

**Family-Sensitive Caregiving and Family Engagement Working Meeting:
Identifying and Measuring Common Core Elements**

June 10-11, 2010

Washington, DC

Meeting Summary

Prepared for:

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Background

On both the federal and state levels, policymakers and program administrators are interested in the topics of family engagement and family-sensitive caregiving. States are interested in including the core elements of family engagement/family-sensitive caregiving in Quality Rating and Improvement Systems (QRIS) and there is a growing interest in measurement tools that measure common core elements from both of these concepts. In response to this interest, the Office of Planning, Research, and Evaluation (OPRE), in collaboration with the Office of Head Start and the Child Care Bureau, sponsored the *Family-Sensitive Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Core Elements*. This meeting brought together researchers and federal staff to work towards identifying common core elements of family engagement and family-sensitive caregiving in early care and education settings. Participants of this meeting represented multiple perspectives and had expertise related to family engagement, family-sensitive caregiving, Head Start, home- and center-based early care and education (ECE) providers¹, schools and school-based programs, measures development, research, and professional development training (see Appendix for participant list).

Purpose and Goals

The purpose of the *Family-Sensitive Caregiving and Family Engagement Working Meeting* was to provide an opportunity to build upon existing definitions of the concepts of family engagement and family-sensitive caregiving and to make progress towards identifying effective strategies for measuring these concepts.

The meeting objectives were as follows:

- Clarify the definitions of family engagement and family-sensitive caregiving and the similarities and differences between these concepts in practice.
- Make progress towards developing measures of family engagement and family-sensitive caregiving by identifying:
 - Common core elements of these concepts as applied in early care and education (ECE) settings;
 - Best methods for measuring these core elements;
 - Gaps in existing measures of family engagement and family-sensitive caregiving as applied within ECE settings; and
 - Next steps for measures development.

¹ Throughout these notes, the term “provider” refers to a range of early care and education professionals, including center and Head Start directors, home-based providers, and ECE classroom teachers.

Meeting Sessions

Thursday, June 10, 2010

Introductions and Meeting Purpose

Nancy Margie, Office of Planning, Research, and Evaluation

Nikki Forry, Child Trends

Toni Porter, Bank Street College of Education

Dr. Nancy Margie opened the meeting by welcoming meeting participants and by describing family engagement and family-sensitive caregiving as important research topics that are of interest to policymakers.

Dr. Nikki Forry then provided an introduction to the meeting materials and framed the meeting as a starting point for future work on this topic. Meeting materials included conceptual models of family engagement and family-sensitive caregiving, and a table comparing the two concepts based on a literature and conceptual review (see Appendix). In addition, draft versions of three reference materials were included in each meeting folder: (1) an issue brief on indicators of family-sensitive caregiving in Quality Rating and Improvement Systems (QRIS); (2) a literature review table, which summarized multi-disciplinary literature on family engagement/family-sensitive caregiving with a focus on attitudes, knowledge, and practice indicative of family engagement/family-sensitive caregiving and the predictive validity of these concepts to child and family outcomes; and (3) a measures table, which summarized family engagement/family-sensitive caregiving-related content in observational and survey measures and qualitative protocols. A reference list including multidisciplinary products related to the concepts of family engagement/family-sensitive caregiving and a PowerPoint handout summarizing key themes from the literature review were also included in the meeting folders.

A resource table, available to meeting participants, contained sample observational tools that addressed family engagement/family-sensitive caregiving and catalogued binders with surveys and qualitative protocols addressing these concepts.

Orientation to the Concepts of Family Engagement and Family-Sensitive Caregiving

Kiersten Beigel, Office of Head Start (Family Engagement)

Juliet Bromer, Erikson Institute (Moderator, Family-Sensitive Caregiving)

Toni Porter, Bank Street College of Education (Family-Sensitive Caregiving/Family Engagement Comparison)

The purpose of this session was to clarify the definitions and the expected outcomes of family engagement/family-sensitive caregiving, and to develop a shared understanding of the distinct and common core elements underlying each of these two concepts. This session used brief presentations to summarize and synthesize existing conceptualizations of family engagement and family-sensitive caregiving, and group discussion to gather insights from meeting participants related to the definitions of these concepts.

First, Kiersten Beigel provided a brief overview of family engagement from a federal perspective and distributed a table that summarized the definitions and guidelines of multiple organizations (e.g., Head Start/Early Head Start, NAEYC, Pre-K Now, Harvard Family Research Project, Center on School, Family, and Community Partnerships) who have influenced its conceptualization across different dimensions (e.g., decision-making; communication; school, home, and community connections; parent education; social networks; transitions; collaboration and coordination; family support; and parent leadership and advocacy). Ms. Beigel highlighted the fact that families are central to children’s learning and acknowledged the multi-dimensional nature of the term “family engagement”. In reviewing the table that was distributed, Ms. Beigel acknowledged the overlap and variation in terminology when considering family engagement from different organizations’ perspectives. Ms. Beigel also discussed distinctions in the conceptualization of family engagement in relation to children aged birth-5 years versus school-aged children. Finally, Ms. Beigel highlighted parent advocacy and parent leadership, two dimensions of family engagement, as areas in need of further exploration due to gaps in knowledge and interest by states.

Dr. Juliet Bromer then introduced the concept of family-sensitive caregiving. Family-sensitive caregiving hypothesizes that child care programs and providers who are sensitive to parents and families as well as responsive to children may have the greatest impact on family and child outcomes. From this standpoint, ECE settings may be more effective if the setting serves as a work support in addition to being a place in which children learn and grow. This conceptual model arose from a review of multidisciplinary literature on a range of topics, including work-family balance and family systems, conducted as part of a chapter on articulating and measuring the role of provider-family relationships, interactions, and involvement as a dimension of quality in ECE settings. The model of family-sensitive caregiving assumes that, in addition to developmental outcomes for children, family and parent outcomes are important and can be supported through ECE settings. The model also acknowledges the importance of positive provider outcomes as a mediating influence on child and family outcomes. It states that families have different needs and preferences for support from ECE professionals, and that ECE providers have different strengths and constraints that affect how they influence families and children.

Dr. Bromer reviewed the draft family-sensitive caregiving conceptual model, highlighting the attitudes, knowledge, and practices that comprise family-sensitive caregiving and may lead to a strong provider-parent relationship, greater continuity of care, and better transitions and collaborations. These aspects of the child care arrangement are then believed to predict to provider outcomes (e.g., job satisfaction and tenure in position), parent and family outcomes (e.g., family engagement, social/peer support, decreased stress and work disruptions) and ultimately children’s social-emotional, health, and cognitive development.

Next, Dr. Toni Porter described the similarities and distinctions between the concepts of family engagement and family-sensitive caregiving referring to the family engagement/family-sensitive caregiving comparative table found in the Appendix. This table was developed based on a review of existing literature for the meeting. Key distinctions between the concepts of family engagement and family-sensitive caregiving noted by Dr. Porter included:

- 1) **History:** Family-sensitive caregiving emerged out of a concern about measuring quality in ECE across a range of settings that are intended to serve as a work support as well as a support for children’s development and school readiness, especially for low-income families. Family engagement emerged from early concepts of parent involvement in school—K through 6, and more recently through Grade 12—as a strategy to enhance student achievement, as well as from Head Start’s philosophy about parent engagement, which was part of a broader philosophy of including parents in decision-making about service delivery.
- 2) **Theory:** Family-sensitive caregiving draws from work-family literature, research on family systems, and research on home-based child care, which accounts for a substantial proportion of child care arrangements for young children. Family engagement draws from the Head Start program model, literature on parental decision-making, and social exchange theory.
- 3) **Settings:** Based on the literature, family-sensitive caregiving tends to be more heavily emphasized in center- and home-based care, whereas family engagement is more likely to be emphasized in Head Start, schools, and school-age programs.
- 4) **Intermediate Outcomes:** Intermediate outcomes for family-sensitive caregiving include those for providers and parents—for example, improved continuity between arrangements (home and child care, among multiple care arrangements, or between child care and school) as well as increased provider job satisfaction and increased satisfaction with care by families. Family engagement is focused on improving the relationship between the family and the school, enhancing curriculum and instruction, and improving parents’ support of their children’s learning and development.
- 5) **Long-Term Outcomes:** Family-sensitive caregiving focuses primarily on parental work outcomes (reduced stress around work-family balance as well as greater stability in employment), whereas family engagement focuses primarily on improving/enhancing children’s learning through school-family partnerships.

