 80 percent of the parents looked at the program with great regularity (Bertram, Hines, & MacDonald, 1971). Parents' knowledge of the broadcast suggested that many did view it. In this connection it is essential to realize that over 85 percent of these rural children were cared for at home by their mothers in the daytime, and that an additional 11 percent were cared for by another family member, most often a grandmother. The main character on the program, Miss Patty, consequently provided a regular role model. Her potential impact as a role model can be more fully understood by examining parents' attitudes toward her and the program. These attitudes were found to be highly positive in terms of which available children's

programs the parents considered "best" (Bertram, 1970).

The television component, in the above-mentioned manner, served an additional unanticipated function. It served as a daily reminder to parents to carry out at home some simple developmental activities that were printed in the weekly parent guides. The reminder function likely brought about a more continuous treatment effect for children than do home-oriented programs which lack a television component.

The Home Visitor Role

AEL recruited only local people to serve as home visitors. Because nearly all of the persons being visited in their homes were females, all home visitors selected were females, in conformity with community folkways and mores. Home visitors had all completed high school or earned a high school equivalency certificate; some had completed college work. All were judged in their communities to be trustworthy, reliable, able to keep confidences, effective communicators, and persons capable of relating to young children and their parents; they were recommended by local principals.

They were trained in the special role functions which they would perform; given instruction in how to access community resources; provided more general instruction in child development, teaching, and early learning; and taught how to handle various problematic situations which might arise (e.g., sexual advances, aggression, involvement in family quarrels, etc.). Continuous in-service training and supervision were used to maintain skills, resolve problems, and so on.

During the weekly home visits, the visitor delivered the printed support materials for AROUND THE BEND; discussed with the parent how to carry out simple developmental learning activities with the child; used feedback from child and parent to help adapt the activities to the child's own developmental

skills and interests; modelled for the parent how to work with the child; and completed records on program compliance and reactions. One visit each day was planned to coincide with the television broadcast. During this visit the assignment was to observe and record throughout the broadcast itself. In addition, the home visitor might, at the parent's instigation, become involved with the parent in any of a variety of areas with which the parent might request help (e.g., child care routines, nutrition, personal health problem, etc.). The visitor handled as many of these matters as she could and referred any others. Over time the home visitor became a trusted friend and, in many instances, a confidante. Both parent and child looked forward to their weekly visits.

In all that the home visitor did, the central purpose was to facilitate the parent's functioning as the child's first teacher. The home visitor was, therefore, trained not to usurp the parent's role nor to displace the parent. That this distinction was sometimes blurred was evident from the fact that the home visitors were often referred to by parents as "teacher." Despite this conception of the visitor, an acceptable degree of parental compliance was achieved, as will be discussed later under "Parent Participation and Reactions."

The Classroom or Group Experience

During one half-day session per week, approximately 15 children were assembled for the arrival of the mobile classroom van. This fully-equipped and self-contained unit needed only a power hook-up to be totally operational. It was staffed by the teacher and an aide. Working four days per week, with one day for planning and preparation, the van and its two personnel could provide educational services for eight groups of 15 children--at a great economic advantage over other half-day or full-day preschool programs.

Moreover, it was a fully portable operation, providing age-appropriate facilities and materials in rural communities which offerred no comparable learning environments.

The instruction occurring in the mobile classroom was correlated with that provided by the television and print materials provided to the parents. It provided some direct hands-on experiences for children with learning materials not readily available in homes. Perhaps as important as any of the foregoing, however, was the social milieu of the classroom. There the children could engage in social interaction in small groups of their peers. Such opportunities are usually scarce and difficult to arrange for children in isolated rural settings because there are too few age mates living near one another to sustain such experiences. The social milieu also differed from the home by exposing these young children to a weekly experience of being cared for, guided, and supervised by adults outside the family. Such experiences were viewed as having the potential for reducing later separation anxiety when the children reached school age, in a population known to manifest a high incidence of separation anxiety (e.g., Looff, 1971).

Parent Participation and Reactions

Many and varied parent reactions and patterns of participation were observed. The most typical pattern was that parents generally carried out their part of the contract by being available for the home visit, observing their child watching the program, and carrying out activities suggested by the home visitor. Such behavior may be indicative only of social compliance, although the impressions of home visitors and field evaluators was that parents generally felt some personal commitment to the HOPE program. At one extreme, a few parents thought up extra things to do, carried them out, and then related their experiences to the home visitor. At the other extreme, a

few parents always managed to be busy in the kitchen, for example, during the home visit, thereby leaving the home visitor in the role of direct teacher of the child rather then as an instructor and model for the parent. The parents' reactions to the television series, have already been mentioned. These became more positive during the second and third years of the experiment, apparently because of the production team's increasing success in implementing what they learned through the formative evaluation process.

Much less attention was devoted by the staff to studying changes in the parents themselves than to learning how the children had been affected by the experience. Thus, an opportunity was missed to gain what might have been some of the most valuable data in the entire experiment. It has been possible, nevertheless, to design into the HOPE Follow-Up Study a fairly rigorous test of how parents of the experimental and control groups differed after about ten years had elapsed. This could be accomplished because experimental and control parents had been randomly assigned in the beginning. Yet the follow-up study cannot address certain vital process questions about the critical events which brought about any differences between the two parent groups.

HOPE as Primary Prevention

Although the child population served by HOPE experiment had an elevated rate of risk for the subsequent development of certain conditions (e.g.; Looff, 1971), they were not a specifically "at risk" group. Many of them could have been expected to turn out as reasonably well-coping, adaptive children in the school population without any intervention. Intervention under these specific circumstances, where risk has not been identified or assessed and no labelling has occurred, may be viewed as a primary prevention. Children who may have been at special risk were as likely to be assigned to experimental or control conditions as were children who may not have been at special risk.

Results of the HOPE experiment are, therefore, of particular importance for what they have to say about this home-oriented primary prevention strategy as a means of averting certain unfavorable outcomes. The long-term follow-up study was designed to examine this question.

Immediate Program Effects

For the era when the HOPE experiment was conducted (1968-1971), the staff took an unusually comprehensive approach to assessment of effects on children, while only mimimally examining effects on parents.

Parent Involvement in Children's Early Learning and Development

The study's results document a high rate of concurrent parent involvement in their children's learning and development. There was, unfortunately, no attempt to obtain correlated records on parents and children in order to determine how differing degrees or rates of parent involvement may have related to differential outcomes in children. The HOPE follow-up study is unable to remedy this information gap.

Children's Performance on Cognitive Measures

An individually-administered criterion outcome test was developed, the Appalachia Preschool Test (APT). This is now available to qualified users with supporting documentation from the Educational Testing Service's Test Collection, Princeton, New Jersey. The APT went through various editions, as the curriculum was refined. Throughout the process and the various versions, however, it is appropriate to think of the APT as a measure of early conceptual development.

The program's effects on children's APT scores, as well as on all other measures, were documented systematically in a series of technical reports. A representative summary report from this series provides the essential

highlights of the final program year 1970-1971 (Bertram, Hines, & MacDonald, 1971). It also reports on program effects on the Peabody Picture Vocabulary Test (PPVT), the Illinois Test of Psycholinguistic Abilities (ITPA)-Revised, and the Frostig Developmental Test of Visual Perception, as well as on some non-cognitive measures. A preliminary study established the acceptability of these measures with this population in the sense that their performance approximated the tests' norms.

The effects upon participants may be summarized with reference to four groups of children: 1) those who received no treatment (i.e., an outside-of-community control group; 2) those who received TV only (i.e., a within-community control group which could receive the TV signal but was provided no other treatment); 3) those who received TV, including the printed support materials, plus weekly home visitation (TV-HV); and 4) those who received TV plus home visitation plus the weekly group experience (TV-HV-GE or Package).

