HEAD START RESEARCH

OPRE

Office of Planning, Research and Evaluation

Administration for Children and Families

Design for Migrant and Seasonal Head Start Survey

DESIGN FOR MIGRANT AND SEASONAL HEAD START SURVEY
FINAL DESIGN REPORT

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GLOSSARY OF TERMS AND DEFINITIONS*

Term	Definition
Acculturation	The process whereby an individual changes upon exposure to another culture. This can include shifts in practices, language, and beliefs. Acculturation is considered bi-directional, and thus is not the same as *assimilation*, which describes a linear process whereby an individual moves uni-directionally from the home to the host culture. Acculturative processes have been linked to both health and mental health outcomes.
Center	Physical location of at least one MSHS classroom (though it usually includes a cluster of 3-5 classrooms) operated by a *program*. Centers can be freestanding buildings or can share a building with other entities, such as schools.
Classroom	A group of similarly aged children that receive MSHS services.
Computer-Assisted Telephone Interview (CATI)	A telephone interviewing technique in which a human interviewer is aided by a computer during the interview process. Computer software can customize the interview questions based on previously collected information and prompt the interviewer accordingly. During the interview, the interviewer can enter collected data directly into the computer. CATI can lead to greater efficiency and accuracy of data collection.
Cross-Language Transfer Theory	The empirically-supported theory that an individual's level of development in his or her dominant language is predictive of acquisition of an additional or non-dominant language.
Delegate Agency	For the purposes of this report, a subcontracted organization under the MSHS grantee that provides direct services to children and families.
Dual Language Learner (DLL)	A child who begins the acquisition of a second language while still learning his or her first language. Emphasis is on the bilingual learning of the children. The skills of Dual Language Learners differ from those of monolingual English learners, and therefore different tools are required in the assessment of DLLs.
Grantee	For the purposes of this report, an organization that is fiscally responsible to OHS for MSHS services within a defined geographic area. Most grantees provide direct services to children and families, though some may provide fiscal and managerial oversight to their delegate agencies. A few are termed "supergrantees," since they are larger in structure and provide services across multiple states.
MSFW	Migrant and Seasonal Farm Workers

Term	Definition
MSHS Community Consultant Group	A group consisting of MSHS parents and local MSHS staff (including everyone from MSHS area coordinators to MSHS directors from across the country), formed to provide feedback and information to the MSHS Study Design Team.
Multi-Source method	A research tracking method in which more than one source (e.g. both a MSHS program contact and a personal contact) is consulted in the tracking of an individual or family. (See also *single-source method.*)
National Migrant and Seasonal Head Start Association (NMSHSA)	A non-profit organization that advocates in support of quality comprehensive services to all farmworker children and their families" (NMSHSA website description; http://nmshsaonline.org/). The NMSHSA Board is comprised of MSHS staff and parent representatives from across the country.
Office of Head Start (OHS)	Advises the Administration for Children & Families (ACF) regarding Head Start, a national program promoting school readiness in economically disadvantaged children. OHS provides leadership and coordination for the activities of the Head Start program in the ACF Central Office including the Head Start Regional Program Units. The Office represents Head Start in inter-agency activities with other Federal and non-Federal organizations. (Office of Head Start Mission; www.acf.hhs.gov/programs/ohs/about/index.html)
Program	For the purposes of this report, either a *grantee* or a *delegate agency* (both defined above).
Program Information Report (PIR)	A report prepared annually by each Head Start grantee and delegate agency. The PIR covers information related to the number of children served, staffing, program services, and other information.
Sampling	The process of selecting an appropriate sample for a study. In the case of the MSHS survey design, a multi-stage sampling plan has been developed that accounts for the migratory nature of the MSHS population. This sampling plan would provide unbiased national estimates of the status of MSHS children (infants, toddlers, and preschool children) and families from across the country without requiring participation of all MSHS children and families, which would be cost prohibitive and unnecessary.
School Readiness Development	The purpose of the national Head Start program is to "promote school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social, and other services to enrolled children and families" (OHS website).
Settling out	A phrase indicating that a previously migrating farm worker has established residence in a permanent location.

Term	Definition
Single-Source Method	A research tracking method in which only one source (e.g. a MSHS program contact) is consulted in the tracking of an individual or family. (see also *multi-source method*)

*Citations provided in main body of Report.

DESIGN FOR MIGRANT AND SEASONAL HEAD START SURVEY

FINAL DESIGN REPORT

SECTION I:

OVERVIEW

SECTION I

OVERVIEW

This Design Report for a *Migrant and Seasonal Head Start (MSHS) Survey* lays the groundwork for a study of Head Start's Migrant and Seasonal Branch by offering custom-designed methodological suggestions regarding sampling, site outreach, instrumentation, data collection, and data analyses. Following a presentation of the survey background and a comprehensive literature review of MSHS and the overall study population, the subsequent sections of this report offer details of potential components that could be included in a final survey design by the Administration for Children and Families (ACF).

CHAPTER 1

INTRODUCTION

Head Start has a well-deserved reputation as a national laboratory for innovative preschool program practices (Zigler & Seitz, 1982). Over the past 15 years, Head Start has expanded its reach, and now also serves as a model in the broader field of early childhood research (Harden, 2002). National research efforts associated with Head Start routinely bring together top experts in early childhood and family development and produce widely respected studies, such as the *Head Start Family and Child Experiences Survey (FACES);* the *Early Head Start Survey*, and the *Head Start Impact Study*.

While there has been a positive surge in quality research on the Head Start program over the past 15 years, the Migrant and Seasonal Branch of Head Start (MSHS) has not historically participated in the national studies describing and evaluating Head Start. Inherent differences between the experiences of migrant and seasonal families and the more traditional Head Start families, as well as the subsequent impact of these variations on the operation of local programs, suggest that the MSHS subpopulation needs to be studied both separately and differently from traditional Head Start studies. This MSHS Design Report reflects the critical understanding on the part of the Office of Head Start (OHS) that the unique characteristics and circumstances of the migrant and seasonal families and of the programs that serve them should be specifically considered when planning a study that can account for the cultural, linguistic, and logistical considerations relevant to MSHS programs and families. MSHS has been in operation since 1969 and annually serves more than 33,000 children of migrant and seasonal

farmworkers across the United States. In the years since Head Start started serving the children of agricultural workers, there have been several Federal projects that yielded insights into the operation of this group of programs and the families they serve. This body of work has highlighted some of the challenges faced by a systematic study of this population. However, these projects were relatively cautious and narrow in scope.

This report offers custom-designed options and suggestions for an ongoing survey that will focus on gathering data on MSHS children, families, staff, and programs. The Design Team selected these design specifics after consultation with groups of MSHS parents, MSHS program representatives, cultural and research experts on migrant farmworkers (MFW) and MSHS, dual language learner assessment experts, sampling and analytic experts, and large-scale Head Start research study experts. Each aspect of the plan was selected to address the following primary research questions:

- What types of services are provided to children and families in MSHS programs, centers, and classrooms and what is the variation in the quality of the services provided?
- What are the characteristics of the children and families served by MSHS?
- Where are MSHS infants, toddlers, and preschoolers in their language, learning, and socio-emotional development?

Each component of the survey is intended to gather aspects of the information required to answer these broad questions in a scientifically valid and cost-efficient manner that is grounded in culturally–informed approaches and incorporates the input of community and research consultants.

1.1 Roadmap to the Final Design Report

This Final Design Report presents relevant background information, along with a range of possible designs for the study components and a discussion of challenges that are expected to be encountered in the implementation of the various study components. As noted below, the report is presented in four major sections.

1.1.1 Section I Overview

Section I provides the background for the proposed study options, a synthesis of information about MSHS and the overall study population, and a summary of the possible components to the overall study design.

- Chapter 1: Introduction.
- Chapter 2: Background on MSHS and Literature Review. Details the background of the study, explores available information about MSHS programs, migrant and seasonal farmworkers, and their families.
- Chapter 3: Design of the *MSHS Survey* Development Activities—Consultation and Outreach. Summarizes the design process, including the work with the stakeholders in the MSHS programs.
- Chapter 4: Overall Survey Design. Describes the potential study design and components, details of which will be presented in subsequent chapters.

Upon review, ACF will select options from those proposed within this report based on such factors as availability of resources, which questions are of current interest to the program, and the strengths of the team implementing the design. Therefore, any single layer to the *MSHS Survey* Design could be pursued without the others. To ease review of the optional components, they are presented as two separate but interconnected phases.

1.1.2 Section II: Program/Center Component

Section II presents the details of the Program/Center Component, which involves an optional survey component for exploring all MSHS programs at the grantee/delegate agency level. Section II includes the following:

- Chapter 5: Sampling Plan for the Program/Center Component. Presents issues and suggestions related to sampling for programs and centers.
- Chapter 6: Measurement for the Program/Center Component. Presents data collection instruments to be considered.
- Chapter 7: Recruitment, Outreach, and Data Collection. Offers strategies for program notification, recruitment, outreach, and data collection.
- Chapter 8: Data Analysis for the Program/Center Component. Presents approaches for analysis of the data for specific Program/Center Component options.
- Chapter 9: MSHS Measurement Substudy. Describes a plan that allows for testing and refinement of child assessment measures as well other survey measures.

1.1.3 Section III: Classroom/Family/Child Component

Similarly, Section III presents the details for the Classroom/Family/Child Components, which identify options designed to study nationally representative samples of programs, staff, parents, and children. The chapters in Section III include:

- Chapter 10: Sampling Plan for the Classroom/Family/Child Component. Offers suggestions for a multi-stage sampling plan.
- Chapter 11: Measurement for the Classroom/Family/Child Component. Describes the range of assessments and measures needed.
- Chapter 12: Recruitment, Outreach, and Data Collection. Outlines recruitment and data collection strategies for working with families.
- Chapter 13: Analysis Plan for the Classroom/Family/Child Component. Considers appropriate data analysis approaches.
- Chapter 14: Supplemental Survey Modules. Contains details of suggested supplemental modules—designed to provide greater in-depth information about topics of special interest.

1.1.4 Section IV: Longitudinal Considerations

Finally, although many of the key Head Start research projects collect longitudinal data on children and families, this is a particularly challenging area when working with migrant and seasonal programs and families. Section IV reviews these challenges in detail, then presents two possible feasibility studies that attempt to gather definitive information about what can be collected validly and reliably over time with MSHS-participating families.

- Chapter 15: Introduction to Longitudinal Survey Options. Details the challenges and unanswered methodological questions inherent in such research, and sets the stage for two potential designs.
- Chapter 16: Longitudinal Option A: A Year in the Life of MSHS Migrant Families. Discusses a strategy for assessing the feasibility of tracking migrant farmworker families.
- Chapter 17: Longitudinal Option B: Child and Family Outcomes Feasibility. Considers the feasibility of conducting valid pre-post assessments of MSHS-participating children.

CHAPTER 2

BACKGROUND ON MSHS AND LITERATURE REVIEW

This chapter includes a thorough review of research literature, and incorporates relevant data from national Federal studies and the Program Information Report (PIR) of the OHS. The perspectives of MSHS staff and parents who engaged as consultants on this design project also provided insight on key experiences in the MSHS program and the lives of MSHS children and families (*MSHS Survey* Staff Calls, 2008; *MSHS Survey* Parent Calls, 2008). This information was consolidated to provide a framework for our understanding of MSHS children and families and of the programs that serve them, which was then translated into a conceptual model to guide the survey.

2.1 Head Start, the MSHS Branch, and Prior MSHS Studies

2.1.1 Migrant and Seasonal Farmworkers' Families Fit within Head Start.
Head Start, founded in 1965, is a national comprehensive child development program serving low-income families and their children, from birth to school entry. In 1969, Congress created the Indian and Migrant Programs Division, and in 1984 the Indian and Migrant Programs Division became two separate divisions: the Migrant Programs Branch and the American Indian Programs Branch. For approximately 14 years, Migrant Head Start (MHS) grantees provided comprehensive early childhood education services as well as social services, auxiliary service coordination, and support services to migrant families, defined as those who engaged in agricultural labor and changed residences from one location to another during the previous two years. MSHS classrooms have served infants, toddlers, and preschoolers since the program's inception—other Head Start programs only began serving infants and toddlers in 1995 (through the Early Head Start programs).

The 1998 Amendments to the Head Start Act established the eligibility of seasonal farm workers to receive services through migrant program grantees. As a result of these amendments, Head Start began to provide service to both migrant and seasonal farm worker (MSFW) families. Hence, in 1999, MHS grantees were authorized to serve seasonal farm worker families, defined as those who have *not* changed the geographical location of their residences during the preceding two years *and* are employed in the agricultural industry. The program was then renamed the Migrant and Seasonal Head Start (MSHS) program.

The 2006-2007 PIR data listed 23 grantees and 37 delegate agencies, with a total of 60 programs in operation that provide direct services to children and families and two programs that serve as administrative entities (overseeing delegate agencies, but providing no direct services to children). PIR data also indicated that MSHS provides services to 33,134 children and their families across 36 States with a staff of 3,737 teachers. Although delegate agencies are legally subcontractors to a MSHS grantee, they operate with varying degrees of autonomy in their day-

to-day operations. (See Table 2.1 below for definitions of program terms as utilized in this report.)

Table 2.1: Definitions of Key MSHS Terms Used in This Report

Term	Description
Program	Either a grantee or a delegate agency
Grantee	Organization fiscally responsible to OHS for MSHS services within a defined geographic area. Most grantees provide direct services to children and families, though some may provide fiscal and managerial oversight to their delegate agencies. A few are termed "Super Grantees," as they are much larger in structure and provide services across multiple States.
Delegate Agency	A subcontract organization under the grantee which provides direct services to children and families.
Center	Physical location of at least one classroom (though it usually includes a cluster of 3-5 classrooms) operated by a program. Centers can be freestanding buildings or share a building with other entities (such as schools).
Classroom	Group of similarly-aged children that receive MSHS services from a Head Start teacher.

2.1.2 Previous National Studies of MSHS.

This review includes findings from Federal studies of MSHS as well as from journal articles based on academic research.

Research collaborations with Migrant Head Start (MHS) programs began in 1970, shortly after the programs were initiated (Spencer & Lynn, 1970). Early research efforts included examinations of the cultural dynamics of MHS families, local collaborative and advocacy efforts (De Leon Siantz, 1991), transition of migrant children from preschool to kindergarten (Poblete, 1990), general farm worker needs (Reyes, 1980), and interrelationships among teacher, parent, and child characteristics (De Leon Siantz, et. al., 1994). The operational challenges for early MHS administrators (U.S. Department of Health and Human Services [HHS]; Office of Inspector General [OIG], 1993; Kloosterman, Valentina, Skiffington, Sanchez, & Kiron, 2003) also were examined.

Three national efforts sponsored by the ACF provided direct insight into the MSHS program and participants. These are discussed briefly here and the results are incorporated throughout the literature review. First, *A Descriptive Study of Children and Families Served by Head Start Migrant Programs* (ACF, 1999a) provided the initial national description of all MHS programs and characteristics of the children and families served. Head Start benefited by receiving an overall description of the MHS service delivery system and operational issues affecting the nationwide system and local centers, as well as national estimates of the number of children eligible for MHS services. Primary data collection activities included interviews with: a nationally representative sample of more than 1,000 MHS parents, the Directors of all 26 MHS grantees, the Directors of a sample of delegate agencies, a nationally representative sample of 81 Center Directors, and a sample of local social service providers. The study also included a review and analysis of MHS child health records for participating families. Key findings from this study included:

- An estimation that the program was serving about 28%of eligible children,
- The identification of geographic gaps in center coverage,
- The identification of characteristics of the MHS service delivery system that highlighted the program's responsiveness to migration patterns, and
- The identification of multicultural curriculums as a common program need.

While the first national study yielded useful information on the characteristics and needs of the migrant farmworker families and the MHS programs, it did not provide information on *seasonal* farmworker children and families. Seasonal farmworkers had not yet become eligible to be served by programs when data collection for that study was underway (1994-1995). Therefore, in 1998, ACF funded another study to create new estimates of both the migrant *and* seasonal farmworker populations, and to explore the needs of seasonal farmworkers. This study, *The Descriptive Study of Migrant and Seasonal Farmworkers* (ACF, 1999b), looked at the first year of the revised program through both quantitative and qualitative data collection. The study employed data from the Department of Labor's *National Agricultural Workers Survey* (*NAWS*) and the Department of Agriculture's *Census of Agriculture* and *Farm Labor Survey* to develop national and State-level estimates of the need for MSHS services (i.e., the number of children in the U.S. eligible for MSHS). The qualitative component produced data on the service needs of MSHS families and on the cultural, social, and economic challenges seasonal agricultural workers face when permanently locating in agricultural communities. Data collection for the study consisted of nine site visits to a geographically varied group of MSHS programs, focus groups with parents, interviews with community service providers, and a telephone survey of the remaining MSHS grantees and delegate agencies (a total of 49 Program Directors, 25 MSHS staff, 135 parents, and 11 community service respondents). The findings from this study were varied and extensive. Highlights included the following:

- Variations in availability of MSHS services across the States,
- Under-enrollment of some programs,
- Reported differences in some service needs between migrant and seasonal farmworkers,
- Reasons for specific mood and anxiety issues among the migrant and seasonal population, and
- Obstacles to farmworkers "settling out" for permanent residence in an area.

As a key step in preparing to implement an updated and expanded nationally-representative study, ACF authorized a design study in 2004 (*MSHS Research Design Development Project*) to begin pilot-testing MSHS measures with children and families, develop approaches to learning about program operation, and begin to consider the feasibility of tracking MSHS families (ACF, 2004). Utilizing a small geographically diverse sample, this project updated some descriptive information from earlier work. It also was the first Federal study that attempted to directly assess MSHS children and observe MSHS classrooms in action. The study comprised four components.

- The first component consisted of a literature review, consultant discussions, and focus groups with families, teachers, and staff.
- The second involved a pilot study at four sites with approximately 16 preschoolers, families, and teachers. Participants completed potential measures and interviews under consideration for a larger-scale effort and provided feedback and design suggestions.

- Third, eight classrooms were observed in onsite visits at geographically disperse locations. Interviews were conducted with 194 parents, 19 teachers, 9 Center Directors/coordinators, and 6 grantee directors; 134 preschoolers and 15 infants-toddlers were directly assessed.
- The final component of the *MSHS Research Design Development Project* was a substudy tracking 80 families using two contact methods.

In combination, these four components of the project contributed preliminary information about possible measures and methods for MSHS families and programs. This information directly impacted design and measurement considerations presented in this report.

2.1.3 Current Design Approach

The current work seeks to build on these studies, as well as on other national studies of Head Start, such as the *Family and Child Experiences Survey* (*FACES*), *Early Head Start Research and Evaluation Project,* and the *Head Start Impact Study*. An MSHS survey cannot simply replicate traditional Head Start research; it must acknowledge the differences between MSHS and regional Head Start. Methods must reflect these MSHS differences in sampling, measures, outreach to families and programs, data collection strategies, data analyses, and interpretation of findings.

The literature review that follows provides the foundation for developing pertinent research questions, identifying important unique features of programs and families that should shape methodology, and understanding the successes and limitations of previous design approaches. It begins with the models that contributed to the research design, presents reviews of the extant research on migrant and seasonal farmworker children and families, and provides a more detailed understanding of the MSHS program based on currently available information. This literature review was exhaustive, and endeavored to identify all available studies conducted with MSHS children, families, and children. To the extent possible, distinctions were made when referring to studies specific to migrant farmworkers versus seasonal farmworkers, though very few studies directly compare results between the groups. Many studies present findings from the agricultural community in general, which relate to farmworkers with a range of migrancy backgrounds. In addition, as available, the review includes research that involves broader Latino, immigrant, dual language learner, and other cultural/linguistic communities in the U.S. and abroad.

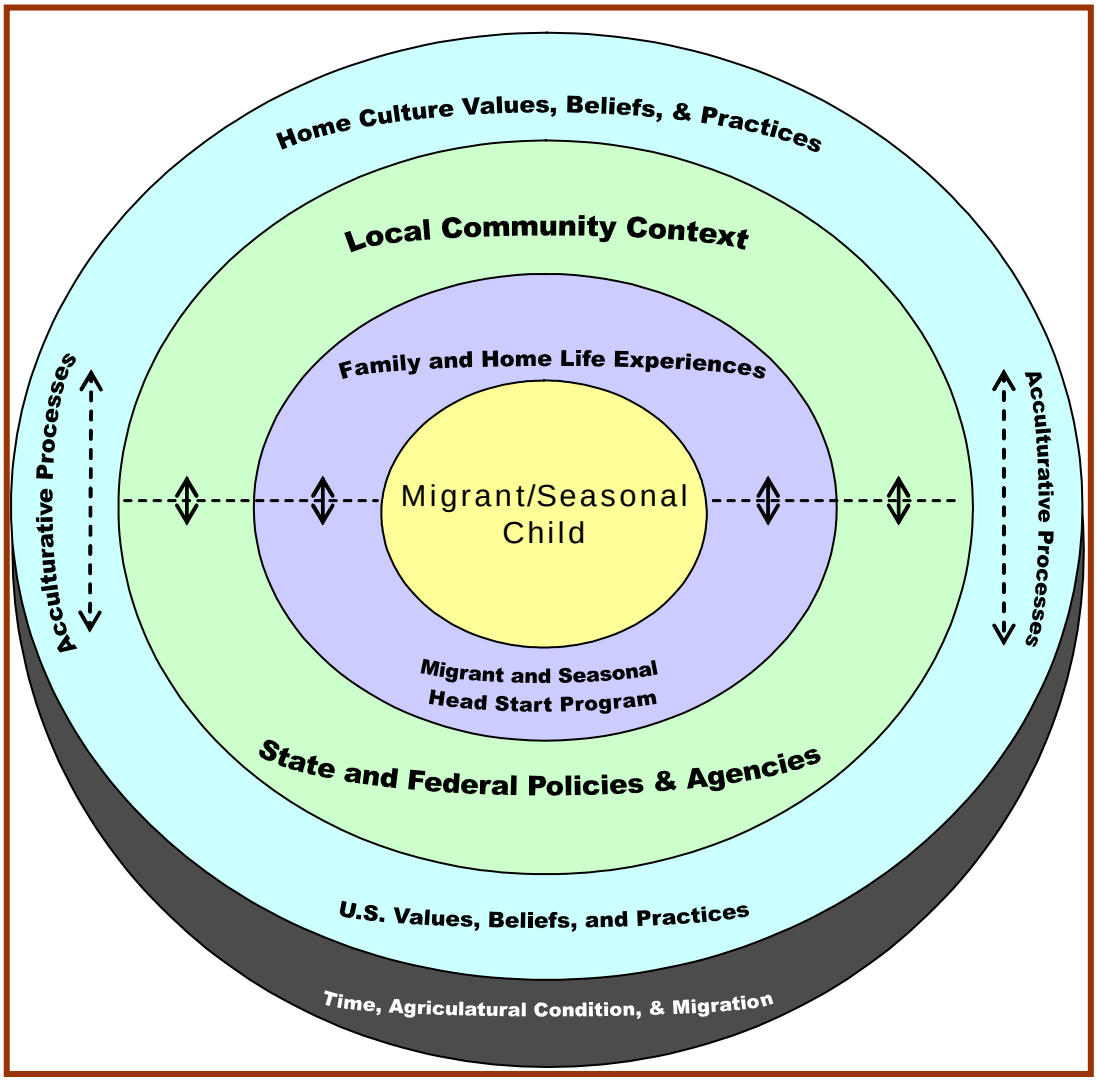
This work is supplemented in the text with feedback received by the Design Team during extensive discussions with MSHS staff and parents. Chapter 3 details of how input was solicited from research and program consultants who work with this population or with relevant topics. Additional information and feedback was offered by the MSHS parents and geographically disperse MSHS staff (from MSHS area coordinators to MSHS directors), that comprised the MSHS Community Consultant Group. Insights that came from these groups are included in this review, as appropriate.

2.2 Designing Options for an *MSHS Survey*: The Conceptual Models

The options and methodological ideas for the *MSHS Survey* are designed to capture the experiences of children and families and provide an up-to-date understanding of MSHS

programmatic systems, relative to serving this population. Guiding the design efforts is a conceptual model that reflects the varied contextual influences present in MSHS children's lives (Exhibit 2.1). It is based on: 1) cross-cultural theories of human development (Bronfenbrenner, 1979; Super & Harkness, 1999), 2) findings from earlier investigations of MSHS (ACF, 1999a; 1999b), and 3) research frameworks used for the *Family and Child Experiences Survey (FACES*) (ACF, 2006; ACF, 2002) and *Early Childhood Longitudinal Studies (ECLS-B* and *ECLS-K*) (NCES, 2002).

Exhibit 2.1: Developmental Contexts of Children Served by MSHS



Building from this contextual perspective, the design of the survey options has systematic conceptual and methodological links to highly relevant national studies, while being responsive to and inclusive of the unique constellation of characteristics and experiences of migrant and seasonal children, their families, their communities, and their MSHS programs. Specifically, this model acknowledges the influences of cultural, linguistic, and agricultural experiences to the physical, language, social, and cognitive development of migrant and seasonal children and

families, while accounting for common developmental and intervention processes experienced by young children and families.

For example, the contextual model centrally focuses on children, which reflects both the focus of MSHS on children's developmental and school readiness outcomes, as well as the important role that children (and dedication to one's children) play in the lives of migrant and seasonal families. The model further reflects the vital importance of parental and family influences on MSHS children's development, which is described in more detail below. A particularly apt feature of this model is the placement of MSHS, directly affecting children's development while concurrently influencing family and home experiences through its services to parents, families, and the community. The broader institutional contexts influence each of the layers within the model: formal State and Federal policies—as well as more informal community contexts—impact the families, children, and the MSHS program. These larger institutional influences can strongly affect families and programs simultaneously; an example is the current focus on the status and role of immigrants in the United States. Touching upon all of these is the larger context of values, beliefs, and practices from both the United States and the home country of the migrant family, such as cultural variations in parents' approaches to child rearing. Finally, an overarching force in the systems of this child contextual model are the less predictable impacts of time and weather that play a central role in the daily functioning of families and programs for agricultural workers. In all, family functioning, program participation, communities, policies, culture, time, weather, and even children's own individual characteristics come together to influence the MSHS child in a dynamic, interrelated fashion. Details of the factors that influence MSHS children are clarified in the model of the *MSHS Survey* Conceptual Pathway (Exhibit 2.2).

Because the primary focus of MSHS is the children it serves, local programs consider many of the developmental and contextual factors inherent to the Contextual Model when planning program services and activities. Subsequently, any proposed MSHS survey will consider these factors to provide timely and productive data that informs programs and the national administration about the families and their experiences with MSHS.

2.2.1 Details of the *MSHS Survey* Conceptual Pathway

Factors of the model displayed in Exhibit 2.2 incorporate a range of details that were confirmed by the literature review and later consultations. To organize the extensive information found, each section of the model is presented below with a discussion of the relevant information.

Literature on agricultural communities and the more extensive cultural communities provided insight for the areas in which there were few MSHS-specific studies. However, it is important to remain cognizant that MSHS families comprise a unique subset of these broader communities. There is historical evidence to suggest that families enrolled in MSHS are differentiated from the general migrant and seasonal farmworker population. For example, the *1999 Descriptive Study of Children and Families Served by Migrant Head Start Programs* found that families who enrolled in the MSHS programs migrated less often, were less likely to be single-parent households, and had higher income, education levels, and more children in the household than the broader population of agricultural families eligible for MHS (ACF, 1999). However, significant changes have occurred since 1999 and it is currently unknown how similar or distinct MSHS families are to the broader agricultural community.

Much of the research regarding MSHS children and families from the broader academic communities is not recent, as research engagement with the migrant community appears to have been stronger a decade or two ago. Occasionally, relatively dated studies were included in the literature review (when no better information could be found and the findings contributed to a greater understanding of MSHS children and families). Such studies often offer strong data for designing, defining, improving, and presenting programmatic service features, but the dated results should be considered cautiously. The changes in the MSHS program over the last decade, in combination with the paucity of research conducted directly with MSHS children, combine to create a strong argument for the initiation of new studies about this population.

2.2.2 Child Growth and Development

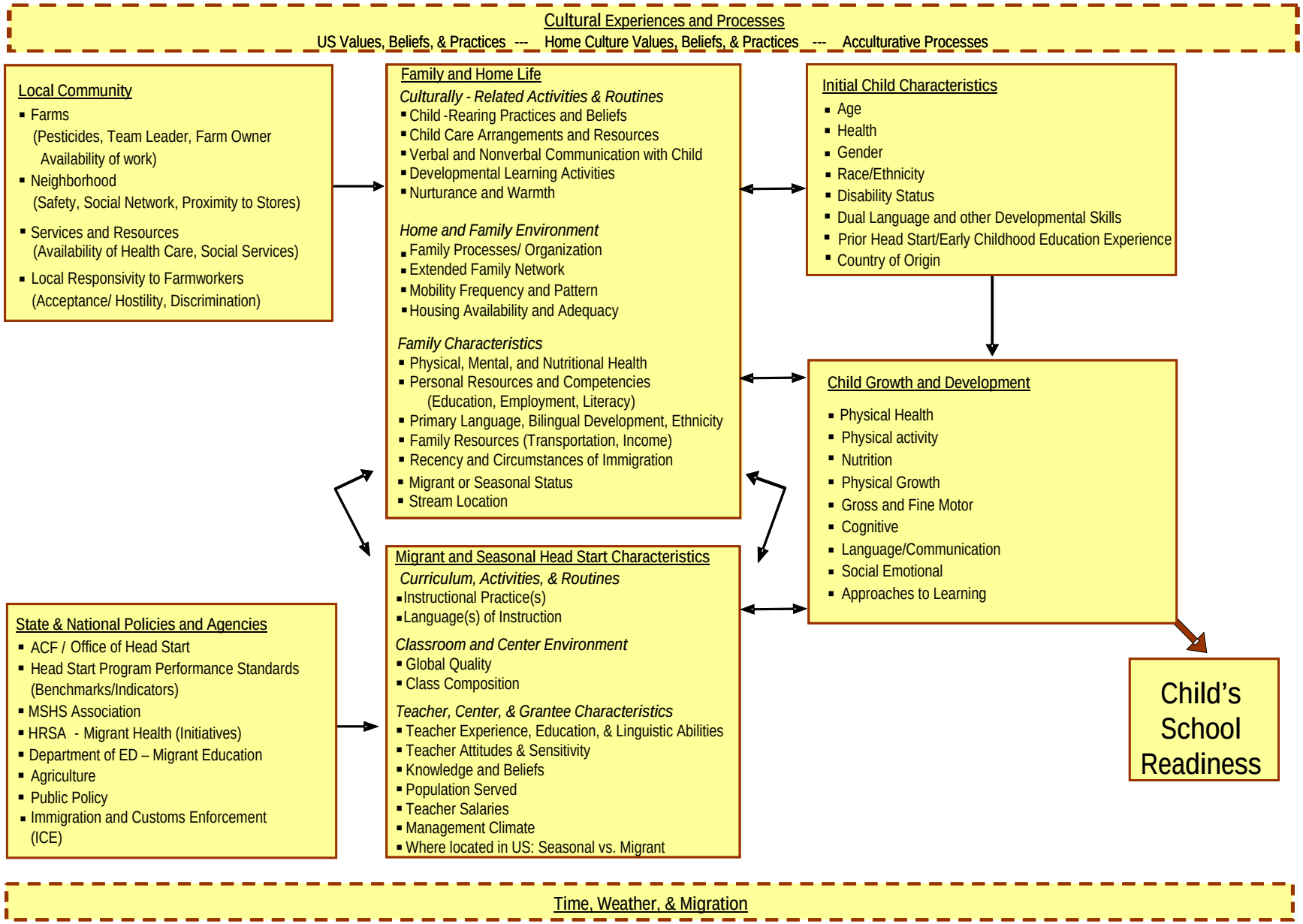
Safety, Physical Health and Disabilities. Among the most salient considerations in the lives of children are their safety, physical health, and development. This is particularly relevant to MSHS children. Indeed, an important contribution of MSHS is the provision of a safe learning environment for young children during the day, so they do not accompany their parents to the fields where they are exposed to a variety of risks (including high temperatures and pesticides).

> **MSHS STAFF INSIGHTS:**
> Areas of health concerns include anemia, asthma, and oral health.
> ***-MSHS Survey Staff Consultant Calls 2008***

Although recent relevant data is sparse, studies across the last three decades consistently identify significant health issues for agricultural workers' children. Children of migrant farmworkers experience greater frequency of malnutrition, infectious diseases, and dental caries than other children, along with lack of timely immunizations (Koch, 1988; Weathers, Minkovitz, Ocampo, & Diener-West, 2003). For example, nearly a third of migrant children had a Vitamin A deficiency, as well as deficiencies in Vitamin C, Calcium, and Riboflavin; these deficiencies in turn can contribute to infection rates (Chase et al., 1971; Thomas, 1996). Further, across other studies on the health of agricultural workers' children, about half of the children were found to have significant decay on four or more teeth (Chase et al., 1971; as cited in Koch, 1988; National Center for Farmworker Health, n.d.) and only about half had received immunizations (Schneider, 1986). Finally, and most tellingly, mortality rates are 1.6 times higher in this population (Slesinger, Christenson, & Cautley, 1986; NCFH, n.d.).

While no single cause of these health issues is determinable, it appears that the combination of a higher likelihood of pesticide exposure, along with inadequate nutrition, poor access to medical treatment, poor housing conditions, and extreme poverty contribute to the poorer health of migrant and seasonal children. A recent study found that preschoolers living in agricultural areas evidenced slower response speed and higher latency to fine motor tasks than preschoolers living in non-agricultural areas; such differences were reportedly consistent with the effects of organophosphate pesticides (Rohlman et al., 2005). Further, a ''lack of an independent means of transportation, lack of knowledge of where to go for needed care, and very high caretaker pressure to work contributed to unmet medical need among migrant children" (Weathers et al., 2004, p. 281).

