

Early Head Start Research and Evaluation Project (EHSRE): Research Partners 1996-2001, Birth to Three Phase

Catholic University of America

Project Title:

Research on the Inclusion of Infants and Toddlers with Disabilities in Early Head Start Programs

Grantee:

United Cerebral Palsy Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

The Catholic University of America (CUA), research partner of the United Cerebral Palsy Early Head Start (EHS) Program in Alexandria, VA conducted this local Early Head Start research project in order to develop an understanding of: (1) the effect of the EHS experience on mobilizing parents to overcome barriers and access resources and supports for family well-being and child development; (2) the varied pathways to family and child development followed by U.S. born and immigrant families and the unique contributions of family characteristics, stressors, strengths and service experiences to the course of family and child development; (3) the pathways to acquiring early intervention / special education services for families whose infants and toddlers were referred because of suspected developmental delays or disabilities and (4) policies and practices that can be adopted by EHS grantees to better serve infants and toddlers with disabilities.

The UCP EHS program served a multicultural population of families along the Route 1 corridor in Fairfax County, Virginia, south of Washington, D.C.,

providing home visiting, family child care and center-based child care, according to families' changing needs. The research sample was 150 families randomly assigned to EHS or comparison groups. The sample included two-thirds U.S. born and one-third immigrant families. Among the U.S. born, more than half had a parent who was a member of the U.S. military. One-third of research families were African or African American; one-third Hispanic; one-fourth Caucasian, and the rest native American Indian or Asian. Multiple quantitative and qualitative methods were utilized to investigate the research areas identified in this study, including a qualitative case study of 32 parents whose infants and toddlers had suspected or confirmed developmental delays or disabilities.

At baseline, EHS families had significantly lower resiliency attitudes and more inadequate resources than comparison families. US-born mothers reported more adequate resources than immigrant mothers. EHS program data showed that immigrant families participated in EHS longer than U.S. born families, and received more parent mobilization services focused on addressing parenting issues and family needs. When focus children were 24 months, EHS mothers reported higher parenting role competence and less use of spanking to discipline their young children than the comparison mothers. US born mothers reported higher average general competence in handling life stresses than immigrant mothers. At 30 months, mothers rated their children within a developmentally appropriate range for socio-behavioral development in both the EHS and comparison groups.

Assessing the paths to mothers' general competence at the 24 month assessment, mothers with higher baseline resiliency attitudes, more adequate resources, and more social support had better general competence. Mothers' general competence also predicted their reported competence as parents. Assessing the paths to children's socio-behavioral development at 30 months, greater parenting competence predicted fewer socio-behavioral problems. For EHS families only, families who perceived they made greater investments in their children or had more goals for the future had children with fewer socio-behavioral problems.

For the qualitative research of 32 families with children referred for early intervention services, case studies integrated in-depth interviews of mothers and staff with reviews of program and research records. Reviews of transcribed interviews and records lead to matrices, creation of categories and identification of themes and exceptions (applying the constant-comparative method for trends across cases). Major findings from the qualitative research are:

- EHS enhanced the likelihood the low-income families obtained early intervention services.

- EHS staff met families where they were in their priorities, and established relationships by assisting with problem solving and resource identification for urgent basic family needs. Staff were then able to help parents with the less familiar challenges associated with understanding child development, recognizing and accepting their child's unique challenges, comprehending what early intervention offers, and navigating the complex early intervention services. Cases illustrated how EHS scaffolded the work with parents differently according to their needs, e.g., through information sharing, task analysis and the achievement of small successes, teaching by modeling, and learning by doing.
- EHS staff ratings of families with children with delays or disabilities at exit from EHS services showed that all families improved their problem solving abilities, the health and safety of their home environments and parenting skills.
- What hindered or helped mothers' acceptance of the child's unique needs and action to obtain assessment and services was related to several factors: the severity of the child's delays or condition, the parents' understanding of normal development and the child's unique needs, the parents' acceptance of the expertness of the referring agent, how child focused the parent was, the urgency of basic family needs, the acceptance and involvement of family members and friends, the intensity of involvement with formal support systems/agencies. The work of EHS influenced these contributing factors in a positive direction, such that barriers were often transformed into facilitators to getting early intervention assessment and services.

Sample:

N=150 families

Measures:

Parental Mobilization

Knowledge of Infant Development Inventory (KIDI)

Self as Parent

Toddler Care Questionnaire

Count Reports, Parent/Child Separations, Mathematica Policy Research (MPR)

MPR Questions (Child Health and Safety, Discipline, Parent/Child Activities)

Family Resource Scales (Dunst and Leat, 1994)

Spirituality Scale

Resiliency Attitude Scale (RAS)

Ethnicity and Military Identity Scale

Stressful Life Events
Parenting Stress Index (PSI)
Family Goals Scale (MPR)
Woodcock-Johnson
Family Environment Rating Scale
Interviews with Parent, Staff, Early Intervention Providers
Early Intervention Records and IFSPs
EHS Program Records

Family Asset Development

Employment Income
Proximity of Relatives and Contact Persons (Social Support)
MPR Social Support Scale
Social Support Scale (Dunst and Trivette)
MPR Listings of Services Received
Pearlin Mastery Scale
Parent Health
Center for Epidemiological Study Depression Scale (CES-D)
CIDI, University of Michigan
Family Functioning Scale
Home Observation for Measurement of the Environment (HOME)
Parental Modernity Scale
Interviews with Parent, Program Staff, and Early Intervention Providers
EHS Program Records

Child Development

Emotionality, Adaptability, and Social Inventory (EASI)
Bayley Scales of Infant Development (BSID)
Child Behavior Checklist (CBCL)
MacArthur Communicative Development Inventories (CDI)
Peabody Picture Vocabulary Test (PPVT-III)
EHS Service Dosage
EHS Program Record Review

Child Care Quality

Infant Toddler Environment Scale
Family Day Care Rating Scale
Early Childhood Environment Rating Scale
Arnett Scale of Caregiver Behavior