Cognitive effects for the various individual measures were as follows: a) APT--Package and TV-HV were equal, both significantly outperforming TV only, and TV only significantly exceeding the outside control group; b) PPVT--Package and TV-HV about equal, both significantly exceeding TV only and outside control, which were not different from each other; c) IPTA--the groups differed on three subtests only, with the patterns of differences not being clearly interpretable, since they varied for each subtest; and d) Frostig--the groups differed on four of the subtests and total score (were not different on figure-ground discrimination), with the four groups always ordered from highest to lowest as Package, TV-HV, TV only, and outside control (Bertram, Hines, & MacDonald, 1971).

The overall set of results was similar for each year of the program, lending support to the overall conclusion that participation in more components of the program resulted in greater immediate effects upon the children's

cognitive development. The importance of having within-community (TV only) and outside control groups was also evident, showing that exposure to TV alone resulted in a wide range of immediate cognitive gains.

Children's Curiosity and Social Development

To measure children's gains in other areas, special situations were arranged in which their behavior could be observed directly. In the first of these, a small room was furnished with familiar children's toys, along with an unusual device which the children could manipulate to produce varied lighting and sound effects. A random sample of children from the three within-community groups (Package, TV-HV, TV only) was selected for observation. Each child, accompanied by his or her parent, entered the room. No one else was present. The amount of time spent interacting with the various objects was recorded for 15 minutes, and the percentage of time spent with the unfamiliar device was used to estimate the child's curiosity or urge to learn. The Package children, by this index, showed the greatest curiosity; the TV-HV children manifested more curiosity than the TV only group. A sex difference also appeared, with boys displaying significantly more curiosity (Bertram, Hines, & MacDonald, 1971).

Immediate program effects upon social interaction were analyzed for a random sample of children from the same three groups by systematically coding their social behavior from videotaped recordings. Recordings were made of groups of from two to four children manipulating a battery operated train and other play materials. The Package group initiated more constructive statements than TV-HV, who in turn surpassed TV only. The Package group showed the most enthusiasm and were the least inclined to withdraw from the task or to become distracted, whereas the TV-HV children were least inclined to stop working but were most likely to become distracted; TV only children tended to

withdraw from the group, either to work alone and/or for security. TV only children met antagonism with antagonism and often initiated antagonistic behavior. The TV-HV children appeared to be more helpful than the Package children.

The preceding group differences tended in general to follow the pattern, from greatest to least social skills: Package, TV-HV, TV only (Bertram, Hines, & MacDonald, 1971). These findings generally support the expectation that the group experience would facilitate social skills development in these children. Contact with the home visitor also had a clear effect on social skill development.

Effects on "At Risk" Children

Some recent reanalyses have been made of the original HOPE data by dividing children into groups of differing ability level, based on their average PPVT scores from two separate administrations. When the sample was thus partitioned into three groups, the following ability ranges resulted: below average (BA, IQ 91.5 and below; lower average (LA), IQ 92-102.5; and higher average (HA), IQ 103 and above. The first of these groups, BA, was considered an "at risk" group for later poor school performance. Therefore, the general question raised in the following analyses was how these "at risk" children did in the HOPE experiment in comparison to the LA and HA groups (Gotts, in press).

The comparisons were made for the three ability levels (G), the measurement occasions (T) (pre-test scores versus post-test scores) and their interactions (G X T). To make the results applicable to the entire experiment, the BA, LA, and HA groups were drawn at random in balanced proportions from the Package, TV-HV and TV only groups. That is, BA, LA, and HA groups contained proportionalized numbers of children from all three treatments.

The resultant findings were required to hold up, therefore, for a composite of all treatments. In this type of analysis, the interaction term (G X T) was of special interest, because it reveals the extent to which the "at risk" group's (BA) performance from pre-test to post-test parallels that of the other groups (LA and HA).

For the Frostig Test total scores, the (G X T) interaction was non-significant (F=.110, p=.89, df=2,104); for the ITPA, (G X T) was non-significant (F=.740, p=.51, df=2,104); PPVT (G X T) was non-significant (F=.420, p=.66, df=2,104); and APT (G X T) was significant (F=3.290, p=.04, df=2,104). The findings for the Frostig, ITPA, and PPVT all suggest that the "at risk" BA group of children made pre-test to post-test gains which paralleled those of the LA and HA groups. The HOPE experiment seems, therefore, to have stabilized them relative to their more mentally-favored age mates, reducing thereby their "at risk" status. Only on the APT was this pattern of findings not supported. For the APT, the BA and LA groups had completely parallel gain lines, but the HA group gained at a significantly more rapid rate in conceptual skills than did either of the other groups (Gotts, in press).

Enduring Program Effects: Long-Term Follow-Up

As was noted earlier, AEL has performed a comprehensive follow-up study of children and parents from the original HOPE experiment. The results will be reported over the next two to three years; it will take that long because of the study's scope and the amount of data to be analyzed and reported.

Effects on Families

AEL has developed a measure of parental "generativity" (Gotts & Paul, 1979) based on the theory of Erik Erikson (1963) as one procedure for examining possible enduring effects of the HOPE treatment. Generativity was assessed

by rating parents' stories regarding 45 pictures of developmental situations involving children from five age levels. Their stories about pictures of infants were rated for facilitation of trust; toddlers for autonomy; preschoolers for initiative; elementary school age children for industry; and secondary age children for identity (Gotts & Paul, 1979). The sum of these five scores was used as one index of parental generativity. The measure's internal consistency has been checked with a validation sample (Gotts, 1980) and found to be acceptable (alpha =.83). Its validity appears to be high, in terms of its ability to differentiate between the parents of coping and non-coping children whose status was determined from judgments made by their teachers (Gotts, 1976). That is, within the validation sample, low generativity parents had 10 non-coping and 6 coping children and high generativity parents had 3 non-coping and 11 coping children. The chi square value associated with this distribution is 5.129 ($p<.05$). Parental generativity, measured when the children were in secondary school, was correlated with their grade point averages for grades 1 through 4. All of these correlations were significant and positive. Parents higher in generativity also expressed greater current satisfaction ($r=.51$, $p<.01$) in their children's school performance (Gotts, 1980). Parental generativity was not, however, affected by the treatment. Other variables from the same interview were useful for differentiating between the experimental and control families, as described in Appendix G.

The other results reported in Appendix G for the indirect parent interview will be summarized here. Ratings of the parent stories were also completed for the 45 pictures using six additional rating scales (Gotts & Paul, 1979): 1) accuracy of perception of child development situations; 2) positiveness and duration of time perspective for story outcomes; 3) positiveness of affect and congruence of affect with story outcomes;

4) conceptualization of motivation relative to story outcomes; 5) recognition of teaching and learning opportunities in the 45 child development situations; and 6) understanding of the characteristics and reactions of children at the various age levels. All six of these ratings were found to be highly internally consistent (reliable) across the total of 45 stories and moderately reliable for all six categories within each of the five child age levels (i.e., the 30 Cronbach alpha coefficients were generally acceptable to highly acceptable).

Parents in the experimental and control groups differed from one another for ratings across the 45 pictures for categories 1, 2 and 5. Moreover, they differed on these three categories for the subsets of pictures representing each of the five child age levels. Differences were found for the remaining categories, but they were not consistently found across age level, and were not, therefore, as useful for developmental comparison. The differences found for categories 1, 2 and 5 suggested that the experimental parents had, as a result of their experience in HOPE, become more accurate in their perceptions (1), developed more positive and long-range perspectives in child outcomes (2), and come to recognize more teaching-learning potentials in child development situations (5). Thus, while they were not affected in generativity, they did develop specific skills for recognizing and dealing with a wide array of matters essential to the development and learning of both children and adolescents.

In the body of the Final Report (pages 17-27) the direct parent interview is described and findings are reported for experimental versus control families. These may be summarized as follows. The experimental mothers described themselves as having higher levels of aspiration and higher expectations for their children academically, plus greater satisfaction with their children's academic progress. The experimental mothers also indicated that they provided

more support for learning at home. On the High/Scope Home Environment Scale, as adapted by AEL, experimental families were found to be providing a home environment that is more supportive and stimulating of learning. Other measures derived from the direct (self-report) interview were correlated in many interesting ways with child outcomes but did not differentiate between the experimental and control families.