Exhibit 2.2 Migrant and Seasonal Head Start Survey Conceptual Pathway



Interestingly, MSHS grantees reported a 50% *lower* prevalence rate of documented disabilities across the physical, language, social, and cognitive domains than regionally-funded Head Start and Early Head Start programs (6% vs. 12%, respectively) (MSHS PIR data, 2007; ACF, 2007a). This is similar to the discrepancy evidenced among public school children where 4% of migrant-eligible children were engaged in special education services in contrast to 9% of the general school population (Department of Education, n.d.a; Department of Education, n.d.b). The lower disability prevalence may reflect the under-identification of disabilities within the short timeframe that migrant children were enrolled in a program; the challenges of distinguishing among disabilities versus normal bilingual development and accounting for children's adjustment processes to contextual challenges; the likelihood that families with children experiencing severe disabilities may be less able to migrate; and/or the limited availability of reliable and valid diagnostic tools for this population. To begin to develop an understanding of the contributing factors to disability prevalence rates among MSHS students, the staff interview suggested for the study would include inquiries about potential barriers to identification.

MSHS STAFF INSIGHTS:
MSHS children's behavioral well-being may be deteriorating in relation to stress from increased immigration raids.
-MSHS Survey Staff Consultant Calls 2008

Behavioral Health and Socioemotional Development. Alternatively, these statistics may reflect the *acculturation paradox,* where more recent immigrants appear to be less negatively affected by risk factors across multiple domains of development, particularly in the early childhood years (e.g., Rosenberg et al., 2005; Landale et al., 2000). This has been indicated particularly in the areas of behavioral health, where young children of Latino immigrants reportedly exhibit less social and emotional difficulties than more acculturated Latinos and others. For example, Johnson, Gomez, and Sanders-Phillips (1999) found that Head Start teachers were likely to rate Latino preschoolers as less anxious than European-American children. MSHS teachers also reported a low incidence of behavior problems in the *MSHS Research Design Development Project* (ACF, 2004). This perception was echoed by the program staff consultants to this design project, who described the children as generally being warm, happy, calm, open, and respectful. The staff speculated that the low incidence of behavioral problems stemmed from their parents' approaches to child rearing (see Consultant Call Minutes in Appendix *A*). However, in further discussion, the staff consultants raised concerns that the high level of behavioral well-being that they perceived among MSHS children may be deteriorating in more recent years; they attribute this possible shift to increased family and child stress resulting from the recent increase in immigration raids (Capps, Casteñeda, Chaudry, & Santos, 2007). Given these potential changes in an area of perceived strength within the MSHS community and their implications for potential interventions, the *MSHS Survey* could examine the behavioral health and socioemotional functioning of MSHS children and their families, the stressors of migrant living, and the varied resources the families use to address those stressors. To strengthen the examination of these factors, the *MSHS Survey* Design Team further suggests gathering both teacher and parent reports of children's behavior, as well as some measure of parental mental health.

School Readiness Development, including Language and Literacy Within and Across Multiple Languages. In comparison to health, fewer studies have examined the school readiness development of young children from agricultural farm worker families, with even fewer focusing on MSHS children. This is striking, as children of farm workers have among the highest rates of grade retention and drop-out in the country at the public school level (e.g., Cranston-Gingras & Anderson, 1990; Martinez, 1996). Although national drop-out rates are not

available, an examination of State-level data is indicative of the discrepancy. For example, data from the 2004-2005 school year indicate that the graduation rate for migrants was 33.3% in South Carolina though the average for all students in this State was 60% (Department of Education, 2005; Planty et al., 2009). There is no work that further explains the learning challenges across school readiness skill development for this population.

However, a glimpse into MSHS early development in areas such as numeracy and approaches to learning can be found in the results from the pilot study conducted for the *MSHS Research Design Development Project* (ACF, 2004). Here, only 9% of 141 preschoolers were reported by their teachers to be able to count to 20, though their parents reported a higher percentage (11% in Spanish; 24% in English). A more positive report was evidenced in color naming, with nearly two-thirds of the sample reported by both teachers and parents to have proficiency in this skill. Further, according to teachers, MSHS students scored within the typical preschool range in their approaches to learning. This was a limited sample, but variations across domains indicate that it will be meaningful to explore further these variations within a representative MSHS sample.

Additional areas of particular interest and relevance to early childhood education and the MSHS community are the language and literacy development of the children.[1] In addition to interest in overall communicative and literacy development, there is key interest in the development of the children's abilities within English and their home language(s). According to 2006-2007 PIR data, about 10% of MSHS families speak English as a primary language, 86% speak Spanish, and 4% of families predominately speak other languages. At the present time, however, there is limited specific data on MSHS children's variations in language and literacy abilities and/or development, as few studies have examined these areas across this community. Indeed, only two studies were found that examined early language and literacy skills among young MSHS preschoolers.

The first small cross-sectional study, by Ezell, Gonzales, and Randolph (2000), demonstrated that migrant children's emergent literacy skills were more strongly related to literacy activities in the home than in the center, though both were significantly uniquely related to migrant children's scores. This suggested that both MSHS parent and classroom practices are independently associated with emergent literacy scores.

The second study that included direct child assessments of language and literacy skills was part of the *MSHS Research Design Development Project* (ACF, 2004). The project focused on piloting various measures with MSHS children. The older preschoolers in that study appeared to attain higher scores on the emergent literacy tasks (such as Woodcock-Johnson Letter-Word Identification and Story and Print Concepts tasks) than in vocabulary (such as on the Peabody Picture Vocabulary Test). Whether these results reflect different rates of bilingual development in the subdomains of vocabulary and emergent literacy or are more reflective of the measures' inherent properties may be the subject of future research. Variation was also seen across English and Spanish. Within the early literacy domain, MSHS preschoolers' parents reported that the children demonstrated greater letter naming, counting, and color knowledge skills in English than Spanish. Overall, teacher's reports suggest continued need for improvement in children's early writing skills and alphabet recognition.

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[1] Family literacy is also of key interest and is discussed later in this Section.

As there are limited data about MSHS children's language and literacy development, an important contribution of the *MSHS Survey* could be the examination of these domains. In order to have a grounded understanding of what might be useful to include in the Survey, it is helpful to turn to the growing body of literature about ELL language and literacy development. A review of bilingual theories (García, Kleifgan, & Falchi, 2008) highlighted the following:

- The strong development of children's *overall* linguistic and early literacy systems is critical, regardless of the specific language used (e.g., *linguistic interdependence;* Cummins, 1979, 1981, 2000).
- Skills learned in one language will be accessible or "transferred" into other languages learned (e.g., *common underlying proficiency;* Cummins 1979, 1981).
- The skills needed to understand and speak a language conversationally develop more quickly and differ to some degree from the skills needed to utilize language for learning (e.g., *academic language, communicative language;* Skutnabb-Kangas & Toukomaa, 1976, Cummins, 1981).

There also are competing theories regarding the relationship between extent of exposure to a specific language and subsequent development in that and other languages (e.g., *time-on-task theory*; Taylor, 1974 and Pinker, 1991 and *non-limited language development*; Lenneberg, 1967; Penfield, 1967).

There is empirical support for many of these theories (e.g., Dickinson et al., 2003; Durgunoglu, 1993, Genesee, 2001). For example, *cross-language transfer* theory is supported by research showing that the extent of ELLs' development within their dominant language predicts growth in their nondominant language, even after controlling for initial linguistic and cognitive abilities (e.g., Paez & Rinaldi, 2006). Further, support for the *common underlying proficiency* theory is seen in the greater abilities within and across ELL children's languages related to subsequent improvements in broader domains of school readiness, cognitive abilities, and emotional and behavioral regulation (e.g., Bialystok, 1999; Rodriguez-Fornells et al., 2006). Additional evidence indicates that the type and level of linguistic skills needed for basic communication develop on a faster time sequence (1-3 years) than more advanced language (5-7 years) (e.g., Hakuta, Goto, Butler, & Witt, 2000; Thomas & Collier (1997), yet there is literature to support the interdependence of these skills (*pluralingualism theory*; García, Bartlett, & Kleifgen, 2007).

Further indication of the importance of including language/literacy variable in the *MSHS Survey* can be found in the growing literature that supports the building blocks of language and literacy, such as phonemic awareness, as essential for further literacy/language development for ELLs (Goldenberg, 2008). Interpretation of results would need to be grounded in a thorough understanding of ELL development, as children learning multiple languages may also progress through a "quiet period" as they listen and try to decipher what others are saying and contribute less conversationally (e.g., Tabors, 2002). Finally, a growing body of literature is finding that the rate of bilingual children's development within their languages is an important indicator of their later development (Hammer, Lawrence, & Miccio, 2007).

Regardless of the questions asked, those implementing and interpreting direct child assessments must consider features of bilingual development (regardless of the school readiness domain in question). Therefore, the *MSHS Survey* design offers multiple options and careful

consideration of language in its suggestions for direct assessment of MSHS children. If direct assessment activities are pursued, the detailed information regarding the children's bilingual language skills could allow the programs to address language needs most effectively and to understand more fully the interaction between bilingual language and other school readiness skills. The dearth of information available regarding language development in this population suggests that careful measurement and analyses of bilingual language skills across ages also offers valuable information to the academic community in general.

Family and Home Life. To understand the migrant child, it is critical to have a full understanding of their family, as represented in the Contextual and Conceptual Models (Exhibits 2.1 and 2.2). Within the contextual model underlying the *MSHS Survey* design, the family and home life experiences of MSHS children and the role that agriculture and home culture play in the composition of these experiences were organized using a framework consistent with Super and Harkness' (1999) developmental niche theory. According to this theory, three interrelated and culturally mediated factors of a child's family and home environment (family characteristics, activities and routines, and home and family environment[2]) should be examined in order to gather a comprehensive understanding of children's home life experiences (Gardiner & Kosmitzki, 2005). These three subdomains are similar to the familial experiences and mechanisms portrayed in prior Head Start conceptual models (e.g., West et al., 2007; Exhibit 2.1 and Exhibit 2.2).

Family Characteristics. Key characteristics of the family are associated with meaningful differences in child outcomes. Additionally, programs consider many family characteristics in their outreach, parent education, and parent involvement efforts. Multiple domains of family characteristics are reviewed below, including the domains of language, region of origin, education, literacy, health, and mental health. In most cases these are demographic features of the family, which when combined, are indicators associated with quality and variation in family dynamics and risk. A number of suggestions for the *MSHS Survey* parent interview resulted from this review, including detailed questions designed to gather up-to-date and accurate demographics from the MSHS families.

In terms of region of origin, the 1999 *Descriptive Study of Migrant Head Start* identified 83% of MHS parents as being foreign-born. It is possible that the inclusion of seasonal farmworker families in MSHS since then may have reduced this number, but potential changes in the overall immigration and agricultural populations make it difficult to predict the exact current distribution of origin in MSHS families. For example, while significant percentages of farm workers continue to originate from Mexico (94%, with 2% from Central America and 1% from other countries), the numbers of workers who were born in the southern part of Mexico doubled from 9% during 1993-1994 to 19% in 2001-2002 (Department of Labor, 2005). This corresponds to increases in emigration from the southern Mexican states of Veracruz, Guerrero, Oaxaca, Morelos, Chiapas, and Puebla. These changes in the composition of the agricultural worker population may be related to the striking increases in poverty over the past 15 years in Mexico, where government-support of agriculture has diminished.

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[2] These components are called "Customs of Child Care and Child Rearing," "Physical and Social Settings of Daily Life," and "Psychology of the Caretakers," respectively, in Super and Harkness (1997) original writings. Titles are adapted to better reflect the terminology of the early childhood field.

Correspondingly, MSHS programs reportedly are experiencing increases in families who speak non-Spanish languages, though it appears to fluctuate. This may be associated with the increases in emigration from the southern Mexican states, where a greater diversity of non-Spanish languages are spoken. These languages include 2 types of Huasteco, 5 types of Mazateco, 14 types of Nahuatl (Aztec), 9 types of Otomi, and 4 types of Popoluca, among many others (Gordon, 2005). In the 1999 *Descriptive Study of MHS,* 87% of MHS mothers reported primarily speaking Spanish while the PIR data from the 2005-2006 year indicate that 83% of children live in homes where the dominant language is Spanish. This level returned to 86% in the 2006-2007 PIR data. Across these years, the percentage of estimated English-dominant homes remained similar (10%), indicating that fluctuations occurred in the levels of languages other than Spanish. While the specific types of additional languages have not been formally reported within MSHS, data from the *NAWS* from 2001-2002 suggests that Creole, Mixteco, and Kanjobal are among the most prevalent non Spanish/non English languages within the general agricultural community.

Regardless of the language, parental literacy is often limited. Eighty five percent of migrant farm workers are estimated to struggle to gain information from printed materials in any language, given limited years of schooling (U.S. Department of Labor, 2000). Indeed, in the last national-representative study of MHS (ACF, 1999), the mean education of MHS mothers was 7.9 years, while that of fathers was 7.4 years. The low levels of education relate to the fact that Mexican citizens must pay for their own schooling after the 6th grade.

MSHS PARENT INSIGHTS:
A key area of health concern was the risk of sexually transmitted diseases in the community.
-MSHS Survey Parent Consultant Calls 2009

Physical health plays a large role in the family and home lives of MSHS children. Illness, fatigue, and pain are experienced by many agricultural workers from working long hours in difficult conditions. Further, specific health difficulties include poor nutrition, eye and skin damage from exposure to the sun, back injuries, musculoskeletal problems, dehydration, pesticide poisoning, and parasitic infections (NCFH, 2003c). Given that few agricultural positions allow for paid sick leave or worker's compensation, many parents may not attend to health issues in order to keep working. For example, in the 2004 *MSHS Research Design Development Project,* only 42% of adults reported receiving medical or dental care and 51% reported receiving prenatal care (ACF, 2004). Lack of insurance and paucity of rural medical services are major obstacles. Further, few resources can be brought to bear on physical health maintenance (e.g., regular check-ups, proper nutrition, disease prevention, stress reduction), given that MSHS family household incomes fall in the median range of $12,500 to $14,999, which is well below the 2005 poverty level for a family of five (Federal Register, 2005; ACF, 2004). As such, agricultural workers have a high morbidity and mortality, with life expectancies that are much shorter than typical U.S. life expectancies (e.g., Kloosterman, Skiffington, Sanchez, & Kiron, 2003; Slesinger, 1992).

Mental health difficulties are also prevalent and under-treated in the agricultural farm worker population. Documented rates of depressive symptoms of migrant farm workers range from 20% to 57% (Hovey & Magaña, 2000; Alderate et al., 1999; Hovey, Magaña, & Booker, 2001). In a recent MSHS sample (Barrueco, Cumba, Sena, & Alvarado, 2008), 30% of parents reported moderate to severe depressive symptoms, with a high percentage (75%) expressing interest in seeking mental health services. While many national studies of young children and families focus on depression, given its prevalence rate and consistent relationship with child outcomes,

anxiety is of additional relevance to MSHS experiences. The comorbidity of depressive and anxiety symptoms is generally higher within the Latino population, and anxiety also is heightened among agricultural workers due to stress experienced from acculturative, agricultural, migratory and poverty experiences (Hovey & Magaña, 2002a; 2002b). These include social isolation and limited social networks, as MSHS children and parents are separated from family members and friends across national borders and have little opportunity to establish new connections within the U.S. when migrating.

Two recent studies found that MSHS parent's health and mental health functioning have various implications for their participation in both their children's lives and in the MSHS program. For example, MSHS parents participated less in family literacy activities at the centers and at home with their children if they reported higher levels of physical pain, depression, and migratory stress (Cumba, Barrueco, Sena, & Alvarado, 2008). Greater levels of arguing and drug use were also related to lower levels of storytelling and book reading (Barrueco et al., 2008). Further, higher MSHS fathers' migrant-related stress was related to lower developed levels of children's vocabulary and alphabet knowledge. Given the potential prevalence of symptoms and the probable association between parental mental health and child outcomes (Cumba et al, 2008), measuring adult coping resources and depressive or anxiety symptoms in the *MSHS Survey* may be of key importance to programs designing effective parenting supports.

Activities and Routines. As with every family, the MSHS families' activities and routines are a major source of interaction, socialization, and information for children. How the family handles routine activities (i.e., church, grocery shopping, laundry) offers clues to children regarding community attitudes, cultural norms, social interaction expectations, and family organizational structure. More direct child-focused interactions (e.g., child care, reading, discipline, playing, helping out parents) are also part of the family activities and routines. Overall, these processes of family life can represent strengths within the family when things are going well, but can be particularly vulnerable when stress is high or resources are exceptionally low. Therefore, a portion of the parent interview suggestions for the *MSHS Survey* is centered on gathering information on home and community activities that contribute to children's well-being and healthy development.

Migrant farm work and the livelihood (and poverty) that comes with it can stress familial relationships and functioning, as well as parenting practices (Siantz, 1991). Research with young children links the degree and consistency of parental engagement and family routines with developmental outcomes (e.g., Guralnick, 2006); for example, children with involved parents who interact directly in a consistent supportive manner have better outcomes. Work and parenting are competing demands in most parents' lives in the United States. For MSHS families, given the more extreme demands to work for long stretches of time, the frequency and intensity of parent-child interaction could be an even more important factor in the child's development. However, for many of these families, there are also the contributions of extended family and siblings to support the child's development. As with many of the domains discussed, this is an area where comparison of seasonal and migrant family experiences may be informative. Since seasonal farm workers are more likely to experience stability in their work environments, they are hypothetically less likely to experience strong fluctuations in family routines and time spent with their children. One of the few studies to examine social support among MHS families (De Leon, Siantz, & Smith, 1993) found that maternal social support predicted peer acceptance among the children. Interestingly, greater reports of social support

among migrant fathers related positively to teachers' reports of children's behavior, but negatively to maternal reports of children's behavior. Therefore, parents' sense of social connectedness and supports may be associated strongly with family well-being as well as parent-child interaction quality, and questions about social networks and parent-child activities could be informative to include in the parent interview of the *MSHS Survey*.

Parents' perceptions of their role in their child's development vary across cultures. Many Latino immigrant parents are wholeheartedly dedicated to the educational success and linguistic proficiency in English and Spanish of their children, from the time their children are born and into adulthood (e.g., Gloria & Segura-Herrera, 2004). Yet Latino immigrant parents generally perceive their roles in contributing to this early development as facilitators for learning through a wide array of activities, rather than as active agents in focused pre-academic activities as espoused in mainstream conceptualizations in the United States (Halgunseth, et al., 2006). For example, Spanish-speaking parents report feeling that encouraging older siblings to teach younger children or taking their young child to a broad array of home and community activities are parent behaviors that contribute to language and literacy development. Further, many Latino immigrant parents provide high degrees of warmth and affection for their young children's nurturance, health, and protection and engage less in structured formal learning activities in the home; these attitudes tend to hold true regardless of parental literacy levels and years of formal education (Halgunseth et al., 2006). As their children enter school, Latino immigrant parents tend to become more directive and structured in their educational, linguistic, and behavioral expectations for their children, reflecting a developmental, and perhaps acculturative, effect in Latino immigrant parenting beliefs (Halgunseth et al., 2006). Given this evidence, one suggestion for the *MSHS Survey* is exploration of mothers' and fathers' perceptions and attitudes on these parenting dynamics. In addition, it may be of interest to identify current MSHS program goals and orientation and staff perceptions regarding attempts to increase family engagement. These areas of information could contribute to development and maintenance of increasingly effective program interventions and supports.

It is important to recall at this juncture that the linguistic and region-of-origin shifts within the agricultural farm worker population noted above may be associated with shifts in the cultural composition of the MSHS population and therefore, may be associated with as yet unexplored shifts in attitudes towards parent-child interaction and parental-roles in education (and other important features of home life and child development). For example, research indicates that Mexican migrants who are members of indigenous communities (such as Mixtec, Triqui, and Zapotec heritage) are becoming more prevalent in the Pacific Northwest (Stephens, 2001). Discussion with program staff consultants (ACF, 2004) indicated that programs are only beginning to address the challenges inherent in outreach and appropriate cultural and linguistic approaches for these families. It is difficult for MSHS programs to develop effective parent engagement programs that are appropriate to varied cultures when little to no information is available. Therefore, the suggested examination of parental attitudes would be strengthened and most informative if pursued using a framework that would allow capture of multiple cultural perspectives and competencies.

Of further interest to MSHS and all who want to help and support migrant families are parental attitudes toward child care and early childhood education. However, relatively few studies have examined obstacles to service access and preferences of the migrant families. Further, limited work has been done addressing the child care composition and settings of children of

migrant and seasonal workers, though early childhood programs may have a significant impact on the lives of MSW children. Indeed, rates of growth in weight and height among Mexican-American migrant children accelerate when attending day care centers (Dewey et al., 1993).

In terms of types of child care utilization and preferences, Latino families, who comprise 83% of agricultural workers (NAWS, 2005), are generally less likely to use non-family care (Garcia & Gonzalez, 2006; Buriel & Hurtado-Ortiz, 2000; Fuller, Holloway, & Liang, 1996). Children of immigrants and of English Language Learners are also less likely to be enrolled within Head Start (Nord & Griffin, 1998; US GAO, 2006). This has been found to largely relate to socioeconomic and structural barriers experienced by families as well as shortages of center-based and culturally-competent child care services in the area (Hernandez, 2006; Howes, 2003). An examination of immigrant families in selected communities across the country indicated limits in awareness of child care opportunities, accessibility, and responsiveness (Matthews & Jang, 2007).

MSHS STAFF INSIGHTS:
Even non-family child care is difficult to find due to limited availability in rural areas, longer waitlists in these areas during summer months, and eligibility barriers.
-MSHS Survey Staff Consultant Calls 2008

For agricultural workers, the obstacles to locating and securing family- or center-based -home childcare are tremendous. Their circumstances and poverty often necessitates that both parents work, and many families do not have extended family to support them due to immigration and continued mobility. Thus, agricultural children are often brought to the fields and other workplaces from infancy, experiencing unhealthy and dangerous conditions including high heat and toxin exposures (e.g., Arcury & Quandt, 2003; Frank et al., 2004; CMHP, 1986; as cited in Koch, 1988). Alternatively, younger children might be cared for by older children when they are not in school (CMHP, 1986; as cited in Koch, 1988). Once in the field, there may be a tendency for preschool children to assist their parents with the field work as soon as they are able (e.g., Bey, 2003). Since both parents in agricultural farm worker families often work long hours and most days of the week, such strenuous and unhealthy activities have serious implications for children's development. Over past decades, the presence of children in the fields greatly decreased as Federal agencies worked to target this problem through regulatory approaches as well as the provision of MSHS itself (ACF, 1999). One set of suggestions for the parent interview of the *MSHS Survey* focuses on perceived obstacles to child care and/or MSHS services, as well as the variation and quality of child care services utilized over the seasons. This would serve as critical information for OHS policymakers and MSHS programs attempting to reach families at most risk for having their children in the fields.

MSHS STAFF INSIGHTS:
Parents are becoming more likely to bring their children with them into the fields rather than enroll them in a program like MSHS due to concerns that they may not be reunited in the event of an immigration raid.
-MSHS Survey Staff Consultant Calls 2008

Home and Family Environment, including Sources of Resilience. While the direct exposure of MSHS children to negative farming conditions might have decreased, some researchers remain concerned about indirect effects of living in an agricultural community. For example, pesticides deposited near homes on farms and can seep into homes through the water supply, plumbing, house tiles, and other methods (McCauley et al., 2001). Parents may carry the pesticides home on clothing and shoes. As presented in an earlier section, Rohlman et al., (2005) identified slower response speed and higher latency to fine motor tasks among preschoolers living in agricultural areas compared to those living in non-agricultural areas; these delays that were

consistent with the effects of organophosphate pesticides. The poor housing conditions of migrant families have also been well-documented, with many young migrant children living in homes with high levels of heat, pest infestation, lead, and plumbing difficulties (e.g., Slesinger, 1992).

> ***MSHS PARENT AND STAFF INSIGHTS:***
> Parents reported preferring to live in farm housing since it is typically less expensive and easier to obtain. A reduction in available housing, an increase in leasing restrictions, and a rise in community resistance to migrants is increasing the stress associated with migrant lifestyle. This combination of obstacles may also be contributing to a decrease in safe and healthy housing for MSHS families; one potential area of exploration for the *MSHS Survey* that could identify crucial paths for intervention.
> ***-MSHS Survey Staff and Parent Consultant Calls 2008***

Housing availability and conditions and their effect on MSHS children and families might also be informative to consider in the *MSHS Survey*. Indeed, a primary stress on the family environment reported by migrant MSHS families (using the *Migrant Stress Inventory*; Hovey, 2002) was the difficulty of finding housing upon moving to a new location, with some families reporting living in their cars until they were able to find housing (Barrueco, in progress). In general, migrant families experience more stress when seeking housing than seasonal families, who inherently need to engage in less searching for housing and, because of extensive time in one place, can often identify homes with better conditions than migrants (Hovey & Magaña, 2002). However, seasonal and migrant workers do experience similar stress from the cost of housing, which is the biggest proportion of their salaries. Housing availability for migrants is linked, in large part, to the length of the harvest season. In upstream areas, where seasons are shorter and therefore migrant workers are in the locations for shorter periods, more housing is available on farms. Many farms in the downstream areas do not provide housing.[3]

Moves for work were experienced an average of 1.37 times per year by migrant families in the only nationally representative study of MHS (ACF, 1999). Now that MSHS serves seasonal families, the mean number of moves across the population may be lower. However, the number of moves reported by parents in the *MSHS Research Design Development Project* (ACF, 2004) was higher: they reported two moves in the year prior to the study and an average of 4.31 moves during the actual year of the study. These differences may relate to the non-representative sample that was used, to a short-term increase in migration patterns, or perhaps to longer-term shifts in agricultural work patterns. Incorporating questions regarding migration rates and decision process in the *MSHS Survey* could inform programs about family trends that should shape program services. It could then be informative for the future *MSHS Survey* to compare the rate of migration of its families with the data available in the *NAWS* for the general migrant population with preschool children.

Surprisingly, the influence of frequent moves on the development of migrant children has rarely been examined, although the frequency of a family's mobility has been linked with child outcomes in many studies (see Humke & Schaefer, 1995 for review). However, a recent study by Barrueco et. al., (2008) found that greater levels of mobility were associated with greater difficulties with children's energy and feelings, as observed by trained examiners. For a month

[3] The term "home base" is often used to describe the families' identification of an area to which they almost always return; these are often located in warmer locations for winter housing, although this is not always the case. According to the MSHS Community Consultant Group (2008), returning to home base reflect a number of considerations including work availability, season, and the need for older children to enroll in school.

or two after moving, teachers have also reported a slow start up period, as the children settled in to their new sites, engaged in new relationships, and observed the new classroom routines (ACF, 2004).

> ***MSHS PARENT AND STAFF INSIGHTS:***
> Parents reported that mobility stresses their ability to seek health care services for their children, as they must re-apply for Medicaid whenever they cross State lines. The paperwork and logistics involved may be so extensive that they deter many from seeking such important services. Therefore, the moving process may have a distinct influence on children's academic and health outcomes.
> ***-MSHS Survey Parent and Staff Consultant Calls 2008***

Along with the challenges of the multitude of risky conditions and experiences that MSHS families face, they possess multiple sources of strength. For example, in a qualitative study of 13 migrant families, Parra-Cardona and colleagues (2006) found that being family-focused, with children a "source of inspiration when facing adversity and extreme hardship" (372), was a strong contributor to parents' report of their resiliency. Dedication to the family (including both immediate and extended) is a salient and frequently observed characteristic among MSHS families (Barrueco et al., 2008), reflected in 90% of parent reports in the one national study of MHS (ACF, 1999; 81% in the 2004 *MSHS Research Design Development Project*). Further, pride in *"trabajando duro"* (working hard) and a belief that such work improves their children's lives contributes to making meaning of adversity and supporting stronger life satisfaction (Parra-Cardona et al., 2006; Walsh, 2003). Finally, spirituality and religious beliefs are often strong factors in the lives of MSHS families and contribute to positive child development. A recent analysis of national *ECLS-B* data showed that religious attendance was one of the most reliable predictors of early infants' cognitive, socioemotional, and motor development in Latino families (Barrueco, López, & Miles, 2007). In a sample of MSHS families, fathers who reported larger resources of resiliency (including religion, extended family, and hope) were more likely to engage in language and literacy activities with their children, including singing, book reading and story telling (Barrueco et al., 2008). Whenever measuring attitudes, perceptions and beliefs, the methodological framework should be carefully designed to be open to diverse cultural and individual points of view. Further exploration of these domains of resiliency within the MSHS families, how these domains associate with MSHS services and child development and, if possible, assessment of these family strengths over time, may offer a useful foundation for building appropriate programmatic supports.

Among the program goals of MSHS is supporting the family environment to create a supportive arena for children's healthy development. If ACF pursues measurement of family demographics, parenting attitudes, and home environment characteristics, the resulting information will fine-tune local program and OHS' understanding of the families being served, as well as allowing accurate presentation of the population being served. The most effective supports should avoid clashing with close-held cultural approaches, family history, and family goals. Detailed information drawn directly from target families could markedly shape and improve MSHS outreach and parent engagement efforts.

Local Community. As reflected in Exhibit 2.1, MSHS children and families are embedded within, and influenced by the communities in which they live. Typical community-level considerations for Head Start studies include the safety of the neighborhood and the strength of the social service network in the community and in the lives of the families. As further captured in the conceptual pathways model (Exhibit 2.2), MSHS families are particularly influenced by community characteristics such as the availability of work, health care, and other health and

human resources in rural areas. Further, agricultural farm worker families' proximity to grocery and other stores, their experiences with local community members' attitudes towards them, and the strength of their relationship with team leaders and farm owners directly relate to their mental health and general well-being (Hovey & Magaña, 2000; Hovey, Magaña, & Booker, 2001; Hovey & Magaña, 2002a; 2002b). Unfortunately, discrimination is a salient feature in the lives of agricultural farm workers which has been documented in a number of studies (Dalla & Christensen, 2005; Parra-Cardona et al., 2006; Ruiz, 2002; Wirth & Dollar, 2004).

In a study by Martin, Gordon, & Kupersmidt (1995), 52% of their sample of 54 migrant and seasonal children had experienced some form of violence, either as witnesses (46%) or as victims (19%). These rates exceed national estimates and begin to approximate those of poverty-stricken, high-crime urban areas found in a 1993 report of the *NIMH Violence Project* (19% were victims and 61% were witnesses among younger children while 32% were victims and 72% were witnesses among older children; Richters & Martinez, 1993). Again, this information is not recent, but indicates an important area that requires current accurate information to identify potential gaps in services. Gathering more current information in these domains could increase the safety and long-term success of these children.

MSHS PARENT AND STAFF INSIGHTS:

The trauma of violence can play a role in the lives of the migrant children and families, but a particularly salient stressor at the time of this report is the increase in immigration raids in the past year. MSHS parents reported that they are worried on a daily basis about the possibility of an immigration raid that could result in separation from their children. Staff speculate that the negative national focus on immigration has reduced housing availability (as fewer farmers now provide housing), as well as limited the availability of short-term leases.

To address these challenges, MSHS families report that some families maintain leases on multiple households (which are a high expense), are more likely to live with other migrant families or migrant individuals, or migrate less. Crowded housing conditions, less familiar individuals, and more chaotic households could undermine family solidarity, increase individual vulnerability, and result in even higher levels of stress.

-MSHS Survey Parent and Staff Consultant Calls 2008

Cultural Experiences and Processes. Surrounding many of the aforementioned experiences and contexts affecting MSHS children are cultural experiences and processes, such as the exposure to U.S. and home culture values, beliefs, and practices within the communities, agencies, MSHS classrooms, and home environments. Acculturative processes are thus inherent throughout the everyday life experiences and development of MSHS children (as noted in Exhibits 2.1 and 2.2). Each individual that crosses paths with the immigrant children (e.g., parents, extended family, teachers) present behaviors, attitudes, and interactions that may be laden with cultural experiences and messages (whether explicit or implicit) (e.g., Barrueco et al., 2004; Hinton, 1999). Rules, attitudes, approaches, encouragement, responsiveness, available materials, priorities, and nonverbal and verbal expressions are a small selection of contextual features that may provide meaningful cultural information. Thus, we all are engaged in an acculturative process from moment to moment, and the degree and method of acculturation within the family and center environments (and within broader contextual domains) play a role in children's outcomes.

The acculturative process is not necessarily a simple linear process; the child does not always move from being more "ethnic" to more "American" (Chun, Organista, & Marín, 2003). Rather, bi-dimensional models (such as those conceptualized by Berry [1980; 1997] and others) have

stronger empirical support.[4] Within these models of the acculturative processes, each culture separately influences an individual's "ethnic" practices, language, and beliefs and "American" practices, language, and beliefs. As such, by these models, individuals may become *bicultural* by retaining strong ethnic practices and beliefs and developing American ones as well. Alternative outcomes may be *assimilation* (low ethnic, high American), *unacculturated* (high ethnic, low American), or *marginalized* (low ethnic, low American). Notably, research suggests that bicultural individuals exhibit more positive outcomes in health and mental health than other outcomes, particularly among Latinos. (For more on acculturation, see Chun, Organista, & Marín, 2003, and Marín, Organista, & Chun, 2005). Given these findings, the acculturative process and cultural aspirations within MSHS families, and even programs, were incorporated into the conceptual pathways model (Exhibit 2.2). Multiple suggestions for the Parent Interview of the *MSHS Survey* address measurement of cultural perceptions and acculturative processes, particularly as associated with parenting and early childhood education. MSHS programs more informed about culture can fine-tune their approach, reduce obstacles to engagement and access, and strengthen a child's development in subtle yet important ways, by boosting cultural identity and, in turn, potentially bolstering health, mental health, and school readiness. In particular, measures using an open framework to gather cultural attitudes and perceptions may widen programs' understanding of variations within their client populations.