Place of Birth and Occupational Status

Head Start Family Information System (HSFIS)
Birth and Occupational Questions
Parent and Program Staff Interviews

Child with Developmental Delays

EHS Program Assessment and Referral Records

Early Intervention Records IFSPs

HSFIS

Parent Services Interview

Bayley Scales of Infant Development

Open Ended Questions Regarding Beliefs about Inclusion

Interviews with Parent, Program Staff, and Early Intervention Providers

Harvard University

Project Title:

Harvard Graduate School of Education-Early Education Services Research Partnership

Grantee:

Early Education Services

Project Funding Years:

1996-2001

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Project Abstract:

The objective of the Harvard Graduate School of Education-Early Education Services Research Partnership was to investigate factors that mediate child and family outcomes related to language and socio-emotional development in the context of a local Early Head Start (EHS) program. This research effort focused specifically on parent-child interaction as a context for: (1) language and literacy development; (2) socio-emotional development; (3) risk and resiliency in parenting. Data collected in this study will provide information on the impact of the EHS program and will outline the specific program components shown to have produced those effects.

The sample for this study was drawn from the rural low-income population of Windham County, Vermont. Poverty, isolation and cultural lack of support for children's intellectual development are some of the risks present in this community. Data were collected on 146 families, half of whom received EHS

services and half of whom did not. Eight families drawn from this larger sample were followed in an ethnographic study of parenting and child development.

This research project supplemented the national EHS evaluation by: (1) retaining the program/control design; (2) collecting naturalistic language data and multiple source data on child socio-emotional development and risk and resilience in parenting; (3) collecting additional program utilization data on EHS families; and (4) enriching qualitative data with ethnographic and other observational data.

Sample:

N=146 families, half of whom received EHS services
n=8 families, ethnographic sub-sample

Measures:

Parent

Head Start Family Information System (HSFIS)
Family Assessment Profile (program group only)
Family Functioning Scale (program group only)
Wechsler Adult Intelligence Scales for Children (WAIS), Vocabulary Subset
Woodcock-Johnson Word Recognition subscale
Stressful Life Events Scale
Center for Epidemiologic Study Depression Scale (CES-D)
Knowledge of Infant Development Inventory (KIDI)
Knowledge and Expectations about Child Development Child Abuse Potential Questionnaire
Parenting Stress Index (PSI)
AIMS: Developmental Indicators of Emotional Health (program group only)
Family Problem and Strength Profile (program group only)

Child and/or Parent-child Interaction

Nice and Mean Interaction Scales
Behavioral Style Assessment
MacArthur Communicative Development Inventories (CDI)
Book Reading and Toy Play Observation
Mastery Task Observation
Child Behavior Checklist (CBCL)

Ethnographic substudy

Videotape and audiotape of Family Activities
Family Oral History Interview

Project Title:

Project HOME (Home Observation to Measure Effectiveness)

Project Title:

Project HOME (Home Observation to Measure Effectiveness)

Grantee:

Mid-Iowa Community Action, Inc. Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

Project HOME (Home Observation to Measure Effectiveness) was conducted by Iowa State University in conjunction with the initial implementation of the Mid-Iowa Community Action, Inc. EHS program and the EHS Research and Evaluation Project. While the EHS Research and Evaluation Project was designed to examine the impact of EHS on the development of participating children and families, the primary focus of Project HOME was a within intervention group study designed to delineate the intervention variables, in this case related to home-based intervention, that differentiate intervention effects for diverse children and families.

Project HOME had three primary goals. The first was to describe the intensity, content/process, and quality of home visits conducted by the Family Development Specialist and the Child Development Specialist while the child was enrolled in the MICA EHS program. The second goal was to assess the extent to which specific aspects of home visitation as an intervention were differentially related to child development and parental well-being. The third goal was to determine which aspects of home-based intervention were most effective for children and families facing diverse levels of risk.

These research goals were proposed to enable Project HOME to assist in providing information needed to guide policy development and program implementation necessary to support families facing the real-life challenges of today's world. Examining intervention outcomes without understanding

the intensity, process/content, and quality of interventions does not help the field understand how to shape effective interventions for diverse groups of people. In addition, failure to consider mediating and moderating variables interacting with interventions for these populations yields confusing data that cannot be used to further research efforts or to guide service delivery systematically. Thus, the research questions addressed and methodology utilized were undertaken to facilitate overcoming some weaknesses in past research efforts to examine interventions and related outcomes and helping us understand what intervention strategies are effective for whom.

While the focus of this study is the relations between specific intervention factors and parent and child outcomes, the relations between intervention factors and other outcome variables (e.g., overall family well-being) were also considered carefully. Intervention and outcome variables, as well as the relations between them, were considered in terms of both direct and indirect relations.

Sample:

n=226 families

Measures:

Program Construct

Parent Services Interview

Individualized Family Service Plans (IFSPs)

Child Care

EHS Provider and Program Director Interviews

Infant/Toddler Environment Rating Scale (ITERS)

Family Day Care Rating Scale (FDCRS)

Early Childhood Environment Rating Scale (ECERS)

Child-Focused Observation

Family Construct

Head Start Family Information System (HSFIS)

Parenting Stress Index (PSI)

Family Conflict

Stressful Life Events

External Family Influences

Family Support Scale

Stressful Life Events

Family Services and Resources Survey

PSI

Caregiver Characteristics

EHS Parent Interview

Center for Epidemiologic Study Depression Scale (CES-D)
Knowledge of Infant Development Inventory (KIDI)
Parent Empowerment Scale
Welfare Reform Questionnaire
Woodcock-Johnson

Home Environment

Home Observation for Measurement of the Environment (HOME)
Community Violence Questionnaire

Interaction Construct

Parent-Child Interaction
HOME
EHS Video Protocol

Child Cognitive and Language Outcomes

Cognitive and Language Development
Bayley Scales of Infant Development
MacArthur Communicative Development Inventories (CDI)

Child Social and Emotional Development

EHS Parent Interview
EHS Video Protocol

Child Health Status

EHS Parent Interview
HSFIS
PSI

Assessment of Home Visits

Home Visit Observation Form- Revised (HVDF-R)

Medical University of South Carolina

Project Title:

Early Head Start for Substance Abusing or Mentally Ill Adolescent Mothers,
Fathers, and their Infants

Grantee:

Sumter School District 17 Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

This research project, conducted by the Medical University of South Carolina Family Services Research Center in partnership with the Sumter School District 17 Early Head Start Program (SSD17-EHS), was designed to collect information that would increase the knowledge base about effective interventions for families of infants and toddlers affected by parental substance abuse and/or other mental health conditions.