There are a number of similarities between the concepts of family engagement and family-sensitive caregiving:

- Both draw from developmental ecological and strengths-based frameworks as well as from the parent health and well-being and family support literature.
- Both acknowledge family stress as a result of poverty.
- Both focus on enhancing parenting skills, social supports, enhanced mental health, and ultimately child outcomes.
- Provider attitudes (e.g., respect, trust, cultural responsiveness) and knowledge (of families’ work and family life information) are similar across both concepts.
- Both underscore the importance of relationship-building, two-way communication and reciprocal partnerships between the school/program/provider and family, collaborating and coordinating to provide the family community resources, and providing opportunities for parents to use and share their skills and strengths.

After the brief presentations, the group discussed the issues that had been raised. The following topics were discussed:

- What supports (training, financial resources) do providers need in order to provide family-sensitive care? Can we expect providers without those supports/resources to provide family-sensitive care? Will we put additional stress on providers by requiring them to engage in family-sensitive practices without these supports?
 - Supports discussed included: training and money. A suggestion was made to expand the family-sensitive caregiving conceptual model to include a box to the left of the Family-Sensitive Caregiving Constructs (attitudes/knowledge/practices) that specifies the inputs needed to support engagement in family-sensitive/family engaging practices.
 - Should training/professional development focused on working with families/family systems be considered essential knowledge for ECE practitioners much in the same way that child development knowledge is considered essential?
- Will practices related to family engagement/family-sensitive caregiving be mandated?
 - Head Start and Early Head Start already have program standards around family engagement. For community-based ECE programs, the National Association for the Education of Young Children (NAEYC), National Association of Family Child Care Providers (NAFCC), some state Quality Rating and Improvement Systems (QRIS), and the Child Development Associate (CDA) credential each have standards related to family engagement/family-sensitive caregiving, but community-based settings are not regulated through these standards and may not have the same capacity as Head Start/Early Head Start to meet such standards.
- Is there a need to distinguish between the concepts of family engagement and family-sensitive caregiving? Perhaps they exist on a continuum or could be incorporated into an integrated model.
 - One purpose of this meeting is to identify the common core elements that underlie both concepts. These core elements can be used and adapted to inform state QRIS, professional development efforts, programs, and policymakers.
- The concept of family-sensitive caregiving has some overlap with the already existing concept of family-centered care, though family-sensitive caregiving was developed within the context of thinking about how to measure quality in ECE settings.
- The family-sensitive caregiving model could be expanded by considering how parents approach ECE providers as well. This feedback loop would be more reflective of a true ecological model.

Review of Existing Knowledge: Identifying Gaps in Knowledge

Amy Susman-Stillman, Center for Early Education and Development, University of Minnesota (Moderator)

Judy Langford, Center for the Study of Social Policy (Strengthening Families)

Nikki Forry, Child Trends (Multi-disciplinary Literature Review)

Eva Marie Shivers, Indigo Cultural Center, Inc. (Culturally-Responsive Care)

In this session, brief presentations were used to showcase attitudes, knowledge, and practices that exemplify family-sensitive caregiving and family engagement, and how these attitudes, knowledge, and practices predict to desired outcomes for parents, children, and programs.

Ms. Judy Langford began the session by discussing the Strengthening Families framework. The Strengthening Families model started as a child abuse prevention approach by implementing a universally available prevention strategy based on communication, motivation, and persuasion. The research-based Strengthening Families model has been adopted widely by practitioners and parent organizations. The five protective factors identified by Strengthening Families are:

- (1) Parental resilience (“be strong and flexible”);
- (2) Social connections (“everybody needs friends”);
- (3) Knowledge of parenting and child development;
- (4) Concrete support in times of need (materials and services); and,
- (5) Facilitation of the social and emotional development in children.

This model takes a strengths-based approach to identify and build upon parents’ capabilities. Strengthening Families has developed online self-assessments designed for ECE programs to assess to what degree they offer parents the ability to build these protective factors. The Quality Improvement Center for Early Childhood (QIC-EC) is currently exploring how to measure indicators of Strengthening Families’ protective factors. In closing, Ms. Langford discussed opportunities for collaboration in thinking about protective factors and invited meeting participants to join the Strengthening Families learning network.

Dr. Nikki Forry then provided an overview of key themes from a multi-disciplinary literature review of family engagement and family-sensitive caregiving conducted in preparation for this meeting. (See Appendix for PowerPoint handout and bibliography of the articles reviewed/collected). The literature review included 43 articles selected based on the following criteria/guidelines: published in/after 2000 (except some seminal work suggested by the planning group members); a balance of materials across various disciplines (e.g., child welfare, early care and education, and health) and authors was sought; articles that specified attitudes, knowledge, or practices indicative of family engagement/family-sensitive care, or that provided evidence as to the predictive validity of these concepts to child and family outcomes were prioritized. Reviewed articles came from the fields of health, mental health, social work, family systems, early care and education, and education, and used a range of methodologies, including qualitative, program evaluation, quantitative, and a few conceptual articles.

Attitudes highlighted as indicative or necessary for sensitive/engaging practices with families included: strengths-based empowerment, equality, trust, respect, warmth, flexibility, supportiveness, sensitivity, and commitment. *Knowledge* necessary for family engagement/family-sensitive caregiving was broken into two categories: family-specific knowledge (e.g.,

recognition of family strengths and goals, awareness of family circumstances, knowledge of family's language and culture) and general knowledge (e.g., practitioner self-awareness, how to navigate complex systems, resources in the community, and how to effectively promote learning at home). *Practices* were divided into processes (e.g., open, honest, and validating communication; inclusivity; and consistency) and skills (e.g., reciprocal dialogue, collaborative family decision-making, formal and informal support building, and capacity-building). Family outcomes found to be associated with practices related to family engagement/family-sensitive caregiving included empowerment and self-efficacy, parenting attitudes and behavior, increased engagement in programs/services, increased social supports, and improved parent-provider/parent-teacher relationships. Child outcomes associated with practices related to family engagement/ family-sensitive caregiving included improvements in attachment security, social competence, internalizing and externalizing behaviors, approaches to learning, and cognitive development.

Dr. Eva Marie Shivers began her discussion of the cultural context by emphasizing the overlap between the family and cultural contexts. She then provided highlights from a literature review on culturally responsive care that distinguished between attitudes, knowledge, and practices. She discussed providers' *attitudes* about families and how providers/teachers are thinking about being sensitive to diverse children in the classroom. In addition, she discussed the need for formal *knowledge* about who the family is and the cultural background of the family, providers' intuitive and informed knowledge on culture, and the often unrecognized cultural match between providers and families. In terms of *practices* related to cultural responsiveness, Dr. Shivers discussed the relevance of appreciating minorities through periodic events such as holiday celebrations, but also being responsive to culture on a daily basis through communication practices, schedule setting, and support provision. Dr. Shivers reported emerging work focused on professional development opportunities related to cultural sensitivity and an expanded view of culturally-responsive care that includes supports for teachers/providers within a culturally-responsive organization. She highlighted the lack of findings linking culturally-responsive care to children's outcomes within ECE settings and discussed a current project exploring associations between cultural congruency between home and school and child outcomes using Head Start Family and Child Experiences Survey (FACES) longitudinal data. Finally, Dr. Shivers emphasized that, since culturally responsive care occurs in every day practices, measures of culturally responsive care should not be limited to checklists. Rather, to truly understand how children's development is enhanced in culturally responsive settings, it is likely that our methodological approaches will need to use a variety of measures to examine how different combinations of factors impact children's experiences in care. For example, new research (Sanders, under review) examines the combined influence of overall program quality, teachers' perceptions of experienced racial discrimination, teacher-child racial/ethnic match, and peer conflict on children's self-concept.