A special substudy was performed of the demographic indicators from the direct parent interview. The purpose was to derive on "Index of Favorability" of the family demographic profile relative to child outcomes. To accomplish this analysis, parents were divided into criterion groups of those whose children were a) coping and b) non-coping, as measured on a 138-item checklist completed by their teachers (Gotts, 1976). The groups thus formed were examined by multiple discriminant analysis in two ways. First they were compared using four SES measures only. Then they were compared using a fuller set of demographic indicators, including the same four SES measures.

Within this rural population, the SES indicators education and occupation of head of household are highly intercorrelated and, consequently, redundant of one another. In consequence only one of these, occupation, was entered into the discriminant solution. Income was the second variable entered. Subjective SES (i.e., reference group) is related to almost nothing in this population and was, therefore, excluded from the discriminant solution. Coping children had parents of higher occupational ($p=.01$), educational ($p=.02$), and income ($p=.03$) levels. Using the variables occupation and income, parents of coping and non-coping children were highly differentiated from one another ($p=.0053$). Finally, the correctness of classification (hits) was tested for the two-variable discriminant solution. Parents of coping children were accurately classified 62.1 percent of the time; those of non-coping children

61 percent of the time. This indicates that SES information is a significant but far from perfect predictor of child outcome for this population.

The second discriminant function selected and entered the following variables in the following stepwise order: a) degree of urbanization where family resides; b) number of adult-oriented organizations to which parent belongs; c) health of parent; d) parent education; and e) occupational mobility of parent. It is interesting to note that when other family demographic indicators were considered, neither of the previously selected SES measures added sufficiently to the equation to be selected, and parent education emerged as the fourth most important variable in this solution. Other variables which did not add to the efficiency of differentiating the groups were: marital status, age of mother at marriage, geographic mobility, family size, religious participation, age of mother when child was born and number of child-oriented organizations to which the parents belong. The foregoing predictors had all been selected because prior research suggested that they relate to child outcomes in important ways.

The combination of the five variables in the discriminant solution differentiated significantly between the two groups of parents ($p=.0085$). An intriguing difference occurred in the success of classification, compared with the SES only solution. Now the parents of coping children were more accurately detected (72 percent correct), whereas the parents of non-coping children were detected at rates much poorer than chance (35.6 percent correct only). Thus the overall classification success with the SES-only equation was better. These two results suggest that unfavorable child outcomes (i.e., non-coping) are indeed predicted by SES, while favorable child outcomes (i.e., coping) are more adequately represented by other family demographic indicators.

The preceding would suggest, contrary to much respected contemporary

opinion, (see review in Gotts, Spriggs & Sattes, 1979), that dealing only with the problem of basic family support is not an adequate or sufficient approach for impacting favorably on the lives of children. Instead one must consider a more complex approach in which basic family support is a first step that can help to avert unfavorable outcomes but cannot assure positive outcomes. Positive outcomes require a second step which attends to other factors within the family which may impact upon child outcomes. These well may vary from population to population.

Four of the earlier-mentioned variables (i.e., urbanization, parent health, parent education and occupational mobility) related to child outcomes in the manner predicted from prior research findings. That is, more urban residence (compared to isolated rural), higher parent health (and probably vitality), higher parent education, and greater upward occupational mobility were associated with favorable child outcomes. Prior studies have evaluated "community involvement" or participation by the total number of organizations to which the parents belong. Because participation in organizations may be self-oriented more than family-oriented or child-oriented, AEL summed such participation into two subscores: number of adult-oriented organizations and number of child-oriented organizations. This led to the interesting finding in this discriminant analysis that the number of adult-oriented organizations to which the parents belong relates negatively to positive child outcomes. This once more underlines an earlier point, namely, that demographic analysis must become more complex if it is to afford insights into useful approaches to supporting family life in ways that will impact favorably on children.

During early 1981 AEL will perform additional analyses on the HOPE Follow-Up Study data. The two demographic "favorability" indices just discussed will be used as covariates within those analyses to judge among

various causal explanations of relations between the parent interview measures on the one hand and the child interview measures and school data on the other.

Effects on Children's School Performance

In the preliminary findings, student grade point averages of home-visited children (Package and TV-HV) were compared with those of children who did not receive home visitation (TV only). These groups differed significantly at grade 1 ($F=5.097$, $p=.025$) and grade 2 ($F=5.831$, $p=.017$), with the former group receiving higher grades. For grades 3 and following, school grades were not significantly different between these comparison groups. Another type of analysis was performed after the school data had been summarized, as reported later below.

In another comparison of the home-visited children with the TV only group matched samples of 80 of the former group and 40 of the latter group were included. Between grades 1 and 9 only 4 of the former group of children repeated a grade, whereas 10 of the TV only were retained in grade. The chi square value associated with this difference is 10.350 ($p=.01$) Home visitation seems, thus, to have reduced the rate of retention in grade from about 25 percent (TV only) to 5 percent by the addition of home visitation. It is worth noting that there was a very low use of special education in these rural schools in the early 1970's. Retention in grade appears to have been used in place of special education.

A number of problems in the analysis of the school data were corrected during 1980 by creating summary statistics for each child for a) school attendance, b) teacher grades in basic skill areas, c) overall teacher grades, d) achievement test results for grades three and six, and e) ability test results for preschool and first, third and sixth grades. For the first three

areas (a - c), the relevant data were summarized for each child for as many data points as were available for grades one through six. For all variables, appropriate corrections were made for missing data points. Since variables d and e could be converted to standard score form that would be comparable to national norms, this was also accomplished in the transformations. Where appropriate, means, standard deviations, and slopes of each variable were computed for each child.

In general, analysis of the standard deviations and slopes revealed that they did not differentiate between the experimental and control groups. Simple analysis of variance tests on the child means, however, revealed consistent differences between the groups. These differences are summarized below and in Table I, which also contains results for the following section.

Over the first six years of school the HOPE children had better attendance records ($p<.01$), higher teacher grades in basic skills areas ($p<.01$), and were far less likely to have been held back a grade in school ($p<.01$). In fact, retention in grade was reduced from 25 percent to 5 percent by HOPE. On statewide testing, the HOPE children demonstrated higher ability ($p<.01$) and higher performance on achievement tests in basic skills areas ($p<.01$). Even more impressive is the fact that the HOPE children exceeded national norms on ability and achievement, whereas the control children fell below national norms as is characteristic of the rural school systems from which they came.

(Table I - See Page 28).

Effects on Children's Social and Emotional Adjustment

The School Behavior Checklist (Gotts, 1976), was used to determine the children's social and emotional adjustment in school. It was scored in the standard manner. Results are summarized on the next page.

TABLE 1

LONG-TERM EFFECTS OF HOPE ON THE

SCHOOL CAREERS OF WEST VIRGINIA CHILDREN

	Group Means		
Indicator or Measure*	HOPE	Non-HOPE	Probability of Difference
Standard School Records (Grades 1-6):			
School Attendance	95.42%	93.68%	.0011
Teacher Grades--Basic Skills	3.92**	3.65**	.0035
Failed a Grade (Retained)	5%	25%	<.01
Statewide Testing Results (Gr. 3 & 6)			
Ability Level	.13***	-.16***	.0047
Achievement: Basic Skills	.05***	-.28***	.0055
Teacher-Completed Checklist (Secondary Level):			
Disorganized Classroom Behavior	1.66	3.28	.034
Symptoms of Depression	.10	1.21	.016
Aggressive Behavior	3.78	10.03	.019
Responsible Behavior	14.16	8.32	.0004
Significant Problem Behaviors	28%	40%	.05

* Averaged over the times or grades indicated

** Where A=5, B=4, C=3, D=2, F=1

*** Converted to standard score form; if minus sign appears, performance is below national norms.

Home visited children were significantly lower (M=1.66) on personal disorganization than TV only children (M=3.28) (F=4.580, p=.034). TV only had more symptoms of depression (M=1.21) than home visited children (M=.104) (F=6.014, p=.016). See Table 1.