SSD17-EHS is a school-based program that provides comprehensive services for teen/young mothers, infants/toddlers, and their families. Besides core Early Head Start child development, health, social service, case management, and other services, the SSD17-EHS program included supplemental therapeutic childcare, an intensive center-based intervention. It also included a research demonstration of intensive home-based service for families with extreme needs. The objective of the study was to understand the differential effects of SSD17-EHS's standard and intensive programs when compared against usual community service controls. The focus of this research project was on family outcomes, primarily parental substance use and mental health functioning, as well as parent-child interactions, family and dyadic adjustment, and peer relations. Data collected in the Sumter School District study supplements the national Early Head Start (EHS) impact study by focusing on differential effects of intensified EHS program components for an important target sub-population.

Besides economic disadvantage and child disability, which are the primary eligibility criteria for receipt of Early Head Start services, eligible EHS population in Sumter School District 17 includes a high percentage of adolescents who are teen parents, who are at risk of dropping out of school between 8th and 12th grades, and who are at risk of alcohol and substance use. A sample of 152 EHS-eligible participants were recruited continuously between July 1, 1996 and September 30, 1998 and randomized to receive either EHS or usual community services. In addition, based on characteristics of the participants (e.g., risk for out-of-home placement, risk of child abuse or neglect, parental mental health conditions—especially depression—child disability, and/or extreme material deprivation), selected

high-risk EHS children who were receiving center-based EHS services were referred to receive supplemental therapeutic childcare. In addition, during the second year of the project, a small number of high-risk and difficult-to-engage families who were receiving home-based EHS services were referred to receive intensive home-based services for periods ranging from 6 months to 1 year. These cases were part of a research exploration of the potential benefits of intensive home-based services for engaging high-risk families who were difficult to reach through conventional EHS outreach. For all cases, local research assessments were scheduled at enrollment and 6-, 15-, 26-, and 36-month follow-up points.

Sample:

N=152 children and caregivers

Measures:

Substance Use

Addiction Severity Index / Teen Addiction Severity Index

Psychiatric Symptoms

Composite International Diagnostic Interview-Short-Form (CIDI-SF)

Depression Module

Brief Symptom Inventory (BSI)

Social Competency and Behavior Problems

Child Behavior Checklist (CBCL) - Parent Report

Youth/Young Adult Self Report

Achievement

Wide Range Achievement Test (WRAT)

Woodcock-Johnson

Peer Relationships

Family, Friends, and Self (FFS)

Family Functioning

Family Adaptability and Cohesion Evaluation Scales (FACES-III)

Dyadic Adjustment Scale (DAS)

Parenting Stress Index (PSI)

Fathering (Mother Report)

New York Fathering Measure

Descriptive and Moderating Variables

Demographics

Social Class

Research Engagement Ratings

Qualitative

Adolescent/Young Adult Parenting Experiences Interview

Michigan State University

Project Title:

Pathways Project: Research into Directions for Family Health and Service Use

Grantee:

Region II Community Action Agency

Project Funding Years:

1996-2001

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Project Abstract:

The Pathways Project was a collaborative research effort of Michigan State University and the Early Head Start (EHS) Program of the Community Action Agency (CAA) in Jackson, Michigan. The objectives of this project were to define family health status and examine family utilization of and retention in services and programs. The research questions addressed in the study included: (1) identifying the characteristics associated with family health; (2) determining the association between EHS participation and time of enrollment and family health over time; (3) determining whether family health, EHS participation, and time of enrollment predict the type, combination, use of, and retention in services and programs at different times; and (4) determining whether family health was a mediator of child outcomes.

The focus of the study was on the bio-psychosocial components of family health, which included family interaction, family coping, developmental transitions, family integrity, and biophysical well being with a special focus on nutrition. Research findings from this project expand the national EHS research by presenting a unique family perspective and multidimensional view of services. This research is especially significant because it includes

the early infancy period that is critical for intervention in the family. The study provided information about a seamless service system for families with young children, focused on all aspects of family health, which could potentially be a model for a state or national system of services and programs.

The EHS Program provided intensive intervention services using a home visit model to high-risk families with infants and toddlers, while providing early access to health care services for the child and family. The sample for this study was recruited from EHS-eligible families attending a local family health center or other community agencies. A sample of 190 families were enrolled and randomly assigned to intervention and control groups. A longitudinal experimental design combined qualitative and quantitative data collection and analytic approaches. Methods of data collection included child and parent observations, parent interviews, and record reviews. Child and parent observation data and parent surveys were collected at 14, 24, and 36 months of the child's age, and parent interviews were collected at enrollment, at 6, 15 and 26 months after enrollment, and at exit. Medical records were reviewed for the parent and the child.

Sample:

N=190 families with approximately 160 families completing 2 or more waves of data collection.