Group discussion after the presentations focused on the following topics:

- Anthropological research has examined continuity/discontinuity issues and how the provider sees him/herself in relation to the participant/child.
 - Culture is more abstract when you talk about it with families. The conceptualization of culture is often limited to materials, but children's day-to-day interactions are what really matters.

- Parent choice issue: some parents want culturally congruent care and some don't.
 - Do we want to measure congruence between parents' desires and what they experience? It is important for us to keep individualizing ideas when we are talking about these concepts.
- The Emlen scales include important aspects of child care for parents and children. How do we determine how parents define what quality is? At what threshold of quality do we see results for children? Is there some kind of minimal knowledge required? Should we be training to a threshold or to the highest standards?
- The use of checklists to measure knowledge can be applied to the information a provider collects about a child/family, but what the provider does with the information is most important and less likely to be captured accurately on a checklist. For example, gathering information could create bias in the providers' attitudes towards child or family.

Identifying Common Core Elements

Small Group Facilitators:

Roseanne Flores, Office of Head Start

Nicole Richardson, Office of Head Start

Shannon Moodie, Child Trends

For this session, meeting participants were asked to join one of three topically-oriented small groups representing (1) center-based providers' perspectives, (2) home-based providers' perspectives, and (3) parents' perspectives. Focusing on attitudes, knowledge, and practices separately, small group discussions were used to review the information shared in the previous session, identify core elements of family engagement and family-sensitive caregiving, and identify key measurement/research issues. The overarching research/measurement issues that emerged from small group discussions are highlighted below. A list of elements drafted during this breakout session and expanded in the following session is found in the following section of the notes called "Clarification of Common Core Elements".

Overarching Research Issues

- Is there a temporal process of influence when considering knowledge, attitudes, and practice? For example, would the following be an accurate logic model?
 - Knowledge—>Practice—>Attitudes—>Outcomes
 - Alternately, does Practice—>Knowledge (as with coaching/consultation models)?
- What can we expect of providers? (variation in expectations based on type of care)
- At what point is it appropriate to measure family-sensitive caregiving? (Given that caregiver-family relationships evolve over time, at what point would you know that a relationship was viewed as "family-sensitive" by caregiver and family?)

Overarching Measurement Issues

- How can we measure how knowledge is used?
- Are measures of attitudes necessary or are attitudes captured implicitly in measures of knowledge and practice?
- Is it more accurate to think of attitudes as "core values"?
- How can we measure or acknowledge that inputs, behaviors, and outcomes are all part of a feedback loop?

- What existing measures tap into the common core elements we are interested in measuring (e.g., measures of burnout from social work)?
- How do we ensure parents' perspectives are always captured in measurements?
- How can parents' perspectives be taken into account when measuring providers' attitudes, knowledge, and practices? Should family characteristics, such as social support, trust, respect, and satisfaction with care be considered simultaneously with providers' attitudes, knowledge, and practices when assessing family-sensitive care?
- How do we develop measures that would be applicable to a diverse group of providers (ranging in formality from family/friends/relatives through regulated programs with performance standards)?
- Who is the best reporter for measuring the common core elements of family engagement and family-sensitive caregiving? (among family members and within an ECE setting)

Friday, June 11, 2010

Clarification of Common Core Elements

Nikki Forry, Child Trends

The meeting reconvened on Day 2 with a review of the core elements identified during the “Identifying Common Core Elements” small group sessions. Additional discussion in large-group format resulted in a revised list of providers’ attitudes, knowledge, and practices identified as being central to the study of family engagement and family-sensitive caregiving (see below).

Attitudes

** Note: Though the primary focus of this list is provider attitudes, both parent and provider attitudes should be assessed when rating family engagement/family-sensitive care.*

- Perceptions of self/perception of role
- Focused on strengths (belief that the family has capacity)
- Readiness to change/Open-willingness to learn
- Trust
- Respect
- Equality
- Motivation
- Attitude towards one’s role as a caregiver and the children he/she serves
- Attitude toward family choices (e.g., parenting roles, gender roles), characteristics (e.g., culture), and issues affecting families (e.g., poverty)
- Match/fit between family’s and caregiver’s style of caregiving (e.g., discipline practices, etc.) (NOTE: appropriate matches may be complementary)
- Commitment to families

Knowledge

- Teacher/provider knowledge in three areas:
 - **Community/Skills:** Community resources, child development, basic elements of family systems theory
 - **Self:** own biases, how to relate to others
 - **Family:** Culture, dynamics, circumstances, interests and needs, roles of family members, work schedules, childrearing/discipline philosophy and practices, beliefs/faith
- Process of gathering knowledge:
 - Gathered sensitively (taking into consideration culture and family dynamics)
 - Honoring confidentiality
 - Maintaining boundaries
 - Intentional information gathering
- Knowledge is used in a way to support families (responsiveness, advocacy, referrals)

Practices

* *Note: Identified practices included both process issues and specific actions/activities.*

▪ **Process Issues:**

- Being culturally responsive (e.g., being respectful and inclusive of culture in interactions with families, classroom activities, classroom materials, food, etc.).
- Karen Mapp's three-stage joining process was raised: (1) *creating* a welcoming environment through proactive outreach; (2) *honoring* families by removing barriers to participation; and (3) *connecting* families to social networks and to what children are learning.
- Individualizing services and maintaining flexibility in caregiving practices to be responsive to work-family demands (e.g., flexibility in hours of care), family's preferred language and mode of communication, family's food preferences for child, etc. Flexibility needs to occur within the context of boundaries. Offering pre-set options and negotiation were both suggested strategies for working successfully with families.
- Having a complementary match between provider and parent temperaments and maintaining clear expectations.
- Building a partnership with the family.

▪ **Specific Actions:**

- Positive, two-way communication in which family members feel valued/listened to; meaningful content is shared; and the level of detail, frequency, mode (e.g., text, email, voicemail, notes, charts, etc.) and language of communication is sensitive to family members' preferences.
- Providing opportunities for family leadership and decision-making.
- Engaging families in children's learning through the classroom environment and curricula.
- Creating opportunities for families to connect with peers and build peer support systems.
- Invitational/welcoming practices, such as providing a family-friendly environment (e.g., making families feel welcome with adult-sized chairs).
- Gathering and using knowledge about families' needs, strengths, and circumstances to support families.
- Providing referrals and advocating for families.
- Providing opportunities for family growth and development through parent education.
- Embedding family sensitivity into curricula.
- Providing opportunities for families to give feedback about the program.

Utilization of Diverse Methodologies to Study Family Engagement and Family-Sensitive Caregiving

Lisa McCabe, Cornell University (Moderator)

Carl Dunst, Orleana Hawk's Puckett Institute (Survey Methods)

Concha Delgado-Gaitan, Educational Research and Writing Consultant (Qualitative Methods)

Jay Fagan, Temple University (Surveys and Qualitative Methods with Fathers)

Presentations and group discussion were used to identify different methodologies and measures that have been or could be applied to the study of attitudes, knowledge, and practices related to family engagement and family-sensitive caregiving. Lessons learned in implementing various methodologies/measures were also discussed.

Dr. Carl Dunst began the session by discussing the development and evolution of the Family-Centered Practices Scale. This scale has two major constructs: Relational Practices (interpersonal practices, cultural sensitivity, recognizing and building family strengths) and Participatory Practices (active family participation, practitioner responsiveness, informed choices, resources families need, and building family capacity). Dr. Dunst was able to capture individualized practices through the use of “interchangeable indicators”, or the use of multiple indicators that capture the main construct but are sensitive to different respondents’ varying operationalizations of that construct. This process is only valid if multiple respondents agree on the various operationalized definitions of the construct. Dr. Dunst’s measure includes both universal indicators and culture-specific indicators, which were developed from work with specific subgroups. This measure development process allows for adaptation of the instrument to different contexts (e.g., home-based vs. center-based ECE arrangements or application to various cultural/ethnic groups), while still measuring the same construct.