Time and Weather. The final domain incorporated in the model is time and weather, which are of particular unique relevance to MSHS children, families, and programs. The timing of agricultural seasons is the major system underlying the complexities of the child/family/program links. Therefore local weather patterns are key. Droughts, hurricanes, and shifting weather trends influence the harvesting season on a monthly basis. Other chronological features of importance to the MSHS system include the length of participation in a program, time since immigration, frequency of migration, crop development patterns (e.g., planting, maintenance, and harvesting), and various other time-related characteristics. These directly affect the mobility of families, employment of parents, and ongoing features of MSHS programming. Examining these details would expand OHS and community understanding of the challenges inherent to successful MSHS programming; gathering descriptions of processes across a national sample of programs may also highlight creative and successful techniques for planning and scheduling programmatic efforts. Therefore, the *MSHS Survey* plan includes suggestions for including sections asking administrators, staff, and families about family and program timing and decision-making processes.

> ***MSHS STAFF INSIGHTS:***
> Within certain outer limits, specific program startup and closing dates and family arrival/departure dates are generally unknown until quite close to program startup, and can change very suddenly (e.g., families departing with no warning, families previously unknown to an area arriving because of a specific new crop, multiple waves of families over the MSHS season because of variability in the growth and ripening of specialty crops).
> ***-MSHS Survey Staff Consultants Calls 2009***

[4] Recent research has even begun to support a multidimensional process capturing more nuanced patterns and variations in underlying cultural processes, such as the separation of linguistic and cultural practices (e.g., Berry, 2003; Sue, 2003).

2.3 Migrant and Seasonal Head Start

The first sections of this chapter review the conceptual models for the *MSHS Survey*, previous MSHS studies, and the details of family and child characteristics that may be of interest to OHS and the MSHS families and programs. This section moves directly into program details, highlighting the links between the MSHS program characteristics and features of the families being served.

2.3.1 Head Start Program Performance Standards and Measures

A primary reason for the ongoing high level of quality across Head Start programs (including MSHS programs) is the required implementation of Head Start Program Performance Standards (effective January, 1998). The areas covered by these standards include program management and staffing, child education services, parent involvement and program governance, health and nutrition, and disabilities services. Head Start also provides grantees with guidance on strategies for meeting these standards, which set minimum requirements for the services that programs provide to children and families and drive the management of all Head Start programs, regardless of the population being served. However, local programs meet these standards by applying strategies that are adapted to the realities of their locations and the local populations they serve.

2.3.2 MSHS and Performance Standards and Measures

Early work looking at MHS programs found that the MHS programs (now the MSHS programs) diverged from the regional Head Start programs primarily in terms of local programs' accommodation to the migrant lifestyle, not in the fundamental design and goals of the essential services (ACF, 1999). The *Descriptive Study of Children and Families Served by Migrant Head Start Programs* (ACF, 1999) found that core services—remaining in line with the requirements set out in the Program Performance Standards—universally included developmental and educational activities for children; health and dental screenings, preventive health services, and follow-ups; assistance to families in securing social services; and parental involvement and education programs. However, the programs also actively sought to incorporate multicultural and bilingual features into their work.

2.3.3 Program-Family Links: MSHS Shaped to Family Characteristics

MSHS programs play an integral role within their local agricultural community due to their employment of a holistic approach to meet the needs of children and families. The Head Start program is known for its 'whole child' approach, and MSHS supports this philosophy as well. It puts this to practice in different ways. For example, some MSHS programs provide resources that support entire families, while some centers serve as local hubs for the general migrant and seasonal farm worker (MSFW) community, providing resources for housing, work, and other factors. The programs often are shaped in ways that allow them to actively address family characteristics (i.e., likely work hours, cultural backgrounds, and recency of arrival in U.S.).

MSHS Schedule. One of the basic ways MSHS programs differ from regionally-funded Head Start programs is in terms of service structure and program operation. According to the recent PIR data (PIR, 2006) almost one half of the children served attend regionally-funded Head Start programs that are 9–10 month programs offering only part-day or part-week programs. In contrast, 100% of MSHS programs, in an effort to accommodate farm workers' schedules, offer

full-day programs; some are open at dawn and remain open until after parents return from the fields (PIR, 2006-2007). A number of MSHS centers are open 12 hours a day, 7 days a week.

The months that MSHS centers operate vary widely, depending on the demands of the local agricultural industry as well as fiscal restraints. In some cases, centers open approximately one month prior to the harvest season and close up to one month after the harvest is completed. According to previous ACF studies (ACF, 1999a; 1999b), peak service periods for MSHS programs typically are determined by agricultural indicators and the quality of the local harvest. Community needs assessments include consultations with local farmers and community-based agencies, surveys and informal discussions with migrant parents about their plans for the following harvest season, and local employment data. As discussed previously, actual start and end dates vary from year to year, both within and across programs; what makes this inconsistent and challenging is that local weather conditions and crop production may cause center opening and end dates to fluctuate by weeks with little prior notice. If the families aren't there yet, it makes no sense to open. If the local agricultural season goes longer then usual, the centers stay open if possible. The duration of program operation ranges from a minimum of 6 weeks to those that remain open year-round (see Appendix B). More than four-fifths of the 81 centers in *The Descriptive Study of Migrant and Seasonal Farmworkers* survey sample (ACF, 1999) indicated their facility was open during peak harvest periods of the summer, while in the more Southern areas, the remaining centers were open during the winter months where many (though not all) families tend to stay for the off-season. Recent increases in the proportion of seasonal families within the overall migrant farmworker population, coupled with a corresponding need for year-round child services, are likely reasons for the increase in the number of MSHS programs that remain open during the winter season.

MSHS Program Locations. MSHS programs can be categorized as downstream programs, upstream-only programs, and mixed downstream and upstream (or receiving) programs. Downstream programs[5] typically are in southern portions of southern States and offer services for longer periods because of the longer harvest seasons in the South and because many migrants return to use these programs as "home-based" locations between harvests. Migrants with an identified home-base location tend to return to these communities frequently and sometimes maintain permanent residences there. In contrast, upstream programs are generally in the northern areas, offer services ranging from 6 weeks to 7 months, and provide care for children and families as they migrate during shorter harvest seasons (Head Start Fact Sheet, OHS Web page, 1998). A few mixed grantees maintain downstream and upstream programs, often covering very broad service areas that stretch across both the northern and southern regions. As of 2007, 39 of the 48 contiguous United States were home to a MSHS Center.

There also has been a tradition in migrant research, and perhaps within the migrant community itself, to discuss the patterns of North-South annual migrations in terms of three overarching paths: the West Coast, Midwest and East Coast 'streams' (Exhibit 2.3) (MSHS TAC-12/ National Collaboration Office/AED, 2007). However, the simplicity of this organization currently appears to be a matter of convenience and not accuracy, as family migratory patterns now cross from one stream to another. In addition, families may or may not follow the same pattern from

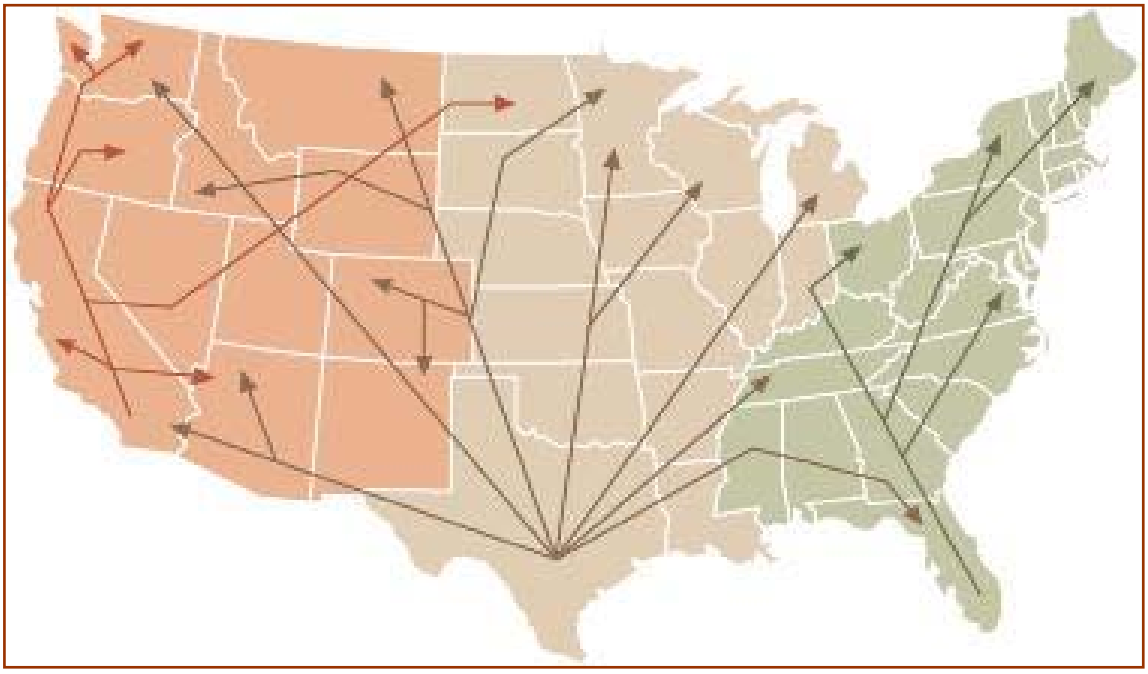
[5] These location labels (upstream, downstream) have developed for convenience, but there is no strict definition of the boundary between upstream and downstream programs.

year to year, making the job of anticipating movement and enrollment even more difficult for local Head Start programs. Two national studies (ACF, 1999a; 1999b) explored the reasons why migrant farm workers choose one migrational stream over another, while occasionally engaging in interstream migration. These studies identified agricultural, meteorological, and cultural factors, as well as practical factors (i.e., availability of subsidized health care, child care, legal, and MSHS services) as important influences on the choice of migration patterns.

> ***MSHS STAFF INSIGHTS:***
> Staff report that about half of families return to their MSHS centers, though this may be changing as immigration reform affects the migration patterns.
> ***-MSHS Survey Staff Consultant Calls 2008***

MSHS tries to locate the centers based on the migration patterns of the families. Migrant families served by MSHS programs typically engage in four types of migration. In the first type, families travel to one or two locations during the annual harvest period and return to their "home-base" after the harvest. In the second type, families travel from farm to farm for an extended period of time, sometimes covering more than one annual harvest, before returning home. For some families, this means moving to various areas of the country before returning to an area that they consider more of a "home base." In a third type of migration, families continually move without returning to a consistent home base. Finally, other families move within a relatively small area, traveling from farm to farm, such as nut and grape farmers in the Central Valley in California. Many of these families with a narrower migration zone reside permanently in one area while one member of the family, usually the father (or an adult male), travels relatively short distances for agricultural work (Klayman & Hubbell-McKey, 1998).

Exhibit 2.3: Current Diversity of Agricultural Workers' Migratory Patterns, Overlapping the Traditional 'Streams': Western, Midwestern, and East Coast (MSHS TAC-12/ National Collaboration Office/AED, 2007)



> ***MSHS STAFF INSIGHTS:***
> Staff reported concern that the number of unfilled MSHS slots may increase if fewer families are migrating due to their current concerns about immigration raids.
> ***-MSHS Survey Staff Consultants Calls 2008***

Programs adjust their schedules in other ways to meet the needs of their client families. A Descriptive Study of Children and Families Served by Head Start Migrant Programs (ACF, 1999a) also found that some centers reported adjusting their seasonal schedules to open somewhat before the peak season—to balance the efficiency of operating centers only when agricultural demands were highest with the need to be responsive to the unique needs of migrant families with young children. According to this study, families with young children often arrived sooner than other migrant families, in an effort to secure housing from the limited options that typically are available. In 1998, Center Directors estimated that only three-quarters of the children remained within their programs for the entire period the center was open, with the remaining slots needing to be refilled by mid-season (i.e., a second or third wave of families). Some programs increase the slots available during certain periods in order to be responsive to families that engage in short-term, specialized harvests which may occur mid-to-late season. In such cases, the families may require MSHS services for only a small portion of the time a center is actually open. Strategies employed for filling open slots included personal outreach by center staff, maintaining contacts with local agricultural employers, fielding referrals from other local organizations in touch with migrant families, as well as advertising through appropriate electronic or print media outlets.

Much formal information regarding programs' location and scheduling decisions, recruitment and enrollment is anecdotal (MSHS Community Consultant Group), dated (1999 study), from small convenient MSHS samples (Barrueco et al., 2008), or from the more general research regarding agricultural workers. For ACF and OHS administration to understand more fully the current challenges and highlights of MSHS programs, the *MSHS Survey* could gather information regarding these planning and implementation processes from all grantee and delegate agencies. Such information could emphasize the challenges to successfully customizing the MSHS program to the population being served. Further, should ACF continue to pursue the *MSHS Survey* for multiple years, changes in this information could reflect critical trends in population and migration patterns.

Teacher, Center, and Grantee Characteristics. As is the case for regional Head Start and Early Head Start, an MSHS teacher's experience, education, and training are important characteristics that are theorized to relate to their pedagogical practices. Additional teacher characteristics of importance are their child development knowledge, beliefs, attitudes, and sensitivity. An examination of the available labor pool for teachers, in *A Descriptive Study of Children and Families Served by Head Start Migrant Programs* (ACF, 1999a), found that many bilingual and bicultural applicants lacked the training and educational credentials that would be desirable for filling program positions. In contrast, educationally qualified job applicants often lacked either the necessary language skills or the experience working with migrants or Head Start. Although 89% of the grantee agencies in that study reported having staff members who spoke Spanish, these staff were not always working directly in the classrooms.

In 2007, Congress's Head Start Act strengthened the necessary qualifications for teachers, requiring that at least 50% have either a baccalaureate or advanced degree in early childhood education or a baccalaureate or advanced degree and coursework equivalent to a major relating to early childhood education, with experience teaching preschool-age children, by the end of

FY2013. Such requirements put increased pressure on programs for recruiting and paying for qualified staff. In 2003, about 27% of classroom teachers had an ECE or related degree while in 2007, 48% of classroom teachers did. The *MSHS Survey* plan includes proposed questions at the administrative and/or center and teacher levels that would explore trends in teacher credentials and variations in staff recruitment and retention strategies across the country. If options regarding teacher credentials are pursued, it will be possible to explore which factors of teacher credentials are associated with key factors such as parent engagement and classroom characteristics.

Training also plays a role in the activities of MSHS programs and their staff. In the *Descriptive Study of Children and Families Served by Migrant Head Start Programs (ACF, 1999a),* most trainings centered around issues related to children's development (including those with disabilities), health and safety, cultural sensitivity, and administration. Less common at that time were trainings related to working with migrant children (76%) and multilingual development (71%). The vast majority of trainings were conducted by staff internal to the program, with the MSHS Technical Assistance Center and colleges/universities conducting a small proportion. Center Directors reported in the 2004 study that particular training would be useful in program management and staff hiring. Recent data are not available regarding the range and source of training, teachers' perceptions of the training, and any associations with classroom quality. Trainer characteristics and enrollment variations could be assessed directly at the center and classroom level. At the family level, parents' perceptions could be gathered regarding many program features, including organizational structure, staff qualities, and center schedules and location. Information at each level (and their associations with classroom quality and parents' perceptions) could serve to improve program consistencies. Most MSHS children enroll at multiple centers over their time in MSHS, and variations in recruitment, teacher credentials, and facilitation of transitions may importantly impact program services and variations in family and child development and coping.

MSHS programs have served children from infancy through five years of age since its inception. *A Descriptive Study of Children and Families Served by Head Start Migrant Programs* (ACF, 1999a) found that approximately three-quarters of the centers served infants, toddlers, and preschoolers, although the overall proportion of the total enrollment represented by infants was lower than that of the other age groups — 14% vs. 24% for toddlers and 62% for preschoolers. The most recent total enrollment data from the 2006-2007 PIR indicate that more infants are now being served proportionally (under one year of age: 5,196; one-year-olds: 5,420; 2-year-olds: 6,836; and preschoolers: 16,682).

Classroom Activities across Age Groups. Thus, variations in classroom activities across age groups are of importance to MSHS. For example, an essential difference arising from the teacher interviews in the 2004 *MSHS Research Design Development Project* is that 83% of preschool teachers reported that decisions about classroom activities were made by program staff, while 71% of infant/toddler teachers reported making such decisions themselves. Since only a few infant/toddler teachers (n=7) were interviewed in this study, it is unknown whether this is similar to experiences across the country. Other differences that may be examined are interactions (e.g., the type and degree of teacher-child interactions throughout day) and structure (including the degree of indoor/outdoor play), and the nature of materials and manipulatives in the classroom (e.g., gross, fine motor; pretend play).

Classroom Curricula, Activities, and Routines. Classroom characteristics that have been found to influence the development of children include the type of curricula used, the degree of its implementation, the degree to which learning activities are presented consistently and frequently (e.g., storytime, arts, science, free play), and the presence of routines in the infant, toddler, and/or preschool classrooms (e.g., Lawhon & Cobb, 2002; Peisner-Feinberg et al., 2001).

In the *Descriptive Study of Children and Families Served by Head Start Migrant Programs* (ACF, 1999a), three-quarters of MSHS programs across the nation used either a curriculum such as *Creative Curriculum* or *Nuevo Amancer*, or their own locally developed curriculum. Twenty-five percent of programs across the country did not report the use of a curriculum to structure their educational activities. In the 2004 ACF study, a slightly higher percentage (85%) of programs in this non-nationally representative sample used a standard formalized curriculum.

Further, global quality indicators of the physical elements, layout, and safety of classrooms, centers, and play areas have long been known to relate to children's socioemotional, motor, and pre-academic development. In keeping with recent developments in classroom quality research, however, the *MSHS Survey* should take a more in-depth assessment of classroom quality that includes examination of teacher-child interactions. Further, the uniquely unstable nature of MSHS classroom compositions must be taken into account. The assistance of MSHS staff members will be useful in examining both of these important elements of MSHS classroom and center environments, leading to a better understanding of potential improvements in classroom quality.

Due to recent research on classroom quality, increased attention is being paid to the actual interactions between teachers and children (e.g., Howes et al., 2007; Mashburn et al., 2008). In particular, the emotional and instructional support provided by teachers is seen as a key feature of classroom quality, with measures such as the CLASS becoming part of the PRISM now being utilized to capture this feature of classrooms (e.g., Mashburn et al., 2008).

Both the composition of students in the classroom and enrollment variability are of considerable relevance to MSHS programs and, potentially, their child-related outcomes. For example, if teaching staff are focused on facilitating the transition of children in and out of classrooms due to mobility, less emphasis may be able to be placed on typical classroom educational practices. While the composition of seasonal families within MSHS classrooms is generally stable, this is not the case for migrant families. As discussed briefly in the section above, upstream centers may experience multiple "waves" of children moving through during a season. These waves occur as families specializing in various crops move through a region, causing turnover and changes in classroom composition and teaching strategies as the season progress. The degree of classroom turnover is one of the critical elements that could be considered when examining the experiences of migrant children and the realities of running an MSHS program.

The *MSHS Survey* provides the opportunity to talk with education managers, teachers, and assistant teachers about how classrooms are managed in MSHS centers. Proposed site visits also offer the opportunity to conduct standardized observations of MSHS classrooms in action. When both of these methodologies are employed, OHS should be able to learn important lessons about the variations in programming in extant in the national program.

Multilingualism in the Classroom. In MSHS classrooms, decisions regarding curricula, activities, interactions, and routines are guided by the unique cultural and linguistic background of the MFW population. Given the overwhelming majority of English Language Learners in MSHS, it could be informative to more specifically explore the approaches to utilizing and teaching various languages (e.g., English, Spanish) within the classroom by MSHS teachers and assistant teachers. Specifically, research suggests that it might be important to examine the following:

- The relative fluency of the lead and assistant teachers,
- The degree to which the languages are used in the classroom,
- The activities occurring when each language is utilized (e.g., instruction, transitions, free play) and its primary source (e.g., lead teacher, assistant),
- Availability, quality, and planned utilization of instructional materials or curricula in each language,
- Teachers' training in bilingual development, and
- The program's stated and unstated policies and goals regarding their children's language development (for further discussion, see Tabors & Snow, 2002).

Among these, much attention has been dedicated to approaches to language instruction with English language learners, particularly within elementary school and more recently within early childhood. The approaches may take multiple forms, including:

- *English as a Second Language (ESL),* where English is spoken primarily for instruction with adaptations made in the curriculum for emerging English learners.
- *Transitional bilingual* education, where the home language is utilized to a greater degree at the beginning to support children's development in content areas and then decreased as children develop their English skills.
- *Dual language learning/two-way immersion,* where both English and home language are used equally for instruction.

To summarize the literature, children's English development is generally well established using any of these approaches, but their content knowledge and skill development (even in English) is better developed if their home language is utilized at least in some part for instruction (for recent reviews of this literature, see Goldenberg, 2008 and García et al., 2008). For example, in a study that randomly assigned Spanish-speaking preschool children to one of two types of programs (two-way immersion or English-immersion), Barnett, Yarosz, Thomas, Jung, and Blanco (2007) found that the use of Spanish contributed positively to children's development across multiple domains without affecting their English language development. This held true regardless of whether the bilingual children predominantly spoke Spanish or English. Further, the use of Spanish in classrooms has been found to relate positively to children's socioemotional functioning, even when controlling for the ELL composition of the class (Chang et al., 2007).

To date, programmatic approaches towards bilingual language use listed above have not been fully examined within MSHS. Research from the *2004 MSHS Research Design Development Project* suggested that while all the teachers in that study reported using both English and Spanish for verbal instruction (100% respectively), 17% of teachers reported teaching solely in English. Further, 83% indicated that Spanish was used for printed materials in the classroom. In addition to a basic direct examination of the frequency to which two languages are present in

the classroom, it could be useful to explore the programs' language instructional model, whether formally defined and implemented or simply naturally developed. For example, a program may informally pursue a bilingual model where the main teacher uses English in more formal classroom instruction and assistant teachers, who are more likely to be fluent in the home language, utilize the home language during transitions and free play.

In all, multilingual classroom activities, interactions, and materials are important considerations for the *MSHS Survey,* given these research findings and prevalence rates in the population.

Parent Involvement and Family Services. The MSHS goal most endorsed by the 194 parents in the 2004 study was to be informed fully about their children's development, followed by increasing their skills in accessing services, economic self-sufficiency, and literacy development. An important feature of all Head Start programs is the strong emphasis on parental involvement in educational and family services. Programs encourage parent involvement through participation on the grantee's policy council or committee, through employment and volunteering within the program, and through encouragement of parent pursuit of reading/writing and other learning activities at home. More than half of the programs recruit staff from among the parents, (ACF, 1999a). Directly involving parents in council and in program work improves a program's quality by increasing responsiveness to parents' concerns, while providing migrant parents with experiences that empower them, expand their understanding of early childhood education, and promote subsequent participation in their children's schooling. Most centers also use home visits as a means of establishing close relationships with families, individualizing services to each family, and encouraging home-learning activities (ACF, 1999).

> ***MSHS PARENT AND STAFF INSIGHTS:***
> Parent training and education are key features of the MSHS experience. Increased MSHS parent involvement in their children's education is probably one of the superior qualities of MSHS programs.
> ***-MSHS Survey Parent and Staff Consultant Calls 2008***

It is not always easy to effectively adapt family services within the MSHS framework. In *The Descriptive Study of Children and Families Served by Head Start Migrant Programs* (ACF, 1999a) a majority of local centers reported that family mobility and subsequent fluctuating enrollment among migrant families had negative impacts on their ability to deliver the full range of services that make up the ideal MHS program. The service areas reportedly most affected by this included parental involvement activities and home visits with families. In addition, in the 1999a study, staff reported language, literacy, and cultural barriers that undermined determination of eligibility and implementation of MHS community services (e.g., housing, employment training). Programs suggested that sharing information across centers as the families move could potentially reduce these difficulties by avoiding duplication and delay of access to services at subsequent locations. Today, staff and parents report similar difficulties with maintaining records across migrant transitions from program to program.

Health and Disability Services. In *A Descriptive Study of Children and Families Served by Head Start Migrant Programs* (ACF, 1999a), MHS parents reported generally good health and low rates of disability for their children, findings paralleled by the parents in the 2004 *Research Design Development* Project. A majority of these parents

> ***MSHS STAFF INSIGHTS:***
> The availability of community resources was very limited in rural settings and programs needed to work hard to maintain effective connections in the community; this problem that may be on the rise. These connections may be tentative and sensitive, and should be examined with care.
> ***-MSHS Survey Staff Consultant Calls 2008***

also indicated that their own health was good or very good (ACF, 2004). The latter report also indicated that more than 80% of children in that convenience sample were covered by health insurance, typically a State version of CHIP (Children's Health Insurance Program) (ACF, 2004). In contrast, however, less than one-third of the parents reported that they were covered. In the earlier study, Center Directors reported that programs used a full array of resources to address child health needs. These resources included Migrant Health clinics, county or State health department services, community health centers, and private physicians (ACF, 1999a). Health Service Coordinators work to ensure that all children's immunizations and physical examinations are up-to-date but it can be difficult to maintain an immunization schedule and retain records given income limitations and family mobility. In an early study, it was reported that almost 50% of children came to MSHS without health records (ACF, 1999a).

Along with the physical health concerns for the parents (who often work in unhealthful conditions), concerns about the mental health status of migrant families were first noted in 1996 (ACF, 1999a). These concerns are still supported. One of the biggest barriers in health services for migrant families is the lack of bilingual mental health providers in their communities. Interestingly, only 10% of Directors interviewed in the *1999 Descriptive Study of Seasonal Farmworkers* indicated unmet needs for mental health services. This discrepancy may be caused by recent need for increased mental health services or by the non-representative nature of both the 1999 MSHS study participants and the Community Consultant Group. Therefore, the *MSHS Survey* could play an important role in helping OHS and local programs examine both mental health needs and services, and staff and parent perceptions of effective services within the MSHS community.

> ***MSHS STAFF INSIGHTS:***
> Mental health issues among the parents and children are becoming more prevalent as anxieties rise in response to the increased immigration raids in the U.S. This is in addition to the frequently stressful experiences of crowded and unsafe housing, unstable and uncertain employment, working conditions where rights are poorly defended, and the breakdown of informal networks that have traditionally provided social support to families experiencing difficulties. To at least partially address these difficulties, some MSHS programs have worked to improve parents' knowledge about their rights through collaboration with local legal service agencies.
> ***-MSHS Survey Staff Consultant Calls 2008***

It is a primary goal of the *MSHS Survey* to describe the infrastructure of the programs and how they are shaped to serve agricultural workers. To understand the overall context of programs, centers, and classrooms, the *MSHS Survey* Design suggests measures that include a range of questions that start at the grantee-level, assessing details about the specific population served (e.g., proportion of migrant and/or seasonal, agricultural specialization, extent of risk factors present, etc.), the program perceptions of migration followed by the families, decision making regarding the program season (e.g., length, start dates), as well as organizational elements such as teacher salaries, management climate, and program size. Discussions with parents and staff from the *MSHS Survey* Consultant Group and with the Research Consultants indicated that the strengths of organizational coordination, communication, and variations in service delivery across centers are particularly relevant concerns for many MSHS programs. This range of program features, and how they associate with each other, could be explored within the *MSHS Survey*.

2.4 Five Organizing Research Questions

Together, the conceptual models and literature review demarcate multiple paths and possibilities for the *MSHS Survey* Plan. Although the information presented above regarding

children, families, staff, and programs was derived from critical review of all available literature and consultations with current staff, parents, and researchers, the limitations are significant. Much information was anecdotal (MSHS Consultant Group, 2008), dated (1999 study), from small non-representative samples (2004 study), or from research addressing the broader agricultural migrant community (not MSHS-specific). In many ways, therefore, the reality of current MSHS programs is unknown. The families and children are in need of informed and responsive supports, and the ACF administration and each MSHS classroom could benefit directly from carefully collected data.

As noted, the goals of the *MSHS Survey* Design Project are to provide both design and methodological suggestions for examining the services provided to MSHS children families and the variations therein, learning about the characteristics of the MSHS community, and assessing areas of children's functioning. Considering the literature review in context of these key objectives led to the creation of five overarching research questions (See Table 2.2 below, and a very detailed list of potential sub-questions (see Appendix C).

Each of these questions concerns information of immediate interest to the MSHS community. Subsequent sections of this Final Report present suggestions concerning proposed methodology for reliably and validly addressing these research questions.

Table 2.2: Suggested Primary Research Questions for the *MSHS Survey*

1. How are MSHS infants, toddlers, and preschoolers functioning in domains such as language, early literacy, and socio-emotional?
2. What are the characteristics of those served by MSHS programs? What is the relationship of family and parental characteristics with MSHS children's functioning?
3. Who works at MSHS?
4. What is the variation in features of quality of MSHS programs and how do these relate to child and family and staff characteristics?
5. What are the relationships between community and neighborhood characteristics and child, parent, family, and MSHS programs?

CHAPTER 3

FEATURES OF THE DESIGN OF THE MSHS SURVEY DEVELOPMENT ACTIVITIES -- CONSULTATION AND OUTREACH

This chapter will cover varied strategies employed by the Design Team to include input from the MSHS community and the academic community in the preparation of the suggested survey options. These steps were taken not only to ensure the scientific rigor of the survey design, but to ensure that the survey options offered are valid representations of the kinds of information that is desired and found useful by MSHS staff. Using feedback from the MSHS community, the Design Team also established a foundation for the subsequent data collection effort by building communication links with the MSHS community and regularly updating the community on the progress of the work.

3.1 Specialized Consultation

Because of the focus on a population that is so unique within Head Start, the Design Project required specialized consultation. In a broad sense, this involved important stakeholder groups as well as experts in the research areas most relevant to this survey. Relationships were established early in the process with the Migrant and Seasonal Branch of the OHS as well as with the National Migrant and Seasonal Head Start Association (NMSHSA). With their extensive assistance, a number of important outreach activities were undertaken during the design project to inform the community and to collect feedback from individuals who are stakeholders in the survey. The sections below provide further details of the work with consultant groups as well as outreach activities conducted during the Design Project.

3.1.1 Research, Staff, and Parent Consultants

In consultation with OHS, MSHS leadership, and NMSHSA, the team developed three important sets of project consultants: The MSHS Parent Consultant Group, the Staff Consultant Group, and the research consultants. Members of the first two groups came directly from the MSHS community and included selected migrant and seasonal farmworker parents enrolled in MSHS and MSHS program representatives. The third was a group of mostly academic researchers who brought specialized expertise in understanding and conducting research within the migrant and seasonal farmworker culture, with dual language learner assessments, sampling strategies for studies of migrant populations, and more general large-scale Head Start research studies.

This Design Project benefited from the use of a total of 23 research consultants drawn from a national pool of researchers in relevant fields and experts in understanding migrant families and/or Latino culture. With respect to the *MSHS Survey*, the expertise of these individuals covered the following areas:

- Sampling (migration, knowledge of farmworker issues).

- ELL assessment (early literacy, language development, bilingual assessment).
- Assessments with infants and toddlers.
- Assessment of parenting practices and psychological functioning.
- Disabilities and health.
- Data collection strategies with migrant and bilingual populations.
- Data analysis (large national studies, multi-level modeling, psychometrics—IRT and Rausch analyses).
- Multilingual and multicultural development, migrant farm workers.

While the Design Team maintained regular contact with many of the consultants throughout, most participated directly in at least one of the consultant meetings held in Bethesda, MD. The first, held in January 2009, dealt solely with issues related to developing the Design Project sampling plan. In February 2009, the Design Team (approximately 20 research and program consultants and ACF staff) assembled for an intensive two-day meeting to solicit feedback on a number of important issues, including sampling, data collection procedures, data analysis, and data collection measures (including child assessments).

3.1.2 MSHS Community Consultants: Staff and Parent Consultants

The MSHS Staff and Parent Consultant Groups were selected to broadly represent program staff and parents from MSHS grantees across the country, bringing expertise in education, childhood disabilities, family service activities, program management, and health. These 27 individuals from 22 agencies were recommended by ACF and NMSHSA. The groups were comprised of family service specialists, early childhood education specialists, health service coordinators, disability managers, program directors, and parents of current and former students, among others. Consultants represented grantees and delegate agencies, rural and urban areas, large and small programs, and programs from each migrant stream.

During the spring of 2008, the Design Team engaged small groups of MSHS staff consultants in a series of one-hour calls to discuss key study features under consideration for the *MSHS Survey* design. On each call, extensive efforts were made to include staff representing multiple roles and geographic areas; all of the staff consultants were scheduled for at least one of the calls, except for one individual whose schedule conflicted with all calls.

Each call centered on a different topic, focusing on a narrow selection of key aspects of programs, centers, classrooms, staff, children, and families, while complying with regulatory limitations on federally-sponsored data collection activities. It is recommended that additional comprehensive preliminary focus groups be part of ACF's actual study plan. The following is a list of the topics addressed in the calls:

- General background information.
- Recruitment issues.
- Interviewing and working with children and families.
- Longitudinal issues and tracking.
- Community relationships.
- Language development and instructional practices.
- Health and mental health.

In addition, five representatives of the MSHS program staff and one former MSHS parent served as reviewers for sections of this Final Design Report.

With the assistance of the NMSHSA, a series of separate parent-only calls (with MSHS parent consultants) were held to address the following issues:

- Parenting and attitudes towards education.
- Understanding of child development.
- Perceptions of MSHS.
- Engaging children and families in the survey.

The information from parents and staff greatly enriched the Design Team's understanding of MSHS programs, grounded the extensive research review in practical fact, and affirmed many components of the methods planned for outreach, recruitment, and data collection. In addition, these enthusiastic staff and parents offered additional suggestions for adaptation, refinement, and expansion of the *MSHS Survey* design. Summaries of all MSHS staff and parent calls are in Appendix D.

