

United Way of Dane County
August 2012 Report to the
Oscar G. & Elsa S. Mayer Family Foundation

I. AGENCY SUMMARY

Organization name: United Way of Dane County

Project/Program title: Parent-Child Home Program for Dane County

Program/Project Start Date: 8/1/2011 Program/Project End Date: 7/31/2012

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II. PROPOSAL SUMMARY

United Way of Dane will launch a Parent-Child Home Program home visiting program for 50 low-income at risk children age two to four. The Parent-Child Home Program home visitors will visit program family twice a week for 23 weeks each of two years – a total of 92 visits. The home visitor will bring a gift of a book or educational toy and model for the parent how to play, read and interact with their child to build language and emergent literacy skills and promote school readiness. Two special characteristics of our program will be that AmeriCorps members and volunteers will serve as home visitors and there will be an emphasis on recruiting these home visitors from the communities being served. The Parent-Child Home Program has an extensive evaluation based showing its effectiveness in getting children ready for Kindergarten. We will serve two very low-income neighborhoods and expect the demographic breakdown of the children to be about 20-30% African-American, 30-40% Latino and 30-40% White.

III. RESULTS

We had high hopes for this program and we must say that it has exceeded our expectations. Even in this first year of implementation we were successful in attracting our target population of families, retaining the overwhelming majority through the full year, and documenting measurable results in these children's development in areas critical to their readiness for Kindergarten and school success. We are very grateful to the Oscar G. & Elsa S. Mayer Family Foundation for providing crucial support to make this launch possible.

1. Faithful implementation of a research-based program model.

To assure faithful implementation of the research-based model, program staff attended training at the National Center for the Parent-Child Home Program in New York on August 16th, 17th and 18th, 2011. Kathy Hubbard, the United Way Community Impact Director in charge of early childhood, as well as the three site coordinators and supervisors – Teri Weiland, Liz Kober and Brenda Hunter – attended.

The three-day intensive training included:

- Background on brain development, early childhood development, and school readiness
- Background and Research on the Parent-Child Home Program
- Parent-Child Home Program Curriculum
- Use of curriculum materials
- Conducting home visits
- Effective recruitment, training, and supervision of home visitors
- Working with families
- Documentation and tracking forms
- Evaluation protocols and forms
- Management Information System (MIS)
- Typical and atypical development
- Typical and atypical development in children, identifying causes for referrals
- Resources

Every Parent-Child Home Program replication site is required to be accredited by the National Center for the Parent-Child Home Program. The accreditation process takes place as the program implements its second year. The National Center conducts an extensive site visit as well as review of program results to assure high quality, faithful implementation of the program model and results. This will take place next year.

2. Enrollment and retention of families

We are pleased to report that recruitment overall went very smoothly, though it was somewhat delayed. A typical Parent-Child Home Program year begins in October and runs through June. Since we needed to get trained by the National Center during their late summer and fall trainings, we weren't able to begin enrolling families until November. Since our staff was new to the program model, we staggered the enrollment of a few new families each week with each home visitor. By January we had enrolled 43 families and had to stop enrolling new families because we would not have been able to complete 23 home visits this program year. As a result we were not able to enroll the 50 families we projected. We are glad that we erred on the side of maintaining program quality and having all families complete the full 23 weeks of visits.

All of the children recruited met our target criteria: they have at least one significant risk factor, as identified by research on barriers to young children's healthy development, notably parents' low-level of literacy and/or education, teen parents, poverty, history of educational delays/challenges for older siblings, early health problems. More than three-quarters of the families have incomes under \$25,000 annually.

Family Annual Income Distribution
from the PCHP MIS system

	Percent	#
Under \$10,000	16.28%	7
\$10,001-\$15,000	32.56%	14
\$15,001-\$20,000	16.28%	7
\$20,001-\$25,000	11.63%	5
\$25,001-\$30,000	9.30%	4
\$30,001-\$35,000	9.30%	4
\$35,001-\$40,000	2.33%	1
\$40,001-\$45,000	2.33%	1

Marital Status of Primary Caregiver
from the PCHP MIS system

	Percent	#
Married	51.06%	24
Never Married	44.68%	21
Separated/Divorced	4.26%	2

We are very pleased with our success with attracting and enrolling Latino and Hmong families to the program. Our main regret was that we were not able to recruit African-American families in numbers closer to their percent in the school population (about 25%). We are making specific strides to include more African-American families next year.