Dr. Concha Delgado-Gaitan spoke of her ethnographic work, which involved multiple data collection techniques, including ethnographic observations and interviews, video analysis, extended case studies, and selected surveys. She highlighted the need to be knowledgeable about the background of a community, perceptions of community members, and dynamics between ECE providers, schools, and parents before beginning ethnographic work. She also spoke of the need to maintain a “blank slate” about the constructs that might arise from the research until the data collection begins so that constructs can evolve in a way that reflect the communities’ experience.

Dr. Jay Fagan spoke about the correlations between results using various data collection techniques within the context of a quasi-experimental study of father involvement in Head Start. The data collection techniques used included: sign-in data (sign-in sheets with follow-up calls to fathers and teachers to ensure that the fathers were actually signing in when present), teacher report of father involvement, a modified time diary approach (collected via phone three times per week regarding what happened during the last week), and a quality observation measure (Parent-Caregiver Interaction Scale). Dr. Fagan found low to moderate correlations when comparing data collected through the various techniques. He also found that fathers and teachers often do not agree regarding how involved fathers are in Head Start. Dr. Fagan found sign-in sheets to be most predictive of child outcomes with significant dosage effects. Dr. Fagan also recommended

measuring indicators of father involvement outside of the classroom (e.g., what fathers are doing with children to support their development at home).

Group discussion after the presentation focused on the following topics:

- Measure development is a multi-stage and time consuming process. The value of cognitive testing was raised. Through cognitive testing, items are identified and brought to a focus group to determine what the items mean to respondents, what terms the target population uses in thinking about the concept, etc. The value of piloting was also raised.
- Should we use a combination of approaches in order to gather information on knowledge?
- How can we capture the sensitivity of providers? Measuring the extent to which the provider documents families' need or children's developmental skills does not tell us what the provider does with this information.
- Cultural differences in responses were found on John Fantuzzo's Family Involvement Questionnaire (FIQ). This multi-dimensional measure was developed with African-American families in Head Start, and the most important dimension of the measure changed when tested with Latino families. Because dimensions/measures change cross-culturally, it may not be good practice to throw out items with little variation during the measure development phase (as these items out may be more significant with certain subgroups).
- Need to determine the goal of the measure: Inclusion in QRIS? Measure for basic research (intervention or testing the paths of the conceptual model)? Self-assessment measure to improve practice? Measure to provide descriptive statistics on the prevalence of practices and to compare practices occurring in different communities? The urgency of developing measures that can be incorporated into QRIS was discussed. States are moving forward with QRIS development and are looking for direction.
- It is important to determine the unit of analysis and who the target respondent is. For example, if measuring quality in a classroom setting, is it of interest to aggregate parents' experiences/perceptions or to have a measure of each parent's individual experience/perception? This partly depends on the purpose of measurement.
- Are the concepts of family engagement/family-sensitive caregiving being discussed applicable to Head Start and public Pre-K? Yes, in that many of the practices overlap (relationship-based communication, community, home-school connection).
- What is the core set of practices that every child should experience (regardless of setting type, family demographics, etc)?
- How can we avoid socially desirable responses?
- Are perceptions more important than quantifying practices? Likewise, is it more important to focus on process (style) vs. specific behaviors?

Creation of Measure Development Interest Groups

Bobbie Weber, Oregon State University (Moderator)

Meeting participants were given an opportunity to break into one of two small groups:

1. narrowing down the common core elements of family engagement/family-sensitive caregiving;

2. identifying promising measurement practices and suggestions for measure development.

Core Elements Breakout Group

The core elements group used a modified Q-sort process in small groups to come up with a list of the three most important common core elements reflecting family engagement and family-sensitive caregiving. The following core elements were identified:

- **Communication:** two-way, reciprocal process
- **Responsiveness (Flexibility):** including individualized services, flexibility to respond to parents' work issues, culture, and unique needs
- **Gathering and using existing knowledge about families over time:** including understanding family circumstances, advocating for families or referring them for additional services when appropriate; and gathering family feedback about the program; information should be gathered through a relationship between the parent and provider.

The group emphasized that cultural responsiveness and positive, two-way communication will permeate all aspects of family engagement and family-sensitive caregiving. They also stated that provider self-reflective practices (self-knowledge) are necessary for being responsive and gathering and using existing knowledge over time. Likewise, being welcoming/having a family-friendly environment (e.g., physically accommodating parents- for instance by providing adult-sized chairs; communicating an appreciation for families; being warm, open, and inclusive) facilitates communication with families.

Next steps identified by the small group included:

- Categorizing which indicators brainstormed earlier in the meeting fit within these core elements.
- Ensuring that the family engagement perspective is reflected in the core elements.
- Gathering input from parents, ECE providers, and other stakeholders.
- Cross-checking core element list against existing measures and expanding existing measures if applicable.

Measurement Breakout Group

The measurement group emphasized that the first step towards developing measures is to clarify the purpose/goal of the measurement instruments. What do you want to know? What will be done with the information?

Suggestions from this group included:

- Measurement instruments should be:
 - multidimensional,
 - purpose-driven,
 - comprehensive (i.e., cover the most important domains of family-sensitive caregiving and family engagement),
 - comprehensible across informants and languages (translation is not enough to ensure this),
 - culturally- and gender-sensitive and representative,
 - sensitive to change (for program monitoring over time), and

- designed to assure anonymity/confidentiality.
- Multiple methods should be used to develop any measure (e.g., observation of programs, interviews with providers and parents, focus groups, Q-sorts, expert panels, quantitative analysis methods)
 - Care providers and parents should be involved in developing and completing the instrument.
 - Subgroup and within-group considerations should be part of the development process and eventual analyses (e.g., low-frequency or low-variance items should not be automatically deleted because they might be important for certain groups).
- The group also recommended that measures be completed by the multiple stakeholders in a family, not just the primary caregiver.
- The presentation of an instrument should be done in partnership and the purpose should be transparent. Ideally, it should be presented as part of a program improvement initiative without high stakes attached to it (for the purpose of strengthening families and improving care).

Wrap Up and Next Steps

Nancy Margie, Office of Planning, Research, and Evaluation

Nikki Forry, Child Trends

The meeting closed with suggestions for continuing measures development work as well as for developing dissemination materials to share knowledge from the meeting with the field.

Next Steps

- **Identifying Core Elements**
 - Further development and validation of the core elements and indicators identified in this meeting needs to occur among ECE providers/teachers, parents, researchers, program administrators, and members of professional organizations (e.g., National Association of Child Care Resource & Referral Agencies National Association for the Education of Young Children). A Q-sort procedure was recommended.
 - Ensuring that the constructs reflect both family engagement and family-sensitive care. During the meeting, the focus shifted to more heavily emphasizing family-sensitive care. The construct of family engagement needs to receive more attention in future discussions to ensure that both concepts are appropriately and adequately incorporated.
 - More discussion is needed regarding how the quality of family engagement and family-sensitive caregiving practices should be assessed. How would practices that are responsive to families, but not supportive of children's development, get addressed (e.g., serving child unhealthy foods, not enforcing boundaries with parents)?

- **Measures Development**
 - Clarify the purpose of a measure.
 - Systematical review of existing measures to determine whether there are any gaps in measurement of the core elements identified in the meeting and whether new types of measures need to be developed.
 - Bring this discussion to the QRIS learning community to see how this work can affect their standards.

- **Application**
 - Conversion of the family-sensitive caregiving conceptual model into a logic model.
 - Where does family engagement fit into this model? How can we integrate the identified common core elements within a shared logic model?
 - Identification of professional development and other supports providers need in order to do this work.
 - What kinds of links/training are needed to support providers in engaging in family-sensitive caregiving practices and supporting family engagement? What supports do providers perceive they need in order to be sensitive to and engage families? How can organizational climates and the broader ECE system be more supportive?
 - The processes of identifying supports needed by providers and understanding what family-sensitive care/family engagement means to families should be parallel to the measures development process so that we are not assessing providers before giving them the supports they need.
 - Look at institutions of higher education, professional development systems, as well as state-level departments that offer training to ECE practitioners to identify gaps in training.