Measures:

Parent-Infant Interaction

Nursing Child Assessment Teaching Scale (NCATS)

Nutritional Status

24-Hour Diet Recall for mother and child

Social Support

Items in parent interview

Family Coping and Functioning

Family Crisis Oriented Personal Evaluation Scale (F-COPES)

Dyadic Adjustment Scale (DAS) - satisfaction scale

Home Observation for Measurement of the Environment (HOME)

Family Environment Scales (FES) - conflict scale

Infant Characteristics

Emotionality, Adaptability, and Sociability Inventory (EASI)

Family Functioning

McMaster Family Assessment Device (FAD) - General Function scale

Parent Knowledge
Knowledge of Infant Development Inventory
Psychological Empowerment Scale (PES)

Life Course Events
Interview Guide

Adult Growth/Development - Personal Health
Interview Guide
Medical Record

Attitudes Toward Service
Interview Guide

Perception of Family Health
Interview Guide

Time Management
Interview Guide

Service Needs and Use Referral
Parent Services Interview
EHS program records
Medical record

Child Health/Development
Parent Interview
Medical record

Pattern of Well/Illness Care
Major Illnesses/Injuries
Medical Record - Mother and Child

New York University

Project Title:
Local Research Partnership for New York City's Early Head Start Program

Grantee:
The Educational Alliance, Inc.

Project Funding Years:
1996-2001

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Project Abstract:

This research project, a collaborative effort between New York University and the Educational Alliance Early Head Start (EHS) program, assessed the effects of an EHS program on outcomes in each of EHS's four cornerstones: child, mother and family, program staff development, and community. This research emphasized parent-child interactions, particularly those supportive of children's language development, and examined children's emerging competencies in the areas of language and play across the first years of life. Additionally, we examined factors central to positive parenting, including mental health, violence, and social networks, with special attention to Hispanic and African American cultures. The specific outcomes addressed in this study included: (1) cognitive and linguistic abilities, social competence, psychological and physical health, and lowered propensity for violent and aggressive behavior in children; (2) parental efficacy; functioning in school, work, and social settings, knowledge of development, mental and physical health, support from family and community resources, and utilization of social and career resources in mothers, fathers and families; (3) skills in working with infants, mothers and families, empathy and responsiveness, sense of personal accomplishment, decreased exhaustion and depersonalization symptoms in staff; and (4) number of skilled providers available to community families, and cooperation between public and private community organizations.

This research project was conducted within the EHS program of the Educational Alliance in one New York City high school that served teen mothers. The population served was ethnically and culturally diverse, and included a large population of Spanish and Asian speaking immigrants. The total sample for the study was approximately 200, including 75 mother-infant dyads enrolled in EHS and 75 control group dyads. The comparison group consisted of mothers in the community who received parenting classes

at Educational Alliance. The sample was culturally representative and included at least ten percent of infants with disabilities. Data was collected at baseline (intake), and when children were 6-, 14-, 24-, and 36-months-old.

University of Arkansas for Medical Sciences

Project Title:

Arkansas Early Head Start Research Project

Grantee:

Child Development, Inc. Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

This research project was a collaborative effort between the University of Arkansas and the Child Development, Inc. (CDI) Early Head Start (EHS) program. The specific objectives of the local research study were to determine: (1) the impact of participation in EHS on children and their mothers; (2) the association between behavior and attitude changes in the parent with similar changes in the child; (3) the quality of training provided for children and parents by the EHS staff; (4) the improvement of parent outcomes resulting from program participation; and (5) the improvement of child outcomes resulting from program participation. A transactional developmental model, which took into account the influences between parent and child and between EHS program, parent, and child, was utilized. The research questions for this study were based on an intervention approach that included a center-based program for children with a strong parent training component. The parent training component focused on self-sufficiency, education, employability, physical health, adult-child relationships, and relationships with adults. Parent Domain research questions addressed each of these areas. Child Domain research questions addressed social competency, communication skills, physical health, and nutrition.

The Arkansas research project utilized a systems approach to investigate child outcomes and focused intensively on specific parent outcomes and the effect of those outcomes on children. This interactive systems approach increased understanding of how child outcomes were mediated through interactions with significant adults.

The sample for this research project included rural families in three Arkansas counties with a child under one year old and a parent who was either employed or enrolled in an educational school. Eligible families were randomly assigned to intervention or control conditions. The control group included non-selected children who were directed to other community resources.

Baseline demographic and parent dependent variables were collected from intervention and control families at the time of enrollment, and measures were repeated at 12, 24, and 36 months after enrollment. Each dependent variable was analyzed using a two-way mixed model ANOVA design based on group (control or intervention) and time of assessment (12, 24, and 36 months). Multivariate and qualitative analyses were also conducted. Baseline data collected in this study will form the basis for a subsequent longitudinal study of this population.

Sample:

N=150

Measures:

Mother/ Grandmother

Grandmother-Figure Demographic Data

Social Skills Scale

Grandmother Involvement with Child Scale

Expectations of Parenting Role Scale

Mother-Grandmother Interaction

Scales of Intergenerational Relationships Quality (Wakschlag, 1991)

Parental Investment in Child

Parent Opinion Survey (PIC)

Mother

Maternal Food Frequency (Adapted from NHANES III)

Maternal Activities (Physical; Adapted from NHANES III)

Parental Self-Efficacy

Mother's Living Situation

Quality of Life Scale

Resiliency Attitude Scale

Adult Attachment Scale

Substance Abuse Questions Developed Locally

Household Food Environment

Household Food Environment (Adapted from CSFII 1994-5 Household Questionnaire)

Child

Infant Feeding Questionnaire

University of California at Los Angeles

Project Title:

The Children First Program

Grantee:

Children First Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

This project was a collaborative effort between UCLA and the Children First Early Head Start (EHS) program. The primary objective of this study was to examine the mediating pathways to an EHS program that enhances children's social competence. A second objective was to examine the efficacy of EHS for a sample of low-income, Spanish-speaking, Latino immigrant families in an urban community characterized by high levels of violence and wide disparities in income level. An additional objective was to examine Children First's two generational service model, which utilizes Family Care Coordinators to provide child and family services and Child Care Providers for non-parental care.

This study focused on three EHS outcome domains: child, family, and staff. Outcomes of interest within the child domain included secure attachments with parents/other caregivers and social competence. Responsive and sensitive maternal caregiving was the primary family domain outcome addressed and was also explored as a process explaining child outcomes. Within the staff domain, a co-construction of child to Child Care Provider

attachments and of maternal-staff relationships was examined both as outcomes and as process variables in relation to achieving more positive child and family outcomes.