3.2 Outreach Activities

Through the 16 months of plan development, the *MSHS Survey* Design Team conducted outreach activities to engage in a dialogue and to begin to establish a collaborative research relationship with the MSHS programs and with the MSHS families. The goals of these activities were to learn about specific MSHS interests and concerns to include in the Survey, and to share information about and create positive interest in the *MSHS Survey*. The five primary outreach activities that were conducted are described below.

3.2.1 Activity 1: National Migrant Seasonal Head Start Association (NMSHSA) Board Meeting

In November 2007, the principal investigators of the, Drs. Sandra Barrueco and Michael López, attended the NMSHSA Annual Board Meeting in Sacramento, CA. The
NMSHSA is the nonprofit organization that advocates and creates "partnerships to help member agencies provide quality comprehensive services to all farmworker children and their families" (NMSHSA Web site description). The Board is comprised of MSHS staff and parent representatives from across the country. Drs. Barrueco and López engaged in a presentation and question-and-answer session. They provided background on the Migrant and Seasonal Head Start Survey Design Project and the Design Team, including the research and program consultants. A portion of the discussion with attending parents was carried out in Spanish (10-15 minutes). Spanish and English versions of the project abstract (See Appendix E) and descriptions of the Design Team were provided to all Board members.

Discussion centered around numerous questions, including the distinction between the planning of a study and the actual data collection, measurement selection recommendations, language considerations, and the Design Team's understanding of MSHS itself. NMSHSA directors discussed potential consequences of the study for the MSHS community and the likely benefits of expanded programs and improved family understanding. Overall, the group emphasized that the project should focus on broad features inherent in MSHS programs, such as bilingualism, community involvement, continuity efforts between programs, and migrant

family features. In addition to gathering these recommendations, the Design Team solicited suggestions for individuals who might serve as parent and staff consultants for the project.

MSHS does not have any programmatic strategies for tracking families and the Board appeared interested that Design Team might be able to suggest possibilities for following families. However, it was noted that tracking efforts may become increasingly difficult as families may want to remain more private—given the increasing prevalence of immigration raids. The effects of this increase in enforcement on MSHS program enrollment and functioning, as well as the families' mental health, also were discussed.

Finally, the group pointed out that the percent of families who primarily speak a South American, Latin American, or Mexican indigenous language is increasing. For both the programs and the *MSHS Survey* Design Project, this shift in population must be carefully considered.

3.2.2 Activity 2: Presentations at the National MSHSA Conference

In February, 2008, the MSHS Design Team (Drs. Barrueco, Klayman, López, O'Brien, and Ms. D'Elio) and a key member of the Design Consultant Team, Ms. Manda Lopez Klein (Project Coordinator Mentor for the Texas Early Education Model and former NMSHSA Executive Director), attended the NMSHSA conference in Washington, D.C. They participated in three presentations focusing on the *MSHS Survey*. The first two had an open invitation and were geared to all NMSHSA participants, providing an overview of the Survey and encouraging active feedback and questions. These sessions were led by Drs. Barrueco and Lopez and Ms. Lopez Klein, with the first conducted in English and the second in Spanish to ensure complete participation among conference attendees. The third session enabled the Design Team to meet with attending staff and parents who were participating in the *MSHS Survey* Design Project's newly convened MSHS Staff and Parent Consultant groups (see Activity 3 below). While not all members of these consultant groups attended the conference, it provided an opportunity to begin discussions about the Design Survey and the role that each group would be playing. In addition to the sessions, written bilingual abstracts of the Survey (See Appendix E) were presented to all NMSHSA participants at a display table.

Key topics for study mentioned by audience members during the presentations included the following:

- Housing: As noted in the literature review, affordable and available housing is reportedly becoming scarce due to inflation, immigration raids, less employer-provided housing, and less common short-term rentals. Some families pay for housing in multiple locations, while others share housing with additional families in more crowded conditions. Housing stress is therefore an increasingly salient issue for agricultural workers that influences migration choices and family well-being.

- Inclusion: MSHS staff and parents stressed the importance of including community partners in the Survey implementation, and that programs would be interested in understanding how MSHS programs can best collaborate with these partners.

- Health Care Access: Limited access to health care (including dental and mental health services) was cited as a continuing stressor for the family. Barriers that could be examined included transportation, insurance coverage, language, and prejudice.

- Direct Assessment: Another discussion centered on the advantages and disadvantages of assessing children directly. On the positive side, such assessments might gather information about MSHS infants, toddlers, and preschoolers along many dimensions, such as children's health, language (Spanish and English), learning, and social/emotional development. However, some participants were concerned that such assessments may underrate the development of MSHS children, particularly if the measures are not carefully selected in terms of their appropriateness for the population.

3.2.3 Activity 3: Conference Calls with the MSHS Community Consultant Group

In May 2008, the Design Team conducted a short series of one-hour calls, using a limited set of questions, with the MSHS Community Consultant Groups: staff and parents. One set of calls involved current MSHS staff members while a separate series of calls were specifically conducted in Spanish with parents (see next paragraph). Questions were carefully selected and reviewed prior to the calls. Given regulatory limitations on federally-sponsored data collection activities, these calls were kept to an introductory level. (Note: Preliminary data collection activities for the *MSHS Survey* itself could include similar but more comprehensive[6] focus group outreach.) However, the Design Team used these carefully limited opportunities to solicit MSHS staff and parent input on some important issues to ensure that *MSHS Survey* design options are accurate and responsive to the needs of the MSHS community.

The calls with staff consultants centered on key aspects of programs, centers, classrooms, staff, children, and families. The goals for these calls included gathering feedback on methodological issues pertinent to programs including approaches to engaging with MSHS children, families, centers, and programs, and topic areas of interest to be addressed in the *MSHS Survey* itself (i.e., health, language development, community partnerships and more). A summary of the staff calls can be found in Appendix D.

A separate series of group and individual calls were conducted with the parent consultants of the MSHS Community Consultant group. These calls centered on parents' areas of interest for the study and their suggestions for engaging parents and children in Survey activities. Topic areas identified for the Survey included examining variations in family literacy, teachers' dedication to working with the migrant community, and children's bilingual development. A summary document of the parent calls is in Appendix D.

3.2.4 Activity 4: Presentation at the National Head Start Research Conference

A discussion hour was presented at the Head Start Research Conference in June 2008. Participants included the Steering Committee and the Federal Project Officer. The goal of this session was to inform the broader Head Start research community about the progress and development of ideas for the *MSHS Survey*. A short introduction to MSHS and the *MSHS Survey* was presented, along with some overarching research questions. Feedback from the conference

[6] All Federally-sponsored data collection efforts are required to follow the guidelines of the Office of Management and Budget (OMB - http://www.whitehouse.gov/omb/inforeg/pmc_survey_guidance_2006.pdf).

community focused on the need to carefully incorporate the Survey plan in the context of other MSHS data collection efforts and to consult and potentially collaborate with the MSHS Training and Technical Assistance teams.

3.2.5 Activity 5: Project Newsletters via the NMSHSA

Program staff and parents who were closely following the project development asked for more details. To keep the NMSHSA and other interested community members informed, three newsletters were sent to the community during the final six months of project development. Each provided details on technical components being suggested for the *MSHS Survey*. These periodic briefs were distributed to national and local program staff. The newsletters are presented in Appendix F.

3.3 The Future of Outreach Activities

The bottom line of this effort to draw input and feedback from the MSHS community goes well beyond designing a survey that yields valid findings. We found that the community is very invested in being involved in this effort and in sharing the findings about their work. Any ongoing Survey activities will need to tap into this investment to achieve desired participation rates. However, the better the communication with the MSHS community, the better chance the team conducting the survey will have in overcoming the critical barriers (see Chapter 4) it will encounter in trying to collect quality data for ACF.

CHAPTER 4

OVERALL SURVEY DESIGN

The combination of the literature review and the *MSHS Survey* development activities presented in Chapters 2 and 3 provide a foundation for the *MSHS Survey* design. Based on this foundation, this report presents custom-designed methodological suggestions regarding sampling, site outreach, instrumentation, data collection, and data analyses. The suggested design consists of multiple components addressing alternative methodologies and different aspects of MSHS programs (from grantee agency all the way to the child). ACF will review these components, and will decide which to incorporate based on funding availability and areas of key interest at the time of implementation. Below, key challenges to the project design activities are listed. Once the methodological and design issues are highlighted, the overall framework of the study design is described. This framework serves as a map to the remainder of the report, which gives extensive detail on each aspect of the suggested study design.

4.1 Challenges

The literature review above (Chapter 2) identified multiple features unique to MSHS and the children and families it serves. However, when considered from the point of view of a researcher attempting to reliably and validly describe the program, many of these features directly undermine the application of standard research methodology. There are significant challenges in studying the migrant and seasonal population that are not encountered when looking at other Head Start groups. Some of the inherent characteristics that lead to research challenges are:

- **Language Considerations:** The primary language spoken by a large majority of the MSHS families is not English. While this makes the use of bilingual interviewers a requirement for the research teams, it also cements the need to thoughtfully select appropriate measures and methods, particularly for the child assessments. Exacerbating this issue is the report of a growing segment of migrant families who speak neither Spanish nor English, but rather use one of the many indigenous languages of Mexico (MSHS Community Consultant Group, 2008). The team will need to utilize translators who are proficient in these languages as well.

- **Start/End Dates and Intermittent Waves of Migration:** Families do not always migrate according to a set calendar. Contextual factors, like weather, will cause unexpected variability in crop growth—which is a determining factor for when the work starts and ends. For example, bad weather may delay movement by the families while the crops catch up. Hence, actual center opening and closing dates for programs become tentative and can vary from year to year. Not only does this significantly affect center operations, it also impacts the logistics of data collection visits. The following questions need to be considered when considering the project timeline and methods: When will the families

be at the site and settled in enough to participate? When will the families depart? Should data collection occur at an estimate of peak time of the harvest? What about the families that tend to arrive in waves earlier or later in the season (e.g., those working with specialty crops)?

- **Peak Operational Periods:** Because of the seasonal nature of the work, peak operational periods for centers vary across the calendar, depending on the geographic location of the centers.

- **Numbers of Families Present:** Movement by families is not only affected by the variability of crop growth, but also by immediate variations in the areas of the country where work is available. It becomes difficult for programs to anticipate enrollment at certain times or in certain areas because 1) families make last minute changes to their anticipated travel patterns to pursue work in other geographic areas, sometimes leaving MSHS centers with empty enrollment slots, or 2) if work in the area served by a MSHS center is particularly attractive, actual enrollment numbers may increase over those anticipated. This becomes a research issue because of the dependence of the sampling plan on having stable numbers of children in centers and classrooms.

- **Duplication:** Multiplicity occurs when a child is selected into a sample at two or more possible entrance points. For example, in this type of study, a child participating at a program site in the Texas could then be sampled and recruited at a selected program in Oklahoma later in the year. This is a typical risk when studying a mobile population. The difficulty is to ensure that unique cases are included in the data collection sample, that children are identified before they are assessed a second time, and that enough new families are available at upstream programs that are selected for the study later in the season.

- **Infants through Preschoolers:** All MSHS programs have the responsibility of providing services to children ranging in age from 0 through 5 years. Consequently, any research that wants an accurate picture of MSHS needs to account for differences across ages with respect to selecting measures, conducting child assessments, and adjusting classroom observations and interviews to include developmentally appropriate questions.

Further, there are a host of analytic issues to carefully consider and anticipate. For example, as described in further detail later in this report, analyses choices will be affected by the variations in MSHS program lengths (4 weeks to nearly year-round), as well as the variations in the MSHS participation of individual families (e.g., total number of months or years in the program across their children; enrollment in multiple centers or programs across time). The analytic issues also extend to the examination of measures' psychometric properties, especially for use with bilingual populations.

Finally, current immigration enforcement activities greatly affect migrant farmworker families, often compromising their participation in data gathering activities as well as in MSHS itself. Privacy is of increasing importance to these families, and research and program staff will need to closely collaborate to offer families appropriate information and support throughout their participation in the *MSHS Survey*.

The Design Team and consultants' held many discussions focused on these challenges to studying MSHS families and programs. Potential solutions are detailed throughout subsequent sections of this report.

4.2 Study Design Summary

The research plan offers suggestions and options for methods and analyses to conduct a national survey that provides descriptions of the MSHS programs, staff, family and/or children. Depending on the options selected, the survey may provide detailed information on the following:

- The types of services provided to children and families in MSHS programs, centers, and classrooms and variations in the quality of the services provided.
- The characteristics of the children and families served by MSHS.
- The status of MSHS infants, toddlers, and preschoolers with respect to their language, learning, and socio-emotional development.

Given the range of information needs of MSHS and the key challenges to collecting this information, the Design Team suggests a systematic series of survey components. As shown in Exhibit 4.1, the options proposed for the *MSHS Survey* fall naturally into two areas based on program organization:

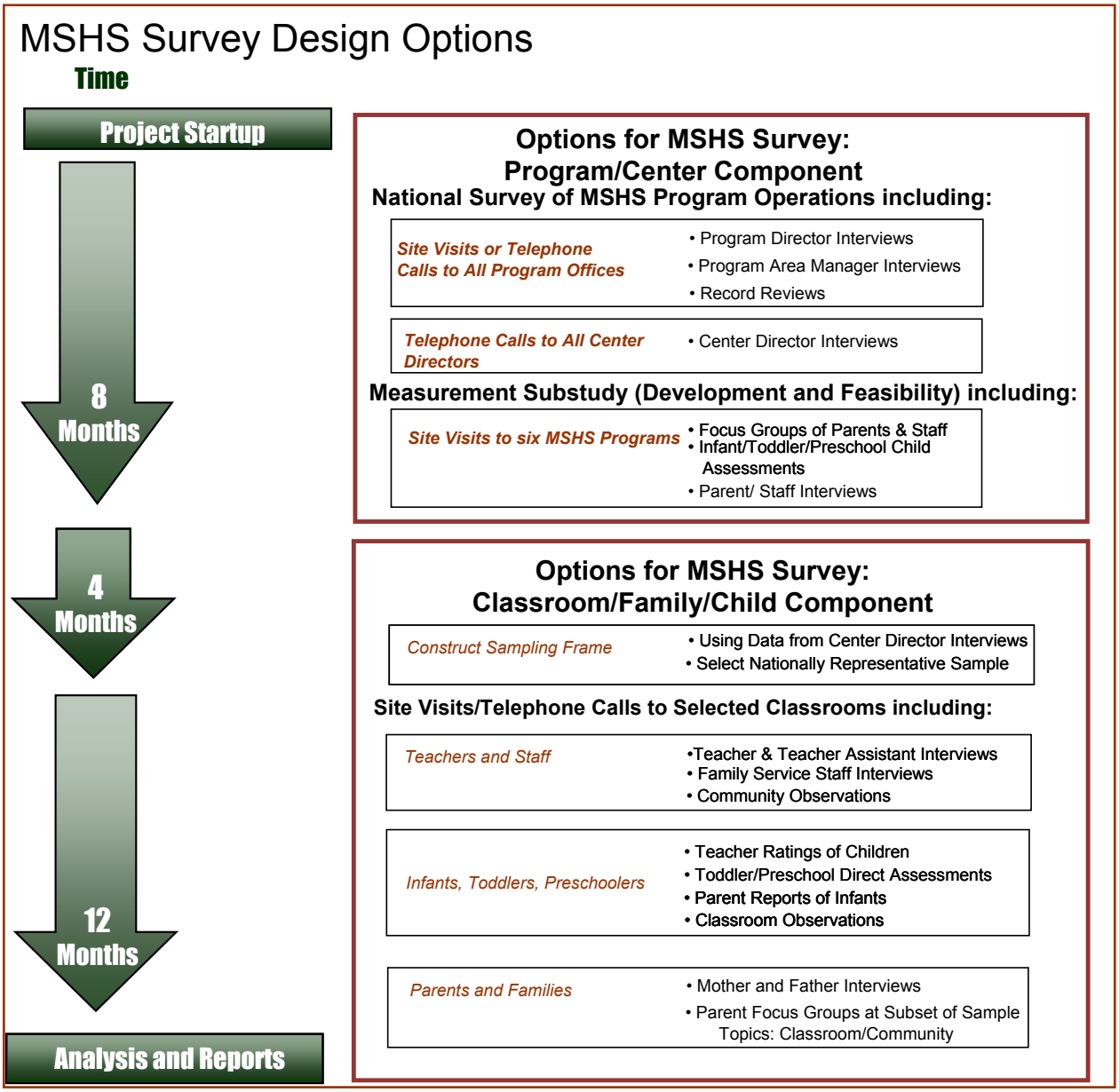
- **The Program/Center Component:** A survey of MSHS program operations at all 62 programs, including their centers. (Full details are presented in Section II of this Report.)
- **The Classroom/Family/Child Component:** A survey of a nationally representative sample of MSHS children and their families, classrooms, and centers from 24 programs. (Full details are presented in Section III of this Report.)

These proposed components are described in more detail below and in subsequent sections of this Report.

4.2.1 Program/Center Component: A National Survey of MSHS Program Operations

The Program/Center Component of the project focused on descriptive information at the administrative and organizational levels of MSHS. The options suggested for this Program/Center Component include program staff interviews, record reviews, and Center Director calls. There would be advantages to completing these activities at all 62 MSHS programs and to completing Director calls with all MSHS centers as well as possibly conducting focus groups with parents at up to 6 of these programs. A final option proposed for the Program/Center Component is opportunity to field test child assessments, parent or staff interview questions and ratings, and classroom observation tools prior to full implementation in the field.

Exhibit 4.1: Summary of the *MSHS Survey* Design Options



The Program/Center Component activities are designed to serve the following purposes:

- Accurately and completely describe program operations and services across the universe of all MSHS programs, documenting up-to-date information and compiling an overall picture that includes a level of detail not previously provided to MSHS,
- Systematically identify variations in program operations, both within and across programs,
- Proactively develop important collaborative research partnerships with programs that are vitally important to the study efforts (if other project components are implemented), and

- Gather information necessary to create an accurate sampling frame for the Center/Family/Child Component[7].

Should all the Program/Center Component activities be pursued by ACF, the recommended timeframe would span four months, optimally during the peak operations for most programs (roughly the period from August to November), although in some cases only the main program offices will be open. The estimated peak operations period for each program could be identified during initial recruitment calls to Program Directors.

Program/Center Component Program Site Visits. Depending on the size of each of the 62 programs, a two or three day site visit would be conducted by two research staff (a senior-level research analyst and a locally-hired, bilingual field interviewer). Possible site visit activities include the following:

- Program Director interviews,
- Coordinator interviews: Education, Family Service, and Health,
- Record reviews, Community needs assessments, and each program's recruitment, selection, and enrollment policies and procedures,
- Sharing information about the survey and beginning a collaborative partnership to support ongoing survey activities, including attending Parent Policy Council meetings where possible, and
- Conducting six focus groups with MSHS parents to inform design decisions for the Center/Family/Child Component. These focus groups would be conducted at six of the programs not sampled for participation in the Center/Family/Child Component.

It is possible that ACF will decide to pursue the most cost effective approach and complete all program/center interviews and other key data gathering activities by phone. However, objective record reviews would, of course, need to be completed by researchers during onsite visits. Further, MSHS programs are concerned about the accuracy and validity of the research information and methodology. It is recommended that if onsite visits are used for the Program/Center Component, senior research staff use this visit to establish a positive relationship with all the programs in support of data collection efforts. This will be particularly valuable if ACF decides to pursue Classroom/Family/Child activities.

Program/Center Component Telephone Interviews with all MSHS Center Directors. For each program, as the site visit (or appropriate telephone interviews) is completed, telephone interviews of the program's individual Center Directors could begin. Across all 420 centers, computer-assisted telephone interviews (CATI) would be employed to gather important information about individual center operations, as well as specific center-level data that would be necessary to construct an accurate sampling frame for the Center/Family/Child Component (e.g., enumeration of individual, center-level enrollment numbers; number of classrooms by age; typical enrollment patterns and/or discreet waves or cycles of families based on different crop cycles, etc.).

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[7] Note: this option could be pursued separately, without other components of the Program/Center Component, if necessary

Program/Center Component Measurement Substudy. Rather than simply select measures and questions for the final set of recommended measures without feedback or analysis, it would be very informative to determine which measures and questions work most efficiently and effectively in capturing the development of MSHS children, families, and programs. This is particularly relevant, as there are few early childhood and family measures that were developed or evaluated with bilingual or migrant populations.

The proposed Measurement Substudy would incorporate and extend prior MSHS research efforts (ACF, 1999; ACF, 2004) to examine the cultural appropriateness, strength, and feasibility of methodologies for measuring migrant children, parents, and teachers. Targeted constructs include skills and perspectives on language, literacy, socioemotional development, and instructional practices in early childhood development.

This optional substudy could provide additional critical information on:

- The psychometrics and acceptability of existing or new measures when used with MSHS children, parents, classrooms, and program staff. Specific attention could be paid to identifying potential biases within questions and measures, particularly related to age differences, bilingualism, dialectical variations, and/or unclear wording.
- How well the measures and specific items function for the culturally and linguistically diverse MSHS population of children and families. The relative strengths and weaknesses of each measure for informing continuous programmatic improvement could also be considered.
- The interrelationships among the child assessments, parent interviews, teacher reports, and classroom observations, to assess whether multiple measures tap similar constructs and therefore would be redundant in larger scale efforts.
- The feasibility of the proposed measures in terms of overall cost and burden on the respondents.

Measures would be tested by a team of trained data collectors from six selected programs. This could be coordinated with the Program/Center Component—such as the program site visits—allowing for cost-effective oversight by senior staff. Measures could be examined using a mix of qualitative and quantitative methods, including verbal feedback from children, parents, and staff, as well as statistical analyses such as item and factor analysis and other psychometric analyses. The results from the proposed Measurement Substudy could help inform any other Federal efforts pursuing assessment of English Language Learners, agricultural workers, or MSHS programs. More immediately, results from this substudy could directly inform selection of measures for the systematic activities proposed for the Classroom/Family/Child Component. As with the Program/Center Component, the Measurement Substudy is discussed in greater detail in later sections.

4.2.2 Classroom/Family/Child Component: Options for a Nationally Representative Survey of MSHS Children and their Families, Classrooms, and Centers

In combination, the Classroom/Family/Child Component activities would include gathering comprehensive descriptive information at the center. Data collection activities could occur for one or more aspect of the MSHS program, including child assessments, parent interviews, classroom observations, staff interviews, selected focus groups, and/or interviews with

community partners. As with the Program/Center components of the Survey, ACF could choose to implement one or many of the suggested data collection activities.

The Classroom/Family/Child Component would employ a multi-stage sampling design to collect information on a national, probability sample of MSHS children and their families, classrooms, and centers. Specifically, this design would include four stages:

- Stage 1: Selection of a nationally representative random sample of programs.
- Stage 2: Selection of a sample of centers from each selected program.
- Stage 3: Selection of a sample of classrooms from each selected center.
- Stage 4: Selection of a sample of children from each selected classroom. Families and communities associated with selected children could then be included in other optional Classroom/Family/Child Component data collection activities.

A nationally representative sample of families engaged in MSHS will be selected for the Survey, and migrant and seasonal MSHS families will be represented proportionally in the sample. For example, if 10% of MSHS families are seasonal, 10% of those in the *MSHS Survey* will also be seasonal.

To gather information regarding the characteristics of MSHS children, families, and classrooms, the survey design calls for a nationally representative sample of 1000 to 1400 children and families at 24 programs (73 centers). The sample could be stratified and sorted on key characteristics such as upstream/downstream, area of country, child age, and seasonality of the centers. The recommended sampling would provide unbiased national estimates of the status of MSHS children (infants, toddlers, and preschool children) and families from across the country without requiring the cost-prohibitive and unnecessary participation of all MSHS children and families. Depending on the data collection activities selected for implementation in the *MSHS Survey*, this sampling approach would provide the ability to accurately estimate the following:

- The cognitive, linguistic, and social emotional skills and abilities of children enrolled across MSHS programs and the characteristics of their families.
- Variations in teacher, classroom, and center practices.
- Details regarding the communities and MSHS-community partnerships where MSHS families live and work.

If all activities were implemented within the Classroom/Family/Child Component, the Design Team estimates that the timeframe would span approximately one year (roughly from April to April). With this plan, data collection would begin, in most cases, 6-8 weeks after opening day for each respective center, allowing for stabilization of ongoing rosters and for families to become familiar with the program and local services.

Possible data collection activities within the Classroom/Family/Child Component are as follows:

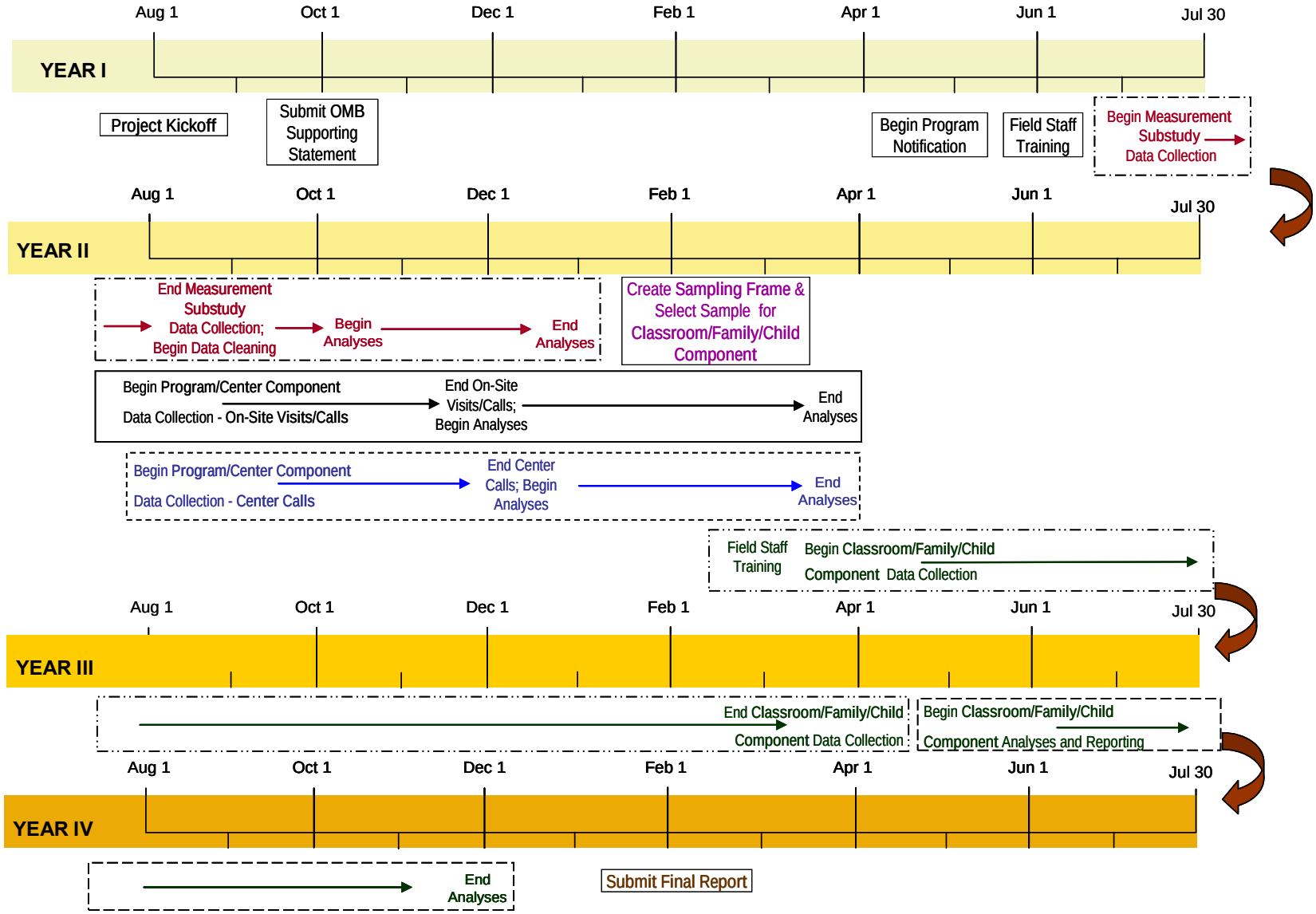
- Four to five day site visits with a team of 3-4 data collectors (assessors, observers, interviewers),
- All day classroom observations,
- Child assessments,

- Interviews with parents,
- Interviews with teachers and assistant teachers,
- Interviews with family service workers,
- Collection of teachers' ratings of children,
- Conduct of 12 focus groups with parents,
- Interviews with community service providers (via telephone), and
- Collection of ongoing attendance records for participating children for remainder of school year.

Exhibit 4.2 provides a detailed timeline of the major survey activities, if all suggested options were pursued in a coordinated and comprehensive effort. This estimated timeline for the completion of these activities would be a 42-month project period.

Exhibit 4.2 MSHS Survey Timeline –

Fully Implemented Program/Center Component and Classroom/Family/Child Component



4.3 Supplemental Survey Modules

The *MSHS Survey* plan, while containing comprehensive components, must comply with practical limitations on the depth to which it can study any particular topic area. Primary among these limitations is the need to minimize the time burden imposed on respondents and the costs to ACF. However, should ACF identify certain topic areas that require more in-depth study than is feasible in the base components recommended for the Survey, supplemental survey modules could be developed to gather enriched data on key topics of pressing importance to OHS. These could range from the addition of one questionnaire on a particular topic to oversampling a targeted population (e.g., migrants from indigenous populations in Mexico) into the overall *MSHS Survey*. Specialized modules allow the opportunity to customize the Survey, to expand the depth and intensity of data collection on particular topics of interest, and to increase the cost-efficiency of topically-focused data collection by using embedded subsamples. They also can be used to provide timely, policy-relevant data to examine emerging trends and inform policy and programmatic responses. ACF could select one or more different topical modules for each implementation of the *MSHS Survey*.

The following is a list of suggested supplemental survey modules:

- Migrant Family Life and MSHS Involvement Substudy.
- Health and Mental Health Substudy.
- Communities Serving MSHS Families Substudy.
- Indigenous Families Substudy.
- Curriculum & Instructional Practices Substudy.

Preliminary recommendations for modules are included in Chapter 13.

DESIGN FOR MIGRANT AND SEASONAL HEAD START SURVEY

FINAL DESIGN REPORT

SECTION II:

PROGRAM/CENTER COMPONENT

SECTION II

PROGRAM/CENTER COMPONENT

The options put forward in this Report have, as their underpinning, many of the methods used in other large national studies of Head Start, Early Head Start, and Even Start, as well as the *Descriptive Study of Children and Families Served by Head Start Migrant Programs*. Although these methods provide a solid foundation for the current work, the Design Team has made adaptations to address the unique characteristics of MSHS programs and families and the challenges they face, as well as the cultural considerations that could directly affect data collection decisions. Conducting culturally-sensitive research with MSHS children and families necessitates a grounded understanding of their lives and experiences. The design options were guided not only by the literature, but also by lengthy discussions with members of the Migrant and Seasonal Head Start (MSHS) Branch, current and former leadership within the National Migrant and Seasonal Head Start Association (NMSHSA), research and program consultants, and the MSHS Staff and Parent Consultant Group (see Chapter 3). Collaboration with the MSHS community was a critical strength of the planning for the *MSHS Survey*; The Design Team strongly recommends continuation of these collaboration efforts to ensure successful execution of the study.

Options for the MSHS Survey: Program/Center Component

National Survey of MSHS Program Operations including:

Site Visits or Telephone Calls to All Program Offices	• Program Director Interviews • Program Area Manager Interviews • Record Reviews
Telephone Calls to All Center Directors	• Center Director Interviews

Measurement Substudy (Development and Feasibility) including:

Site Visits to Six MSHS Programs	• Focus Groups of Parents & Staff • Infant/Toddler/Preschool Child Assessments • Parent/ Staff Interviews

The above exhibit presents Program/Center Component options of the overall suggested *MSHS Survey* design described in Chapter 4. In order to collect adequate program-level administrative data, the Design Team suggests that two-day site visits be made to each of the 62 programs. Depending on the questions ACF decides to pursue during the program visits, researchers could collect information via in-person interviews with program staff, record reviews, and/or a Measurement Substudy to include focus groups with MSHS staff and families. Site visits also provide an opportunity for the research team to set the foundation for positive working relationships with local MSHS community members. Following completion of the site visits, center level data collection activities could occur. Telephone interviews could be conducted with all 420 Center Directors.

This section details the practical methodology related to these plans for the activities associated with programs and centers, along with details of the Design Team's suggestions regarding sampling, instrumentation, data collection, and data analysis. In addition, Chapter 9 includes a presents recommendations associated with conducting a Measurement Substudy to investigate the feasibility and validity of potential study measures.

CHAPTER 5

SAMPLING PLAN FOR THE PROGRAM/CENTER COMPONENT

The general framework used for previous large, national studies of Head Start (ACF, 1999) was the starting point for the best sampling strategy for a study of MSHS programs, children, and families. The selected general approach involves selecting a sample of programs, then selecting a sample of centers and center-based classes from those programs; and finally selecting the children within those classes.

The overall goals for the sampling design are to: 1) maximize the estimates of variance at all stages of selection, 2) minimize costs, 3) select a nationally representative sample of programs by geographic region, and 4) include children representing all ages served by MSHS.

5.1 Program/Center Component: Survey of MSHS Programs and Centers

According to the 2006-2007 PIR, there are 62 programs[1] with approximately 420 centers in the entire MSHS. Given the relatively small number of sites, *MSHS Survey* design options include a proposal to collect information from all 62 programs and 420 centers, including information that could be used to create a more accurate center- and classroom-level sampling frame for the Classroom/Family Child Component (see Section III).

If any of the Classroom/Family/Child options of the *MSHS Survey* are implemented, it would be important to complete the sampling selection for each level prior to initiating any contact or recruiting for any programs. The sampling process is briefly discussed here, but is described in more detail in Chapter 10.