Places to Share/Gather Additional Information

There was a consensus in the group that more work needs to be done on defining and operationalizing the common core elements of family engagement and family-sensitive caregiving. A number of venues were identified as opportunities for sharing information that was learned in this meeting and continuing the conversation about the common core elements of family engagement and family-sensitive caregiving:

- Child Care Research and Policy Consortium (CPRC) research meeting and SharePoint website
- Head Start Research Conference/Head Start/Early Head Start
- American Educational Research Association
- National Association for the Education of Young Children
- Pre-K Now
- Harvard Family Research Project
- Center on School, Family, and Community Partnerships
- Research Connections
- Open-invitation webinars

Subsequent to the meeting, participants were invited to reply with their interest in joining an ongoing Working Group on Family Engagement/Family-Sensitive Caregiving, or maintaining involvement in this work through other means. Although the *Family-Sensitive Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Concepts* was more heavily weighted towards exploring the concept of family-sensitive caregiving, the goal of the working group is to explore both constructs in more depth. The co-leaders of the Family Engagement/Family-Sensitive Caregiving Working Group welcome new members, particularly members who have an expertise in family engagement. If you are interested in learning more, please contact Nikki Forry (nforry@childtrends.org) or Nancy Margie (Nancy.Margie@ACF.hhs.gov).

APPENDICES

- 1. Family-Sensitive Caregiving and Family Engagement Working Meeting Participant List**
- 2. Meeting Agenda**
- 3. Family-Sensitive Caregiving Conceptual Model**
- 4. Social Exchange Model of Family Engagement**
- 5. Family Engagement/Family-Sensitive Caregiving Comparative Table**
- 6. Literature Review Power Point Presentation**
- 7. Bibliography of Articles Reviewed/Collected for Literature Review**

**Appendix 1:
Family-Sensitive Caregiving and Family Engagement
Working Meeting Participant List**

Family Sensitive Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Concepts

June 10-11, 2010
Embassy Suites Hotel Convention Center
Washington, DC

Invited Participants

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Appendix 2: Meeting Agenda

Family Sensitive Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Concepts

June 10-11, 2010

Meeting Agenda

Thursday, June 10, 2010

Introductions and Meeting Purpose (1-1:45)

Nancy Margie, Office of Planning, Research, and Evaluation

Nikki Forry, Child Trends

Toni Porter, Bank Street College of Education

Following brief introductions, the objectives of this meeting will be reviewed. The meeting objectives are to:

- Clarify the definitions of “family engagement” and “family-sensitive caregiving” and the similarities and differences of these concepts in practice.
- Make progress towards developing measures of “family engagement” and “family-sensitive caregiving” by identifying:
 - Common core constructs of these concepts as applied in early care and education settings;
 - Best methods for measuring these core constructs;
 - Gaps in existing measures of family engagement and family-sensitive caregiving as applied within early care and education settings;
 - Next steps for measures development

Orientation to the Concepts of Family Engagement and Family-Sensitive Caregiving (1:45-2:45)

Juliet Bromer, Erikson Institute (Moderator, Family-Sensitive Caregiving)

Kiersten Biegel, Office of Head Start (Family Engagement)

Toni Porter, Bank Street College of Education (Family-Sensitive Caregiving/Family Engagement Cross-Walk)

In this session, brief presentations will be used to summarize and synthesize existing conceptualizations of “family engagement” and “family-sensitive caregiving”. Meeting participants will be invited to react and share their perspectives on each of these constructs with goals of:

- Clarifying the definitions and the expected outcomes of each construct, and
- Developing a shared understanding of the distinct and shared core concepts underlying each of these two constructs.

Guiding Questions:

- Is there a standardized set of constructs for family engagement/family-sensitive caregiving practice? If not, can it be developed?
- Are there some elements of family engagement/family-sensitive caregiving attitudes, knowledge, and practices that are more essential than others?

Break (2:45-3:00)

Review of Existing Knowledge: Identifying Gaps in Knowledge (3:00-4:15)

Amy Susman-Stillman, Center for Early Education and Development, University of Minnesota (Moderator)

Nikki Forry, Child Trends (findings from multi-disciplinary literature review)

Eva Marie Shivers, Indigo Cultural Center, Inc. (culturally responsive care)

Judy Langford, Strengthening Families

In this session, a sample of multi-disciplinary literature will be presented to showcase:

- The attitudes, knowledge, and practices that exemplify “family-sensitive caregiving” and “family engagement”;
- How attitudes, knowledge, and practices related to “family-sensitive caregiving” and “family engagement” predict to desired outcomes for parents, children, and programs.

Guiding Questions:

- Are there thresholds of quality (in terms of intensity or dosage) in these components (e.g., attitudes, knowledge, practices) when predicting to family and child outcomes? How do we operationalize these thresholds?
- What do we know about parents’ perspectives on family engagement/family-sensitive caregiving? How do these perspectives affect parents’ child care choices?
- Are there associations between parents’ perspectives on family engagement/family-sensitive practices and parent outcomes, child outcomes, and/or provider outcomes?
- How has the need to respond to cultural perspectives shaped thinking about the constructs of family engagement/family-sensitive caregiving? Are family sensitive attitudes/ knowledge/practices actually different across cultural groups?

Identifying Core Constructs (4:15-5:30)

Roseanne Flores, Office of Head Start (Moderator)

Nicole Richardson, Office of Head Start (Moderator)

Shannon Moodie, Child Trends (Moderator)

Focusing on attitudes, knowledge, and practices separately, small group discussions will be used to review the information shared in the previous session and identify core constructs of “family engagement” and “family-sensitive caregiving” as well as gaps in evidence on these core constructs. The small groups will then report back recommendations for constructs that would most benefit from additional study.

Friday, June 11, 2010

Clarification of Core Constructs (8:30-9:00)

Nikki Forry, Child Trends

The meeting will reconvene on the second day with a review of the core constructs identified in Day 1.

Utilization of Diverse Methodologies to Study “Family Engagement” and “Family-Sensitive Caregiving” (9:00-11:00)

Carl Dunst, Orleana Hawk’s Puckett Institute (Survey methods)

Concha Delgado-Gaitan, Educational Research and Writing Consultant (Qualitative methods)

Jay Fagan, Temple University (Surveys and qualitative methods with fathers)

Presentations and group discussion will be used to identify different methodologies and measures that have been or could be applied to the study of attitudes, knowledge, and practices related to “Family Engagement” and “Family-Sensitive Caregiving”. Lessons learned in implementing various methodologies/measures, predictive validity of existing measures, and how existing gaps in knowledge could most effectively be addressed will also be discussed.

Guiding Questions:

- What are the best ways to measure provider attitude, knowledge, and practices? (e.g., self-report, survey, vignette, observation)
- What are the strengths and weaknesses of specific approaches for measuring each component (e.g., attitudes, knowledge, practices) of family engagement/family-sensitive caregiving? What about combining approaches—survey, observations, qualitative interviews?
- What approaches can we use to measure family-sensitive care/family engagement across provider types? Can we use the same measures across different settings (e.g., center-based programs vs. family child care vs. family/ friend/ neighbor care)?

Break (11:00-11:15)

Creation of Measurement Development Interest Groups (11:15-12:30)

Bobbie Weber, Oregon State University (Moderator)

Meeting participants will be given an opportunity to break into small groups focused on different types of measurement, respondents, or constructs of interest. Groups will be encouraged to take advantage of this time to plan next steps for measurement development.

Working Lunch (12:30-1:30)

Interest groups will continue to meet through a working lunch.

Report Back (1:30-2:30)

Bobbie Weber, Oregon State University (Moderator)

Interest groups will report their plans to the larger group.

Wrap Up (2:30-3:00)

Nancy Margie, Office of Planning, Research, and Evaluation

Nikki Forry, Child Trends

Strategies for continuing the measures development work started at this meeting as well as suggestions for developing dissemination materials to share knowledge from the meeting will be discussed.