Child Race/ Ethnicity
from the PCHP MIS system

	Percent	#
Asian, Non-Hispanic	4.65%	2
Bi-Racial or Multi-Racial	4.65%	2
Black/African American (Non-Hispanic)	13.95%	6
Spanish/Hispanic/Latino of any race	62.79%	27
<i>Central American</i>	2.33%	1
<i>Hispanic White</i>	9.30%	4
<i>Mexican</i>	48.84%	21
<i>Other S/H/L</i>	2.33%	1
White, Non-Hispanic (Includes European, Middle Eastern, & North African origins)	13.95%	6

We are using extensive partnership networks to identify children and families who are best matched to the program.

Referral Sources
from the PCHP MIS system

	Percent	#
Coordinator Outreach	27.91%	12
Other Program Family	9.30%	4
Referral from Agency or Program in Community	16.28%	7
Referral from Another Home Visiting Program	39.53%	17
Referral from Early Intervention Services	2.33%	1
School	2.33%	1
Word of Mouth	2.33%	1

Twenty-three of our families speak a language other than English at home and twenty have no or only limited English language skills. As a result of recruiting bilingual home visitors, twenty one of our families receive visits in Spanish and two families receive visits primarily in Hmong. The program shows positive results for children's learning and school readiness regardless of the language in which the visit is conducted.

Primary Language Spoken in Child's Household
from the PCHP MIS system

	Percent	#
English	44.19%	19
Other	4.65%	2
Spanish	51.16%	22

Self-reported Spoken English Skills of the Primary Caregiver
from the PCHP MIS system

	Percent	#
None	17.02%	8
Some	25.53%	12
Yes	57.45%	27

3. Home Visitor Recruitment

The Parent-Child Home Program places a strong emphasis on recruiting home visitors who share a common language, culture and background to the families being visited. As a program gets established, there is a focus on recruiting parents who have graduated from the program. Our Hmong home visitor and Spanish-speaking Caucasian home visitor were our AmeriCorps members. I am pleased to report that they have both been hired by the program as regular Parent-Child Home Program staff starting in the fall.

Home Visitor Demographics
from the PCHP MIS system

	Percent	#
Asian, Non-Hispanic	25.00%	1
Spanish/Hispanic/Latino of any race	25.00%	1
White, Non-Hispanic (Includes European, Middle Eastern, & North African origins)	50.00%	2

Home Visitor Native Language
from the PCHP MIS system

	Percent	#
English	50.00%	2
Other	25.00%	1
Spanish	25.00%	1

4. Program Implementation details

As noted earlier, we successfully recruited 43 families. Eighty-eight percent of families continued to participate in the program through the end of the program year and made a commitment to participate in the program again for the 2012-2013 program year.

This well exceeds our ambitious goal of an 80% retention rate, and is an absolutely astonishing accomplishment. Most home visiting programs have retention rates far below this. This is a tribute both to the appeal of the Parent-Child Home Program and the excellent trust and communication the staff established with the parents. We were pleased to see that those families that left did so for unavoidable and/or appropriate reasons (see chart).

Family Enrollment and Retention
from the PCHP MIS system

Total # of Children entered in MIS: 43	Percent	#
Completed Program	88.37%	38
Completed 46 or more visits	81.58%	31
Completed 35-45 visits	13.16%	5
Completed less than 24 visits	5.26%	2
Dropped	11.63%	5
Completed less than 24 visits <ul style="list-style-type: none"> • Two of the children were dropped from the program because they moved with their primary caregiver to another county • One of the children was placed into center based daycare, and the commitment to the program was too great for the family • One of the children was placed into head start and mother began working full-time • One of the fathers' of the children left the country and did not return which caused a work/schedule conflict because the mother had to return to work full time 	100.00%	5

As an added value, we have identified 18 siblings and 2 non-siblings of program children who are participating in the home visits and therefore getting full or partial benefits of the program.

Families received an average of 40.65 visits compared to the planned 46 (two visits weekly for 23 weeks) as of the end of July. This was mostly due to the late program start and illness or other conflicts in the parents' schedules. Some of these visits are being made up in August and September, before the new program year starts. The children and their parents received an average of 11 books and 8 educational toys as part of their home visits.