The goal for the first step of the process would be to select a stratified, random sample of 24 programs from the total universe of 62 programs. The suggestion to select 24 programs was based on finding a balance between maximizing the variance of the estimates and minimizing the cost of data collection. While a smaller number of programs in the sample increases the design effect and therefore reduces the precision of the estimates, it also reduces the cost of conducting the *MSHS Survey*. However, analysis of the precision of the estimates (presented later in Table 10.1) demonstrates that the sample size of 24 programs would provide acceptable precise national estimates of MSHS children and families.

[1] The 2006-07 PIR reports separate data on 23 grantees and 37 delegate agencies in operation for a total of 62 programs. While two of the 62 programs do not directly serve children (and are not included in the sampling frame for the CFCC), they should be included in the administrative data collection suggested as part of the Program/ Center Component as they administratively oversee delegate agencies which directly provide services to children and families and would provide valuable information.

To select the 24 programs, a sampling frame of all programs in the MSHS universe would be constructed, using the information gathered from the Head Start PIR, the Academy for Educational Development (AED) locator directory, the Head Start Program Directory Web site, and administrators from the MSHS Branch of OHS. The universe of programs would be stratified into six geographic regions that roughly correspond to the northern versus southern half of the country, as well as the western, middle west and eastern sections of the country (resulting in a 2x3 configuration based on geography). These six strata will ensure adequate representation of programs across the three major migratory streams and inclusion of both upstream and downstream programs. Stratification will also help ensure adequate representation across broadly-defined program operational periods (summer, winter, summer/winter). (Note: The sampling plan for the Classroom/Family/Child option is discussed further in Chapter 10.)

However, when considering only the proposed design for Program/Center Component, the plan is to include the universe of all MSHS programs and all centers, thereby eliminating the need for sampling. The strength of this approach is that the estimates of characteristics relating to programs and centers will have no sampling error: when one hundred percent of the population is measured, the resulting data is not biased because of sampling.

As part of the activities suggested for the Program/Center Component, two additional options would entail sampling considerations: 1) conducting a Measurement Substudy (Chapter 9) as a pretest for data collection instruments under consideration and 2) conducting a small number of focus groups with staff and parents as part of the Substudy. Following are procedures for selecting a convenience sample for the latter option; the goal is to increase the likelihood of producing generalizable results. A proposed sampling strategy for the Measurement Substudy is presented in Chapter 9.

5.2 Sampling Plan for the Focus Groups of Parents and Managerial Staff

If the focus groups are not linked with the Measurement Substudy, the Design Team suggests selecting a random sample of six programs, each of which would complete two focus groups: 1) one group of parents, and 2) one group of managerial staff (Program Directors and Program Area Coordinators). To gather a broad and generalizable set of viewpoints, reduce the cumulative burden on any one program, and minimize travel costs, the following sampling stages are suggested:

- **Stage 1: Selection of a Sample of Programs for Focus Groups**
  For each of the six strata identified for pursuit in the Classroom/Family/Child Components , create a list all the programs NOT selected for the primary survey implementations that have centers open and located within 30 miles of the program office (to minimize travel costs). Sampling from programs that are not participating in the Classroom/Family/Child components of the Survey reduces the potential burden on families and staff. Randomly select one program per each of the six strata.

- **Stage 2: Selection of Centers within the Six Selected Programs for Focus Groups**
  In each selected program, list all centers that are open and serving children and located within 30 miles from the program office. Randomly select one center to participate in parent and staff focus groups.

CHAPTER 6

MEASUREMENT FOR THE PROGRAM/CENTER COMPONENT

This chapter details Design Team suggestions for data collection instruments for each set of activities in the Program/Center Component of the *MSHS Survey* design. As discussed in Chapter 4, three main sets of data collection options are proposed. The first set of activities would involve the collection of data to describe program operations and services across the universe of all MSHS programs and centers. Potential measurements are discussed for Program Directors, Area Managers, and Center Directors.

Program/Center Component

National Survey of MSHS Program Operations

Site Visits or Telephone Calls to All Program Offices	• Program Director Interviews • Program Area Manager Interviews • Record Reviews
Telephone Calls to All Center Directors	• Center Director Interviews

The second set of proposed activities involves a Measurement Substudy which would be implemented concurrently with data collection activities and would provide an opportunity to field test a selected number of child assessments, parent or staff interviews, and other measures prior to full field implementation. The Substudy, if pursued by ACF, could vary markedly in the measurements to be considered, depending on the research questions of interest to ACF. Thus, decisions regarding measurements for the Substudy would be made closer to the implementation. The Measurement Substudy is discussed in greater detail in Chapter 9.

For the third set of data collection activities, parent focus groups could be completed in a small sample of the centers, and the corresponding measures would functionally address outstanding logistical issues and additional sets of interview questions.

6.1 Program/ Center Measures

6.1.1 Staff Interview Protocols

The staff targeted for interviews during the Program/Center Component are the Program Directors, the program's Area Managers (Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers), and the Center Directors. In the likely event staff titles and/or roles vary across programs, Program Directors will be asked to recommend the most appropriate respondent for each interview. During the development of the staff interview protocols, the following elements were taken into consideration:

- Identification of key domains relevant to the administration of MSHS programs, centers serving MSHS families based on previous work in this area, and feedback from the expert consultants and the MSHS Community Consultant Group (see Chapter 3).
- Review of items used in prior and current MSHS, Early Head Start, and Head Start studies (e.g., *A Descriptive Study of Children and Families Served by Head Start Migrant Program; The Descriptive Study of Migrant and Seasonal Farmworkers; MSHS Research Design Development Project; Early Head Start Family and Child Experiences Study (Baby FACES); Family and Child Experiences Survey (FACES); Head Start Impact Study; National Agricultural Worker Survey (NAWS*); Dr. Barrueco's measurement pilot study with MSHS families).
- Review of items used in other early childhood studies (e.g., staff interviews from the Early Childhood Longitudinal Studies-Birth Cohort).

As a result of these efforts, a summary of proposed topic areas and questions to be addressed in interviews with Program Directors, Area Managers, and Center Directors were identified.

MSHS Staff Characteristics

- Number of staff
- Staff background and characteristics
- Race/Ethnicity
- Language
- Educational qualifications
- Specialized education and training
- Educational "match"
- Compensation
- Turnover
- Training and supervision
- Management climate
- Satisfaction/Career commitment

MSHS Program Characteristics

- Centers
- Classrooms
- Funded enrollment levels
- Actual enrollment levels
- Program options
- Staff/child ratios
- Migrant/seasonal ratio
- Migrant/seasonal responsiveness
- Professional Development/training/mentoring
- ELL instructional approach/attitude/beliefs
- Curriculum
- Family engagement
- Services
- Assessment (family, child)
- Families' needs
- Disabilities
- Impact of family migration/agricultural changes
- Impact of immigration issues
- Fluctuations in program operations
- Recruitment and enrollment policies and procedures.
- Continuity and transition planning activities
- Family mobility
- Programmatic challenges/program needs
- Strengths, innovations

Each interview presented in this section will begin with a set of core questions about each respondent's background relative to their position in MSHS. These questions (Table 6.1) will ask

about prior relevant work experience, experience with Head Start, education, language abilities, current work effort, and perceptions of working for MSHS. The question types are linked in the table to the relevant domain in the *MSHS Survey* Conceptual Pathway (Exhibit 2.2). (Teacher interviews are discussed in Section III.)

Table 6.1 Suggested Core Content Questions for Interviews of Program Directors, Area Managers, and Center Directors

Domain, Construct	Specific Items for Consideration for CORE sections of Program Director, Area Manager, and Center Director Interviews
Teacher, Center, & Grantee Characteristics: Teacher Background	▪ Years administering programs for children preschool age or younger ▪ Years in Head Start administration ▪ Years in MSHS administration ▪ Years teaching children who were preschool age or younger ▪ Years teaching in Head Start ▪ Years teaching in MSHS ▪ Years at current program ▪ Prior work or volunteer experience as a teacher or as a social worker/case manager in a family support program ▪ Previous work with migrant and seasonal families
	▪ Do you have any children living in your household who attend MSHS now? ▪ Did any children who lived in your household in the past attend MSHS?
	▪ What is the last or highest grade of school you have completed? o Have you had special training or previous experience prior to this position.
	▪ What diplomas, certificates, or degrees do you have? ▪ Do you have any job-related licenses or certificates? ▪ Are you currently working on a degree, certificate, or license?
	▪ (Interviewer identify) gender;
Teacher, Center, & Grantee Characteristics: Language – English	▪ How did you acquire the English language? o Native speaker o Heard the language spoken at home o Heard the language spoken in my community o Classes o Lived outside the United States and I studied English in school while I was there o Other (specify) ▪ For the following questions, please select from the following descriptors of your language proficiency in English: o Advanced (My language skills are like those of native speakers of the language; I can satisfy a broad variety of everyday, school, and work situations in this language without effort). o Fluent (I have strong language skills though they are not perfect; with some effort, I can satisfy the requirements of everyday situations and routine school and work requirements). o Intermediate (I am able to handle most uncomplicated, basic, and communication tasks and social situations). o Basic (I am able to handle some uncomplicated, basic, and communication tasks and social situations). o Limited (I have minimal understanding of vocabulary and conversation). ▪ Please rate your Listening Comprehension ability in English. ▪ Please rate your Speaking ability in English. ▪ Please rate your Reading ability in English. ▪ Please rate your Writing ability in English.
Teacher, Center, & Grantee Characteristics: Lan-	▪ Do you know a language(s) other than English? Which other languages do you know?

Domain, Construct	Specific Items for Consideration for CORE sections of Program Director, Area Manager, and Center Director Interviews
guage – Non-English	o Advanced (My language skills are like those of native speakers of the language; I can satisfy a broad variety of everyday, school, and work situations in this language without effort) o Fluent (I have strong language skills though they are not perfect; with some effort, I can satisfy the requirements of everyday situations and routine school and work requirements). o Intermediate (I am able to handle most uncomplicated, basic, and communication tasks and social situation). o Basic (I am able to handle some uncomplicated, basic, and communication tasks and social situation). o Limited (I have minimal understanding of vocabulary and conversation). ▪ Please rate your Listening Comprehension ability in the language. ▪ Please rate your Speaking ability in the language. ▪ Please rate your Reading ability in the language. ▪ Please rate your Writing ability in the language. ▪ How did you acquire the language(s)? o Heard the language spoken at home; o Heard the language spoken in my community; o College/ University Coursework (Number of courses?); o Informal Coursework (Number of courses?); o Lived outside the United States and I studied the language formally while I was there (Country? Months or Years?); o Other (specify)
	Follow up with: ▪ Do you know a language other then English or (language named above)?
Teacher, Center, & Grantee Characteristics: Current Work Experience	▪ How many hours per week are you paid to work for MSHS? ▪ How many hours per week do you actually work for MSHS? ▪ How many months last year were you paid to work for MSHS? ▪ How many months this year will you be paid to work for MSHS? ▪ About what percent of your time would you estimate is spent… o Directly providing services to MSHS families or children? o Contacting and working with community agencies? o Administrative tasks? o Other?
	▪ What other positions have you held in a MSHS program? As we go through the list, please tell me the terms your program uses to describe these jobs (if they are applicable to your program), and how many people your center has for each job. o Teacher o Instructor/Trainer o Mentor/Coach o Area Manager o Outreach staff/recruiter o Counselor o Center Director o Other o None – no previous positions
Teacher, Center, & Grantee Characteristics: Program Climate	▪ In your current Migrant and Seasonal Head Start position, what conditions or situations make it hard for you to do your job well? Follow up: These are typical challenges that arise in any Head Start program. Which of these would you say is the biggest obstacle for your work? Second biggest?

Domain, Construct	Specific Items for Consideration for CORE sections of Program Director, Area Manager, and Center Director Interviews
	o Time constraints such as not enough time to do all that is required o An undefined role; unclear guidelines on job responsibilities o Salary too low for job demands o Lack of support staff o Not enough training for secondary responsibilities o Not enough support and communication from administration o Not enough funds for supplies and activities o Inability to maintain sustained contact with families o Too little time with families o Language of families o Other o No problems o Don't know
Teacher, Center, & Grantee Characteristics: Perceptions of MSHS	▪ What two things do you think your program does really well for children and their families? ▪ If you could change one thing (including staff, administration, classroom practices, and facilities) that you think would significantly improve the services MSHS is providing, what would it be? ▪ What do you think are the things that make the MSHS program different from other Head Start programs? ▪ What do you think are the most unique and important features of the MSHS program? ▪ If it were just up to you, how likely would you be to continue working for MSHS through the next Head Start year? Very likely, Fairly likely, Very unlikely? ▪ How satisfied are you with working in the field of family services? Would you say you are: a) Very satisfied, b) satisfied, c) Neither, d) Dissatisfied, e) Very Dissatisfied? ▪ How satisfied are you with your current job? a) Very satisfied, b) satisfied, c) Neither, d) Dissatisfied, e) Very Dissatisfied? ▪ If it were just up to you, how likely would you be to continue working for Migrant and Seasonal Head Start in the next Head Start year? In the next five years? Very likely, Fairly likely, Very unlikely?

6.1.2 Program Director and Area Manager Interviews

After obtaining demographic background information regarding the individual respondent(s), the interview will become more specialized to glean descriptions of operations of MSHS programs. Personal interviews will be targeted to key informants, including the Program Directors and Area Managers (such as Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers from every MSHS program). In cases where staff roles do not align to these categories, Program Directors will identify the most appropriate staff person to be interviewed.

Program Directors. Interviews with the Program Directors primarily will focus on overall staffing and program characteristics, such as organizational structure, staffing configurations, and professional development activities. Table 6.2 provides details of the question items suggested for consideration in the MSHS Program Director Interview and links the question types to the relevant domains in the *MSHS Survey* Conceptual Pathway (Exhibit 2.2). The items in Table 6.2 are generally drawn from *Baby* FACES and the *2004 MSHS Research Design Development Project*.

Table 6.2 Suggested Content for Program Director Interview Questions

Domain, Construct	Specific Items for Consideration for Program Director Interviews
Teacher, Center, & Grantee Characteristics: Facilities	▪ What organization owns these facilities? What is the nature of the agreement for your program to use them? ▪ Are the facilities adequate for the services you need to provide? ▪ Are the facilities conveniently located for the families? ▪ If you could, what facilities would you add for the administration-level work (administration)?
Teacher, Center, & Grantee Characteristics: Staffing	▪ What efforts do you have in place for administrative staff recruitment? ▪ What efforts do you have in place for teaching staff recruitment? ▪ Is the job of finding replacement teachers relatively easy, fairly easy, fairly difficult, or very difficult? Is it easier to find replacement teachers for infants and toddlers or for preschoolers?
	▪ What are you doing or trying to do to reduce turnover? Follow Up: Potential strategies: o Increasing teacher salaries o Hiring or recruiting more assistants, aides o Providing more or better training or education o Subsidies o Providing better fringe benefits (e.g., tuition, health coverage) o Giving teachers more say in choice of curriculum and planning of activities o Providing teachers with better physical facilities (furniture, classroom or lounge areas, etc.) o Providing substitute teachers o Anything else?
	▪ What are your language qualifications for teachers? For staff?
Teacher, Center, & Grantee Characteristics: Improving Degrees and Credentials	▪ What efforts do you have in place to help teachers and assistant teachers get their college degrees, CDAs, or other early childhood certification? o Providing tuition assistance o Giving teachers release time/ substitute teachers o In-service training for CDAs o Assigning a mentor o Anything else? o No efforts o Don't know
Teacher, Center, & Grantee Characteristics: Staff Training	▪ How often does your program provide training for: a. Teachers and assistant teachers; b. Education Coordinators; c. Family Service Workers; c. Health staff? Please describe the training that occurs prior to program start, in the first month and in the most recent month. ▪ Who provides staff training for this Program? o Education Coordinator o Center or grantee staff o Other community resources (Please describe:____) o Local consultants o Coach/ Mentors o MSHS Quality Improvement Center (HSQIC) o Disability Services Quality Improvement Center (DSQIC) o National MSHS Association (e.g., Heads Up Satellite Training) o State or national conferences (NAEYC or NHSA)

Domain, Construct	Specific Items for Consideration for Program Director Interviews
	o Private companies or organizations (e.g., High Scope, Teaching Strategies) o Other ▪ Which of the options above made the biggest improvement in your program services? ▪ Overall, how satisfied are you with the results of these trainings? ▪ Overall, how satisfied are your teachers/staff with the trainings? ▪ What kinds of additional training would you like to offer, if you had funds or resources?
Teacher, Center & Grantee Characteristics Coaching and Mentoring	▪ Do you have mentors or coaches working with teachers in classrooms? ▪ What are the qualifications of your mentor/coaches? ▪ How often do they come to the classroom? Would you say…Once a week; Once every two weeks; Once a month, or; Less than once a month?
Teacher, Center, & Grantee Characteristics: Enrollment	▪ How do you predict how many families/children will be seeking enrollment in your program? What are your sources of information? ▪ In what ways, if any, do you work with other MSHS programs to know which children will likely be enrolling and what their specific needs are? ▪ How do you outreach to families? What is your schedule and what community resources are available to help you reach families?
Teacher, Center, & Grantee Characteristics: Non-enrolled Families	▪ Are there children in this service area that you know about who are eligible for MSHS and are not served? ▪ Why are these children not served? Follow up with: o Lack of enrollment slots in the program o Parents decline to participate o Parents are not aware of the program o They live in a very remote area (e.g., too far from center) o Transportation a problem; Other
Teacher, Center, & Grantee Characteristics: Referrals	▪ If your program is full, what options can you give to the families? ▪ Do you know if parents utilize these other options?
Teacher, Center, & Grantee Characteristics; State & National Policies and Agencies: Expansion	▪ Have you expanded this MSHS program within the last two years to serve more children? ▪ How many slots have you added? How many classrooms have you added? How many teachers have you added? ▪ Have you added new program components? (such as: Family daycare-based MSHS? Child care partners? Community Services Partnerships?) How many? How long ago? How satisfied are you with these new program components at this time? ▪ In carrying out these expansions, have you encountered challenging problems in any of the following areas? Follow up with: How about… o Recruiting children to fill the increased slots? o Recruiting qualified teachers or staff? o Training teachers or staff? o Finding or constructing additional space/facilities? o Managing the increased number of parents/families? o Managing the increased number of staff? o Other? If yes to any of these, please describe solutions you have tried.
Teacher, Center, & Grantee Characteristics;	▪ Do you plan to expand this MSHS program (further) in the next two years to serve more children? How have you identified the additional need in

Domain, Construct	Specific Items for Consideration for Program Director Interviews
State & National Policies and Agencies: Expansion	your service communities? What data will you use to support your request for more slots? ▪ How many children do you plan to add? How many classrooms do you plan to add? How many teachers do you plan to add? ▪ Do you plan to add new program components, such as: o Family day-care based MSHS? o Other? ▪ In carrying out this expansion, do you anticipate serious challenges in fulfilling your goals? Follow up: How about... o Recruiting children to fill the increased slots? o Recruiting qualified teachers or staff? o Training teachers or staff? o Finding or constructing additional space/facilities? o Managing the increased number of parents /families? o Managing the increased number of staff? o Other?
Teacher, Center, & Grantee Characteristics: MSHS Goals	▪ What goals does MSHS have with children? With families? What goals does MSHS have in addition to the HS goals? ▪ Which is the single most important goal for your MSHS program (provide list derived from focus groups)? Does your particular MSHS program have any additional goals?
	▪ What activities and classes have you offered for parents in MSHS this year? How has it been getting parents to participate in MSHS activities and classes this year? Is that typical? What does your program do to encourage parents to participate in MSHS activities and classes?
Teacher, Center, & Grantee Characteristics: Communication with Parents	▪ What means are used to communicate with parents about involvement opportunities? ▪ Which is most helpful for encouraging recruitment? ▪ Which is most helpful for encouraging participation in activities? ▪ Which is most helpful for encouraging parent engagement in child's education? ▪ Follow up question: Any of the following? o Newsletter (frequency: e.g., weekly, monthly?) o Parent/teacher conferences (how many?) o Group meetings (frequency: e.g., weekly, monthly?) o Phone calls o Home visits, (number of visits) o Poster/bulletin boards o Radio/television announcements o Other o Don't know
Teacher, Center, & Grantee Characteristics: Parent Activities and Engagement	▪ Why do you think that not all parents participate? What do they say when you ask? Follow up question: Any of the following? o They are too tired from work o They don't have anyone to watch the children o They aren't in the area long enough o They don't want to participate o They are not available when the center is open o Other

Domain, Construct	Specific Items for Consideration for Program Director Interviews
	o Don't know ▪ How often do teachers schedule formal meetings with the parents of each child to discuss their child's care and activities? Daily; Two or three times a week; Weekly; Two or three times a month; Monthly; Less than monthly; Never; Don't Know; Where do these meetings happen? ▪ How successful would you say your program has been in involving fathers in MSHS? Very successful; Somewhat successful; Mostly unsuccessful; Very unsuccessful Please describe your programs efforts with MSHS fathers. ▪ How are the members of your program's Parent Policy Committee/Council selected?
Teacher, Center, & Grantee Characteristics: Services for Families	▪ How many case managers/family service providers work at your program? How many families do they provide service for? o If more than one coordinator/case manager: What determines how families are assigned to specific case managers/family service workers? ▪ During the MSHS program session, what are the number of home visits to the family of each child during the MSHS program session by: o Teachers or assistant teachers? o Family Service Assistants/Providers or Family Advocates?
	▪ What activities has your program offered for parents/families in the last month? Follow up: Over the course of the program session, does your program offer any of the following activities for families? How many times per season? o Group socializations o Events for the entire family o Workshops on parenting o Training or workshops for learning English o Parent training or workshops on other topics (such as employment, job training, or financial counseling) o Health training (such as pesticides, child health, oral health) o Some other services ▪ Does your program offer any of the following services to families? Do you have community partnerships to provide these services? Which of the following is your program least effective in providing (for example, no community resources identified)? Which does your program provide consistently? Which is the one most requested by parents (second most, third most)? o Child care o Health care o Oral Health care o Prenatal care o Transportation assistance o Disability services o Emergency assistance o Employment assistance o Education or job training o Drug or alcohol abuse o Legal assistance o Housing assistance o Financial counseling

Domain, Construct	Specific Items for Consideration for Program Director Interviews
	o Family literacy o Trainings/Workshops for learning English
Teacher, Center, & Grantee Characteristics: Needs Assessments	▪ What are the assessment tools that your program uses with children at intake? ▪ What parent or family assessments are most important for your program? ▪ Do you have a standard intake interview for parents? If so, please provide a copy.
Teacher, Center, & Grantee Characteristics: Curricula	▪ Do you have a specific curriculum or combination of curricula for pre-school age children and/or infants and toddlers in your program? ▪ [If yes} What name does it go by (or do they go by)? ▪ What are the goals that your curriculum/teachers appear to target effectively? ▪ What are the learning domains that your curriculum/teachers seem to target less effectively? ▪ How do you assess classroom progress? ▪ How often do you have formal trainings/workshops on your curriculum?
Teacher, Center, & Grantee Characteristics: Language and Literacy	▪ What is the program level policy regarding language use in the classroom? ▪ What language(s) are typically used for instruction in your Program? ▪ For what languages are printed materials available for families? English; Spanish; Kanjobal; Mixteco Alto or Bajo; Chinese; Japanese; Korean; Vietnamese; A Filipino language; Indigenous Mexican Language: Zapoteco, Tarasco, Triqui, Chu; American Indian Language: e.g., Kickapoo; Other language ▪ ?
Teacher, Center, & Grantee Characteristics: Languages Used in Classrooms	▪ What different languages do the families in your program speak? o Spanish o Native Central American, South American and Mexican Languages (e.g., Mexican, Quichean) o Caribbean languages (e.g., French-Creole, Haitian) o Middle Eastern and Indic languages (e.g., Arabic, Hindi) o Far Eastern Asian languages (e.g., Japanese, Vietnamese) o Native North American or Alaska Native languages o Pacific Island languages (e.g., Palauan, Fijian) o European and Slavic languages (e.g., Italian, Croatian) o African languages (e.g., Swahili, Wolof) o American Sign Language o Some other language (Specify) ▪ What percentage of families served by your program communicate better in a language other then English? ▪ Do you have staff that speak [Language Reported]? How do parents typically use staff that speak their language? (social connectedness, discussions with teachers, accessing community services) ▪ Do you have staff that write [Language Reported]? Do families speaking [Language Reported] request assistance in translating written materials? ▪ Most of the time, how does you program staff communicate with families who speak [Languages Reported above]? Follow up: Do they o Use MSHS Staff o Use an MSHS Parent o Use community interpreter o A telephone interpreter service

Domain, Construct	Specific Items for Consideration for Program Director Interviews
	o Family members or other informal translators o Other (Specify) ▪ What work does your program pursue to increase cultural sensitivity and responsiveness? What are issues of cultural sensitivity that are challenging in MSHS programs? What issues are handled well?
Teacher, Center, & Grantee Characteristics: Kindergarten Transition	▪ Please describe your programs transition to kindergarten activities. Provide examples of documentation. ▪ Follow up questions: Does your program do any of the following regarding transition to kindergarten? o Send letters home with children or mail letters to parents providing information on transition? o Invite parents to attend informational meetings or discussions with MSHS or school staff about kindergarten transition? o Provide parents with information on the school their child will attend? o Schedule parent and/or child visit(s) to the school the child will attend? o Accompany parents and/or children to visit the school? o Teach parents skills to advocate effectively for their school-age children? o Meet with kindergarten teachers at the schools MSHS children will attend? (if local) o Provide children's MSHS records to the family to facilitate school transition? o Provide children's MSHS records to school? o Do anything else? (Specify)
Teacher, Center &Program Characteristics Community Partnerships	▪ With which community agencies and organizations do you normally work to address the needs of the children and families in your center? ▪ [For each agency or organization mentioned] Do you have a formal [for example, a Memorandum of Understanding] or an informal agreement with that agency? What are the challenges to establishing and maintaining these partnerships? What is key to a strong community partnership? ▪ What kinds of services are provided by these agencies and organizations? Prompts: Welfare Agency; Food/Nutrition Agency (e.g., WIC); Job Service Agency (e.g., WIA) ; Migrant Health; Migrant Education; College or University ; Religious ; Public Schools; Medical/Dental Professional; Community Mental Health; Community-based Organization; Legal Aid; Local Government; Growers' Associations; Other employer groups
Perceptions of MSHS	▪ What two things do you think your program does really well for children and their families? ▪ If you could change one thing (including staff, administration, classroom practices, and facilities) that you think would significantly improve the services MSHS is providing, what would it be? ▪ What do you think are the things that make the MSHS program different from other Head Start programs? ▪ What do you think are the most unique and important features of the MSHS program? ▪ If it were just up to you, how likely would you be to continue working for MSHS through the next Head Start year? Very likely, Fairly likely, Very unlikely? ▪ How satisfied are you with working as a Center director? Would you say

Domain, Construct	Specific Items for Consideration for Program Director Interviews
	you are: a) Very satisfied, b) satisfied, c) Neither, d) Dissatisfied, e) Very Dissatisfied? ▪ How satisfied are you with your current job? a) Very satisfied, b) satisfied, c) Neither, d) Dissatisfied, e) Very Dissatisfied? ▪ If it were just up to you, how likely would you be to continue working for Migrant and Seasonal Head Start in the next Head Start year? In the next five years? Very likely, Fairly likely, Very unlikely?

If ACF limits the survey, one possibility is to pursue only the Center Director interviews (as in the 1994 Study). In that case, this interview serves as the only source of program information, so it may be necessary to ask this expansive list of questions that will provide the most insight across many program and center activities. However, if the other options are pursued by ACF—including interviews of the Area Managers and Center Directors—the Program Director interview could be simplified to minimize overlap.

Program Area Managers. A range of Program Area Managers could provide useful specific information about variations in center functioning. Inclusion of the Program Area Managers interviews would be even more important if ACF chooses not to pursue the Center or the Classroom /Family/Child options for the *MSHS Survey*. Table 6.3 below provides details of a selection of question items suggested for consideration in the MSHS interview for Area Managers and links the question types to the relevant domains in the *MSHS Survey* Conceptual Pathway (Exhibit 2.2). Questions to be considered are drawn from previous research with Head Start and from *ECLS*. Some questions parallel those asked of the Program Directors, but others ask more specifically about various service domains.

Table 6.3 Suggested Content for Area Manager Interview Questions: Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
Coordinator, Manager, Provider Roles	▪ What is your job title? ▪ What are the primary functions of your job? ▪ Who performs the following functions for this MSHS program? o Develop curriculum, schedules, and classroom plans; o Assist director in program management activities; o Provide or arrange for staff training/ education o Arrange for IEPs [individual educational plans] and special services for children with disabilities o Conduct child assessments o Manage transition to school activities o Provide parent education o Provide outreach, recruitment, and enrollment services o Arrange for services for children with other community programs o Arrange activities that involve parents	HS; CDE; FCP; DS

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	o Other ▪ From the work that you do, please tell me your three most important goals in working with parents. With children. With staff/teachers.	
Teacher, Center, & Grantee Characteristics: Program Goals	▪ What does your program do to encourage parents to participate in MSHS activities and classes? ▪ Follow up question: How about… o Offer incentives such as door prizes or samples of proucts? o Provide transportation? o Provide child care? o Provide interpreters? o Serve food such as snacks or supper? o Anything else?	HS; CDE; FCP; DS
Teacher, Center, & Grantee Characteristics: Daily Planning	▪ Who makes most of the decisions about the day-to-day plans for the children at your Center(s), such as ▪ the selection of themes and projects for the day? Is it… o Specified in your curriculum o Program administrators o Individual center directors and staff o Individual teachers o Assistant teachers o Someone else?	CDE
Teacher, Center, & Grantee Characteristics: Language and Literacy	▪ Please react to <u>each</u> of the following statements by indicating if you Strongly Agree, Agree, Disagree, Strongly Disagree: o If children are not proficient in English, the center should avoid the use of Spanish and provide primarily opportunities for the children to hear and speak English. o Proficiency in two languages provides an advantage for an individual. o Parents who do not speak English should be encouraged to speak only English to their children. o All children, regardless of home language, should be exposed to a second language. o Development in a home language other than English does not aid in English acquisition. o Parents who speak a language other than English can play a critical role in their children's learning and development. o Language drills are appropriate for young children learning a second language. o Teacher knowledge of a second language is beneficial in the classroom. o A second language can be learned without formal instruction if a nurturing language environment is provided. o When a child begins to participate in school activities in English, there is no need to continue instruction in the home language. o Young children learn a second language more quickly, tho-	CDE

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	roughly, and easily than adults. o Games and songs in Spanish are important for language development in classrooms with Spanish-speaking children. o Parents who do not speak English should be asked not to read to their children in the home language. o Language development is best addressed through active, hands-on learning experiences and talk in the classroom.	
Teacher, Center, & Grantee Characteristics: Language and Literacy	▪ How many times do teachers do these activiteis in their classroom in English? (less than 1 to 5 or morex per week) o Reading stories to the children? o Retelling stories? o Discussing new words? o Learning about rhyming words and word families? o Learning about common prepositions, such as over and under, up and down? o Learning about conventions of print (left to right orientation, book holding)? o Learning the names of letters? o Writing letters of the alphabet? o Children writing names? o Working on phonics? How many times do you do these activities in your classroom in Spanish? (less than 1 to 5 or more x per week)	CDE
Teacher, Center, & Grantee Characteristics: Classroom Practices	▪ I'm going to read some statements that some teachers have made about how children in Head Start should be taught and managed. Please tell me whether these approaches are common for your program. (Most of the time, Some of the time, Occasionally, Seldom.) o In my program, activities are responsive to individual differences in children's development o Each curriculum topic is taught as a separate subject at separate times; o Children are allowed to select many of their own activities from a variety of learning areas that the teacher has prepared (writing, science center, etc.) o Children take the lead on certain activities in our program, such as cutting out their own shapes, performing their own steps in an experiment, or planning their own creative drama. o Students are seated and work on their own on school-tasks. o Our children actively explore. o Teachers use treats, stickers, or stars to encourage appropriate behavior o Teachers reprimand to encourage appropriate behavior o Children are involved in establishing rules for the classroom	CDE

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	o Children are instructed in recognizing the single letters of the alphabet, isolated from words o Children should learn to color within predefined lines o Children should learn to form letters correctly on a page o Children dictate stories to the teacher o Children are taught their letter sounds o Children practice forming letters correctly	
Teacher, Center, & Grantee Characteristics: Developmental Assessments	▪ Do you currently assess Preschoolers' developmental progress over the course of their enrollment? What methods do you use for these assessments of Preschoolers? How many times do you plan to assess the children over the course of enrollment? Check all that apply: o Parent Report Ratings o Teacher Report Ratings o Direct-Observational Rating o Work sampling o Direct individualized testing with standardized tests or screening instruments (Specify)? o Other (Specify)? ▪ Over the course of the program session at this Center, how often is each Preschooler's development assessed? Weekly; Two or three times a month; Monthly; Beginning and end of enrollment; Other (Specify) ▪ What domains are targeted by your program's assessments? Math; Letter/Word ID; Art; Science; Social-emotional	HS; CDE; DS
Teacher, Center, & Grantee Characteristics: Developmental Assessments	▪ Do you currently assess Infants and Toddlers' developmental progress over the course of their enrollment in your Center? ▪ What methods do you use for these assessments of Infants and Toddlers? Check all that apply: o Parent Report Ratings o Teacher Report Ratings o Direct-Observational Rating o Work sampling o Direct individualized testing with standardized tests or screening instruments (Specify)? o Something else? (Specify). ▪ How often over the course of the program do you assess each Infant or Toddler's development? (Specify)	HS; CDE; DS
Teacher, Center, & Grantee Characteristics: Developmental Assessments	▪ What are the most important child assessment tools that your program uses with children?	HS; CDE; DS
Teacher, Center, & Grantee Characteristics: Disability	▪ What do you do when you suspect a child might have a disability? ▪ When a disabilities specialist sees a child, what kind of feedback does the specialist provide you with?	HS; CDE; DS