An epidemiological model of analysis can be used when considering the frequencies of coping (i.e., those who are identified by teachers as cooperative, responsible, etc.) and non-coping children in these groups (Figure 1). Using this approach 62 (28 percent of the home visited and 33 (40 percent) of the TV only children would be classified as non-coping, while 159 (72 percent) and 50 (60 percent), respectively, classify as coping. This overall distribution has a chi square value of 3.847 (p=.05), suggesting that the home-oriented portion of the treatment resulted in an absolute reduction of mild behavior disorders by about 12 percent. This represents a reduction in the incidence rate of 12/40 or about 30 percent (Gotts, 1980).

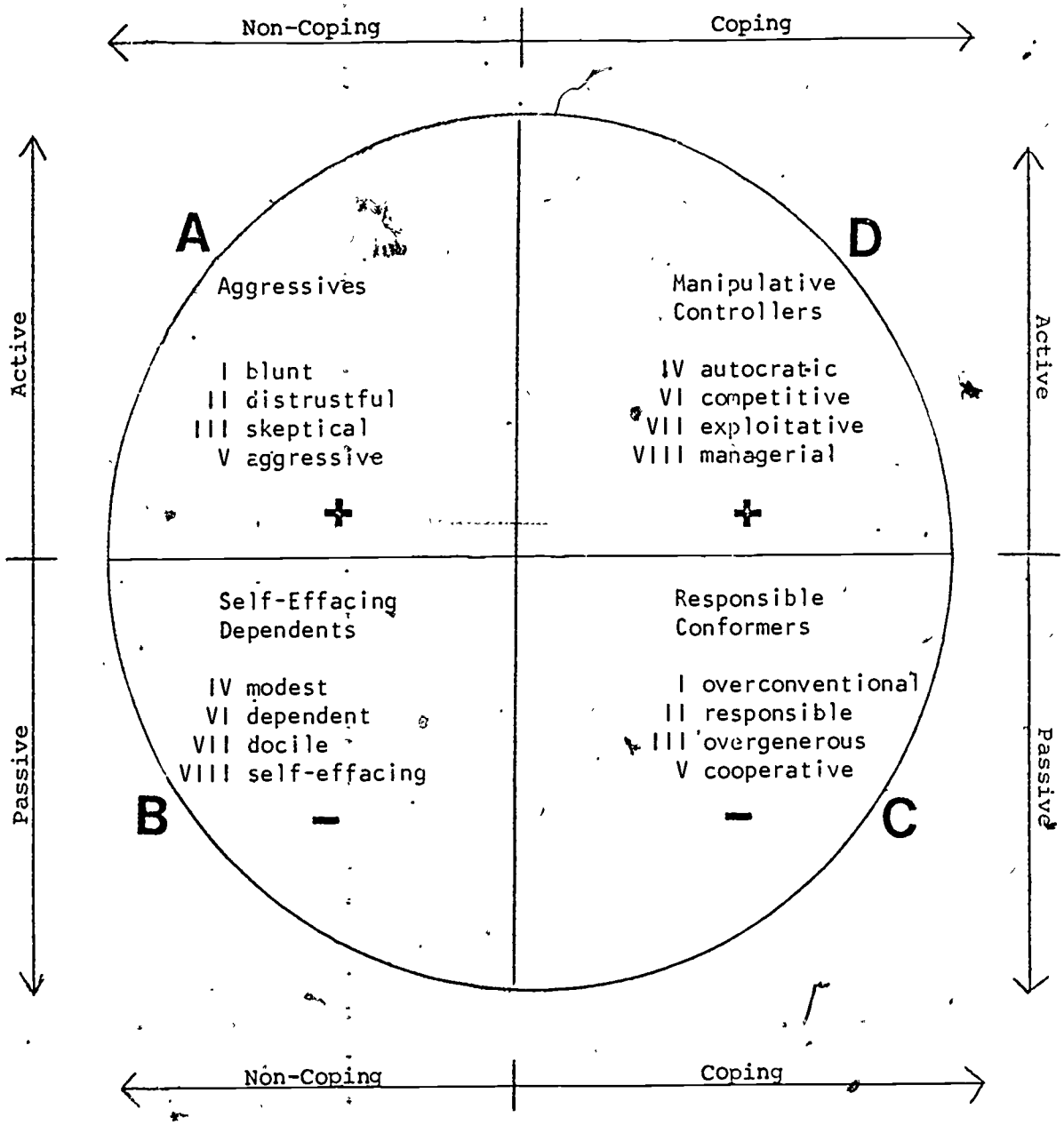
Unanswered Questions

Other questions which were explored used the Tasks of Emotional Development (TED) Test (Cohen & Weil, 1975), which was administered to over 200 of the children in the sample. The TED Test was to permit comparisons to be made of home visited and TV only groups on other important dimensions of social and emotional development. The TED Test protocol was scored using an Eriksonian rating system. Each story was rated on a five-point scale as to whether it reflected high (5) or low (1) trust, autonomy, initiative, industry, and identity. Each of the 13 TED pictures was further assigned to the Eriksonian category or categories upon which its stories typically and primarily focused. The ratings were then summed for the primary focus categories across the pictures and labelled psychosocial maturity for this total score.

The foregoing procedure had previously been shown to produce reliable scores for elementary school-age children in an unpublished dissertation

Figure 1

Typology of Children's In-School Interpersonal Behavior Styles



Source: Gotts, E.E., Phillips, B. N., & Adams, R. L., Journal of School Psychology, 1968-69, 7 (3) 54-62.

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study, but with the present sample of rural adolescents, the scores were not reliable. Whether this failure to replicate is due to differences in the samples age levels, to the fact that the prior sample was non-Appalachian, or to other factors will require further study. In early 1981, other scores will be assigned to the children based on their TED Test stories, and these will be analyzed for their psychometric properties and then used to compare the experimental and control groups, if appropriate.

A direct (self-report) child interview was also administered. A number of technical problems have been encountered with this new measure around the issue of handling missing data points within its various brief scales (i.e., these are typically five or less items each in length). A special computer program has now been written to handle these difficulties. Consequently, it will be possible to analyze the direct child interview results early in 1981 under a "carryover" arrangement at no additional cost to the contract.

Summary of Study's Scope and Effects

The HOPE experiment was and remains a landmark study of home-oriented preschool intervention as primary prevention. The study's unique character consisted of: (a) a well-defined intervention directed toward serving (b) rural families of preschool children (c) without regard to family income level or restriction to particular segments of the rural population and with (d) families being representatively included and randomly assigned to conditions and (e) children's progress being comprehensively evaluated in terms of the intervention's objectives. The experiment was, moreover, subsequently replicated in additional rural communities in five states.

Now, as befits the original experiment, an unusually comprehensive long-term follow-up study is being completed. Ultimately enduring effects of the intervention will be analyzed for parents, child participants, and their younger siblings. Many of the data have been examined and more remain to be examined. It is, nonetheless, clear from the varied effects studied thus far that this relatively circumscribed intervention has had far reaching effects upon the HOPE children.

The HOPE process of early intervention has been made widely available by commercial publication of the materials required to operate each program component. Collectively, these materials are called "Aids to Early Learning." Their usability and effectiveness were evaluated in typical early childhood program settings in 14 states in 1976-1977 (Gotts, 1979).