The research design utilized in this study was a within-subject examination of processes and changes over time. Multiple assessments of children, family, and staff development were conducted over the three-year period that the children were enrolled the program. The research design included in-home observations, maternal interviews, child care observations, provider interviews, parent interviews, and staff questionnaires.

Sample:

N=113 families (Spanish-speaking, Latino)

Measures:

Child

Language use
Peer Play Scale
Attachment Q-set

Family

Observation of Adult –Child socialization
Sensitive-Responsive Caregiving
Adult Involvement Scale (Howes & Stewart)
Maternal Behavior Q-Set
Emotional Availability

Attachment Representations

Adult Attachment Interview (AAI)
Parent Attachment Interview

Child Care

Sensitive-responsive Caregiving
Adult Involvement Scale

Caregiver Attachment

Adult Attachment Interview (AAI)
Attachment Q-set

University of Colorado Health Sciences Center

Project Title:

Clayton Mile High Family Futures Project

Grantee:
Clayton/Mile High Early Head Start Program

Project Funding Years:
1996-2001

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Project Abstract:
The objective of the Clayton/Mile High Early Head Start Program (C/MHEHSP) local research plan was to understand the mediating factors for intervention outcomes. C/MHEHSP interventions addressed all four cornerstones of Early Head Start (EHS): (1) the development of the child; (2) the development of the family; (3) staff-parent/child relationships; and (4) community collaboration. The local research effort focused on the developing child in the context of caregiver interactions and placed methodological emphasis on direct observations of the child in interactions with the identified caregiver. The conceptual emphases of the project were to assess: (1) positive relationship building and (2) the development of socioemotional competence, including early moral strengths.

Researchers examined the following areas: (1) empathy, emotion regulation and language observed in intervention and control group families; (2) the influence of the mother/intervener relationship on maternal attitudes, caregiving behaviors, and other supportive relationships (mediators to child development outcomes); (3) the extent to which mediators were related to child outcomes; (4) the relationship between the amount and quality of intervention services delivered and child outcomes in the areas of empathy, emotion regulation and language; and (5) the moderating effects of maternal personal resources on intervention.

The C/MHEHSP project targeted the northeast quadrant of Denver; a multi-ethnic community with a significant Hispanic and African American population. The C/MHEHSP sample drawn from this area was largely African American, poor, and in need of comprehensive child development services. The study sample included pregnant women who have not had a previous live birth and first-time mothers whose infants were under six months old.

A sample of 162 families were enrolled in the project. In addition to supplementing national EHS research measures with direct observations of parent-child interactions, emotional availability, language and child socioemotional development, the Clayton/Mile High study also contributed longitudinal databasing that allowed for tracking of Head Start children into the school-age period and comparisons with other samples of children.

Sample:

N=162 families

Measures:

Mother-Child Interaction

Emotional Availability Scale (Coded from Videotaped Free Play)

Maternal Interview

Emotional Regulation of Child

Standard Emotion Events/LAB TAB (Coded from Videotape)

Observation of Empathy (Using NIMH and MALTS Procedures)

Maternal Interview

Center for Epidemiologic Study Depression Scale (CES-D)

Wechsler Adult Intelligence Scale - Revised (WAIS-R)

Pearlin Mastery Scale

Conflict-ridden Relationships Questions (Simpson)

Dosage of Interventions

Home Visitor Ratings of Maternal Involvement

Frequency of Visits

Language

Preschool Language Scales (PLS-3)

Project Title:

Family Star Montessori Early Head Start

Grantee:

Family Star Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

The objective of the Family Star Montessori Early Head Start Program (FS-EHSP) local research plan was to understand the mediating factors for intervention outcomes. (FS-EHSP) interventions addressed all four cornerstones of Early Head Start (EHS): (1) the development of the child; (2) the development of the family; (3) staff-parent/child relationships; and (4) community collaboration. The local research effort focused on the developing child in the context of a center-based multicultural intervention in the Montessori tradition as applied to Early Head Start. The program served a community with a substantial Latino population and was dual language, with Spanish as well as English spoken. The conceptual emphases of the project were to assess program effects on child development as mediated by the center-based environment, and also to assess its effects on families and the community. Positive relationship building and child socio-emotional development were also assessed as was language development.

Researchers examined the following areas: (1) empathy, emotion regulation and language observed in intervention and control group families; (2) classroom behavior of children in relation to engagement; (3) the home environment and parental attitudes in relation to the center-based program; (4) the relationship between the amount and quality of intervention services delivered and child outcomes in the areas of empathy, emotion regulation and language; and (5) the moderating effects of maternal personal resources (maternal depression and relationship attitudes) on intervention and its outcomes.

The (FS-EHSP) project targeted the northwest quadrant of Denver; a multi-ethnic community with a significant Latino as well as Caucasian population. The C/MHEHSP sample drawn from this area was, poor, with many recent Mexican immigrants in need of comprehensive child development services. The study sample included pregnant women who have not had a previous live birth and first-time mothers whose infants were under six months old.

A sample of 147 families were enrolled in the project over a 12-month period. In addition to supplementing national EHS research measures with direct observations of parent-child interactions, emotional availability, classroom observations, child socioemotional development, additional language assessment and ethnographic studies, the Family Star Program study also contributed longitudinal basing that allowed tracking of Head

Start children into the school-age period and comparisons with other samples of children.