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	▪ What services can your program provide for children with disabilities?	
Teacher, Center, & Grantee Characteristics: Needs Assessments	▪ Who picks which assessments to use? o Program or Center Director o Prior director o Program staff o Program specialists o Other ▪ Who conducts these assessments? o Program Staff o Lead teacher o A specialist o An outside provider o Other ▪ How did the assessor learn to do the assessment? ▪ Are the assessments typically conducted during program hours or outside of program hours? o During program hours o Before or after program hours o At the center o At the family's home o Someplace else; Specify ▪ Is the assessment culturally relevent? What cultural issues have arisen? ▪ Is the assessment in an appropriate language? What language issues occur? ▪ Is the assessment 'standardized'? Who is trained to use the assessments appropriately? ▪ Does the assessment have evidence that the results are associated with important developmental outcomes and school readiness?	HS; CDE; FCP; DS
Teacher, Center, & Grantee Characteristics: Families	▪ What activities does your program offer for families? ▪ Follow up question: What about… o Group socializations o Events for the entire family o Workshops on parenting o Training or workshops for learning English o Parent training or workshops on subjects such as employment, job training, or financial counseling o Information/Training on health practices o Information on available services ▪ What activities does your MSHS program do to involve fathers or father figures? How successful are these activities? What strategies have you used to encourage father involvement? ▪ Follow up question: What about… o Hold events or activities specifically for fathers or fathers and children (not including mothers)	CDE; FCP

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	o Host events for the entire family that include fathers o Provide employment or job training services for fathers	
Teacher, Center, & Grantee Characteristics: Family Services	▪ Which of these services are offered to families? Which are offered most frequently/successfully? For which have you not been able to identify a community partner(s) as resource? ▪ Follow up. Of these services, which are 1. Offered directly by MSHS staff? 2. Offered by a community partner but provided at the center. 3. Offered through a community partner and provided off-site o Child care o Physical health care o Oral health o Prenatal care o Trainings/classes for learning English o Transportation assistance o Disability services o Emergency assistance o Employment assistance o Education or job training o Drug or alcohol abuse o Legal assistance o Housing assistance o Financial counseling o Family literacy ▪ Does your MSHS program offer or make available any of the following adult-learning services for families? o Assessment of English language skills o Assessment of basic reading and writing skills (Spanish and/or English) o Activities, trainings, classes or workshops for parents of young children learning two languages o Adult Literacy trainings, workshops, classes o Information/application support for: Adult English as a second language or Adult Education community classes o Other (please specify). ▪ What methods does your MSHS program use to identify family needs? Do you use… o Family self-reports o A checklist o Screenings o Something else. Specify ▪ Does your MSHS program create Individual Family Partnership Agreements (IFPA) for families? ▪ IF YES: What proportion of the families in your MSHS program have an IFPA? How many times a year are the IFPAs updated? ▪ IF NO: what are your reasons for not using IFPAs? o Lack of resources o Assessment tool not available	HS; CDE; FCP; DS

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	o No staff qualified to develop the IFPA's o IFPA process not useful o Use alternative process (please specify) o Families tend to leave before agreements can be implemented o Other. Specify	
Teacher, Center, & Grantee Characteristics: Health Information	▪ Many MSHS families have health or developmental concerns that require some level of assessment and intervention. We would like to better understand what MSHS programs need do to obtain services for such families and children. If for example, a child in your program was recently screened for a developmental concern (such as a speech problem), what would be the first step you would have to take to gain intervention services for this child? Probe: The process leading to intervention can include many steps such as the building of awareness, gaining cooperation, planning with families, referral for evaluation, etc. Probe: OK, What would you do next? ▪ Does your MSHS program offer or make available any of the following mental health services? Do you have trained staff or community resources available to address these needs? ▪ Follow up questions: Are these services provided by 1. Offered directly by MSHS staff? 2. Offered by a community partner but provided at the center. 3. Offered through a community partner and provided off-site o Mental health screenings o Mental health assessments o Family therapy o Staff Mental Health Consultation o Domestic violence intervention/Shelter o Crisis Support o Something else (Specify) ▪ Does your MSHS program offer or make available any of the following oral health services? 1. Offered directly by MSHS staff? 2. Offered by a community partner but provided at the center. 3. Offered through a community partner and provided off-site 4. Not available (please identify obstacles). o Oral health screenings o Oral health assessments o Family education on oral health o Staff consultation/ follow up with families o Something else (Specify) ▪ Do staff talk with parents about providing adequate sleep for their infants/toddlers? Does your program currently offer materials or workshops to educate parents on the importance of sleep? ▪ Do staff talk with parents about appropriate nutrition for infants, toddlers and preschoolers? Does your program currently offer materials or workshops to educate parents on the importance of nutrition?	HS; CDE; FCP; DS

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships;
	▪ Do staff talk with parents about appropriate nutrition for infants, toddlers and preschoolers? Does your program currently offer materials, workshops to educate parents on the dangers of pesticides and how to protect themselves and their children? ▪ What approach has seemed most effective for getting health messages to your families?	
Local Community; State & national Policies and Agencies; Teacher, Center, & Grantee Characteristics: Community Linkages	▪ Does your MSHS program have a formal written partnership with any of the following? o Local Part C agency o Child care providers o Health care providers o Mental health care providers o Oral health care providers o Migrant Health o Migrant Education ▪ For each of the partnerships indicated above: Do you currently serve families through this partner? If yes, Do you or your staff have regularly scheduled contacts with this partner? ▪ What problems do you encounter when trying to establish formal partnerships? Are agencies willing to serve MSHS families through informal partnerships? ▪ Do the local communities support partnerships that serve migrant farmworkers and their families?	HS; CDE; FCP; DS
Teacher, Center, & Grantee Characteristics: Working Conditions	▪ Please tell me the extent to which you agree or disagree with the following statements: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree, NA, DK o Overall, our MSHS Program has high morale o Our MSHS program allows teachers and staff input into planning. o Our MSHS program helps teachers and staff to work effectively with children with disabilities. o Our MSHS program helps teachers and staff work with effectively with children with behavioral difficulties (i.e., too shy, hyperactive, aggressive). ▪ I enjoy working with my colleagues. ▪ I am satisfied with my job. ▪ If it were up to me, I plan to be working here next year.	HS; CDE; FCP; DS
Teacher, Center, & Grantee Characteristics: Information Technology	▪ Who in your program has access to computers or laptops? o Are laptops available for use during home visits? By which staff? o Who has computers for use in classrooms? o Who has computers available at work to use for planning? ▪ Does your MSHS program have Internet access? Do all centers have Internet access? Is the speed of the internet that you have available generally appropriate to the work you are doing? ▪ Does your MSHS program provide access to any of the following reports?	HS; CDE; FCP; DS

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	o Enrollment lists o Reports on characteristics of families being served o Reports on services provided o Reports on child's health/immunization status o Reports on staff characteristics o Reports on staff training/in-service o Progress reports on individual children o Reports on families leaving other centers (family mobility) o Something else (Specify) ▪ How frequently do you use reports? Daily; Weekly; Monthly; Annually; Never use the report	
Teacher, Center, & Grantee Characteristics: Staffing	▪ How many full-time employees does your MSHS Area employ? ▪ How many part-time employees does your MSHS Area employ? ▪ Does your MSHS program employ or have access to the following specialists? o A father or male involvement specialist or coordinator o Mental health specialist or coordinator o Disability specialist o Literacy specialist o Speech or language specialist o Health care professional or nurse o Some other specialists; Specify	HS; CDE; FCP; DS
Teacher, Center, & Grantee Characteristics: Staff Training	▪ Do your MSHS program staff have individual professional development plans? What are the training requirements for… o Directors/ Assistant Directors o Managers/ Supervisors o Teachers o Assistant Teachers o Family Service Workers ▪ Approximately how many hours of training are provided at your program each year for... o Directors/ Assistant Directors o Managers/ Supervisors o Teachers o Assistant Teachers o Family Service Workers ▪ Which of the following have been topics of your MSHS program's staff trainings in the last year? o Time management/ classroom management o Parent and community relations o Child development o Assessing family needs o Curriculum/ lesson plans/ best practices o Working with migrant farmworker families o Working with dual language learner families/children o Linking migrant families with services o Other, Specify ▪ What accommodations does your MSHS program make for staff	HS; CDE; FCP; DS

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	to attend trainings outside of program? Do they... o Pay registration fees o Pay for travel o Provide staff coverage o Tuition reimbursement for relevant college courses o Other, Specify	
Teacher, Center, & Grantee Characteristics: Staff Recruiting and Hiring	▪ What does your MSHS program seek as specific qualifications for a family service worker? Follow up: o ECE Education/ degree/ credentials o Experience in Early Childhood settings o Management experience o Parents of enrolled children o People from the community o Males o Multilingual applicants o Former migrants or seasonal farmworkers o Familiarity with migrant and seasonal farmworker families o Other ▪ What does your MSHS program seek as specific qualifications for a teacher? Follow up: o ECE Education/ degree/ credentials o Experience in Early Childhood settings o Management experience o Parents of enrolled children o People from the community o Males o Multilingual applicants o Former migrants or seasonal farmworkers o Familiarity with migrant and seasonal farmworker families o Other ▪ What does your MSHS program seek as specific qualifications for an assistant teacher? o ECE Education/ degree/ credentials o Experience in Early Childhood settings o Management experience o Parents of enrolled children o People from the community o Males o Multilingual applicants o Former migrants or seasonal farmworkers o Familiarity with migrant and seasonal farmworker families o Other ▪ How do you assess if a bilingual staff member has a proficient command of the required languages? o Observe the staff member o Have other staff interview them in their language o Based on recommendations from people in the community o Something else (Specify)Is your MSHS program able to hire people with these qualifications?	HS; CDE; FCP; DS

Domain, Construct	Specific Items for Consideration for interviews of Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers	Respondent HS=Health Services; CDE=Child Development & Education; FCP=Family & Community Partnerships; DS=Disability Services
	Always, Usually, Sometimes, Never ▪ IF NO: Why? ▪ Is your program able to retain people with these qualifications? Always, Usually, Sometimes, Never o	
Teacher, Center, & Grantee Characteristics: Staff Recruiting and Hiring	▪ What strategies does your MSHS program use to recruit staff? Do you… o Advertise on the internet o Advertise in the newspaper o Recruit from local colleges o Recruit among parents of enrolled children o Other Specify ▪ Would you say staff salaries and benefits are… o Below average for the surrounding area o The same as the average for the surrounding area o Above average for the surrounding area	HS; CDE; FCP; DS

6.1.3 Interviews with MSHS Center Directors

The key suggestion for the Program/Center Component is to conduct telephone interviews with all of the MSHS Center Directors. At minimum, if ACF must limit the options pursued, the Design Team recommends undertaking these interviews, as they would not only yield information to inform MSHS community on center operations, but they also would provide key information—not available anywhere else—for ACF to plan future work on sampling of centers, classrooms, children, and families.

It is suggested that computer-assisted telephone interviews (CATI) of that program's set of individual Center Directors could be conducted (see Chapter 7). These interviews would yield the first MSHS database that contains program-wide information about individual center operations, as well as the updated, critical center-level enrollment data that would be necessary to construct an accurate sampling frame for other *MSHS Survey* options. For this sampling purpose, the unique data elements needed are anticipated enrollment numbers for each center, sorted by each of the targeted age groups (infant, toddler, and preschool), the number of classrooms serving children of each age, and information on typical enrollment patterns and scheduling, including the Center Director's perceptions of any discreet waves or cycles of families who attend based on varying crop cycles. It will be important to conduct the center Director interviews in their primary language and at a time that is convenient for them. A summary of potential interview topics includes the following MSHS Center Characteristics:

- **Classrooms**
- **Funded enrollment levels**
- **Actual enrollment levels**
- **Program options**
- **Migrant/seasonal ratio**
- **Family mobility**
- **Impact of family migration / agricultural changes**
- **Fluctuations in program operations**
- **Typical patterns or cycles**
- **Recruitment & enrollment policies and procedures**
- **Turnover**

Table 6.4 provides details of interview topics and related questions for the Center Director Interview and links the question types to the relevant domains in the *MSHS Survey* Conceptual Pathway (Exhibit 2.2). The proposed interview overlaps with the suggested Program Director and Program Area Managers interviews. If all options are pursued by ACF and all interviews are completed, it would be appropriate to simplify the Center Director interview to reduce overlap.

Table 6.4 Suggested Content Questions for Center Director Interview

Domain, Construct	Specific Items for Consideration for the Center Director Interview
Teacher, Center, & Grantee Characteristics: Facilities	▪ What organization owns your MSHS center's facilities? What is the nature of the agreement for your Center to use them? ▪ Do you share facilities with other day care programs; for example, regular Head Start? [If Yes] What are those other programs? ▪ Are you able to use the same facilities each year? Follow up: how do you plan for your program space each year? ▪ Are the facilities adequate for the services you want to provide? ▪ Are the facilities conveniently located for the families?
Teacher, Center, & Grantee Characteristics: Transportation	▪ What transportation do you provide? How many children uses this transportation?
Teacher, Center, & Grantee Characteristics: Schedule	▪ What factors do you consider in determining the scheduled start and end dates for your Center' each program year? Follow up: what was your start up date for this year? When did you make that decision? ▪ Did you have to adjust, for any reason, the dates that the Center was opened this year? If yes, why? How will this affect the closing date for the Center? ▪ What are the most common reasons for making changes to scheduled start and end dates? ▪ What hours is the center open each day? Does this vary at all during the program year? If yes, why?
Teacher, Center, & Grantee Characteristics: Staffing	▪ How many of the teachers are new to the Center this year? Are there currently any unfilled vacancies for teachers? Since the end of the last program season, how many teachers left and had to be replaced? ▪ In your opinion, are the teachers who came to the Center this year or last more qualified, as qualified, or less qualified than the teachers they replaced? ▪ Is the job of finding replacement teachers relatively easy, fairly easy, fairly difficult, or very difficult? Is it easier to find replacement teachers for infants and toddlers or for preschoolers?
Teacher, Center, & Grantee Characteristics: Staffing	▪ What are you doing or trying to do to reduce turnover? Follow up question: Potential strategies: o Increasing teacher salaries o Hiring or recruiting more assistants, aides o Providing more or better training or education o Subsidies o Providing better fringe benefits o Giving teachers more say in choice of curriculum and planning of activities o Providing teachers with better physical facilities (furniture, classroom or lounge areas, etc.) o Anything else?

Domain, Construct	Specific Items for Consideration for the Center Director Interview
Teacher, Center, & Grantee Characteristics: Staffing	▪ How many assistant teachers (or teacher aides) are new to the Center this year? Are there currently any unfilled vacancies for assistant teachers (or teacher aides)? During the last program season, how many assistant teachers (or teacher aides) left and had to be replaced?
Teacher, Center, & Grantee Characteristics: Staffing	▪ Do you have requirements for hiring teachers… o Speak the home/native language of children from non-English speaking or limited English-speaking families? o Are familiar with the ethnic customs, traditions, and values of migrant farm-worker families? ▪ Do you have requirements for hiring assistant teachers who… o Speak the home/native language of children from non-English speaking or limited English-speaking families? o Are familiar with the ethnic customs, traditions, and values of migrant farm-worker families?
Teacher, Center, & Grantee Characteristics: Information Technology	Let's discuss computer availability at your program ▪ How many computers/laptops does your center own? ▪ Which staff have access to program computers (laptops/desktops)? ▪ Do staff have laptops for use during home visits? ▪ Do staff have computers for use in classrooms? ▪ Do staff have computers available at work to use for planning/assessing? ▪ Does your MSHS center have Internet access? ▪ How does your MSHS program use the following? Does your MSHS program provide staff access to any of the following? How frequently do you use these reports? Daily; Weekly; Monthly; Annually; Never use the report o Enrollment lists o Reports on characteristics of MSHS program families o Reports on services provided o Reports on child's health/immunization status o Reports on staff characteristics o Reports on staff training/in-service o Progress reports on individual children o Reports on families leaving other centers (family mobility) o Something else (Specify)
Teacher, Center, & Grantee Characteristics: Degrees and Credentials	▪ What professional development efforts do you have in place? What have you begun to help teachers and assistant teachers get their college degrees, CDAs, or other early childhood certification? o Providing tuition assistance? o Giving teachers release time? o In-service training for CDAs? o Assigning a mentor teacher? o Anything else? o No efforts o Don't know
Teacher, Center, & Grantee Characteristics: Staff Training	▪ How often do you provide training for: o Teachers and assistant teachers o Family service workers o Health staff ▪ Would you say once every few years, about once a year, every few months, monthly, or weekly? ▪ Who provides staff training for this Program? o Center or grantee staff

Domain, Construct	Specific Items for Consideration for the Center Director Interview
	o Other community resources o Local consultants o MSHS Quality Improvement Center (HSQIC) o Disability Services Quality Improvement Center (DSQIC) o National MSHS Association (Heads Up Satellite Training) o State or national conferences (NAEYC or NHSA) o Private companies or organizations (e.g., High Scope, Teaching Strategies) o Other ▪ What additional trainings would you like to have? What additional trainings do your staff request? ▪ Overall, does the training improve staff performance? Overall, how helpful would you say the trainings are: Would you say: Very helpful; Fairly helpful; Could be more helpful, Could be much more helpful
Teacher, Center, & Grantee Characteristics: Staff Training	▪ In the past year, on what topics has training been provided or made available to your staff by MSHS? o Parenting education o Mental health issues o Domestic violence/family violence o Child abuse and neglect o Substance abuse o Family needs assessment and evaluation o Providing case management services to families o Linking families to community services o Helping families set goals and schedules for meeting goals o Helping families with INS and related issues o Understanding migrant culture and needs o Understanding bilingual children's development o Supporting parent engagement o Housing o Other o No training o Don't know ▪ Overall, how helpful was the training provided by or made available to your staff by MSHS? Very helpful; Fairly helpful; Could be more helpful, or Could be much more helpful? What additional trainings have your staff requested? Which seemed to contribute to the strongest improvement?
Teacher, Center, & Grantee Characteristics: Mentoring	▪ Do you have mentor/coaches/ peer coaches to work with teachers in classrooms? Do you know how often they come to each classroom (Yes; No; Approximately). [If Yes or Approximately] How often do they come to each classroom? Would you say…Don't Know; Once a week; Once every two weeks; Once a month, or; Less than once a month? ▪ How do you select the mentor/coaches? What are your priorities for the mentor/teacher interactions? How satisfied are you with the mentor/coaches that you are using currently? What training/supervision do you provide your mentor/coaches?
Teacher, Center, & Grantee Characteristics: Enrollment	▪ How many classrooms in your center serve infants? How many infants are you actually serving this season? ▪ How many classrooms in your center serve toddlers? How many toddlers are you actually serving? ▪ How many classrooms in your center serve preschoolers? How many preschoolers are you actually serving? ▪ What is the ratio of migrant children to seasonal children in the center?

Domain, Construct	Specific Items for Consideration for the Center Director Interview
	▪ How many classrooms do you have that serve a combination of these age groups? How are these set up?
Teacher, Center, & Grantee Characteristics: Enrollment	▪ How do you predict how many families/children will be seeking enrollment in your Center each year? What are your sources of information? ▪ What percentage of families (with a child still under 5 years of age) are likely to come back from year to year? ▪ In what ways, if any, do you work with other programs and centers to know which children will likely be enrolling and what their specific needs are? Do you receive any direct information from other programs? Prior to the children's arrival? ▪ How do you gain contact with parents when they arrive in your area? What kinds of outreach do you use? ▪ For your typical center season, do most families follow a similar schedule for enrolling and leaving the program, or are there different waves of families that enroll and leave across the entire program period? If yes, please explain. How do you plan for that? ▪ Is there any way in which the patterns of enrollment differ between families that have an infant or toddler and families with only preschool-age children? (Follow-up: Does one age group arrive at a different time or depart at a different time?)
Teacher, Center, & Grantee Characteristics: Waiting Lists	Let's discuss waiting lists. How long is the waiting list for your program currently? Do you think all those families are still here locally? At the beginning of this program season, did you start out with a waiting list of children whose parents wanted to enroll them in classes in this Center, but for whom slots were not available? How many children were on this waiting list at the beginning of the year? ▪ Based on last year's experience, how many of the children on the waiting list do you think you will eventually enroll during the course of the year? ▪ Based on your experiences at this center, about how many of the children on the waiting list will eventually enroll during the course of the session? ▪ Do you have separate waiting lists for different age groups (For example, one list for infants, one for toddlers, and one for preschoolers)? ▪ What is your procedure for selecting children off the waiting list? ▪ Does your staff refer families to other programs for their children if you do not have room for them? [If Yes] What are the other programs? What feedback have you received about the other programs?
Teacher, Center, & Grantee Characteristics: Non-enrolled Families	▪ Are there children in this service area that you know about who are eligible for MSHS and are not enrolled? ▪ Why are these children not enrolled? Follow up with: o Lack of enrollment slots in the program o Parents decline to participate o Parents are not aware of the program o They live in a very remote area (e.g., too far from center) o Transportation a problem (please describe) o Parents concerned about potential immigration issues o Parents advised not to enroll o Other ▪ What strategies do you use to try to contact and enroll these families?
Teacher, Center, & Grantee Characteristics: Expansion	▪ Have you expanded this MSHS program within the last two years to serve more children? ▪ How many infants have you added? How many toddlers have you added? How many preschool-age children have you added? ▪ How many classrooms have you added? How many teachers have you added?

Domain, Construct	Specific Items for Consideration for the Center Director Interview
	▪ Have you added new program components? ▪ In carrying out this expansion, what are the most serious problems you have encountered? Follow up: have you encountered serious problems in any of the following areas? How about… o Recruiting children to fill the increased slots? o Recruiting qualified teachers or staff? o Training teachers or staff? o Finding or constructing additional space/facilities? o Managing the increased number of parents/families? o Managing the increased number of staff? o Other?
Teacher, Center, & Grantee Characteristics: Expansion	▪ Do you feel the need to expand this MSHS program (further) in the next two years to serve more children? ▪ How many infants do you plan to add? How many more toddlers to you plan to add? How many more preschool-age children do you plan to add? ▪ How many classrooms do you plan to add? How many teachers do you plan to add? ▪ Do you plan to add new program components, such as: o Family day care based MSHS? o Other? ▪ In carrying out this expansion, do you anticipate serious problems in any of the following areas? How about... o Recruiting children to fill the increased slots? o Recruiting qualified teachers or staff? o Training teachers or staff? o Finding or constructing additional space/facilities? o Managing the increased number of parents /families? o Managing the increased number of staff? o Other?
Teacher, Center, & Grantee Characteristics: Program Goals	▪ What are the most important goals of your MSHS center? ▪ Follow up: Which of the following goals are most important to your MSHS program? o Enhance child development o Improve parenting o Improve parent self sufficiency o Foster appropriate parent-child relationships o Knowledge of child development o Child social emotional development o Child cognitive development o Child language development o Child health and physical development o Family Mental Health o Safe and secure environment o Providing cultural understanding for families ▪ Which of these is the single most important goal for your MSHS Program?
Teacher, Center, & Grantee Characteristics: Program Goals	▪ Which of the following does your program do well? Which are more challenging (describe challenges)? o To provide a warm and loving environment for children? o To provide care for children so parents can work? o To prepare children for school/kindergarten? o To help children learn to speak and read English? o To promote children's development? o To teach children appreciation for their culture?

Domain, Construct	Specific Items for Consideration for the Center Director Interview
	o To provide religious instruction? o To keep children safe? o To support parents in learning to speak, read and write English? o To support parents to pursue education and/or job skills, through, for example, offering a GED program or work skills training? o To help parents to maintain a warm and loving relationship with their children? o To collaborate with parents as the primary educators of their children? o To provide parent education workshops (e.g. developmentally appropriate child expectations, positive discipline, First Aid/ CPR, health/dental health/ nutrition topics, etc.)? o To collaborate with parents in shared decision-making processes? o To develop opportunities for parents as parent leaders? o To provide referrals for families to community services (e.g., health, dental health, domestic violence, housing, referrals, food closets, WIC, etc.)? o To obtain resources for children with disabilities or potential disabilities? o To promote literacy opportunities in the home (e.g. Program-sponsored lending libraries)? o To promote other opportunities for literacy (in first language, as well as second language – linkages to libraries, children's literature workshops, Spanish for Spanish speakers, parent essay contests, etc.)? o Other
Teacher, Center, & Grantee Characteristics: Staff goals and strategies	▪ From this list, tell me what your program does to support parents: Supporting parents' knowledge and skills of child? (Follow up prompts:) o In understanding child development and parenting generally o In understanding their own child's development o In understanding health and nutrition for themselves and their children o Involvement in child's education Supporting parents' social and community connections (Follow up prompts:) o Knowledge about support services in their community and help them to use them o Provide opportunities for developing a social support network of other parents and families in the program and community o Have parents participate in policy and program decisions o Serve as a bridge for acculturation Supporting parents' own professional development (Follow up prompts:) o Help parents become economically self-sufficient (i.e., get further education and employment) o Help parents improve their literacy skills o Help parents identify their personal goals and ways in which to achieve them o To help them learn English/connect to ELL; resources ▪ Does your program do things to encourage parents to participate in MSHS activities and classes? Follow up: How about… o Offer incentives such as door prizes or samples of products? o Provide transportation? o Provide child care? o Provide interpreters? o Serve food such as snacks or supper? o Anything else?
Teacher, Center, & Grantee Characteristics: Communication	▪ What means did you use last week to communicate with parents about their child? About involvement opportunities? Follow up: Are the following used to communicate with parents about involvement opportunities? o Newsletter (frequency: e.g., weekly, monthly?)

Domain, Construct	Specific Items for Consideration for the Center Director Interview
with parents	o Parent/teacher conferences (how many?) o Group meetings (frequency: e.g., weekly, monthly?) o Phone calls o Home visits, (number of visits; what staff are responsible) o Poster/bulletin boards o Radio/television announcements o Other o Don't know o Why do you think that not all parents participate?
Teacher, Center, & Grantee Characteristics: Parent Meetings	▪ How often do teachers schedule formal meetings with the parents of each child to discuss their child's care and activities? Daily; Two or three times a week; Weekly; Two or three times a month; Monthly; Less than monthly; Never; Don't Know ▪ What does your program do to involve fathers in MSHS? Please describe. How successful would you say your program has been in involving fathers in MSHS? Very successful; Somewhat successful; Mostly unsuccessful; Very unsuccessful ▪ What determines how families are assigned to specific case managers/family service workers? Is it… o According to the child's classroom? o According to the center? o Geographic location of family? o Caseload size? o Previous experience with specific families? o Match between race, language, ethnic, and/or cultural characteristics of family and staff? o Something else? [if more than one, ask "Which of these is the one used most often?" ▪ Are home visits to families of center-based children required of your center staff? What are the minimum number of home visits to the family of each center-based child during the MSHS program session by: o Teachers or assistant teachers? o Family Service Assistants or Workers or Family Advocates? ▪ About how many times is each family visited by… o Teachers or assistant teachers? Family Service Assistants or Workers or Family Advocates?
Teacher, Center, & Grantee Characteristics: Parent Activities and Engagement	▪ How are the members of your program's Parent Policy Committee/Council selected? ▪ How many current or former MSHS parents are employed in your center? ▪ How many current or former MSHS parents are employed at your center as a/an: o Lead teacher? o Assistant Teacher? o Teacher's aide? o Family Service Worker? o Cook? o Assistant in meal preparation? o Driver of a MSHS bus? o Maintenance person? o Administrator (e.g., Center Director, Area Manager)? o Other
Teacher, Center, & Grantee Characteristics:	▪ In the last month, what activities did your center offer for families? Follow Up: Does your Center offer any of the following activities for families? o Multi-family socializations

Domain, Construct	Specific Items for Consideration for the Center Director Interview
Services for Families	o Events for the entire family o Workshops on parenting o Training or workshops for families of DLL (Dual Language Learners) o Parent training or workshops on subjects other than DLL, such as employment, job training, or financial counseling o Information on sleep practices o Some other services ▪ Does your program offer any of the following services to families? Which are provided most consistently (to every family)? Which do you have resources for in the community? Which are more challenging to provide? Which are more challenging to find resources for in the community? o Child care o Health care o Prenatal care o English Language Learner (ELL) o Transportation assistance o Disability services o Emergency assistance o Employment assistance o Education or job training o Drug or alcohol abuse o Legal assistance o Housing assistance o Financial counseling o Family literacy ▪ Does your program offer or make available any of the following services? o Screenings/Developmental assessment of English language skills o Screening/Assessment of basic reading and writing skills o Activities and Workshops for parents of English Language Learners o Assistance in applying for medical insurance o Assistance in scheduling appointments for pre-kindergarten screening o Information about: Head Start, Adult ESL or Education and Community How many family child care partners does your program have?
Teacher, Center, & Grantee Characteristics: Needs Assessments	▪ What are the most common child assessment tools that your program uses with children? How do these differ for infants, toddlers, and preschool-age children? How satisfied are you that these tools are evidence-based? Culturally appropriate? What is your program's greatest need in the assessment domain? ▪ What parent or family assessments/screenings are most commonly used by your program?
Teacher, Center, & Grantee Characteristics: Curricula Facilities	▪ Do you have a specific curriculum or combination of curricula for preschool-age children in your program? For infants and toddlers? Please describe. ▪ If your principal curriculum for preschoolers (infants and toddlers) has a name, what is that name? If your additional or supplemental curricula for Preschool children and/or infants and toddler have names, what are they? ▪ Regardless of who developed it, does the curriculum used by your program for preschool-aged children and/or infants and toddlers specify the following o Goals for children's learning and development o Specific activities for children o Suggested teaching strategies o Suggested teaching materials o Ways to involve parents in their child's learning activities o Supports for bilingual language development

Domain, Construct	Specific Items for Consideration for the Center Director Interview
	▪ How would you say your curriculum does on evidence based support? Cultural and linguistic sensitivity? Supporting literacy? Supporting math? Supporting science? Supporting social-emotional development? Are teachers satisfied? Are parents satisfied? ▪ Did any of the following factors make you choose this curriculum over another? o Cost o Recommendations from other MSHS programs o Recommendations from teachers o Personal experience using the curriculum in another early childhood setting o Research findings or reports on the curriculum o Availability/ curriculum was already being used o Cultural and linguistic sensitivity o It was required o Other—Specify
Teacher, Center, & Grantee Characteristics: Classroom Schedule	▪ Is there a schedule of activities posted inside or outside of each classroom? ▪ On a nice day, about how many minutes do toddlers typically spend playing outdoors? ▪ On a nice day, about how many minutes do preschoolers typically spend playing outdoors?
Teacher, Center, & Grantee Characteristics: Language and Literacy	▪ What different languages do the families in your program speak? Spanish; Native Central American, South American and Mexican Languages (e.g., Mexican, Quichean); Caribbean languages (e.g., French-Creole, Haitian); Middle Eastern and Indic languages (e.g., Arabic, Hindi); Far Eastern Asian languages (e.g., Japanese, Vietnamese); Native North American or Alaska Native languages; Pacific Island languages (e.g., Palauan, Fijian); European and Slavic languages (e.g., Italian, Croatian); African languages (e.g., Swahili, Wolof); American Sign Language; Some other language (Specify) ▪ How does your program support communication with parent in these languages? Do you have staff that speak [Language Reported]? What percentage of families receives services in [Language Reported]? How often is it not possible to provide appropriate interpretation for a parent? ▪ What languages are typically used for instruction in this Center? What languages are print materials available in? English; Spanish; Kanjobal; Mixteco Alto or Bajo; Chinese; Japanese; Korean; Vietnamese; A Filipino language; Indigenous Mexican Language: Zapoteco, Tarasco, Triqui, Chu; American Indian Language: e.g., Kickapoo; Other language What languages are used for reading in the classroom to children? What language is used for learning letters? What languages do staff use typically during outdoor play?
Teacher, Center, & Grantee Characteristics: Languages Used in Classrooms	▪ How does you program staff communicate with families who speak [Languages Reported above]? Do they use... o Hired interpreters o A telephone interpretation service o Family members or other informal translators o Other parents o Other (Specify) ▪ In what ways does your MSHS program try to match families and staff based on language or cultural background?
Teacher, Center, & Grantee	▪ Please react to each of the following statements by indicating if you Strongly Agree, Agree, Disagree, Strongly Disagree:

Domain, Construct	Specific Items for Consideration for the Center Director Interview
Characteristics: Languages Used in Classrooms – Director Attitudes	o If children are not proficient in English, the schools should avoid the use of Spanish and provide primarily opportunities for the children to hear and speak English. o A high degree of proficiency in two languages provides a cognitive advantage for the bilingual individual. o All children, regardless of home language, should be exposed to a second language. o Development in the home language does not aid in English acquisition. o Parents who do not speak English play a critical role in their children's learning and development. o Teacher knowledge of a second language is beneficial in the classroom. o When a child can begin to participate in school activities in English, there is no need to continue instruction in the home language. o Young children learn a second language more quickly, thoroughly, and easily than adults. o Games and songs in Spanish are useful for language development in classrooms with bilingual Spanish-speaking children. o Language drills are appropriate for young children learning a second language. o A second language can be learned without formal instruction if a nurturing language environment is provided. o It is of primary importance that children learn English in order to support their school readiness. o Book reading in the classroom should be done mostly in English. o Young children benefit from close partnerships between their parents and the school; o Parents who speak primarily a language other than English would be too uncomfortable at school meetings or activities. o Parents who speak a language other than English should be encouraged to read to their children in the home language. o Parents who are not able to read or write are not able to encourage their children's interest in books and other printed material. o Parents who speak a language other then English should be encouraged to speak only English to their children to facilitate the transition to English. o Primarily English should be used for school topics in the classroom (e.g., letter id, vocabulary, math, science).
Teacher, Center, & Grantee Characteristics: Kindergarten Transition	▪ Does your staff work with parents to determine the community where their children will attend kindergarten? ▪ What supports does your MSHS Center provide for the children's transition to kindergarten? How many of your children will transition to kindergarten this year? Will they transition in this community? ▪ Follow up: Does your Center do any of the following regarding transition to kindergarten? o Send letters home with children or mail letters to parents providing information on transition? o Invite parents to attend informational meetings or discussions with MSHS or school staff about kindergarten transition? o Provide parents with information on the school their child will attend? o Schedule parent and/or child visit(s) to the school the child will attend? o Accompany parents and/or children to visit the school? o Teach parents skills to effectively advocate for their school-age children? o Do anything else? (Specify) ▪ Does your MSHS center work in any of the following ways with the schools your MSHS students will attend?