Guiding Questions:

- How could various measurement strategies inform family engagement/family-sensitive caregiving practice?
- How can information be shared and aggregated (locally and on a large scale) to impact programs?

Additional Questions for Consideration/Discussion

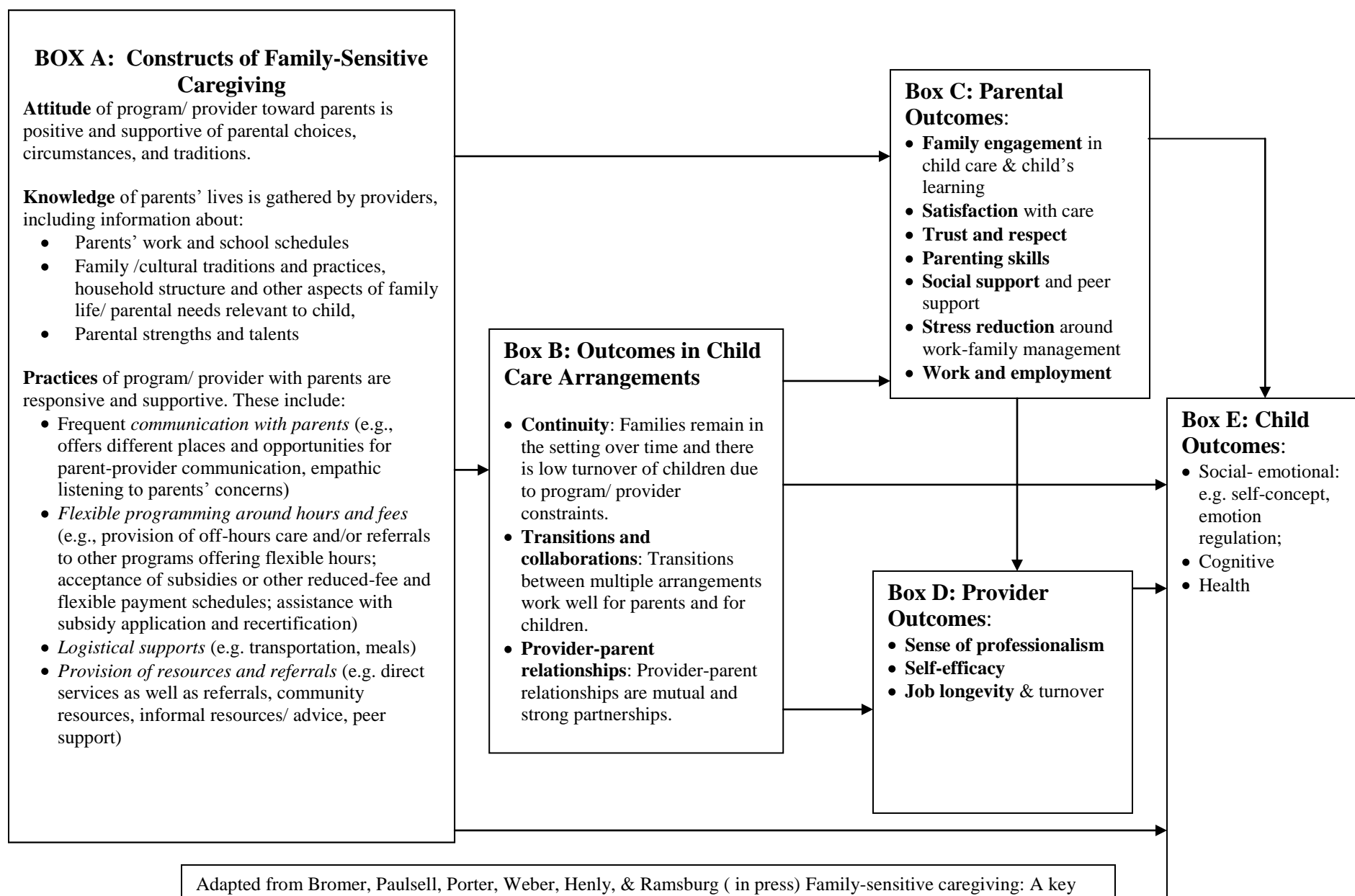
Main Concept of Interest	Questions for Day 1	Questions for Day 2
1. Constructs of FSC/FE: Attitudes, knowledge, and practice	<ul style="list-style-type: none"> • Are attitudes a necessary precursor to knowledge and practice, or is it possible to engage in family engagement/family-sensitive practices without the expected attitudes of respect and acceptance of families? 	<ul style="list-style-type: none"> • How can we measure the ways attitudes, knowledge and practices are linked as well as each of these constructs independently? • What are the best ways to measure provider attitude, knowledge, and practices? (e.g., self-report, observation)
2. Intensity/dosage/threshold	<ul style="list-style-type: none"> • When predicting to family and child outcomes, do thresholds exist (in terms of intensity or dosage) between family engagement/family-sensitive caregiving practices and child/family outcomes? 	<ul style="list-style-type: none"> • How do we operationalize and measure intensity, dosage, and/or thresholds in this context?
3. Related to Providers	<ul style="list-style-type: none"> • Is divergent information gathered when measuring family engagement/family-sensitive caregiving with teachers vs. directors within a program? • Which group provides information with stronger predictive validity to child/family outcomes? • How is family engagement/family sensitive caregiving being included or not as part of early childhood educator's professional development? How can we measure this? 	<ul style="list-style-type: none"> • Who should we be targeting with measures of family engagement/family-sensitive caregiving (e.g., teachers or directors)? • How do we take into consideration the variation across family needs and the individual differences in provider-parent relationships? (In other words, if a provider is sensitive to one family but not to another, is the program family sensitive?)

Main Concept of Interest	Questions for Day 1	Questions for Day 2
4. Related to Parents/Families	<ul style="list-style-type: none"> • Which family members' perspectives do we have knowledge about regarding family engagement/family-sensitive caregiving? • How much do parents value family engagement/family-sensitive practices? 	<ul style="list-style-type: none"> • What should the role of parents be in the development of assessments in this area? • Can we measure family-sensitive care/family engagement without asking parents about their experiences? • When surveying/interviewing families, who is the ideal respondent?
5. Cultural competence		<ul style="list-style-type: none"> • Issues of culture and cultural responsiveness pose significant measurement challenges. What suggestions might you offer about how a culturally responsive framework can be useful in terms of measurement? • How can cultural perspectives be incorporated into measurement of family engagement/family-sensitive care concepts?
6. Application of knowledge	<ul style="list-style-type: none"> • How has knowledge regarding family engagement/family-sensitive caregiving led to changes in practice? • How can information be shared and aggregated (locally and on a large scale) to impact programs? • What are the limitations on sharing this information? 	
7. Global vs. domain-specific measure		<ul style="list-style-type: none"> • What are the advantages and disadvantages of developing measures that may be integrated into global quality assessments vs. measures that are domain-exclusive and focus only on family engagement/family sensitive care?

Main Concept of Interest	Questions for Day 1	Questions for Day 2
4. Related to Parents/Families	<ul style="list-style-type: none"> • Which family members' perspectives do we have knowledge about regarding family engagement/family-sensitive caregiving? • How much do parents value family engagement/family-sensitive practices? 	<ul style="list-style-type: none"> • What should the role of parents be in the development of assessments in this area? • Can we measure family-sensitive care/family engagement without asking parents about their experiences? • When surveying/interviewing families, who is the ideal respondent?
5. Cultural competence		<ul style="list-style-type: none"> • Issues of culture and cultural responsiveness pose significant measurement challenges. What suggestions might you offer about how a culturally responsive framework can be useful in terms of measurement? • How can cultural perspectives be incorporated into measurement of family engagement/family-sensitive care concepts?
6. Application of knowledge	<ul style="list-style-type: none"> • How has knowledge regarding family engagement/family-sensitive caregiving led to changes in practice? • How can information be shared and aggregated (locally and on a large scale) to impact programs? • What are the limitations on sharing this information? 	
8. Measurement approaches		<ul style="list-style-type: none"> • What lessons have we learned from other fields about measuring these aspects of quality? • How would—or could we—use observations to assess attitudes, knowledge and practice?