The biggest challenge we face is finding ways to engage parents who are uncomfortable engaging in play with their child or feel the home visitor is there to teach the child. The staff used its weekly meeting to discuss ideas for how to engage this parent in his/her child's play during the home visit as well as on their own during the week. Another challenge is modeling positive parent techniques when a child exhibits difficult behaviors, such as throwing, hitting, or screaming. It can be challenging for home visitors when a parent chooses not to discipline. The home visitor must navigate a thin line between modeling positive behaviors while simultaneously showing respect for the parent.

5. Results

We are delighted to report that results from the first year of the Parent-Child Home Program funded by the Oscar G. & Elsa S. Mayer Family Foundation show the children and parents measurably benefiting from program participation. The results are summarized on a chart on pages 9 and 10 that follows the same format as our proposal. Our end goal, as you know, is that children who graduate from the program demonstrate on the Madison Kindergarten screener that they are ready for Kindergarten.

Before looking at the assessment data, we want to mention many directly observable successes with the program. The most obvious is that the children in the program know more important pre-literacy and pre-math concepts, including how to identify numbers, colors, letters and shapes.

Parents report that they have developed reading routines with their children before bed or at other times during the day. They talk about how they have developed a better understanding for how to relate to and play with their children. Parents related stories about how their time playing and reading with their children is much less frustrating because they have learned to allow their child to guide the play and reading activities.

Home visitors report that children have developed interest in sitting and listening to books and that their attentions spans and focus have increased. Children's language skills have developed as well as their ability to express themselves. The home visitors observe that the parents are more engaged with their children during visits and praise their children more than in the beginning of the program.

The children who participate in the Parent-Child Home Program families are tracked for two years using three research tested (valid and reliable) instruments. The home visitors administer a developmental screener and two assessments: the Ages and Stages Questionnaire, the Parent and Child Together and the Child Behavioral Traits.

i. Ages and Stages Questionnaire

The home visitors encourage the families to use the Ages and Stages Questionnaire (ASQ) developmental screener within the first seven weeks they participate in the program. The ASQ is used to screen for potential developmental delays. This screener allows us to talk with parents about concerns in atypical child development and refer children to early intervention specialists if necessary.

As a result of the ASQ screening, six children of the program children were recommended for Early Intervention Evaluation and possible service. Four were evaluated and three were recommended for and accepted services. This is extremely important. The Parent-Child Home Program is designed to help children without identified special needs to get on a typical developmental trajectory through exposure to developmentally appropriate books, play, and verbal interaction. When the program is able to identify that a child has more significant developmental delays and provides that child with access to intensive early intervention services, we may be able to prevent that child from later needing special education services. Families are also connected with other resources that will support their children's healthy development, from a primary care provider to the library. Ten families were connected to resources in addition to the program.

ii. Parent and Child Together (PACT) Assessments

The PACT measures the parent-child interaction at the beginning, middle and end of program participation. The average scores for the children who completed at least 40 sessions increased nearly a full point on a four-point scale, from “sometimes” to “often.” The end-of-program goal is for parents to consistently be at “often” or “always.”

The greatest gains were in the areas of:

- Parent verbalizes affection for the child
- Parent encourages child to perform activities that the child can do independently
- Parent is persistent and consistent in enforcing directions
- Parent tries to converse with the child
- Parent provides verbal rationale for obedience
- Parent listens to child’s reaction to a directive and reacts appropriately

The areas needed the most continued improvement (even if they already made gains) are:

- Parent gives child directions and encourages child to follow them
- Parent explains rationale for directions/expectations to the child
- Parent is persistent and consistent in enforcing directions
- Parent is firm with the child

iii. Child Behavior Traits (CBT)

The CBT measures child behavioral traits that indicate healthy development at the beginning, middle and end of program participation. The average scores for the children who completed at least 40 sessions increased modestly, by about half a point on a four-point scale, from a weak “often” to a high “often” in the three main domains tested: Attention to Task, Cooperation with Adults and Engagement in Developmentally Appropriate Tasks. The end-of-program goal is for parents to consistently be at “often” or “always.”

The greatest gains were in the areas of:

- Asserts ownership over toys and possessions
- Is creative and inventive during playtime activities

The areas needed the most continued improvement are:

- Participates in pretend playtime activities
- Expresses strong positive or negative feelings appropriately
- Follows necessary rules in a family setting
- Tolerates necessary frustration

iv. Results compiled

We are gratified to see measurable progress in the families participating in our first year of the Parent-Child Home Program. Certain trends jump out.