Sample:

N=147 families

Measures:

Mother-Child Interaction

Emotional Availability Scale (Coded from Videotaped Free Play)

Maternal Interview

Emotional Regulation of Child

Standard Emotion Events/LAB TAB (Coded from Videotape)

Observation of Empathy (Using NIMH and MALTS Procedures)

Maternal Interview

Center for Epidemiologic Study Depression Scale (CES-D)

Wechsler Adult Intelligence Scale - Revised (WAIS-R)

Pearlin Mastery Scale

Conflict-ridden Relationships Questions (Simpson)

Dosage of Interventions

Home Visitor Ratings of Maternal Involvement

Frequency of Visits

Language

Preschool Language Scales (PLS-3)

Observations of Classroom Behavior

Ethnographic studies

Focus groups of families in the community, learning of expectations with regard to the Program

Home observations and interviews done over time with families of children in the Program

University of Kansas

Project Title:

Early Head Start Local Research Project: A Partnership Between Juniper Gardens Children's Project and Project EAGLE

Grantee:

Project EAGLE Early Head Start

Project Funding Years:
1996-2001

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Project Abstract:

This Early Head Start (EHS) local research project was a collaboration between researchers at the University of Kansas and the Project EAGLE EHS Project of Kansas City, Kansas. A primary goal of the partnership was to examine the effects of multiple sociodemographic risks on children and families in poverty. Compared to children whose parents face fewer challenges, children from families with multiple risks-such as substance abuse, poverty, and limited education-are more likely to experience negative interactions and non-responsive parenting. In turn, a low level of parental responsiveness has been linked to adverse outcomes for children. Improving parental responsiveness is a primary focus of Project EAGLE and many other EHS programs. Among the objectives of this project have been the following: (1) To examine the role of risk factors on parent responsiveness; (2) To examine the relationship of parent responsiveness to children's outcomes, (3) To examine the relationship of parent engagement in EHS to parent responsiveness and children's development; (5) To examine the role of risk factors as moderators of EHS program impacts; (4) To identify how program and family variables affect children's language and cognitive growth over time.

The primary contribution of the study was its emphasis on examining the quality of parent responsiveness over time as measured in naturalistic observations of parent-child interactions conducted in families' homes. The researchers utilized a developmental-ecobehavioral model to systematically investigate how programs produce qualitative differences in children's daily experiences in their caregiving environments and examined how the accumulation of these experiences affected development over time. The influence of sociodemographic risks on daily caregiving interactions and children's positive growth outcomes was also addressed. Participants in the study were drawn from the program's national cross-site sample of EHS-eligible families in eastern Wyandotte County, Kansas City. The sample families were randomly assigned to a program (n=100) or control group (n=100).

The study utilized a prospective, experimental-control group longitudinal design to study families with children from birth to 36 months of age. This research design allowed the researchers to: (1) separate the effects of the EHS program from the range of other services available to and experienced by those not in the program; (2) study the differential growth of individuals, families, and groups across time; and (3) describe program improvement within the same time period. Data were collected using multiple methods (i.e., interview, observation, and standard assessment methods) to describe program factors, family factors, and interaction factors that affected child and family outcomes. The data were collected a minimum of three times over the course of the study to reflect change over time.

Sample:

N=200 families

Measures:

Program Construct

Parent Services Interview

Individualized Family Service Plans (IFSPs)

Child Care

EHS Provider and Program Director Interviews

Infant/Toddler Environment Rating Scale

Family Day Care Rating Scale

Early Childhood Environment Rating Scale (ECERS)

Child-Focused Observation

Family Construct

Head Start Family Information System (HSFIS)

Parenting Stress Index (PSI)

External Family Influences

Family Support Scale

Stressful Life Events

Family Services and Resources Survey

PSI

Caregiver Characteristics

EHS Parent Interview

Center for Epidemiologic Study Depression Scale (CES-D)

Knowledge of Infant Development Inventory (KIDI)

Parent Empowerment Scale

Welfare Reform Questionnaire

Woodcock-Johnson

Home Environment

Code for Interactive Recording of Caregiving and Learning Environments (CIRCLE)

Home Observation for Measurement of the Environment (HOME)

Community Violence Questionnaire

Interaction Construct

Parent-Child Interaction

HOME

CIRCLE

EHS Video Protocol

Child Outcomes

Cognitive and Language Development

Bayley Scales of Infant Development

MacArthur Communicative Development Inventories (CDI)

CIRCLE

EHS Parent Interview

Social and Emotional Development

CIRCLE

EHS Parent Interview

EHS Video Protocol

Health Status

EHS Parent Interview

HSFIS

PSI

University of Missouri at Columbia

Project Title:

Kansas City Early Head Start Project

Grantee:

KCMC Child Development Corp.

Project Funding Years:

1996-2001

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Project Abstract:

This research project, conducted by the University of Missouri at Columbia, provided an in-depth longitudinal analysis of the Kansas City Early Head Start (EHS) Project as it was experienced by participant families. The investigators utilized intensive case studies to explore factors that mediated and/or moderated the impact of the EHS program on child and family functioning. Research questions addressed in this study focused on variables in the following areas: family demographics, infant and child health, personal characteristics, family support and family stress, mother-child relationship and quality of the home environment, non-parental child care, and community variables. Each of these variables was assessed on current and longitudinal bases.

The sample for this local research study included 9 EHS program families selected systematically from a larger sample of 75 program families. The sample included families who entered the program when the mother was either pregnant with her first child or who had already had her first and only child. Eligible families resided in or attended school or job training programs in neighborhoods served by the local health center, and had incomes at or below federal poverty levels. The health center's infant mortality program and high school information session were the primary referral source for EHS program participants.

Quantitative and qualitative data were collected from program records, the program's management information system, questionnaires and surveys, interviews, focus group meetings, and the case notes of Child and Family

Development Specialists. National cross-site data were used to assess demographic variables and service utilization, and local evaluation data were used to assess selected child and family outcomes. Data were collected from the 9 program families at regular intervals, using standardized instruments, semi-structured interviews, and observations. The information was developed into narrative accounts of each family's experience with EHS, reviewed for consistency across team members, and analyzed for common themes and patterns as they related to EHS experiences and program effectiveness. Data collected in this study supplement the national EHS evaluation by providing information on families in the first year of the child's life and new knowledge about the interrelations among child development, family functioning, staff attitudes and behavior, and community resources at times throughout the project.