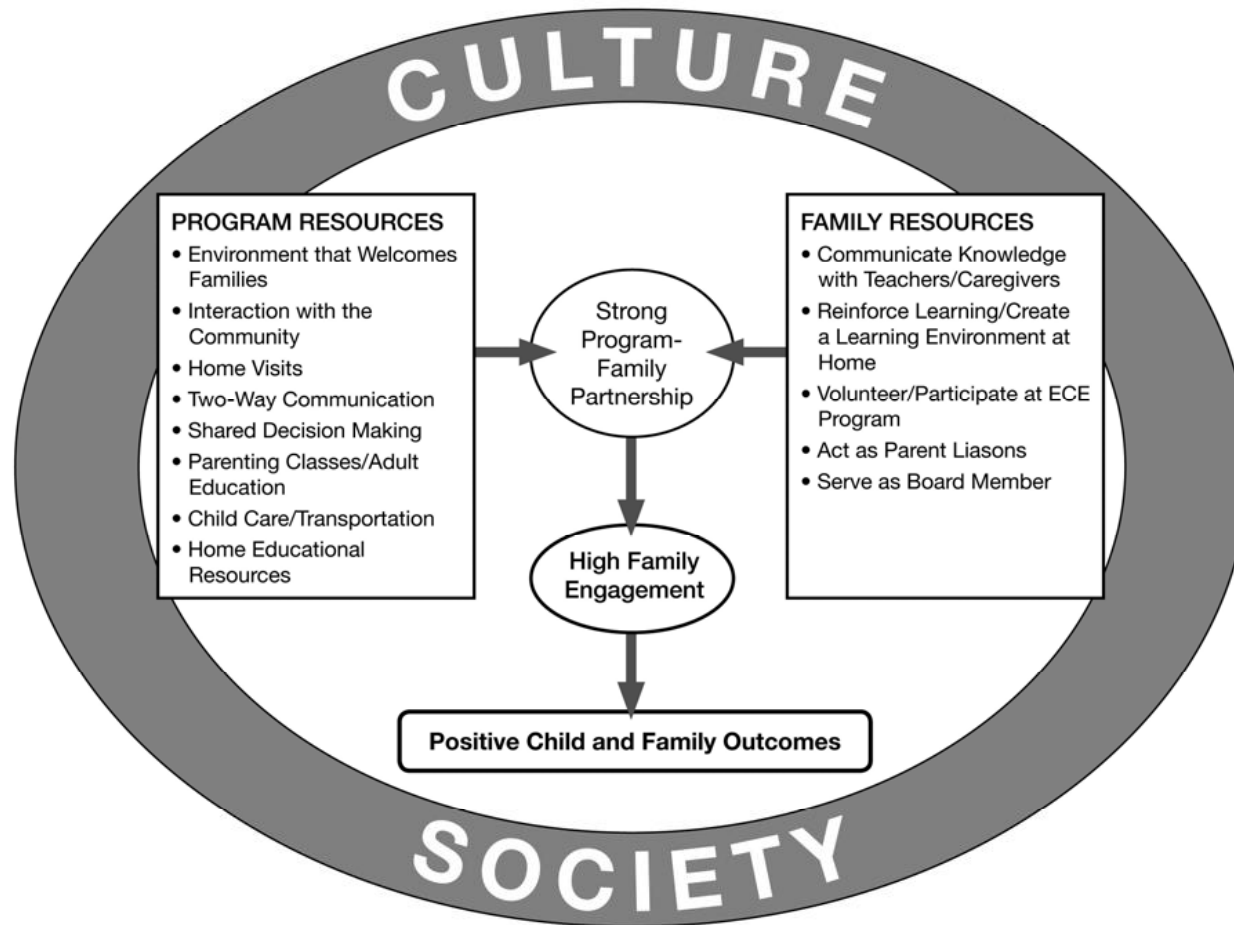
Appendix 3:
Family-Sensitive Caregiving Conceptual Model

Family-Sensitive Caregiving: A Conceptual Model of Child Care Quality



Appendix 4:
Social Exchange Model of Family Engagement

Social Exchange Model of Family Engagement



From: Halgunseth, L.C., Peterson, A., Stark, D.R. & Moodie, S. (2009). *Family Engagement, Diverse Families, and Early Childhood Education Programs: An Integrated Review of the Literature*. Washington, DC: National Association for the Education of Young Children & Pre-K Now.

Appendix 5:
Family Engagement/Family-Sensitive Caregiving Comparative Table

Family Sensitive-Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Concepts

Family Engagement/Family Sensitive Comparative Table

(Note: Bolded text indicates where there are differences between the FSC and FE columns.)

	FAMILY-SENSITIVE CARE (FSC)	FAMILY ENGAGEMENT (FE)	DISTINCTIONS BETWEEN FSC AND FE
Target Population Based on Current Literature	<ul style="list-style-type: none"> Center-based early care and education programs (teachers) Home-based child care (family, friend, and neighbor care and regulated family child care) 	<ul style="list-style-type: none"> Center-based and home-based early care and education programs (teachers/family support staff/home visitors/administrators) Schools School-age programs 	<ul style="list-style-type: none"> FE has, thus far, been emphasized in both early childhood settings and school/school-aged care settings. There are clear distinctions in the goals and implementation of FE for ages birth to five and K-12. FSC has been focused on early childhood settings.
Theoretical/ Foundational Knowledge	<ul style="list-style-type: none"> Developmental-ecological perspective Family health and well-being research Work-family literature Social referencing Research on home-based child care which suggests these providers may be more sensitive to work-family needs of parents Family systems 	<ul style="list-style-type: none"> Developmental-ecological perspective Family health and well-being research Social Exchange theory Historical influence (in Head Start) on Parent Advocacy and Parent Leadership through “Maximum feasible participation” policy 	<ul style="list-style-type: none"> The primary focus of FSC is to reduce parents’ stress, promote job stability, and improve work-family balance through improved relationships with programs and providers, with the belief that these factors may shape family health and well-being as well as child outcomes. For FE, the primary focus is to improve home-school connections in order to improve child outcomes. For Head Start specifically, the goal of FE is to improve both child and family outcomes.
Constructs	<p>Attitudes:</p> <ul style="list-style-type: none"> Respect and acceptance of diverse family traditions, child-rearing practices, and family circumstances <p>Knowledge:</p> <ul style="list-style-type: none"> Knowledge about the lives of families (information about the family’s employment and economic situation, family traditions and cultural beliefs, and awareness of parents’ skills and strengths) 	<p>Attitudes:</p> <ul style="list-style-type: none"> Strengths-based approach Sensitivity to families’ language needs, educational or financial limitations, and the extended family that may be involved in a child’s development and learning. <p>Knowledge:</p> <ul style="list-style-type: none"> For birth to five, knowledge and understanding of the importance of staff-parent partnerships that 	<ul style="list-style-type: none"> FE knowledge and practice constructs primarily center on a shared responsibility and shared decision-making between parents and providers to facilitate children’s development, school readiness, and later school achievement. FSC knowledge and practices primarily focus on supporting families in an effort to reduce stress, facilitate parental employment, and foster emotional wellbeing within the family.

Family Sensitive-Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Concepts

Family Engagement/Family Sensitive Comparative Table

(Note: Bolded text indicates where there are differences between the FSC and FE columns.)