- First, the parents are learning skills that will last for their lifetime of parenting, making them both more effective and satisfied as parents, such as setting limits and showing approval and warmth.
- Second, the children are learning behavioral skills that will help them become lifelong learners, such as knowing how to initiate positive play and being cooperative with adults.
- Third, sometimes areas where the child and parent are making progress are areas where they still have more work to do, such as parent setting rules and children responding to them appropriately.

What we have learned from implementing the program and studying the outcomes for the parents and children is that the Parent-Child Home Program, with its emphasis on modeling parent-child verbal interaction, reading and play is delivering on its promise to attract and retain our target population of children and parents and produce measurable gains in parenting skills and children's readiness for Kindergarten and life.

We are very pleased, honored and proud that in this extension of the vibrant partnership between the Mayer family and the United Way of Dane County, we have been able to launch such an effective new program to help young children in Dane County get ready for Kindergarten and academic success.

Thank you very much.

IV. OUTCOMES AND EVALUATION

Desired Outcome(s)	Action Steps to Achieve Outcome	Indicators of Progress/Results (interim benchmarks)	Timeline for Activities / Estimated Completion	Evaluation and Measurement Methods *	Results (as of August 2012)
Output: 50 families are positioned to access information on how to promote their child's Kindergarten readiness	Community outreach and information sharing with professionals positioned to refer appropriate families	50 at-risk children are enrolled in the Parent-Child Home Program	50 families enrolled by January 2012	Program participant tracking with the on-line Management Information System maintained by the National Center for the PCHP	43 families (86% of our goal of 50) were enrolled due to the delayed start.
Intermediate outcome: 43 children develop cognitive, social, emotional, and physical skills that make them better prepared for Kindergarten and their parents learn how to foster these skills	Home visitors are trained in the PCHP curriculum and implement it faithfully during their home visits with the enrolled families. The program send birthday cards, holds periodic socials, and engages in other activities to help assure retention of families in the program.	80% of the 50 enrolled families will receive two half-hour home visits weekly for one year.	October 2011 – June 2012	Program participant tracking with the on-line Management Information System (MIS) maintained by the National Center for the PCHP	Program supervisors received three-day training; Home visitors received over ten hours of pre-service training and weekly group and individual training. 38 families (88%) completed the first program year.
Intermediate outcome: Children with potential developmental delays are connected to intervention services.	The home visitors are trained to work with the parents to do the Ages and Stages (ASQ) screener with their child.	80% of the parents complete the ASQ. The program social worker connects 90% of the child identified as having potential developmental delays to needed services.	October 2011 – June 2012	Program participant tracking with the on-line MIS maintained by the National Center for the PCHP and the SPHERE system that tracks ASQ results for all children screened in Wisconsin	100% of parents completed the ASQ. Of the 6 children identified with possible delays, 4 agreed to have their children evaluated and accepted services. However 100% received enhanced activities to promote their children development.

Desired Outcome(s)	Action Steps to Achieve Outcome	Indicators of Progress/Results (interim benchmarks)	Timeline for Activities / Estimated Completion	Evaluation and Measurement Methods *	Results (as of August 2012)
Intermediate outcome: Children are performing within developmental norms for their age.	The program coordinator administers the Parent and Child Together (PACT Child's Behavioral Traits (CBT) assessments at the end of the program year.	70% of the children who are enrolled in the program and received at least 40 of the 46 scheduled visits perform within norms for children their age. (This is the end of the first year of a two year program.)	June 2012	PACT and CBT scores tracked on the program participant tracking with the on-line Management Information System maintained by the National Center for the PCHP.	<p>The average PACT scores for the children who completed at least 40 sessions increased nearly a full point on a four point scale, from "sometimes" to "often."</p> <p>The average scores for the children who completed at least 40 sessions increased modestly, by about half a point on a four-point scale, from a weak "often" to a high "often" in the three main domains tested.</p>
End outcome: Children are ready for Kindergarten	The program coordinator administers the Parent and Child Together (PACT Child's Behavioral Traits (CBT) assessments at the end of the program year. Madison-based children participate in the Kindergarten screener,	80% of the children who are enrolled in the program and received at least 87 of the 92 scheduled visits perform within norms for children entering Kindergarten	June 2013	PACT and CBT scores tracked on the program participant tracking with the on-line Management Information System maintained by the National Center for the PCHP.	<i>The children have not yet completed the program and are not yet entering Kindergarten.</i>

* Describe internal or external procedures used to evaluate the outcomes and the effectiveness of any of the activities listed above