Domain, Construct	Specific Items for Consideration for the Center Director Interview
	o Conduct joint training of MSHS and school staffs? o Share curriculum information? o Share information about rules and program policies? o Share information on expectations of students and families? o Provide children's MSHS records to the school? o Meet with kindergarten teachers at the schools MSHS children will attend? o Do anything else?
Local Community; Teacher, Center, & Grantee Characteristics: Community Linkages	▪ With what community resources do you normally work to address the needs of the children and families in your center? ▪ [For each agency or organization mentioned] Do you have a formal [for example, a Memorandum of Understanding] or an informal agreement with that agency? Which of these normally provide services to migrant and seasonal farmworker families? ▪ What kinds of services are provided by these agencies and organizations? Prompts: Welfare Agency; Food/Nutrition Agency (e.g., WIC); Job Service Agency (e.g., WIA) ; Migrant Health; Migrant Education; College or University ; Religious ; Public Schools; Medical/Dental Professional; Community Mental Health; Community-based Organization; Legal Aid; Local Government; Growers' Associations; Other employer groups

6.1.4 Reviews of Administrative Records

It is further suggested that insights into the operations of MSHS programs could be derived from community assessments and documentation of the recruitment and enrollment eligibility criteria in conjunction with enrollment and waiting lists (if available). Community assessments determine the needs of the local MSHS service area, evaluate the relevance of services provided by the MSHS programs, and offer recommendations for MSHS service improvements. For the *MSHS Survey*, they could also yield valuable descriptions of the contexts of the programs, increasing accuracy of interpretation of interview responses. The community needs assessments focus on local assets, resources, and activities as well as gaps, barriers, or emerging needs.

Review of these system artifacts will explore the alignment between the recruitment and eligibility criteria of a local program and the identified community needs. Analyses would highlight both potentially promising practices and topical areas where additional training and technical assistance may improve programs' responsiveness to these needs.

6.2 Parent and Program Area Staff Focus Groups

Should ACF choose to pursue the suggested focus groups, they would be conducted with MSHS parents (six focus groups) and with MSHS program area staff (six focus groups). At ACF's discretion, these could easily be integrated with the work of the Measurement Substudy. Information gathered from these could assist in refining the details of the survey plan for other Survey options, such as possible parent and staff interview questions or procedures for working with families. It also may provide some decision-making insights for ACF relative to the use of the optional Survey Modules (see Chapter 14). Discussion topics could focus on the issues identified in Table 6.5 below.

Table 6.5 Summary of Proposed Parent and Component Manager Focus Group Topics

Focus Groups	Specific Topics That Could Be Targeted During Focus Groups
Strengths of the MSHS Program and prioritized topical areas	▪ Most important benefits of the program on children (e.g., learning, health, safety, development) ▪ Most important benefit of the program on families (e.g., employment, education, family literacy, support, services, etc.) ▪ Ways MSHS contributes to parents carrying out their roles as the primary nurturers and educators of their children ▪ MSHS program areas particularly promising in engaging and supporting parents and families ▪ Areas of early childhood education, health, family services, and community partnerships across programs
Barriers to service delivery	▪ Barriers to full parent participation in MSHS ▪ Barriers to going to MSHS in the next local community where they work (migrants only) ▪ Degree of barriers to accessing community resources (e.g. transportation, business hours, language, cost, legal)
Input on Parent and Staff Interview Items for Measurement Study	▪ Emotional, developmental, cultural, linguistic, educational, and health goals MSHS parents have for themselves and their children ▪ Parental values and perceptions around the use of home language and English, both for themselves and their children ▪ Sources of strength and resiliency that MSHS parents report as contributing to the well-being of their child and family ▪ Type and range of verbal and nonverbal communication, developmental learning activities, nurturance, warmth, discipline, and play that parents/families engage in with their children ▪ Manner in which parents provide learning experiences for their children outside of MSHS ▪ Experience in the Community ▪ Role of Mothers and Fathers in the Family and with the Children ▪ English Language Learner Instructional Practices
Input on Procedures for Parent and Staff Interviews in Classroom/ Family/Child Component	▪ Review invitational language to engage in father and mother interviews ▪ Preferred day, time, and location for interviewers to meet with parents ▪ Monthly call procedures and incentives ▪ Child and Family Enrollment Timeline and Procedures ▪ Survey Communication with Programs and Use of On-site coordinators ▪ Informed Consent Procedures

CHAPTER 7

RECRUITMENT, OUTREACH, AND DATA COLLECTION FOR THE PROGRAM/CENTER COMPONENT

Even with the most efficient and scientifically credible sampling plan and the selection of the most valid and reliable instruments, the success of the *MSHS Survey* will largely depend on the execution of those plans in the real world of MSHS. The practical plans outlined in this chapter are meant to achieve ACF's goal of implementing high-quality studies in the field. The details include plans for recruitment, outreach, and data collection for the various optional components. Featured strategies outlined include culturally-informed approaches for engaging migrant and seasonal families, development of bilingual materials to share with staff and families, and effective incentive programs. These plans also highlight the need to invest time and capital in building trusting relationships with MSHS programs, families, and communities to generate the local support that will facilitate the study's success.

Program/Center Component

National Survey of MSHS Program Operations

Site Visits or Telephone Calls to All Program Offices	• Program Director Interviews • Program Area Manager Interviews • Record Reviews
Telephone Calls to All Center Directors	• Center Director Interviews

7.1 Program/Center Component Staff

For any field study of MSHS, research staff working directly with the programs should be bilingual (Spanish/English), and knowledgeable about both the culture of the agricultural farmworker community and the details of the MSHS programs. When dealing directly with the MSHS community, the research team must not only communicate a pleasant and professional demeanor, but must also comfortably interact with the culture of MSHS communities–communicating respect, warmth, and inherent interest in others' well-being. To ensure that staff attain this range of needed knowledge and skills, all Survey staff could be trained extensively along any or all of these dimensions.

The following staff positions are suggested for inclusion in the interviews for the Program/Center Component:

- **Study Director** - responsible for overall scientific integrity of study.
- **Survey Coordinator** - main point of contact for Programs and Centers.
- **Senior Research Analysts** - task leaders/experts on onsite-data collection teams.
- **Onsite Coordinators (OSC)** - primary program contact recruiting parents/informing staff.

7.1.1 Study Director

The Study Director would have overall responsibility for the scientific integrity and conduct of the study. The Director will serve as the liaison between the Survey and OHS/Project Officer, oversee presentations and participation in consultant group, and be the primary face of the Survey.

7.1.2 Survey Coordinator

The Survey Coordinator's activities are distributed across all components of the Program/Center options. These activities could easily be reduced or adjusted, depending on which components of the *MSHS Survey* plan are implemented by ACF.

The Survey Coordinator[2] will act as the Survey Team's main point of contact for MSHS programs and work closely with the program contacts (i.e., onsite coordinators) at each site to schedule and coordinate the activities prior to and during the data collection visits. To encourage rapport and collaboration, one Survey Coordinator should be responsible for recruiting all 62 programs into the study. In this role, this important Survey Coordinator will be expected to ensure consistency in contacts, increase the comfort level of MSHS program staff (i.e., they get to know and trust the Survey Coordinator), and develop expert knowledge of all programs. Over the long-term, this will help the research team make informed decisions during data collection about strategies and problem-solving.

To address these responsibilities effectively, the Survey Coordinator must be bilingual and should have data collection experience, preferably on large, multisite studies. The Coordinator must be mature, with excellent communication and interpersonal skills, a clear speaking voice, and the ability to attend to details and act independently with sound judgment. Experience with Head Start programs, early childhood education, English Language Learners, and migrant farmworkers would be preferable.

The Survey Coordinator would:

- Establish and maintain contact with Program Directors at MSHS programs.
- Identify and train OSCs selected to serve as liaisons between the program and the survey team.
- Work closely with the Program Directors and OSCs to set an overall data collection schedule of visits at each of 62 programs over the four-month period.
- Design and coordinate the two-day site visit schedule, in collaboration with the OSC.
- Identify and assign bilingual Field Interviewers to each site visit team.
- Assist in the development of training materials and coordinate the logistics of the training session.
- Serve as a member of the training faculty.
- Provide recruitment and scheduling materials to the OSC to prepare for the data collection site visit (consent forms, promotional materials, scheduling guidelines, etc.).

[2] An additional Survey Coordinator should be added if the Classroom/Family/Child Component is fully implemented, as the complexity and challenges of the Survey would therefore expand substantially. At that point, it is suggested that each Coordinator be responsible for a subset of the programs selected for inclusion in those components.

- Supervise the collection of informed consent by the OSC—verify that all consent forms have been received prior to the visit.
- Prepare onsite data collection materials for site visit team (instruments, schedules, log sheets) and coordinate shipment of materials to the team while onsite.
- Brief data collection team on logistics of the visit prior to the visit.
- Ensure that all data collection is completed on time for each program, including makeup visits, as needed.
- Ensure the overall quality of data collection.
- Receive and log incoming data from the field.
- Supervise the telephone interviewing center and computer-assisted telephone interviews (CATI).

7.1.3 Senior Research Analysts

Senior Research Analysts would serve as task leaders/experts, assist in developing training protocols, and serve as senior members of the onsite data collection teams, if implemented by ACF. These senior analysts would also provide expertise in key areas such as or measurement, sampling, weighting, data analysis, data collection methodology, and data management.

7.1.4 On-Site Coordinators

As with the Study Coordinator, On-Site Coordinators (OSC) would be involved in all proposed components of the Program/Center Component. The responsibilities assigned could easily be reduced or adjusted, depending on which optional components of the *MSHS Survey* plan are implemented.

The Design Team suggests the use of a local MSHS program staff member to serve as an OSC for each program. If possible, the OSC would be paid a stipend for taking on study support activities in addition to their regular MSHS work. Primary Survey responsibility for the OSC would be as the liaison between the Survey Team and the MSHS program staff and families. If the proposed focus groups and measurement substudy are implemented by ACF during the Program/Center components, OSCs also would be the liaison with the MSHS families needed for those survey components. Additional tasks include arranging and expediting the logistics of the site visits, thereby reducing the burden placed on MSHS Directors and staff as the main point of contact for the Survey Team. The efforts of these liaisons are invaluable to maintaining the quality and efficiency of data collection efforts.

Many local Head Start staff served successfully as OSCs in past and current national studies of Head Start. ACF surveys of Head Start Directors from programs participating in *FACES* overwhelming endorsed the use of members of their staff as OSCs (ACF, 1998, 2001, 2004). Directors reported that the additional responsibility of serving as OSCs did not interfere with their regular Head Start duties, given that much of the work required of an OSC can be done after hours. Previous research work with MSHS (*MSHS Design Development Project*, 2004) confirmed that using a familiar staff member as the OSC was very important for working with these families, who often are wary of strangers, particularly those linked to the Federal government. An OSC "introduces" the Survey Team to the families and validates their trustworthiness and the overall importance of the *MSHS Survey*. OSCs also help the Survey Team develop relationships with program staff. The Survey Team would depend on each OSC to understand their own programs' administration and the particular challenges facing their programs and families. Having

this intimate and accurate knowledge is a tremendous help in ensuring that researchers understand the flexibility and sensitivity needed when collecting data at MSHS programs.

The ideal OSC is a MSHS staff member who works part-time and has some flexibility with his or her schedule; this ensures that study activities do not interfere with their usual work However, in past national surveys of Head Start, staff at all levels in Head Start served successfully as OSCs. For the Program/Center Component, OSCs would:

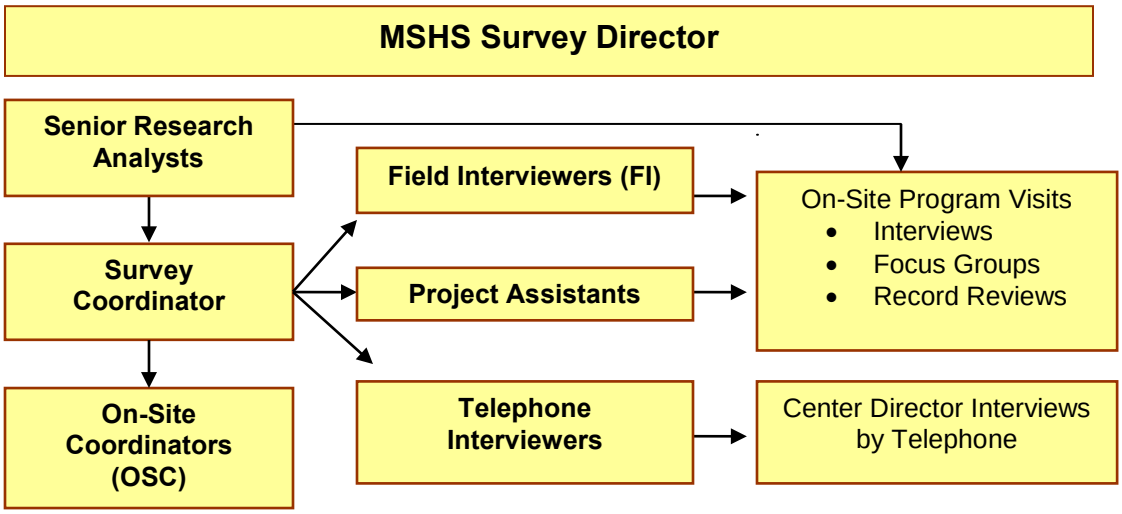
- Communicate frequently with *MSHS Survey* Coordinator via telephone and email.
- Promote MSHS staff interest and engagement in *MSHS Survey*.
- Serve as a liaison between local MSHS Staff and the *MSHS Survey* Team.
- Answer questions about the study from staff.
- Distribute study brochures, information packets, and compensatory gifts to participating MSHS staff.
- Show introductory DVD to staff, as necessary.
- Secure space at the program office for staff interviews.
- Schedule interviews with the designated staff and provide schedule to the Survey Coordinator.
- Provide directions and hotel recommendations for the Survey Team.
- Upon arrival, meet with Survey Team and introduce them to appropriate staff.
- Help the Survey Team access needed records such as community assessments, recruitment and eligibility guidelines, and waiting lists.
- [If measurement development work is pursued by ACF] Help recruit and schedule children, parents, and/or MSHS staff for interviews or assessments and arrange for space (if asked be available to the Survey Team during the site visit).
- [If focus groups are pursued by ACF] Help recruit and schedule 8-10 parents and 8-10 MSHS staff for focus groups and arrange for space; (if asked be available to the Survey Team during the site visit).

7.1.5 Project Assistants

Several project assistants will be needed for the duration of the Survey. These assistants would complete necessary clerical tasks, such as mailing notification packets, producing materials, cleaning and entering data, and supporting the work of the Project Coordinator, Study Director, and Senior Research Analysts.

Exhibit 7.1 presents the overall staffing structure and onsite data collection responsibilities indicated if site visit activities are pursued for the Program/Center Component data collection (described more fully below). Descriptions and responsibilities of field interviewers and telephone interviewers are provided in Section 7.5.

Exhibit 7.1 Recommended Staff Positions for Program/Center Recruitment and Data Collection



7.2 Establishing Cooperative Relationships with MSHS Program Staff and Families

The follow principles should guide the efforts of the *MSHS Survey* to establish the practitioner-research collaboration.

- *Always* treat staff, parents, and children with respect.
- Communicate with staff and parents in the language most comfortable for them.
- Include a local program staff member as part of the research team, as discussed above.
- Provide attractive, clearly written, and useful information to the program staff and families before the start of data collection activities.
- Seek ongoing feedback from staff and families about the process and incorporate that feedback into the research process.

7.2.1 Materials Development

Attractive and clearly developed materials will help inform the parents, program staff, and community stakeholders about the study, highlight the benefits for MSHS children and families, and detail the expectations for family and program participation. These could include a DVD that can be played for the parents by the OSC; overview brochures; a "Frequently Asked Questions and Answers" handouts; consent forms with letters of introduction; and promotional items such as key chains or magnets. The Design Team recommends that materials be developed during the start-up period for the Survey, prior to the start of the Program/Center Component. These materials, important for all options of the *MSHS Survey*, are described in further detail below.

First, it is important to discuss key features of the materials. All materials must have Spanish and English versions and be appropriate for the developing literacy skills of many MSHS parents. Whenever possible, photos of children or families included in the materials should reflect the faces of migrant and seasonal families, rather than "generic" Latino or ethnic families.

Promotional materials could be shared at parent meetings or during recruitment home visits by the OSCs, as well as with the MSHS Policy Council or the grantee Agency Board Chair. To ensure clarity and understanding, it would be important that the OSC (assigned to recruit families), reviews the Survey materials with each and every parent prior to enrollment in the Survey. Finally, the materials need to be clear and accurate about the activities that will be conducted and their purpose. This type of "no surprises" approach to informing all participants contributes to securing long term cooperation.

One critical possibility is that families may be reluctant to either sign consent forms or agree to participate for fear it may put them at risk for deportation. The materials must clearly state that information provided in the course of the study will not be reported to any agency, including the Immigration and Naturalization Service (INS). In order to be able to make definitive statements regarding confidentiality, it is recommended that the Survey Team obtain a Certificate of Confidentiality from the National Institutes of Health (NIH). These certificates are issued "to protect the privacy of research subjects by protecting investigators and institutions from being compelled to release information that could be used to identify subjects within a research project. Certificates of Confidentiality, issued to institutions or universities conducting research, allow the investigator and others who have access to research records to refuse to disclose identifying information in any civil, criminal, administrative, legislative, or other proceeding, whether at the Federal, State, or local level" (OER NIH Web site, 2008).

Many of the materials listed above are discussed in more detail below, and examples can be found in Appendices.

DVDs Introducing the Survey and the Research Team to Program Staff and Families. A DVD could be produced that describes the Survey and introduces the research team to program and center staff. Copies would be sent to programs prior to the Program/Center Component site visit. A second DVD, in Spanish, could be produced primarily for viewing by parents who are selected to participate in the Classroom/Family/Child research options (i.e., it could be shown at parent meetings to explain the Survey) but also used to recruit for the focus groups or measurement work for the Program/Center Components. The DVD could be played for individual parents to supplement written materials and ensure that they are fully informed prior to giving their consent. This video could also be made available on the Study Web site and downloaded as necessary by programs. To support the functionality of the recruitment DVD, a portable DVD player could be given to each participating center.

Study Brochures that Present the Purpose and Importance of the Study. These brochures should be geared to families, use simple and clear language, and provide information relevant for program staff and community stakeholders. Suggested content might include answers to the following questions:

- Who is sponsoring the Survey?
- Who will be involved?
- What is the importance of the Survey?
- What are the benefits of the Survey?
- What effort would be requested from participants?
- What are the incentives for participating (monetary and intrinsic)?

- To what extent is participation kept confidential?
- Who will be conducting the Survey?
- How to contact research staff with questions (A toll-free telephone number, Web site and email address).

Promotional materials also could be provided, such as the following:

- Study folders for staff to store study materials.
- Key chains with study contact information.
- Appointment and reminder postcards.
- Colorful and engaging calendars, magnets, and posters for the centers to remind staff and families about the Survey.

Consent Forms with Letters of Introduction to Families and Staff. Each parent recruited to participate in the Survey must receive and understand a clearly written letter of introduction and informed consent form. Both should be available in English and Spanish, and efforts should be made to translate the consent form and letter into any indigenous language represented in the parent population of a particular center, although this may not always be possible, because some indigenous languages are informal. In these cases, interpreters will be necessary so the parent is fully informed. The informed consent form should fully describe the research process, the parent and child roles, limits to confidentiality, and any risks or benefits involved. Lessons learned during the 2004 *MSHS Design Development Project* suggest that some parents may be reluctant to sign a consent form due to the wording related to mandatory reporting of potential child abuse to authorities, particularly parents who more recently arrived in the United States and thus had less experience living in this country. In addition, most Spanish-speaking parents did not read the consent form in its entirety, even when the document was in Spanish, and preferred to ask for a verbal explanation or brief summary of what they were about to sign. To ensure parent understanding, verbal explanation of the consent form should be mandatory.

Consent forms should be printed on three-part NCR forms (three carbon copies together) so the original signed forms can be kept by the Survey Team, with copies going to the families and the centers. As with the participating parents, MSHS staff responding to Survey questionnaires must also be fully informed about the research process, their protections, benefits, and risks in consenting to participate. Examples of parent and staff consent forms can be found in Appendix G.

Frequently Asked Questions & Answers (Q&As). This format of relaying information is often easier to understand than pages of descriptions and details. It will target the most frequently asked questions and provide easy-to-understand responses. Q&As developed for staff (e.g., teachers, directors, Component Managers, OSCs) provide information they can use to answer questions parents are likely to ask. Similar handouts have been used successfully as recruitment guides in many national studies of Head Start and Even Start (*FACES* 1997, 2000, 2003; *CLIO* 2005). Example Q&As for staff and parents can be found in Appendix H.

Soliciting Feedback from Program Staff, Families, and Community Representatives. Soliciting input regarding *Survey* procedures is not only important, it is smart. The project should be open to gathering feedback systematically throughout implementation, incorporating feedback and improving Survey efforts in a timely manner. Some of the best ideas for successful recruitment strategies for national Head Start studies have come directly from Head Start staff and families. The Design Team has already gathered preliminary feedback from the MSHS community about the best ways to approach and engage families (Chapter 3). The Team suggests maintaining ongoing communication between the research team and MSHS staff, both local and Federal, once the Survey is initiated.

Incentives. Providing incentives to programs and families is a respectful acknowledgement of the time they contribute and improves long-term relations with families and with programs. The MSHS Design team therefore suggests that incentives be part of the recruitment and support package for the Survey. Key considerations include the type of incentives (monetary or gifts); which respondent groups (children, families, programs) should receive incentives; and how to balance the cost with the expected benefit. For example, *The Survey of Early Head Start Programs* offered $20 gift cards for parents, while *FACES* compensated parents $25 for each interview, provided toys for each observed classroom, paid teachers $5 per child for completing ratings scales, and gave each assessed child a sticker. Programs and families reported being satisfied with both of these sets of incentives (ACF Director Survey, 1998; 2001; 2004). *The Head Start Impact Study* used a set of incentives similar to *FACES*. The *MSHS Design Development Study* (ACF, 2004) paid families $50 for a parent interview, TCR, and a child assessment, as well as a classroom gift.

A somewhat sensitive but key issue related directly to the study's success will be the level of comfort that the local program staff feels has with the incentives for families. To that end, the incentives must be tailored to be appropriate and adequate for MSHS families. Although the MSHS Community Consultants reviewed and supported the recommended incentives listed below, they also suggested thinking "outside the box" and going beyond typical incentives. For example, if ACF decides to pursue the Classroom/Family/Child Components plan in its entirety, the majority of participating parents would have to be interviewed in the evenings or weekends due to working long hours in the fields. The Consultants suggested providing dinner for the respondents and their families at the centers to encourage parents to come for evening interview appointments. This strategy has been used successfully by many MSHS centers to increase participation in parent meetings and activities. However, care must be taken to ensure that all incentive activities conform with HHS regulations (i.e., seeking contracting office approval prior to accruing food costs).

The following is a list of suggested incentives for the *MSHS Survey*:

Program/Center Component:

- $5 canvas tote bags with *MSHS Surv*ey logo for staff.
- $25 for parents who participate in focus groups.
- $50-100 per center for dinner and babysitting services during focus groups.
- $25 for parents participating in Measurement Substudy.

- $2 to $3 cloth books or sturdy cardboard books appropriate for toddlers and preschoolers participating in Measurement Substudy.
- Portable DVD player for programs selected to participate in the focus groups or the Measurement Substudy.

Classroom/Family/Child Component:

- $25 cash for primary care provider interview (generally mother).
- $10 cash for secondary care provider interview (generally father).
- $2 to $3 cloth books or sturdy cardboard books that are appropriate for infants, toddlers, and preschoolers for each assessed child.
- $25 gift card or educational materials for classroom participation.
- $5 per child to teachers for completing behavior ratings of participating children in their classrooms.
- $5 canvas tote bags with *MSHS Survey* logo for staff.
- $50-100 per center for preparing dinner during evening interview sessions (dependent on numbers of families selected for interviews), if allowable under the contract.
- Portable DVD player for each center.

7.3 Suggested Initial Program Recruitment Activities

7.3.1 MSHS Branch Program Specialist Calls

The support of the MSHS Program Branch will be invaluable during recruitment. For example, keeping the four MSHS Branch Program Specialists, who each are responsible for a set of MSHS programs and their administrative oversight, informed during the initial steps in the Survey process and discussing Survey activities with them prior to contacting programs would facilitate a smooth recruitment process. This is particularly useful, since local programs occasionally call their Specialists to verify the legitimacy of a survey. Problem-solving ahead of time about potential barriers with the Program Specialists would also be beneficial to the research team and foster the use of carefully tailored approaches. Program Specialists, each of whom supports a group of MSHS grantees, can sometimes provide key insights that may help minimize challenges or barriers to program participation. Program Specialists also can identify programs that are seriously deficient and currently focused on addressing program and service compliance issues; these programs would not be expected to take part in the national Survey components.

7.3.2 Notification Packets

Through outreach efforts, the MSHS program community may receive initial word about the upcoming Survey in informal ways. However, the Design Team recommends that all Program Directors officially be notified of their participation by sending a packet of information via tracked overnight delivery, such as USPS Express, Federal Express, or UPS. Mailings sent in this manner convey their importance and distinguish them from promotional mailings and provide a record of delivery and receipt. Letters of support from the Office of Head Start (OHS) and the MSHS Program Branch also are viewed as important recruitment tools. Therefore, the Design Team suggests the cover letter for this packet be an official notification letter, co-signed by the Director of the OHS and the MSHS Branch Chief. This letter would welcome the programs to the Survey and stress the importance of participation, while noting the overall benefits

of the survey to MSHS programs and families. The letter also should specifically indicate the Survey implementation activities in which their program will participate (see Appendix I). Head Start programs are usually very willing to participate in a national study when it is endorsed officially by the OHS. For example, virtually 100% of the programs approached were recruited successfully through all cohorts of *FACES*. When discussed with MSHS Staff and Parent Consultants, they also indicated that this recruitment approach would be appropriate.

In addition to the notification letter from the OHS and the MSHS Program Branch, the notification packet should contain multiple copies of an attractive, eye-catching study brochure that would help inform the program staff about the *MSHS Survey*. As noted above, this brochure should highlight the objectives and importance of the study, the benefits of participation for MSHS programs, and the expectations for family and program participation. A toll-free telephone number and email address should be provided. The Design Team also suggests a letter of support from the National Migrant and Seasonal Head Start Association (NMSHSA), the parent advocacy organization for the MSHS programs, be included in the notification packet. This endorsement may ease concerns and questions raised by the programs about the intent of the Survey.

Because MSHS programs are relatively new to national studies, letters and brochures most likely would not be sufficient for establishing effective collaborative research partnerships with the MSHS programs. Experiences reported during previous surveys of MSHS suggest that there is also a critical need to use culturally-anchored approaches through direct interpersonal communication with MSHS program staff and families (ACF, 2004). However, the cost would be prohibitive for ACF to send staff out to each center to talk with all staff and family prior to recruitment. To this end, as discussed above, the Design Team suggests the creation of a video that could be made available online or via DVD to be viewed by staff and families at centers, prior to the initial call for center-level data collection.

7.3.3 Initial Contact Call to Programs

The initial recruitment call not only secures the programs' agreement to participate, but should be used to set a positive first impression and tone for subsequent conversations which will build relationships that are key for long-term collaboration and project success. The initial call by the Survey Coordinator should be placed to each MSHS Program Director within a week of sending the notification packet described above. This will give each Director time to read the letter and materials, discuss the *MSHS Survey* with colleagues or Program Specialists, or call the survey information toll-free telephone number and ask questions. The purpose of the initial call is to verify the receipt of the packet, answer any questions the Director may have, describe the survey, and talk about next steps.

The Survey Coordinator should stress the importance of the role that programs play in the survey's success. Not only should the coordinator secure the Director's cooperation, but he or she should strive to make the programs an integral part of the Survey Team by offering clear, detailed and accurate information regarding the study and opening communication lines for future questions. Beyond rapport building with the Program Director, the Survey Coordinator should verify information about the program and begin to plan for the first site visit, to be conducted as part of Parent/Child Component.

Preparation for the Call. In preparation for the initial recruitment call, the Survey Coordinator should review specific information about the local program. This would include basic program data from the national Head Start Program Information Report (PIR) such as program enrollment numbers by program options; ages, ethnicity, race and language of children; and funding auspice (e.g., school system, non-profit organization); as well as information on performance indicators and community assessments. Having an informed Survey Coordinator conveys to the Program Director that the research team takes this program's participation in the Survey seriously and cares enough to have some understanding of its operations. In a more practical sense, it saves time and effort, as the Program Director will not be expected to provide this basic information about his/her program.

It is suggested that the Survey Team develop a call guide or introductory script for use by the Survey Coordinator. Guides help the Coordinator remember all the details to cover in the discussion, while emphasizing the use of a conversational tone. The script should include guidelines for discussing the following, depending on which options of the Survey are implemented.

- **Introduction and Verification of Receipt of Notification Packet.**
- **Purpose of the Survey**. Why is it important? Who is sponsoring it? What are the goals?
- **Expectations for Programs.** Description of data collection sources (staff interviewed, children assessed, classrooms observed, records accessed); who will visit the program (how many, their training and experience), what is the timeline (when data collection will begin, how long the team will be on site), what is needed to prepare (center and class lists, recruiting parents, access to records, such as attendance and community needs assessments if participating in the Classroom/Family/Child Components).
- **Incentives.** Descriptions of what will be provided to programs, staff, classrooms, families, and children to thank them for their participation.
- **Verification of Program Operations.** How many centers are in the program? Review of centers' peak operational periods and anticipated start and end dates. Contact information for each center.
- **Use of an On-Site Coordinator (OSC).** Outline job responsibilities for a program staff member chosen to serve as a liaison between the research team and the program; identify ideal candidates (part-time staff with connection to families); discuss benefits of using an OSC to both the program and families.
- **Scheduling an On-Site Visit.** For the Program/Center Component of the Survey, coordinate the best time for the program onsite visit and data collection.

Steps after Initial Call to Program Directors. All recruitment and data collection tasks are being presented as if the entire set of Program/Center Components would be pursued. However, if ACF decide to implement only parts of the Program/Center Components, the recruitment and data collection activities could be reduced or adapted accordingly.

After the Program Director call is completed, the Survey Coordinator should follow-up with a second mailing of materials to review information discussed on the call. This should include job descriptions for OSCs as well as forms and instructions to gather initial information about centers to facilitate later calls with the Center Directors. The Design Team recommends, if possible, that preliminary data be collected via a Web-based entry system for an online database. To reduce the burden on programs to provide this information, a user-friendly database could be

pre-populated with fields (names of centers, addresses, names of center directors) so data can be confirmed or edited easily. Other information required (such as expected enrollment numbers and start/end dates) would then be entered in additional fields. Examples of the types of information that would be appropriate to collect by this method can be found in Appendix J. If a program or center does not have access to the Web, alternate forms should be provided on which the program can enter the requested information.

Once an OSC has been identified by the MSHS Program Director during the notification call, the Survey Coordinator should interview the nominated OSC by telephone. The goal of this call is to explain the job description in detail (Appendix K) to ensure the OSC understands the responsibilities and commitment required. The need to maintain confidentiality for staff and family comfort will be discussed. If agreement is reached, the OSC should sign a letter of understanding confirming his/her knowledge of the responsibilities, as well as a pledge of confidentiality (Appendix L).

Many of these recommendations, made for initial contact, establishment of rapport, and maintaining communication, are labor intensive for research teams (Table 7.1); they require a large investment of both time and capital (i.e., rather than limiting contact to just prior to data collection). The benefits, in terms of increased cooperation of the MSHS Branch and the local program staff and the corresponding rise in parent participation, should directly improve the overall success of the *MSHS Survey*. Developing and maintaining good relations will be key.

Table 7.1 Summary of Recruitment Activities

Task	Related Activities
Material Development	• Develop Study Brochures • Develop Consent Forms and Letters of Introduction • Develop Frequently Asked Questions and Answers (Q&A) • Record DVD Introducing Survey and Team • Develop Promotional Materials (Study Folders, Posters, Magnets)
Program Notification of Selection	• Send Letter from OHS and MSHS Branch • Letter of Support From NMSHSA
Initial Recruitment Call to Program Director	• Invite and Confirm Participation • Initiate Collaboration • Provide Survey Details • Discuss Benefits and Expectations • Answer Questions • Confirm Program Information • Identify a Candidate to Serve as On-Site Coordinator • Schedule First On-Site Visit Date
Follow-up Mailing to Program Director	• Send Thank You Letter for Participation • Provide Contact Information • Provide Job Description for On-Site Coordinator • Include Instructions for Web-Based Data Entry System

Exhibit 7.2 provides a summary of the recruitment and outreach strategies suggested by the Design Team.