Implications for Working with Rural Parents

The first group of implications relates to the ecology of rural communities. As was indicated earlier, they have: (a) low tax bases (and low revenue-sharing allocations); (b) problems associated with isolation; (c) few facilities that pass state health, fire, or professional accreditation standards for child care; and (d) special strengths associated with the extended family system. The value of using the original three HOPE components (i.e., television, paraprofessional home visitors, and mobile facilities) to respond to this rural ecological configuration has been discussed in terms of an overall rationale. Not only has AEL's experience attested to the efficacy of this multi-components approach; the entire experience of the national Home Start option, within Head Start, is reassuring regarding the appropriateness of some combinations of these intervention methods. The special contribution of daily television to this mix can be inferred, however, only from the HOPE experiment and its replications. These

methods represent cost effective ways of intervening in rural areas, as was discussed earlier.

A second group of implications relates to the demography and psychosocial interior of rural families and to the danger of creating damaging social mythologies about people. Unlike HOPE, Head Start and nearly all other early interventions have singled out the children of low income families for segregated services. This approach is based on the 1960's "cultural disadvantage" myth that only children of poor families need or benefit from such services--and that all poor children do need special services--and that such children alone in isolation from the mainstream. The economic cutting points typically used for admission to such programs exclude many children of the working poor, as well as lower middle class and middle class children, from participation. Moreover, such programs and their participants become thereby strongly associated in the public's mind with poverty--thus serving to reinforce labelling and to further the process of stigmatizing both program and participant with an aura of incompetence and inferiority. This process ultimately results also in segregation of those who deserve the opportunity to become socially integrated before they tackle their transition into formal schooling.

HOPE, on the contrary, sought to include together all rural children who would subsequently enter the same local school--i.e., this was done irrespective of family socioeconomic status. In this manner, the process of social integration was encouraged; children did not need to be labelled as poor to receive services; and the process of stigmatizing those served was avoided. Judging from the results discussed earlier (Gotts, in press), this approach furthered the competence of children of all ability levels and was especially effective in preventing the usually observed progressive erosion of tested competence in children who were initially of low ability level. It may further be assumed--which our observation suggests is the

case--that the self-esteem needs of rural children and parents do not differ from those of others from different life circumstances. Thus, though they may be poor, they would prefer not to be related to as "poor." They value self-respect and want to be known and related to as individuals. In this connection, the use of trained local paraprofessionals as home visitors has much to commend it. Our experience suggests that local paraprofessionals can readily establish relationships with parents that focus on the individual needs of their children and of themselves. When, on the other hand, an outside professional enters a rural home, a host of other issues is likely to be introduced, some of which involve both the client's and professional's having to work through the issue of their differential social status.

A third group of implications arises from the scarcity of services in rural areas. The needs of non-urban communities are not only different, they are greater than those of urban areas judging by a number of indicators (Tamblyn, 1973). Median income is lower, participation in any kind of preschool education is lower, educational level of adults is lower, sub-standard housing is prevalent, and the incidence of disablement among heads of households is higher. Poor transportation is an endemic problem which hinders reception of services of all kinds. Poor health care, high infant mortality rates, chronic disability, and the like are harsh realities which directly affect both access to and effectiveness of any kind of parenting services. All of this reminds one of the familiar complaint about "going out to drain the swamp, only to find you're up to your elbows in alligators." From these facts, it is evident that large quantities of traditional services can be poured into a rural slum with little noticeable impact. It is only by learning to build upon the "hidden" resources there that one can make headway. The resources which HOPE sought to develop were family strengths, community cohesiveness fostered by parent and paraprofessional working together, and the capacities of rural people to recognize and appreciate

the significance of small tokens of progress evidenced in their children's development. HOPE was, further, delivered on a multi-county basis administratively and was tied to what is the strongest local resource in most rural communities, the local school system. In this manner, existing resources were brought to bear and no major new infusion of resources was attempted.

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Footnotes

[1]The work performed herein was performed pursuant to one or more grants from the National Institute of Education. However, the opinions expressed herein do not necessarily reflect the position or policy of the National Institute of Education or the Appalachia Educational Laboratory, and no official endorsement by the National Institute of Education or the Appalachia Educational Laboratory should be inferred.

[2]Non-urban and rural are used interchangeably to refer to unincorporated areas and to incorporated areas having a population of less than 2,500.

APPENDIX F

Recommended Methods of Studying

Rural Appalachian Families

Deliverables SIX and SEVEN

RECOMMENDED METHODS OF STUDYING RURAL APPALACHIAN FAMILIES

Edward E. Gotts

The following discussion is designed to provide the educational practitioner with a perspective for decision making regarding the assessment of parenting needs and the evaluation of parenting program effects. This is accomplished by considering first some contemporary forces which are influencing schools to become more involved with parents. Three of these forces are reviewed briefly: (1) the strength of evidence regarding parenting program effects and parental influences on the lives of their children and teen-agers, (2) legislation calling for parent involvement, and (3) social changes which are affecting both families and schools. Second, the measurement of parent needs and of program effects are discussed and particular measures are examined.

Growth of Parent Involvement Efforts

Recent studies and reports have strongly confirmed the value of school programs which involve parents in meaningful ways (a) in schools and (b) in their children's learning and development (for exam[illegible] see: Brandt, 1979; Bronfenbrenner, 1974; Comptroller General, 1979; Education Commission of the States, 1979; White and Others, 1973). While the evidence supports the foregoing statement most clearly for early childhood efforts (i.e., at preschool and primary grade levels), there is also direct evidence of effectiveness of home-oriented programs across the elementary school years.

Satisfactory evidence regarding such "program" effects is scanty at the secondary level, although research suggests that parental effects continue to be important to children's mental functioning and school progress during the secondary school years (Walberg & Marjoribanks, 1973; 1976). Conger's (1977) careful review of evidence also confirms the influence of home life in the secondary school years on (a) staying in school and graduating; (b) successful transition from high school into the

world of work or higher education; (c) moral development and delinquency; (d) alcohol and drug use; and (e) problems of mental, emotional, and physical health. Thus, although scientifically validated evidence is lacking of effective secondary school-home partnership programs, the need and potential for developing such programs is exceedingly well documented.

The preceding considerations serve to point up one source of a growing interest in school-home partnership efforts -- namely, there is reason to believe that these efforts can improve significantly children's and adolescents' chances of receiving the full benefits of their educational opportunities. By definition this also means that such efforts can correspondingly increase the success of schools in fulfilling their most fundamental purpose: the education of all children.

Legislative Developments

Current interest in building school-home linkages also can be traced to a number of legislated roles for parent involvement in public schools. These roles have been described in a legislative review (Gotts, 1979) which analyzes both federal and state trends in laws and practices affecting parent involvement. Some examples of legislation include: the Child Abuse Prevention and Treatment Act (P.L. 93-247), Family Rights and Privacy Act, Head Start - Follow Through Act of 1979, Education Amendments of 1978 (affecting for example, Title I's Parent Advisory Councils, and implementing provisions of Title II the Basic Skills Act), and the Education of (All) Handicapped Children Act (P.L. 94-142) -- all of which have potential for impacting school practices relative to families.

Social Forces Affecting Families and Schools

School practitioners in many districts are keenly aware of the current dip in school enrollment which has resulted from a whole complex of social changes that have caused women to participate increasingly in the work force and to bear fewer children. Shrinking school enrollments have come at a time of serious and chronic inflation that has resulted in part from worldwide changes in the control and pricing of fossil fuel energy supplies. Taxpayers, faced by a gradually eroding national and personal standard of

living, have applied their concerns at one of the few available points of leverage: often voting down their local school bond levies. Tax dollars have, as a result, become precariously scarce in some school districts. In the face of such problems it is important to recall that some lines of evidence suggest that, irrespective of its influence on the achievement of children, parent involvement may positively influence community attitudes toward schools -- for example, see a report of B. D. Bowles' research (Little Things Make a Difference, 1979).

The annual study of public attitudes toward the schools may be used to study public reactions to various features of the present context of social change; the poll reflects people's reactions, for example, to statements (a) which describe or appraise the current state of the schools and (b) which propose various programs or other approaches for addressing today's educational issues. The most recent of these polls (Gallup, 1979) once more affirmed parental interest in having public schools provide training and information to parents to help them with their child-rearing responsibilities. This conclusion has been strongly supported in all of the most recent Gallup polls. One might well wonder on what other issues parents could agree by such a large margin on what they would like to see the schools doing today!