Sample:

N=193 families (including n=9 families for qualitative data)

Measures:

Child

Attachment Q-Sort

Rothbart IBQ

Fagan - Infant Intelligence

Parent

Parenting Stress Index (PSI)

Luster Parent Opinion Survey

Center for Epidemiologic Study Depression Scale (CES-D)

Intendedness of Pregnancy

Ways of Coping

Woodcock-Johnson

Working Alliance Inventory

Multidimensional Personality Questionnaire (MPQ)

Pearlin Self-Mastery Scale

Knowledge of Infant Development Inventory (KIDI)

Relationship Functioning

Dyadic Adjustment Scale

Family Environment Rating Scale

Family Functioning

Home Observation for Measurement of the Environment (HOME)

Father Involvement

Family Welfare History Questionnaire

Ethnographic/Qualitative Data (9 families)

Semi-structured Interviews with Parents, other family members when

available

Child and Family Development Specialists, Other Service Providers and Key Community Leaders

University of Pittsburgh

Project Title:

Pittsburgh Early Head Start Local Research Project

Grantee:

Family Foundations Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

The purpose of the Pittsburgh Local Research Project was to address three primary issues: (1) how the program's approach to Early Head Start (EHS) service delivery influenced the work of program staff and child and family outcomes; (2) how implementation of services consistent with family support principles helped to foster social support and efficacy for children and parents; and (3) the direct and indirect effects of social policy changes on children, families, communities, and the program itself.

The Pittsburgh project was designed to take implementation and process research beyond the typical formulation of service quantity, and to provide information about how the approach to service delivery and the program's own "theory of change" impact effectiveness. The research findings, as a result, expanded current knowledge regarding how to define, operationalize,

and assess "best practices" in services to families with young children. The study expanded on the national study by providing insight into the pathways that lead from program theory and approach to child and family outcomes, as well as the impact of policy changes in welfare, health care and housing on program functioning and family outcomes. In addition, the local research collected data on father figure involvement, cultural pride, and parent's psychological well-being, conducted a more detailed assessment of economic self-sufficiency, and assessed program impact on the broader community.

The Pittsburgh EHS was a collaboration between a former Comprehensive Child Development Program (CCDP) and a Parent Child Center (PCC). The study sample, recruited from three communities within Allegheny County, Pennsylvania, included 198 families, randomly assigned to a program group (n=102) or a comparison group (n=96). The communities selected for this project had high levels of social and economic risks as reflected in poverty and health indicators. All study families had children born between September 1, 1995, and May 31, 1997, and met EHS income guidelines. None of the study families had participated in Head Start, PCC, or other programs with similar comprehensive services in the previous twelve months, nor had they participated in the CCDP program in the previous five years. Attempts were also made to recruit a sample that was representative of the racial composition of the EHS eligible population of each community. A multi-phase, multi-method approach was used to conduct quantitative and qualitative data analysis in order to test hypotheses, identify relationships among variables, and provide contextual information relevant to the research questions.

Sample:

N=198 families (102 program group; 96 comparison group)

Measures:

Family Support Implementation (Staff/Program)
Family Support Practices Indicators Instrument (FSPII)
Ethnographic Staff Interview
Staff Observation
Ethnographic Case Studies Related to Family Experiences

Adult Social Support

Social Provisions Scale
Arizona Social Support Interview Schedule (ASSIS)
SEEK (Conn & Peterson)
Structured Family Interview
Ethnographic Case Studies
Participant Observation
Ethnographic Interview (Staff and Community Leaders)

Child Attachment

Parent Behavior Rating Scale
Questions Regarding Parent-child Relationships
Ethnographic Case Studies Related to Family-child Experience
Observation of Family Experience

Self-Efficacy

Pearlin & Schooler Mastery Scale
Parenting Competence Scale
Psychological Empowerment Scale
Dimensions of Mastery Questionnaire
Ethnographic Case Studies
Structured Family Interview
Ethnographic Interviews with Staff and Community Leaders
Observation of Community Activities

Linkages to Long-Term Outcomes

Center for Epidemiologic Studies - Depression Scale (CES-D)
Perceived Stress Scale
Mental Health Index--Positive Mental Health subscales
Structured Family Interview
Ethnographic Case Studies
Ethnographic Interview (Staff, Community Leaders, Family Support Leaders)
Observation of Family Support Movement Activities and Community Activities

Public Policy Changes

Media Reports
Internet
Starting Points/OCD
Advocacy Group Reports

University of Washington School of Education

Project Title:

An Investigation of Early Head Start and Beyond for Hispanic, Native American and Other Rural Poor Families in Communities of Washington

Grantee:

Washington State Migrant Council Early Head Start

Project Funding Years

1996-2001

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Project Abstract:

This study, conducted in partnership with the University of Washington's Center for the Study and Teaching of At-Risk Students (C-STARS) and the Washington State Migrant Council (WSMC), focused on the impact of Early Head Start (EHS) on children and families in the Lower Yakima Valley. The Washington State Migrant Council serves low-income families in six rural communities of Yakima County in two concurrent programs. Supportive services are provided through three program components: (1) Home-based Instruction with Center-Based Activities, (2) Home Care Provider Training, and (3) Teenage Parent Cooperative. A major focus of this research was on the child outcome domain, and specifically on social and linguistic development.

The objectives of the study were to: (1) enrich the knowledge base regarding outcomes for poor children and families of Hispanic descent; (2) examine process and outcome variables related to efficacy of the WSMC EHS program, cultural contexts within families, and best practices in child care and development for infants and toddlers with disabilities; (3) determine the short and long-term capacity of EHS to use cultural strengths to promote quality child care and nurturing; and (4) determine the differential effects of the EHS program on selected child outcomes, including health and physical development, social competency, native and English language development, and the nurturing of self-determination.

Approximately 190 children and families were recruited through a continuous sampling process over a period of 27 months. A local cross-site research design including three nested studies was utilized. Research findings from this project enrich understanding of: (1) the interaction between service processes, family child care and nurturing techniques, and children's growth curves in key areas; (2) how to bring about the enhanced level and variety of experiential opportunities that are critical to giving economically disfavored families an early head start; and (3) family acculturation.