	FAMILY-SENSITIVE CARE (FSC)	FAMILY ENGAGEMENT (FE)	DISTINCTIONS BETWEEN FSC AND FE
	<p>Practices:</p> <ul style="list-style-type: none"> • Frequent and positive communication with families about a wide range of issues related to both the child’s and the parent’s needs • Flexible programming such as varying hours of care to accommodate unpredictable job and payment schedules • Logistical supports to parents (e.g. transportation) • Provision of resources and referrals about parenting, as well as other needs, and opportunities for social support with other parents • Collaboration with community to provide resources to meet parent needs (e.g., parenting information, health, employment, opportunities for social support) 	<p>support overall family development, including individual adult development, the parent-child relationship, the parent as the child’s first teacher, and transitions to other ECE settings and Kindergarten to support children’s school readiness.</p> <ul style="list-style-type: none"> • For K-12, two-way knowledge exchange between families and programs to support children’s school and later achievement. <p>Practices:</p> <ul style="list-style-type: none"> • Two-way communication • Shared decision-making regarding child’s education and, in the case of Early Head Start/Head Start, in program governance • Facilitation of warm and responsive parent-child relationships, in an effort to help facilitate children’s development • Collaboration with community to provide resources to support family well-being, parent engagement and children’s, health, development and learning • Reciprocal partnerships • Shared responsibility for learning outcomes between families and programs 	
Intermediate Outcomes	<p>For families:</p> <ul style="list-style-type: none"> • Increased engagement in program • Parents’ satisfaction with care 	<p>For families:</p> <ul style="list-style-type: none"> • Parents’ improved communication with teachers 	<ul style="list-style-type: none"> • Concerning FE, for children birth to five, many programs focus on parent and family well-being outcomes as

Family Sensitive-Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Concepts

Family Engagement/Family Sensitive Comparative Table

(Note: Bolded text indicates where there are differences between the FSC and FE columns.)

	FAMILY-SENSITIVE CARE (FSC)	FAMILY ENGAGEMENT (FE)	DISTINCTIONS BETWEEN FSC AND FE
	<ul style="list-style-type: none"> Improved communication with providers Improved continuity between arrangements (reduced turnover) <p>For programs:</p> <ul style="list-style-type: none"> More active engagement of families in their children’s learning process. Improved transitions between settings and into the school system Improved parent-provider relationships and communication <p>For providers:</p> <ul style="list-style-type: none"> Increased sense of competence and self-efficacy Job role satisfaction Reduced family turnover/increased employment stability 	<ul style="list-style-type: none"> Parents increased participation in school activities and in other complementary learning contexts (e.g. after-school, summer programs, faith-based) Development of parent-provider shared goals for children’s education and development Parents increased knowledge of parenting skills and their child’s development. Parents increased perception of themselves as advocates and leaders as it relates to their child’s learning and development, particularly for parents with children with disabilities. Parents increased sense of self-efficacy through peer and social networks. <p>For programs:</p> <ul style="list-style-type: none"> Improved communication with the parent about the child’s educational experience and the program Enhanced curriculum and instruction based on information about students’ lives and families Improved transitions between settings and especially as children enter the school system Improved support for families in establishing educational/developmental goals for children Improved staff skills at engaging families 	<p>they relate to children’s learning and development outcomes. In K-12,FE focuses on parent outcomes as they relate to children’s education.</p> <ul style="list-style-type: none"> FSC’s primary focus is on outcomes related to early care and education arrangements (e.g., continuity of care) as well as parent outcomes.

Family Sensitive-Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Concepts

Family Engagement/Family Sensitive Comparative Table

(Note: Bolded text indicates where there are differences between the FSC and FE columns.)

	FAMILY-SENSITIVE CARE (FSC)	FAMILY ENGAGEMENT (FE)	DISTINCTIONS BETWEEN FSC AND FE
		For Teachers: <ul style="list-style-type: none"> Increased sense of competence and self-efficacy Job role satisfaction 	
Long-term Outcomes	<ul style="list-style-type: none"> Children’s cognitive, and social-emotional development Improved health outcomes for all family members Parents’ improved sense of self-efficacy, mental health and well-being Reduced stress around work-family issues and greater family stability Parent work and employment outcomes (stability) 	<ul style="list-style-type: none"> For birth to five, children’s, physical health, cognitive and social-emotional development. For K to 12, children’s cognitive and social-emotional development Increase in parents’ ability and willingness to actively participate in their children’s learning contexts Improved home learning environment based on collaborative school-parent goals for children 	<ul style="list-style-type: none"> FE places more emphasis on parents playing an active role in their child’s education in order to facilitate child outcomes. FSC places more emphasis on supporting parents and families so that children can realize their full potential.
Professional Preparation for Early Care and Education Providers	Mode of Preparation: <ul style="list-style-type: none"> Reflective practices, coaching and supervision Content: <ul style="list-style-type: none"> Best practices for working with parents and families Family-centered practice Family systems Social work Relationship-based approaches to working with families How to communicate effectively with families Cultural competence 	Mode of Preparation: <ul style="list-style-type: none"> Reflective practices, coaching, and supervision Content: <ul style="list-style-type: none"> Best practices for working with parents and families Family systems Relationship-based approaches to working with families How to communicate effectively with families Cultural competence 	<ul style="list-style-type: none"> Little is known about how early care and education providers are being prepared to support families through FE and FSC.

Appendix 6:
Literature Review Power Point Presentation

MULTI-DISCIPLINARY LITERATURE REVIEW OF FAMILY ENGAGEMENT/FAMILY-SENSITIVE CARE

Nicole Forry
Shannon Moodie
Julia Wessel
Kristen Darling-Churchill



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Selection Criteria

- Articles/book chapters published in/after 2000 (except for some seminal work suggested by our planning group members)
- Balance of materials from various disciplines and various authors
- Emphasis on:
 - specific attitudes, knowledge, or practice indicative of family engagement/family-sensitive care
 - associations among family engagement/family-sensitive care practices and child or family outcomes

Summary of Articles Included

- 43 articles tabled
- Field Classification
 - 5 Health, 3 Mental Health, 10 Social Work, 5 Family Systems, 29 Early Care and Education, 6 Education
- Data Sources/Samples
 - Sample size ranged from 7 (case study) to over 1,000; majority of studies had between 25-200 participants
 - Samples include: families (mostly mothers), home visitors, child care providers (center-based, family child care, and family/friend/neighbor), teachers, CPS workers, and children
- Methodology
 - Qualitative (interviews, focus groups, observations)
 - Program evaluations (experimental and quasi-experimental designs)
 - Quantitative studies (correlation, regression, factor analysis)
 - Conceptual articles

Family Engagement/ Family-Sensitive Care: Attitudes

Attitudes

- Strengths-based empowerment
- Equality
- Trust
- Respect
- Warmth
- Flexibility
- Accepting
- Supportive
- Sensitive
- Attachment
- Commitment
- Reliable/stable
- Desire for the family to do well
- Supportive organizational climate

Family Engagement/ Family-Sensitive Care: Knowledge

Family-Specific

- Recognition of families' strengths and goals
- Awareness of issues family is facing
- Knowledge of families' language and culture

General

- Practitioner self-awareness
- How to navigate complex systems
- Resources in the community
- How to effectively promote learning at home

Family Engagement/ Family-Sensitive Care: Practices

Process

- Effective communication and collaboration
 - Open, honest, validating, encouraging, tactful, clear interactions
- Systems approach
- Flexibility, responsiveness, and individualized services
- Consistency
- Inclusivity
- Solution-focused therapeutic alliance

Family Engagement/ Family-Sensitive Care: Practices

Skills

- Reciprocal dialogue
- Collaborative family decision-making
 - Mutual goal setting, brainstorming, shared decision-making
- Formal and informal support building
- Resource sharing, including concrete resources
- Advocate and liaison with other systems
- Capacity-building (skill facilitation)

Prediction to Child Outcomes

- Social-Emotional Health
 - Improvements in both internalizing and externalizing behaviors
 - Attachment security
 - Social competence
- Approaches to Learning
 - Attention/Persistence
 - Motivation
- Cognitive development
 - Language and literacy
 - Early math skills

Prediction to Family Outcomes

- Empowerment and self-efficacy
- Parenting
 - Attitudes
 - Behaviors
- Increased engagement in programs/services
- Increased social supports
- Improved parent-provider and parent-teacher relationships
- Increased access to information, services, and materials (mental health services)
- Personal/family well-being

Appendix 7:
Bibliography of Articles Reviewed/Collected for Literature Review

Bibliography of Articles Reviewed/Collected for Literature Review

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