Measurement in Parent Program

The research literature in this area is enormous, as can be judged by a cursory examination of published measurement techniques (Straus & Brown, 1978). Whereas this abundance of measures means that much is available, the sheer magnitude is likely to confuse, overburden or overwhelm school practitioners who desire to measure parent needs and to evaluate parenting program effects. What is needed, consequently, is a framework or structure within which the practitioner can sort out the measurement issues. Such a framework has been developed (Gotts, Spriggs & Sattes, 1979) in the form of a classification system which represents parent-oriented programs and the particular focuses and goals which characterize them. Such a framework greatly reduces the number of measurement options which the busy practitioner must consider. The frame-

work effectively sorts existing programs, providing a basis for singling out those critical elements for which accountability mechanisms need to be in place (See Appendix B).

Parent Needs

The Appalachia Educational Laboratory (AEL) performed a national study in 1975-76 of parent education needs relative to the content experiences and the types of program presentations (e.g., film, group discussion, etc.) which parents of elementary school children might desire (Coan & Gotts, 1976). One product of this work was a highly usable questionnaire that could be completed by parents with minimum assistance, after it had been brought home by their children. This measure "Learning to be a Better Parent" is available in both English and Spanish versions. The instrument reliably measures parent needs in terms of six areas: Family Care, Child Growth and Development, Child Management, Self as a Parent, Treating the Child Like a Person, and Baby Care (Attachment A). These content areas readily translate into curriculum plans to meet parent needs through parent education in groups.

Parent needs can be measured in greater depth using an interview approach developed by AEL for a long-term follow-up study of a home-oriented program. This interview uses drawings of children and parents plus standardized questioning to examine the extent to which parents are able to support and encourage their children's development of: trust, autonomy, initiative, industry, and a sense of personal identity (Gotts & Paul, 1979). It measures, moreover, six areas of parental skills (See Appendix G). A study of the measure's reliability and validity have shown its value for use in individualized in-depth needs assessment (Gotts 1980). This same feature makes the interview useful for individual program planning. This measure can, moreover, be used in a test-retest design to evaluate the results of program experiences provided to parents.

In assessing parenting needs it is also desirable to have an inexpensive method of identifying those children whose in-school behavior suggests they may need special assistance. Such a measure has been developed over the past 15 years. It has been tested (a) in group form, for screening entire classrooms and (b) in individual checklist form, for evaluating

individual children (Gotts, 1976). The measure identifies a child's placement within a circumplex model (Attachment B) according to (a) inter-personal style and (b) whether the child is coping or not coping with the school environment. The 140 item scale also measures symptoms of anxiety and depression and the extent to which a child is well organized in schoolwork. In situations where parent education is used as a means of preventing school failure and behavior problems, this measure can be used to evaluate the program's success in preventing specified unfavorable child outcomes (e.g., prevention of behavior disorders).

We can also recommend from extensive experience another child measure, the Tasks of Emotional Development Test T.E.D. Test (Cohen & Weil, 1975) which provides a more in-depth measure of child needs in 13 essential developmental areas (e.g., peer socialization, self-concept, attitude toward achievement, etc.). The approach of the T.E.D. Test makes it particularly well suited to conjoint use with the Indirect Parent Interview (Gotts & Paul, 1979). The T.E.D. can serve as an especially sensitive measure of significant changes in children which result from help provided through the family.

Assessing Community Needs and Services

Planning for a parenting effort also may call for gaining a better understanding of the family-oriented services available in the community and schools. This can be accomplished with the Survey of Parenting Programs/Services (Snow, 1979b), which is based on a thoroughly tested method of community survey taken from AEL's Home Visitor's Kit. (The Kit, 1977, a three-volume set of materials, is available from Human Sciences Press, New York, New York 10011.) The Survey is a part of AEL's Regional Parenting Surveys: Base Sample Survey which is described in Appendix A. At another level of analysis, the Survey of Model Programs (Appendix B) procedure gathers more in-depth information on existing programs and services.

A related instrument which is used in conjunction with the Survey is the Parent Interview Schedule (Snow, 1979a). This interview examines parents' familiarity with and use of available school and community programs.

In addition, it explores individual parents' sources of help and assistance, among other variables. This instruments' use is, likewise, discussed in the Final Report (pages 5-9) and Appendix A.

The information provided by the two instruments described above can be of considerable value in decision making about whether and what kind of parenting program to initiate.

Special Research Measures

In addition to the measures already described, AEL has assembled and validated two special research measures: the Direct Child Interview (Spriggs, 1979) and the Direct Parenting Interview (Singh, Sattes & Gotts, 1978). These direct interviews provide parallel measures of children, from children and their parents, in the following vital areas, among others: level of academic aspiration and level of vocational aspiration, expectations of successes in academics and vocation, and satisfaction/dissatisfaction with performance. The interviews provide other useful information on the strength of the home learning environment, child rearing styles, and fundamental family characteristics (e.g., social status, educational attainment, family size, etc.). These measures appear to be of particular value for studying programs which seek to involve parents in ways that facilitate their children's levels of aspiration, and so forth. They are discussed in the Final Report (Pages 17-27) plus Appendix E.

Conclusion

The preceding discussion has emphasized (1) contemporary forces stimulating school-home partnerships and (2) parenting program measures for use in needs assessement, evaluation, planning, and special research applications. Such a brief presentation necessarily touches only upon the highlights of these measures and their potential applications. AEL has had experience with all of the measures cited and can confirm their usefulness and practicability for the stated purposes, when used in quite varied school and community settings. Our experience further confirms that local school personnel can be taught to use these measures effectively. Finally, they together provide a broad and reasonably comprehensive set of

tools to support administrative decision making. For additional discussion of these measures, see the Final Report (pages 34-40) of which this is a part plus Appendices A, C, E, and G.

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ATTACHMENT A
O.M.B. No. 51-S75060
Approval Expires: 6/30/76

LEARNING TO BE A BETTER PARENT

What to do: First, read what it says below about each thing you might learn more about. Then decide how much you feel you need or want to learn more about that. For example, if you feel you already know all or just about as much as you need or want to know about "How Children Grow and Develop," then mark the box Nothing More At All. However, if you feel you need or want to learn more about that, then you may wish to answer A Little More or A Lot More. Put a check mark (✓) in the box under A Lot More, A Little More or Nothing More At All for each question. We are interested in what you feel. You may, of course, feel that you need or want to learn more about some things, and nothing more about others. No one will judge you as a parent, whatever your answers are. If you do not want to answer a question, then leave it blank.

Name _____

My City & State _____

My Children's Ages (in years) _____

Name of Nearest Grade School _____

_____

	A LOT MORE	A LITTLE MORE	NOTHING MORE AT ALL
I. HOW CHILDREN GROW AND DEVELOP. How much do you feel you need or want to learn more about:			
1. Where you can find out about how children develop.	( )	( )	( )
2. What your child should be able to learn at his age, so as not to "push" your child too much.	( )	( )	( )
3. How children grow into special, one-of-a-kind people.	( )	( )	( )
4. How the world looks and sounds to your child, and how to help him learn about it.	( )	( )	( )
5. How your child's personality is formed.	( )	( )	( )
6. How your child learns to use his body by playing (runs, jumps).	( )	( )	( )
II. TAKING BETTER CARE OF YOUR BABY. How much do you feel you need or want to learn more about:			
1. What happens before the baby comes (what to eat; what drugs not to take; how long to wait before having another baby; things that can happen to the baby).	( )	( )	( )
2. How babies learn to talk (what the baby hears; what it learns from what you do and say).	( )	( )	( )
3. Helping the baby feel good (not too warm or cool; enough to eat; food that might upset the baby; giving the baby room to move around).	( )	( )	( )
III. TREATING YOUR CHILD LIKE A PERSON. How much do you feel you need or want to learn more about how to:			
1. Tell what children are doing by watching them.	( )	( )	( )
2. Help your child see and accept his or her own feelings.	( )	( )	( )
3. Show love and care to your child.	( )	( )	( )
4. Talk with your child about his problems and answer his questions.	( )	( )	( )
5. Help your child to behave when he starts to fight.	( )	( )	( )