Sample:

n=190; (80 migrant children & families; 110 non-migrant children & families)

Measures:

Home & Family Observation
Attachment Q-Sort
Parent-child Interaction Videotape

Parent Services

Parent Interview

Child & Family Assessment

Bayley Scales of Infant Development and Behavior Rating Scale
Concepts of Development Questionnaire
Family Provider Observation
Center Provider Observation

University of Washington School of Nursing

Project Title:

Attachment in Early Head Start Process and Outcomes

Grantee:

Families First Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

This research project was conducted in partnership by Children's Home Society (a South King County Families First Early Head Start grantee) and researchers from the University of Washington. The objective of this Early Head Start (EHS) research project was to investigate the impact of mothers' early attachment relationships on their engagement in the EHS program and subsequent mother and child outcomes. Three central outcome domains were the focus of the EHS evaluation: (1) family functioning; (2) child development; and (3) family-staff relationships. The research focused particular attention on child-mother attachment security, child language development, and child-staff and mother-staff relationship processes. The

study combined analysis of attachment relationships, intergenerational transmission of parenting, and intervention program elements.

A sample of 179 English-speaking, low-income pregnant women and their families were drawn from the EHS-eligible population of South King County in Washington state. Approximately one third of the selected families were minorities and two-thirds were single-parent families.

The overall research design was a randomized experimental/control group study with longitudinal follow-up. A specific goal of the research was to determine whether a Parent-Child Communication Coaching (PCCC) intervention component, which used video feedback of mother-infant interactions during pregnancy through the second year of life, had an effect on: (1) the mother's working models of attachment relationships from pregnancy to age 36 months; (2) the child's attachment to the mother at 19 to 30 months; (3) the child's expressive and receptive language at age 30 months; and (4) the involvement of the parents and child in program services throughout the child's first year of life. The quality of the child-mother, parent-child, parent-staff, and child-staff interaction was assessed at 15, 19, 24 30 and 36 months.

Sample:

N=179 expectant mothers and their families

Measures:

Psychosocial Risk

Stressful Life Events

Pearlin Mastery Scale

Woodcock-Johnson, Reading

Thorburg Intendedness Scale

Knowledge of Infant Development Inventory (KIDI)

Young Adult Self Report

Wechsler Adult Intelligence Scale (WAIS)

Simpson Relationship Scale

Center for Epidemiologic Study Depression Scale (CES-D)

Attachment

Adult Attachment Interview

Strange Situation (Ainsworth et al.)

Motor Divided Attention

Client Attachment to Therapist Scale (CATS)

Student-Teacher Relationship Scale (STRS)

Clean Up

Lab Tab (Temperament)

Parent-Child Interaction

Nursing Child Assessment Teaching Scale (NCATS)
Home Observation Measurement of the Environment (HOME)

Demographic Risk

Parent Interview

Expressive and Receptive Language

Preschool Language Scales (PLS-3)
National Evaluation Data

Program Participation/Outcomes

Sleep Activity
Nursing Child Assessment Feeding Scale (NCAFS)
Bavalek Parent Expectations
Parenting Stress Index (PSI)
(HELP) Assessment
Community Life Skills
Mother Perception of Parent-Child Communication Coaching Activities
Difficult Life Circumstances
Summary of Family Services

Cognitive Development

Bayley's Mental Development Index (MDI) from National Evaluation Data

Utah State University

Project Title:

None

Grantee:

Bear River Early Head Start

Project Funding Years:

1996-2001

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Project Abstract:

The local research partnership between Family and Human Development at Utah State University and Bear River Early Head Start (BREHS) included a multi-method longitudinal study examining the impact of a BREHS on infants and parents. The study focused on two central outcomes of optimal infant development that support social and cognitive competence—security of attachment and play. The study also examined the impact of EHS on parenting and parent functioning and how that impact could be mediated by social support and moderated by family factors. In addition, the study examined the quality of child care and the relation of the quality of child care to infant and parent outcomes. Finally, program factors were assessed in relation to positive outcomes for those families participating in EHS.

This local research effort enriches the national EHS evaluation by placing emphasis on the development of child and parent outcomes and the impact of the local EHS program on those outcomes. The study's findings regarding the relation of family, program, and community factors to infant development will: (1) contribute to current directions of developmental theory; and (2) provide essential information about best practices for serving infants and their families in a semi-rural area.

The BREHS program in Logan, Utah, serves 75 low-income families with an infant or toddler. The original research sample of 201 EHS-eligible families, randomly assigned to program and control groups, was 78% Caucasian, 13% Hispanic, and 9% other non-Caucasian non-Hispanic. The research has been conducted using multi-method, multi-measure strategies in a longitudinal randomized experimental design. Data were collected from program records, enrollment forms, questionnaires, in-home observations, infant assessments, and parent interviews. Data collection was repeated several times during the first three years of a child's life. Five in-home infant and family assessments (at 10, 14, 18, 24, 36 months child age) and five parent interviews (at pre-enrollment; 6, 15, 26 months post-enrollment; 36 months child age) were conducted. In addition, fathers were interviewed pre-enrollment, 10 months, and 18 months child age and interviewed and videotaped with their child at 14, 24, and 36 months. Program effects within each measurement time frame and patterns of change over time within program and control groups were examined. Researchers also conducted analyses of mediator and moderator variables.

Sample:

N=200 families

Measures:

Measures include those that are part of the national EHS evaluation project. Additional local measures include:

Observation Measures at 10 and 18 months for mothers, 14 months for fathers

Parent Sensitivity

Level of Play

Social Toy Play

Infant Affect

Bookreading interactions

Parent Interview Measures, for mothers and fathers, at multiple time points

Attachment Q-Set

Adult Attachment Style Scale

Center for Epidemiologic Study Depression Scale (CES-D)

Pearlin Mastery Scale

Identity Style Inventory

Parenting Stress Index Short Form (PSI)

Family Crisis Oriented Personal Evaluation Scale, Social Support

Progress Toward Self-Sufficiency

Home Visit Quality