	A LOT MORE	A LITTLE MORE	NOTHING MORE AT ALL
6. Help your child learn to get along with family and friends.	( )	( )	( )
7. Help your child see why rules are good.	( )	( )	( )
IV. TAKING CARE OF YOUR FAMILY. How much do you feel you need or want to learn more about how to:			
1. Pick things for the child's bed and for him to wear (so that they last and are easy to take care of).	( )	( )	( )
2. Find and take care of a home for your family (how to shop and pay for housing and furniture).	( )	( )	( )
3. Pick the right foods and take care of them so they will not spoil (fix meals that are good for your family's health).	( )	( )	( )
V. TEACHING AND TRAINING YOUR CHILD. How much do you feel you need or want to learn more about:			
1. What ways of teaching will work best with your child (the way you teach; use of books, TV).	( )	( )	( )
2. How to control your child by using reward, praise and correction in a loving way (how to help your child control himself).	( )	( )	( )
3. How to teach your child to be neat and clean and to show good manners.	( )	( )	( )
4. How to get your child to go to bed on time (and to rest or take naps).	( )	( )	( )
5. How to get your child to change from doing one thing to doing something else.	( )	( )	( )
6. How to plan your child's use of TV (picking TV programs, not watching too much TV).	( )	( )	( )
7. How to place your chairs, tables and other things so that your child will have room to play and learn (and keeping some things out of sight so your child will not want them).	( )	( )	( )
8. How to feed your child; teach him to feed himself; and make eating fun for your child.	( )	( )	( )
9. How to teach your child to dress and undress.	( )	( )	( )
10. How to help your child think for himself (choose what he wants to do; make plans).	( )	( )	( )
11. How to teach your child to tell right from wrong (to be moral).	( )	( )	( )
VI. KEEPING YOUR FAMILY SAFE AND WELL. How much do you feel you need or want to learn more about:			
1. How to keep your child from getting hurt (and how to give first aid).	( )	( )	( )
2. How to keep your child well (get shots and have the doctor check your child).	( )	( )	( )

	A LOT MORE	A LITTLE MORE	NOTHING MORE AT ALL
3. How to know if something is wrong with your child (is not learning; cannot walk well; cannot see or hear well).	( )	( )	( )
4. How to know when your child is sick (has a fever or says he hurts some place).	( )	( )	( )
5. How to pick things that are safe to play with.	( )	( )	( )
6. How to tell if your child is growing right (body size, height, weight).	( )	( )	( )
II. TAKING CARE OF THINGS AT HOME. How much do you feel you need or want to learn more about:			
1. Making good use of your time (plan your time for child care, house work, school or job, time for yourself and your friends).	( )	( )	( )
2. Getting good help with child care (day care, baby sitter, nursery school).	( )	( )	( )
3. How your child deals with the way that your family lives (people in the home, what they do together, how they get along).	( )	( )	( )
4. Finding help for people who don't take care of their children, or who hurt their children.	( )	( )	( )
II. YOURSELF AS A PARENT. How much do you feel you need or want to learn more about:			
1. Your own feelings and habits and how these help or hurt your child care (how they affect your child care).	( )	( )	( )
2. Your need to make your child mind you (how your own needs can affect how your child feels about himself, and your child's learning).	( )	( )	( )
3. Why your child will not mind you and how this bothers you (how to get over being upset).	( )	( )	( )
4. How to be sure that you are doing what is best for your child (or your worries about what other people think).	( )	( )	( )

What to do: Just as before, read what it says about each thing from which you can learn. That is, if you think you would enjoy learning about being a better parent from "reading books," then you may wish to answer A Lot or A Little. But if you would not enjoy learning from "reading books," then mark the box Not At All. You may, of course, think that you would like to learn from some things and not from others. Put a check mark (✓) in the box under A Lot, A Little or Not At All for each question.

	A LOT	A LITTLE	NOT AT ALL
IX. HOW TO LEARN ABOUT BEING A BETTER PARENT. How much would you like to learn about being a better parent from:			
1. Reading books.	( )	( )	( )
2. Talking with parents in group meetings.	( )	( )	( )
3. Watching a special TV series.	( )	( )	( )

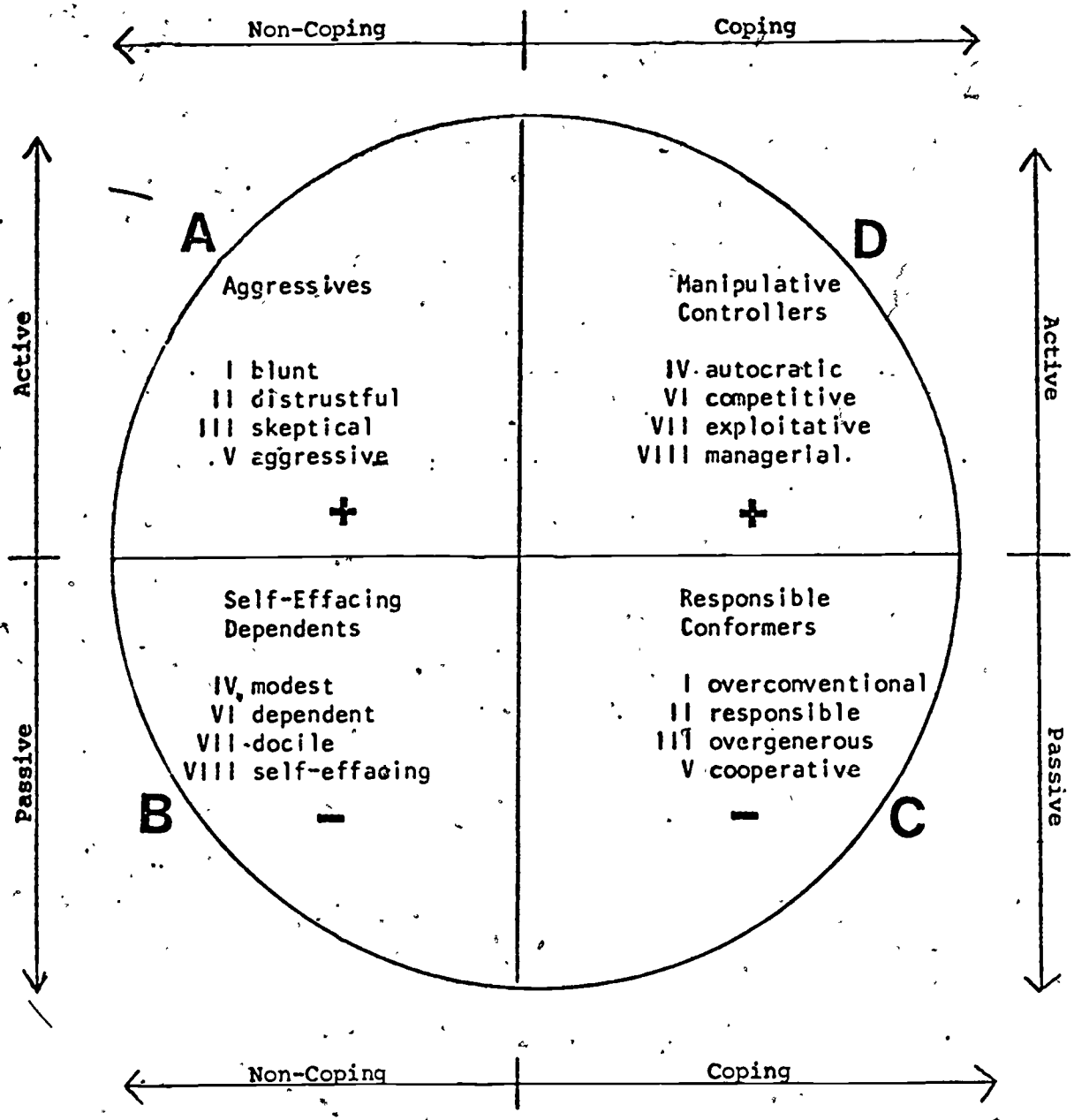
	A LOT	A LITTLE	NOT AT ALL
4. Seeing movies near my home (at a school).	( )	( )	( )
5. Having a person visit my home and talk with me each week.	( )	( )	( )
6. Seeing slides and hearing a person tell about them.	( )	( )	( )
7. Reading about this in magazines or in small newspapers (4 to 8 pages long).	( )	( )	( )
8. Hearing a special radio series.	( )	( )	( )
9. Listening to records or tapes.	( )	( )	( )
10. Playing games that teach me to be a better parent.	( )	( )	( )

On TV or radio or in the movies, how much would you like to learn from:

1. A funny show (humor, comedy, jokes).	( )	( )	( )
2. A talk show with well known guests and parents.	( )	( )	( )
3. Stories about real people (not humor).	( )	( )	( )
4. Special stories done by actors (not humor).	( )	( )	( )
5. An M.D. (doctor) or other expert.	( )	( )	( )
6. A show that goes into real people's homes.	( )	( )	( )

X. OTHER IDEAS. What else do you think you need or want to learn more about in order to be a better parent? Print so that your ideas will be easy to read.

Typology of Children's In-School Interpersonal Behavior Styles



Source: Gotts, E.E., Phillips, B. N., & Adams, R. L., Journal of School Psychology, 1968-69, 7 (3) 54-62.

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APPENDIX G

Measuring Parental Generativity:

Indirect Parent Interview Findings

Deliverable EIGHT

MEASURING PARENTAL GENERATIVITY:

INDIRECT PARENT INTERVIEW FINDINGS

Edward E. Gotts

This Appendix relates to Scope of Work EIGHT in which AEL proposed to complete its theory of parenting by particularizing it to developmental levels and to the specific developmental situations embodied within the 45 pictures of the indirect parent interview. This portion of work was essentially completed when AEL prepared and transmitted to the N.I.E. earlier in FY 80 "Attachment A to Manual for Rating Indirect Parent Interview. Criteria and Considerations for Eriksonian Scoring of Stories Associated with Particular Pictures."

Attachment A, as referenced above, has now been bound into the Manual for Rating Indirect Parent Interview. It makes explicit for each picture how stories are to be construed in terms of their implications for Eriksonian interpretation. The scientific contribution of this work may be stated as follows:

> A relatively abstract statement of parental influences on children (Erikson's theory) has been linked in specified ways to 45 ecologically representative developmental situations (the pictures used in the indirect parent interview) in an explicit manner by 45 interpretive statements (Attachment A to the Manual) which provide an interpretive framework for judging the content of specific parent stories in relation to the theory.

It has been possible during 1980 to go beyond the preceding conceptual framework by putting it to an empirical test with ratings of interviews with somewhat over 200 parents who are representative of a four-county area of southern West Virginia. The results of the internal consistency analyses are reported first, followed by findings regarding the validity of the rating scales

The internal consistency reliability coefficients reported here have been essentially replicated with an independent sample of 34 parents from out-

side the HOPE Follow-Up Study area, so considerable confidence can be placed in the stability of the scales across differing parent populations.

Before examining these results, however, it will be helpful to review the meanings of the several rating scales. First, ratings were performed of parents' facilitation of their children's development of trust, autonomy, initiative, industry, and identity. The sum of these five subscores is called generativity (See also Appendix E, pages 20-22). Subscores for each age level and total scores across age levels were also computed for: 1) Perception -- accuracy of perception of child development situations; 2) Outcome -- positiveness and duration of time perspective for story outcomes; 3) Affect -- positiveness and congruence of affect with story outcomes; 4) Motivation -- conceptualization of motivation relative to story outcomes; 5) Teaching/Learning -- recognition of teaching and learning opportunities in the 45 child development situations; and 6) Comprehension of Development -- understanding of the characteristics and reactions of children at the various age levels. Reliabilities for these scales and subscales appear in Table I.

Experimental and control group mothers did not differ for overall Eriksonian Generativity scores nor for any of the five subscores of this scale. Descriptively, the grand means for items were: trust (3.58), autonomy (3.06), initiative (3.50), industry (3.70), identity (3.61), and overall generativity (3.49). All except one of these means are suggestive that parents in this population facilitate their children's development. The single exception is autonomy, for which the total group grand mean is near the neutral point (3.00). This finding generally fits the description of Appalachian parents as being ambivalent about affording their children much autonomy, because they hate to "give up their babies." But contrary to that stereotype of parents desiring to keep their parent-child relations at an infant level is the fact that the industry score is the highest of the group -- suggesting a strong support of a work ethic as being an equally salient characteristic of these parents.

Groups differed on the perception category at the various age levels as follows for the experimental versus control group: trust (m = 1.68 vs. 1.83), autonomy (m = 1.62 vs. 1.94), initiative (m = 1.55 vs. 1.81),

TABLE I

Cronbach Alpha Coefficients (Internal Consistency Reliabilities) for The Indirect Parent Interview Rating Scale

	Trust/ Infants	Autonomy/ Toddlers	Initiative/ Preschoolers	Industry Elementary Age	Identity/ Secondary Age	Total Across Age Levels
Eriksonian Generativity	.60	.66	.68	.62	.58	.87
Perception	.71	.82	.89	.74	.82	.94
Outcome	.71	.78	.85	.84	.87	.95
Affect	.66	.68	.68	.58	.63	.87
Motivation	.76	.76	.84	.80	.86	.94
Teaching/ Learning	.77	.83	.89	.84	.88	.96
Comprehension of Development	.80	.86	.85	.78	.86	.95

industry (m = 1.56 vs. 1.81), and identity (m = 1.63 vs. 1.78). For the sum of these five categories the means were 1.61 vs. 1.83. A score of 1.00 would mean "very adequate perception" and 2.00 "generally adequate perception," showing that the experimental parents more accurately perceive these child development situations.

On the outcome variable, the results were as follows: trust (m = 2.39 vs. 2.66), autonomy (m = 2.35 vs. 2.73), initiative (m = 2.36 vs. 2.66), industry (m = 2.38 vs. 2.62), and identity (m = 2.43 vs. 2.66). The grand means across all five categories were 2.38 and 2.67. A mean of 2.00 means "generally appropriate outcome" and 3.00 means "marginally appropriate outcome." It can be seen that the experimental group's mean leans toward the former definition and the control group's toward the latter.

The final variable on which there were consistent differences across the subscores was Teaching/Learning. These means for the two groups were: trust (m = 2.86 vs. 3.39), autonomy (m = 2.56 vs. 3.17), initiative (m = 2.45 vs. 2.90), industry (m = 2.43 vs. 2.76), and identity (m = 2.59 vs. 3.02). The grand means across the age categories were: 2.58 vs. 3.05. On this rating scale a score of 2.00 means "Parent clearly sees how the situation . . . lends itself to teaching/learning . . . ," whereas 3.00 means "Parent is somewhat vague about whether or how teaching/learning . . . occur . . ." Thus the experimental group is more prepared than the control group to recognize and deal with issues of teaching and learning.

The foregoing analyses completed in 1980 show that the indirect parent interview is a most interesting instrument for assessing parental skills. It lends itself, moreover, to developmental interpretations of the sort advanced by AEL's conception of the parental role as being differentiated into components that have as their focal points the development issues which children face during five age periods. Further analyses of this measure during early 1981 will form the basis for an invited research address to the Association for Childhood Education International (ACEI) at its annual Study Conference in Spring, 1981.