Table 7.2 Illustrative One-Month Program Site Visit Schedule

				Onsite		Onsite
Month	**Week**	**Team**	**#Programs Surveyed**	**Mon/Tues**	**Wed**	**Thurs/Fri**
August	Week 1	Team 1 Team 2	4	Program 1	Travel	Program 2
				Program 3	Travel	Program 4
	Week 2	Team 3 Team 4	4	Program 5	Travel	Program 6
				Program 7	Travel	Program 8
	Week 3	Team 5 Team 6	4	Program 9	Travel	Program 10
				Program 11	Travel	Program 12
	Week 4	Team 1 Team 2	4	Program 13	Travel	Program 14
				Program 15	Travel	Program 16

7.4 Site Vsits for Program/Center Component

If ACF decides to implement data collection from each MSHS program, the program site visits should occur soon after the recruitment call. Well-planned site visits help elicit high rates of co-operation and a smooth and efficient data collection. The Survey plan includes two-day site visits to each MSHS program, conducted by a two-member survey team (a senior-level Research Analyst and a locally-hired bilingual Field Interviewer). As presented in Table 7.2, each survey team could visit two programs per week, for five weeks, spread out over a four-month period. The Design Team suggests six core survey teams to reduce the overall burden of travel on research staff during the data collection period.

Table 7.2 above illustrates how staffing the visits might be accomplished. The teams would continue to rotate for the four month duration, allowing the onsite data collection at 60 programs to be completed efficiently in four months (while accounting for holidays) with approximately six teams.

It should be noted that most of the program-level information for the Program/Center Component could be gathered via telephone, as is recommended for the gathering of the center-level information. Implementing this telephone-only methodology would reduce the cost of the Survey significantly; however, what would be lost is important outreach and rapport-building with the MSHS Community, which has long felt neglected. The ability to lay the groundwork for trusting relationships, long-term cooperation and collaboration, and teamwork should not be minimized.

7.5 Site Visitors

7.5.1 Site Visit Data Collection Team: Senior Research Analysts

Senior members of the research team should lead the on-site data collection activities. This might include the Senior Research Analysts who oversee the conduct of the study and are experienced in quantitative and qualitative research methods. These Research Analysts would conduct the interviews with Program Directors and Program Area Managers. Spanish fluency is a preferred skill among the Senior Research Analysts (given the recommended methodology). However, the Design Team suggests that multilingual fluency need not be mandatory for these

Analysts except for visits to programs where focus groups or the Measurement Substudy are conducted.

7.5.2 Site Visit Data Collection Team: Field Interviewers

The Design Team recommends the use of professional, locally-hired bilingual Field Interviewers (preferably with prior experience conducting interviews at Head Start) to serve as the second member of the two-person survey team. While it is doubtful that professional Field Interviewers will have previous experience working specifically with MSHS, there is a cadre of national, bilingual interviewers with years of experience working on large national studies of regional Head Start (i.e., *FACES*, EHS, *Head Start Impact Study*). Their understanding of Head Start provides a strong foundation for their training for the *MSHS Survey*. Hiring professional data collectors enhances the ability to gather high quality data beyond that possible with a one-person team, at minimal additional cost, while drawing on the experience and skills of this national pool of talented interviewers.

When selecting field staff, the following factors should be given primary consideration:

- **Previous Experience** - Interviewers with high performance ratings on other national child development studies and good recommendations.
- **Location** – For cost efficiency, interviewers who live near the sample sites should be hired. Local interviewers often have greater chances of building rapport by identifying local interests shared with the sampled respondents.
- **Available Hours** – Interviewers able to devote the hours required per week and to be available during a variety of hours, i.e., daytime, evenings, and weekends.
- **Language Skills** – Interviewers who are bilingual in Spanish and English *must* be selected.
- **Cultural Competency** – Experience with or an understanding of working with the migrant farmworker community or key characteristics (Latino/Mexican, immigrants, rural, poverty) is strongly recommended. Consideration should be given to hiring former MSHS staff or parents with appropriate qualifications.
- **Work with Young Children and Families –** Interviewers who have experience working with young children and families, particularly those from disadvantaged backgrounds, would be favored. While children would not be assessed during the Program/Center Components of the survey, it is helpful for the interviewer to understand working with children when interviewing staff or assisting with parent focus groups.
- **Notetaking Skills –** Interviewers who demonstrate competent writing skills and an ability to take notes during focus groups.
- **General Personality Traits** – Although there is no fully reliable personality profile, certain traits and aptitudes are particularly useful. Individuals with an eye for detail, a gregarious nature, a concern for children and their parents, and the ability to work with little supervision are particularly valuable.
- **Transportation and Ability to Travel** – A valid driver's license and a willingness to travel are critical to working on the Survey, including a comfort level working in rural areas.

The Design Team estimates four Field Interviewers (to be used across six teams) will be minimally necessary for the 16-week data collection period. For the proposed methodology, the in-

terviewers would work the following schedules: Two interviewers work 2 weeks/1 week off; two interviewers work 1 week/2 weeks off. In this way, a set of Field Interviewers is always in the field while allowing for rest periods for the alternative team.

7.6 Training

7.6.1 Site Visit Staff Training

If the Program/ Center Components of the data collection plan are implemented by ACF, preliminary activities should include a 3- or 4-day group training session. (This could be shortened if fewer components of the Survey plan are implemented). Senior Research Analysts members should develop a comprehensive training manual for each member of the field team, covering all aspects of the study, including key background information and readings on MSHS and agricultural communities; the Survey research questions; all measures to be used in the Program/Center Components; and schedules for the Program/Center Component site visit teams. The manual should include detailed instructions or guidelines for completing tasks, standards for acceptable performance, and a discussion of quality control. The training should ensure that site visitors have a common understanding of the site visit objectives, the information to be obtained, and the methods for collecting the data. The training should include a review of each of the protocols to be used in the field and incorporate roleplay and practice with the instruments. Training should also include the following:

- Overview of MSHS programs and the purpose of the study.
- Review of the intent of each question.
- Discussion and instruction on the use of "probes."
- Instructions on how to maintain neutrality and avoid bias.
- What to do when respondents are hesitant to handle certain questions.
- Suggestions on how to handle special circumstances such as lack of adequate time or less than ideal environments.

In addition, instruction on the professional conduct required for working with staff and families at the MSHS program should be included. Professional conduct is multifaceted and extremely important. It is essential that the site visit run smoothly and that the visitors/interviewers are both culturally competent and respectful to individuals. The expression "first impressions last" is very true, and the impression the Team creates in the field is crucial to the overall success of this Survey. These would be the first members of the *MSHS Survey* Team that the MSHS staff and parents meet.

Finally, because confidentiality of respondent data is of great concern, all site visitors should be instructed in confidentiality procedures that ensure all interviews, response sheets, and/or audiotapes are kept confidential at all times and there cannot be any unauthorized discussion, disclosure, dissemination, or access to any research data. All site visitors must be required to sign a confidentiality pledge.

7.6.2 Training Onsite Coordinator (OSCs)

A clearly written training manual with step-by-step guidance for completing the responsibilities for the OSCs should be created, mailed to, and discussed with OSCs via telephone by the Survey Coordinator, and posted on the Survey Web site for reference.

7.7 Types of Data Collection: Scheduling and Other Logistics

The Design Plan includes data collection through a variety of optional methods to obtain accurate, reliable information on the full spectrum of MSHS with practical limitations on effort. Table 7.3 presents the types of data collection and respondents, length of time for each activity, and mode of interviewing suggested. As often as possible, data should be collected from multiple sources using varied data collection approaches. Possible sources include in-person interviews with key informants such as Program Directors and Program Area Managers; telephone interviews with Center Directors; and record reviews of community assessments, recruitment and eligibility criteria, and waiting lists. Additionally, if implemented by ACF, focus groups with MSHS parents and staff will be conducted in six randomly selected programs (one program per sampling strata—see Chapter 5). Detailed descriptions of the approaches for each data collection activity are provided in subsequent sections.

Table 7.3 The Program/Center Component Data Collection Plan

Data Collection Activity	N	Estimated Length of time	Mode of Data Collection
Program Director Interviews	62	.75 hours	In-Person Interview
Component Manager Interviews[3] Child Development & Education Health Services Family & Community Partnerships Disability Services	 62 62 62 62	 .75 hours .75 hours .75 hours .75 hours	 In-Person Interview In-Person Interview In-Person Interview In-Person Interview
Center Director Interviews	420	1 hour	Telephone Interview
Record Reviews Program Community Assessments Recruitment and Eligibility Guidelines Waiting Lists	 62 62 62	8 hours	Abstraction Form[4]
Focus Groups in Selected Programs Parents (12 per group) Staff (12 per group)	 6 6	 1 hour 1 hour	 Focus Group Focus Group

Table 7.4 displays an example of the approximated details of a 2-day schedule using a two-person site visit team. On day 1, the Senior Research Analyst and the Field Interviewer conduct interviews with the Program Director and three of the four Component Managers[5], if possible. Record reviews also begin. The second day of the visit is dedicated to completing any remaining key interviews, as well as completing the record reviews. While it may be possible to com-

[3] The PIR uses the following titles to describe Component Managers: Child Development & Education Managers, Health Services Managers, Family & Community Partnerships Managers, and Disability Services Managers. However, the use of these titles may vary across programs. Managers may also be referred to as component coordinators, content coordinators, content specialists, or program area directors. For the purpose of this report, PIR titles will be used. In addition, there are often not distinct people or full-time staff in these roles within a program.

[4] Forms should be created to facilitate abstraction of data from program records in a uniform manner across all programs.

[5] The typical number of Area Managers is four per program, although this will vary and schedules must be adjusted as required.

plete the tasks in Table 7.5 with only one staff member, all data collection activities are more likely to be successful and of higher quality with two staff members. For example, if only one person is present, it would be significantly more difficult to be flexible and accommodating to the schedules of program staff. Further, some programs are quite large and will necessitate more time for record reviews. The added costs of a second visitor are small relative to the benefits, to the amount and improved quality of the data, and to ensuring that each program is captured adequately in the data collection approach.

Table 7.4 Illustrative Schedule for Two-Person, 2-Day Site Visit - No Focus Groups

Day	Time	Person A: Senior Research Analyst	Person B: Field Interviewer
Day 1	AM	2 interviews: Director and/or Area Manager (2)	2 interviews: Director and/or Area managers (2)
	PM	1 interview: Director and/or Area Manager	Record Reviews
Day 2	AM	Record reviews	Record Reviews
	PM	Record reviews (for large programs) or travel to home	Record Reviews (for large programs) or travel to home

In turn, Table 7.5 displays an example of a typical 2-day/two-person visit to a program that includes focus groups. On day 1, the Senior Research Analyst and the Field Interviewer conduct interviews with the Program Director and Area Managers, if possible. In the afternoon or evening, both members of the survey team prepare for and conduct a focus group of MSHS staff. The second day of the visit would be dedicated to completing any remaining key informant interviews, as well as conducting the record reviews and conducting a focus group with MSHS parents.

Table 7.5 Illustrative Schedule for Two-Person, 2-Day Site Visit with Focus Groups

Day	Time	Person A: Senior Research Analyst	Person B: Field Interviewer
Day 1	AM	Key informant interviews (2)	Key informant interviews (2)
	PM	Focus group (staff)/Record Review	Focus group (staff)/Record Review
Day 2	AM	Key informant interviews (1) Record Reviews	Record Reviews
	PM	Focus group (parents)/ Record Review	Focus group (parents)/ Record Review

7.7.1 Program Director and Component Manager Interviews

Information needed to describe and document the operations of MSHS programs would come from interviews with key informants including Program Directors and Component Managers. Before participating in the interviews, the MSHS staff should have received information packets, provided by the Survey Coordinator and distributed by the OSC. These packets should explain why they are being interviewed, what will happen to the information they provide, how long the interview will take, and previews of any questions that may require them to look up information ahead of time.

The interviews, which should be scheduled by the OSC, should last no more than 45 minutes and be conducted in a private area so staff is able to provide honest answers. The process would be structured interviews with a few open-ended questions, providing the opportunity for detailed discussion of key topics. Prior to the start of the interview, the site visitor should be well-prepared, have all the materials necessary (questionnaire, pens, response cards), and check that the arranged location is suitable for the interview to take place (e.g., quiet with no interruptions).

The site visitors should break the ice with a little friendly chat about the center, the children, and thanking each staff person for his/her time to help make the respondent comfortable and establish a rapport. The Survey Team member also should be aware that their body language is important. For example, a smile goes a long way in making the respondent feel comfortable with the situation and establishing a positive interaction. While it is important to make the interviewee feel comfortable, it also is important not to be too casual in demeanor and approach. Respect for the interviewee's time and role in MSHS should be demonstrated consistently, for both professional and cultural reasons. This is established by standardized professional behavior, such as addressing the staff people with their last names (for example: Ms. Rodriguez), unless directed otherwise, and mentioning the value that their opinions bring to the study.

Prior to any formal questions, the site visitors should explain that the interview will remain confidential. While administering the survey, the site visitor should avoid "approving" phrases that could indicate that there are right/wrong answers to the interview (i.e.,"yes," "that's right," or "absolutely"). However, attentive responses indicating interest and accurate recording (such as "Okay," and "Thank you, that was helpful," "That was clear," or repeating back a little of what was said) assure the interviewees that they have been heard and understood. This feedback is a key tool for building rapport with respondents without directing or shaping their responses. Finally, for fixed-choice response questions with Likert-like response scales, cards on which the response categories are displayed should be used for ease of administration.

7.7.2 Parent and Program Area Manager Focus Groups

Focus groups could be conducted with MSHS parents (six groups) and MSHS program area staff (six groups) that build upon the knowledge gathered via discussion with the Design Project's MSHS Community Consultant Group. Discussion topics might focus on (but are not limited to) the following issues:

- Strengths of the MSHS Program and specific program challenges.
- Barriers to service delivery.
- Changes in the needs of MSHS programs and families.
- Input on procedures for parent and staff interviews in the Classroom/Family/Child level of the Survey activities.
- Input on parent and staff interview items for the Measurement Substudy, if implemented.

One focus group of each type (parent and managerial staff) would be conducted at each of the programs. As noted in Chapter 5, the Design Team recommends that these six programs be drawn from the six main geographic areas in an attempt to be more representative of the MSHS community and increase the generalizability of the findings. Focus group participants would

be selected with the assistance of the OSC, who would manage parent and staff recruitment for focus groups and logistics (e.g., finding space, arranging for snacks or meals). Parent focus groups would be conducted in Spanish. Managerial staff focus groups would be conducted in English, if possible, to reduce the costs for translating focus group data for analysis. However, in the *MSHS Design Development Study* (ACF, 2004), all teachers asked to complete the teacher interview in Spanish. *The required language skills of the site visitors will be determined prior to scheduling the focus groups for managerial staff.*

Focus groups should be held at a non-threatening location that is easily accessible for the participants. This would be particularly important for the parent focus groups. The OSC should arrange for a room at the MSHS program or a nearby MSHS center. If such a space is not available, the OSC could help identify another local site (e.g., church, community center, or library) that can be used. The space selected should provide a sense of privacy for the group, so participants feel comfortable expressing honest responses to the questions.

Each focus group should include up to 12 parents or 12 staff members. Groups larger than this can result in fragmentation and distractions, as well as inhibit the flow of the conversation. On the other hand, focus groups should not be conducted with fewer than four participants, in order to ensure an active discussion and the opportunity to gather a variety of opinions.

A bilingual, senior member of the survey team, who has experience conducting focus groups with similar populations, should lead each focus group. The Field Interviewer would serve as a notetaker, responsible for capturing the key comments of each participant, as well as the general feel or attitude of the discussion, including non-verbal cues. Each focus group should last approximately 60 minutes and be audio taped so that a complete and permanent record of the discussion can be available for analyses.

7.7.3 Record Reviews

Administrative records, such as community assessments, recruitment and enrollment eligibility criteria, and waiting lists for enrollment, are useful for understanding the context of MSHS operations. The primary purposes of the MSHS programs' community assessments are to identify the resources and needs of the local community serving MSHS, to evaluate the relevance of the services provided by MSHS, and to make recommendations for service improvements. Community assessments focus on local assets, resources, and activities as well as gaps in resources; barriers to accessing resources or assets; and the identification of new, emerging needs that will need to be addressed. As one part of the effort to meet their mandate of responsiveness to community needs, individual MSHS programs establish eligibility criteria for entry into their program with corresponding outreach and recruitment strategies that identify families meeting these criteria. These eligibility criteria and outreach efforts typically reflect the unique characteristics of each particular community being served. Finally, understanding characteristics of families that are assigned to waiting lists provides information on the depth of the need for Head Start services in a particular community, while potentially prompting local programs to re-evaluate the established eligibility criteria for their programs.

The Design Team recommends gathering these data through record reviews. A standard data abstraction form for transforming the record review information into quantifiable data (see Chapter 6) would be created prior to program visits. If time is limited, the survey team could

request copies of the community assessments for abstraction after the visit. Eligibility criteria and details from a current waiting list, however, would most likely have to be abstracted onsite.

7.7.4 Center Director Interviews

The Design Team is recommending full interviews with each Center Director, although ACF could choose to limit these interviews to collect only the data necessary for establishing the sampling frame for the Classroom/Family/Child Component data collection activities. The Team also recommends that the approximately 420 center director interviews be administered via telephone immediately after the site visit is completed at their grantee/delegate agency program. While it would be instructive to visit each center to conduct in-person interviews with the Directors, the large number of centers makes this cost prohibitive. Using mail or on-line surveys would be less costly. Mail surveys are relatively inexpensive to administer, require minimal staff and facilities, and provide time for respondents to give thoughtful answers, look up records, or consult with others. Web-based surveys also have advantages, as responses can be collected quickly, data entered directly, and the survey easily modified, if needed. However, compared to these other survey modes, telephone surveys offer a number of advantages that are important for interviewing MSHS Center Directors:

- They provide more personal access to a widely dispersed sample that may not have easy access to the Internet.
- A longer, more complex questionnaire can be used.
- Interviewers can probe for more information or clarification about inconsistent responses.
- Telephone interviews generate higher and quicker response rates than mail or Web-based surveys.

An advance letter to the Center Director, explaining the purpose of the Survey and describing the information needed (a "look-up list"), should be sent prior to the call, soon after the completion of their program's on-site visit. The "look-up" list would allow the respondent to gather specific background information relative to the types of questions that would be asked. This is particularly helpful when Center Directors have to reference records or other staff to answer questions (e.g., about their staff training activities over the past year or an estimate of the number and types of families [short-term, migrant, or seasonal expected]).

One week after the letter is sent, calling to the centers would begin. As described in Chapter 6, the Center Director interview would last approximately one hour. Professional telephone interviewers using CATI software will conduct the interviews. For CATI surveys, questions are programmed into a computer, and interviewers enter answers to questions directly into a computerized data file as the interview occurs. CATI surveys have three additional main benefits: (1) they can be customized to provide prompts based on previous answers and to use complicated skip patterns, (2) the potential for missing data is reduced, and (3) additional data entry is not required later, minimizing data errors and labor costs.

It is estimated that this effort could be completed with two part-time, day-time telephone interviewers across the expected 16-20 weeks of interviewing. The Survey Coordinator could occasionally assist and serve as the backup if conflicts in scheduling arise. As the interviewers would be required to each conduct 210 interviews over a four- to five-month period, solid train-

ing and quality control monitoring would be essential. For example, silent monitoring of at least 20% of the interviews and simultaneous data entry into the CATI database is recommended.

CHAPTER 8

DATA ANALYSIS FOR THE PROGRAM/CENTER COMPONENT

The analyses for the Program/Center Component of the Survey would be driven by the primary program-level research questions selected for the *MSHS Survey* project. For ease of discussion, the analysis plan will be described for all proposed options. Generally, the analyses plan involves mixed methods (qualitative and quantitative) approaches including, of course, the descriptive statistics such as means, medians, frequency distributions, and cross-tabulations to provide a comprehensive description of the characteristics of MSHS programs, centers, and managerial staff. Relational analyses considering the associations between variables also are proposed. In addition, qualitative data, such as focus group data, would be coded and analyzed to provide more in-depth answers and context to the research questions.

Program/Center Component

National Survey of MSHS Program Operations

Site Visits or Telephone Calls to All Program Offices	• Program Director Interviews • Program Area Manager Interviews • Record Reviews
Telephone Calls to All Center Directors	• Center Director Interviews

Ultimately, mixed methods analytic approaches rely upon triangulating data from multiple sources using multiple methods to address adequately each research question of interest. The ultimate goal of these analyses is to answer the two objectives of the Program/Center Component:

- Describe program operations and services across the universe of all MSHS programs, documenting up-to-date information and compiling an overall picture that includes a level of details previously not provided to MSHS.
- Identify variations in program operations, both within and across programs.

This chapter provides an overview of the types of data analyses recommended to describe the programs, centers, and program-level staff, including illustrations of the types of data to be analyzed and reported for the various levels of program operations. This chapter also contains proposed analyses of the focus group data and the Measurement Substudy.

8.1 Data Preparation Procedures

Prior to beginning analyses, preparation of the data must occur. Standard data preparation procedures are described briefly below.

Label Variables and Values. Every variable in every data set, original and newly created, should be labeled fully. This will involve attaching a meaningful description of each variable,

so that each variable is readily identifiable. In addition, each value for a given variable should be labeled.

Code Missing Data. There are two types of missing data that can arise in a survey, even after repeated attempts to collect data. *Unit non-response* occurs when an entire data instrument is not received by the final data management team. *Item non-response* is the situation where an instrument is completed but one or more items on the instrument are left blank or missing. Unit non-response must be given important consideration for the *MSHS Survey*, particularly when generalizability is a concern. It is possible that the proportion of such missing data may be significantly high for the MSHS population, given their high mobility and the wide variability in programs.

Unit non-response can be accounted for by adjusting the sampling weights at each stage for non-response. In many cases, missing item values can be replaced by logical imputations of answers estimated using other data collected in a given program or site, as well as on data from a given case. This approach is superior to leaving cases simply as missing data, because it has been demonstrated to result in biased and/or inefficient estimates, larger estimated standard errors, and greater likelihood of indefinite sample covariance matrices (e.g., Brown, 1994; Little and Rubin, 1987). The logical imputations for adjusting the sampling weights should be made cautiously and fully documented in the data set so they can be easily identified as imputed data. Although this may be the optimal solution, there are some cases in which there will be no obvious way to impute a response.

For item non-response when completing descriptive analyses, the Design Team recommends the following approaches be used when encountering missing data. If there is more than 2% of missing data for a particular item, "missing" should be treated as a category response. If there are fewer than 2% of missing items, assume they are distributed randomly. The presentation of results in such cases should indicate that "no item was missing for more than 2% of the respondents." For relational analyses, the presentation of results should note the amount of missing data on the outcome variable. With regard to item non-response for explanatory variables in regression models, a "hot deck" imputation method is recommended for consideration. This approach is utilized in many multilevel modeling programs to replace missing values. In such cases, a dummy variable for "missing data" on each affected item should be utilized in the model to determine any potential bias of imputing the missing data in the model (Cohen & Cohen, 1983). The utilization of such imputation approaches will increase the validity of the Survey results.

Create Composite Variables. Some analyses will require the creation of new variables from one or more questionnaire items. Most of the composite variables are likely to be treated as continuous variables and are estimated using regressions. If data reduction methods are used, composite variables will be included. Data reduction methods review the set of responses across participants and analyze whether the associations between the responses are statistically strong enough to allow them to be compiled into one scale; if this can be done, many questions can be calculated into one score and thereby greatly simplify further analyses. Large scale efforts, such as the *MSHS Survey*, demand careful attention to reducing data, wherever possible, in a manner that upholds the psychometric properties of extant scales. Factor analyses, both exploratory and confirmatory, will be applied to assess whether scale and subscale structures of

instruments used in the study are in fact supported by the data. At a minimum, instruments expected to have subscales should be examined to confirm that the structures of the scale(s) are sound, and instruments should be assessed for adequate internal consistency. Given the population of interest, factor analyses also will be a valuable analytic approach, particularly with continuous data, to identify new constructs or latent variables of interest for further analysis. These efforts will enhance the parsimony and internal validity of the analyses but also will be critical in the sound development of any new variables to be analyzed.

For example, a research question about potential barriers to parent involvement may yield a series of responses, some of which are more related to one another than others. There may be more pragmatic responses from staff (such as transportation and time issues) while others may be more about internal characteristics (such as parent interest or knowledge). The interrelationships between the responses can be examined using factor analyses. For this example, evidence from the factor analyses might indicate that the responses statistically fall into two categories, such as *pragmatic barriers* and *internal characteristic barriers*. Such composite measures can not only boost statistical reliability but ensure that all variables can be measured on a continuous, interval-level scale. This improves the accuracy of the estimates and allows for a wider variety of follow-up analyses (i.e., modeling).

Create Analysis Files. Once the individual variables are cleaned and new variables are calculated, smaller and more manageable analysis files should be created. This will involve extracting only those variables that will be needed for the analyses. It is likely that multiple analysis files will be created to address each set of research questions at the appropriate level of analysis.

8.2.1 Achieving the Analytic Objectives for Programmatic Data

At this juncture, it is helpful to step through the descriptive analytic procedures using one example from the series of research questions: What are the procedures used by MSHS programs to identify children and families?

After the data in response to this question are prepared for analysis, frequency counts and graphs would be generated to see the numbers and percentages of programs that report each specific strategy used to recruit children and families. This would yield data indicating, in this hypothetical example, that 31 (or 50% of) programs visited migrant camps as a recruitment method.

Next, programs report the use of multiple strategies for recruitment. Frequencies will be calculated as the sum of different strategies reported by each program. Additionally, descriptive statistics such as means and standard deviations could be used to identify the average types of approaches used ("On average, MSHS programs utilize six different strategies to recruit children and families. However, there is a wide range of variability across the country (SD=7).").

To continue with this example, composite variables or subscales could be created if responses to some items are interrelated more than to other items. For example, programs may use various forms of verbal communication (such as agency presentations, migrant camp visits), as well as various forms of print communication (such as flyers, newspaper ads). If factor analysis supports the creation of composite variables (for example, one composite variable for *verbal communication* and one for *print communication*), then these would be created. Following this step, the

composite data would be analyzed with frequencies to identify the number of and percentage of programs that utilize one type of communication approach versus another.

Another analytic step is to use inferential statistics to examine the variations in recruitment efforts across programs. For example, t-tests may be utilized to examine whether there is a difference in the *number* of recruitment strategies needed to be used by downstream vs. upstream programs. Further, chi-square analysis may be applied to examine whether certain *patterns* of recruitment strategies (e.g., flyers, trips to migrant camps) are differentially reported between upstream and downstream programs. Similar types of inferential analyses may be utilized to examine other variations among programs.

Again, this example only serves to highlight the varying types of analyses that might be used for the Program/Center Component. Please note that the hypothetical "results" presented were created for illustrative purposes only.

8.3 Focus Group Analyses

As noted earlier, if all the Program and Center options are implemented, the data would also include qualitative data from focus groups. Analyzing focus group data demands a rigorous process to ensure conclusions are valid and reliable. One approach to qualitative data analyses involves integrating data from focus groups using program-level site reports and analytic meetings (e.g., Pollio, Graves, & Arfken, 2006). This approach necessitates: (1) well-defined study variables to ensure the comparability of cross-site data; (2) development of site reports according to a standardized format to inform cross-site analyses; and (3) the reduction of data so that clear descriptive and relational analyses can be conducted.

Program-Level Site Reports. Qualitative data analyses are iterative processes. Following each focus group, audiotapes of the focus group discussions should be transcribed, edited, and supplemented with the notetaker's affective or intuitive insights. Using data from the final versions of the transcripts, a member of the research team that conducted the focus group prepares a structured formatted report. Structured reporting formats are standardized question-and-answer reports in which researchers provide rich descriptive information about their focus group by answering questions using evidence from the various respondents as well as from observations. A second member of the research team should review the transcripts with the corresponding site report to ensure the reliability of the site report and to aid in bias recognition.

Analytic Meetings and Approach. Researchers with expertise in MSHS, the agricultural community, young children and families, and both qualitative and quantitative analysis should be involved in analytic meetings that examine cross-site results. Using these various approaches, emergent themes, based on the empirically derived findings and supported by the data, can be identified and used to facilitate interpretation and explanation building. Key summative quotes or text segments could be selected to represent the findings for use in later cross-site descriptive summaries within national reports. This also prepares and refines the qualitative data for use in descriptive and relational analyses across sites. In addition, analytic meetings could be used to bring a range of informed perspectives to preliminary findings and emergent themes highlighted in program-level site reports.

One data reduction technique to consider in anticipation of analytic meetings is *Pattern Matching*, which involves presenting the findings by site for each of the focus group questions. Data display tables for each question could be created to quantify the results. These numerically-based tables, which list all the responses reported in each focus group, aid in the identification of similar and dissimilar events, and can be used to answer the following questions in order to establish cross-site summative findings:

- What was the range or distribution of responses?
- What was the modal or typical response?
- Were there relational differences across sites based on factors such as geographic region, size of program, or periods of operation?

The analytic work also might be supported by using qualitative software such as NVivo or Atlas.ti (Cleverbridge, 2005; QSR International, 2008). For qualitative studies with multiple focus groups, this type of software increases the efficiency of summarizing issues and themes across sites by storing, organizing, and sorting information from each site report in an electronic format in one central location. However, given the nature of the data collected in these focus groups, it may not be as beneficial in this study given the length of time such software require for data entry. These considerations should be evaluated when finalizing the plans for the actual implementation of the focus groups.

Chapter 9

MSHS Measurement Substudy

Few early childhood and family measures have undergone extensive development and use with bilingual populations, much less migrant ones (Barrueco & Lopez, 2007). Although later chapters in this report review measurement selection in some detail (see Chapter 11), it is probable that both the Survey format and the questions themselves would be improved with preliminary development and examination in the field with MSHS parents, staff and administrators. Rather than simply selecting measures and questions for the final set of recommended measures without feedback or analysis, it may be critical to first carefully explore which measures and questions work most appropriately, efficiently and effectively in capturing the development of MSHS children, families, and programs.

Program/Center Component

Measurement Substudy (Development and Feasibility)

Site Visits to Six MSHS Programs

- Focus Groups of Parents & Staff
- Infant/Toddler/Preschool Child Assessments
- Parent/ Staff Interviews

In consideration of this possibility, the Design Team proposes an option for a Measurement Substudy that would incorporate, build upon, and extend prior MSHS research design efforts (ACF, 1999a; 1999b; 2004). This Substudy would examine the appropriateness, strength, and feasibility of various methodologies for measuring migrant child, parent, and teacher skills and perspectives on language, literacy, and socioemotional development as well as instructional practices in early childhood development. In particular, this Substudy could target developing and strengthening the *Survey*.

These measurement methodologies would include short assessments with children and parents, as well as questionnaires, interviews, and focus groups with parents, teachers, and program staff.

Depending on the questions considered, the Measurement Substudy would be expected to:

- Reduce the length and increase the ease of the survey administration
- Reduce the potential biases in questions/assessments
- Verify the links between questions asked and policy and program priorities
- Ensure the cultural appropriateness of the questions and the interpretation of findings
- Validate selected measures with item and factor analyses
- Minimize redundancy, burden, and cost
- Maximize the acceptability of measures and methods to MSHS parents, staff, and administrators

This optional Substudy may include limited pilot testing of some or all of the recommended

measures on a targeted convenience sample of MSHS programs, classrooms, children, and families. The study would have three main goals, which may vary in priority at the time of implementation:

1. Test the appropriateness and feasibility of direct child assessments and parent interviews, building upon and expanding the work from the previous related studies (including the 2004 *MSHS Research Design Development Project,* which was restricted in the scope of the piloting of measures with infants and toddlers; ACF, 2004).

2. Update and test the feasibility of program-level data collection measures (with teachers, directors, center coordinators, program-level specialists, etc.), including not just programmatic data on staffing, curriculum, and other services, but also information on processes such as outreach and recruitment of families and coordination of community services. This would be particularly relevant, as the most recent large-scale research effort targeting MSHS programmatic efforts was conducted over 10 years ago, before seasonal farmworkers were eligible to be served by MSHS (ACF, 1999a).

3. Test the feasibility of collecting and analyzing important community level data (e.g., availability and composition of the service delivery landscape).

During the Program/Center Component, a purposive program sample would be selected to include a mix of programs from different regions (drawing programs from across the three major migratory streams) and "upstream" vs. "downstream" program representation. In each of the selected programs, depending on the specific measurement questions identified, data could be collected via direct administration of child assessments, ratings from children's teachers, interviews with children's parents, and classroom observations, as well as through interviews or focus groups with teachers, program staff, relevant component coordinators, and the program director. In order to reduce any impediment to the representativeness of the *MSHS Survey*, it is recommended that data collection be conducted across participating programs at only one point in time.

The in-depth review of measures, conducted as part of the base proposal of the MSHS Design Project (see Chapter 11), yielded a targeted pool of recommended measures that appear most appropriate for the children and families served by MSHS, as well as for the programs themselves. For recommended measures that were noted for needing additional evaluation for use with migrant families and children, a range of psychometric analyses could be applied. These would examine the cultural, linguistic, and statistical appropriateness of individual items and measures, and the findings, in combination with information presented in the measurement review (Chapter 11). The result would be to define a final group of recommended measures and methods approved by ACF for the national *MSHS Survey*. Below is a more detailed description of a proposed study design, data collection plan, and related data analytic work for the optional Measurement Substudy. We begin by describing specific research questions that could be addressed by the proposed study. In the sections that follow, we describe a potential sample design and the methodology for selecting the sample of centers, children, and families; the sources of data; and how the resulting data may be analyzed.

9.1 Research Questions

The Measurement Substudy could pursue a qualitative focus, a quantitative one, or some combination of these two approaches, depending on the respondents and the measures being evaluated. Under a qualitative focus, a researcher could ask follow-up questions regarding the acceptability and interpretation of items from the perspective of parents and staff members. This often involves focus groups or cognitive interviews, although the application of rating scales also has been helpful in this regard. On the other hand, if a more quantitative focus is placed on the research questions and activities, the Measurement Substudy could be comprehensive in scope, gathering formal data from relatively large numbers of participants to examine how the individual items and measures function from a psychometric perspective. In practice, a mix of both qualitative and quantitative foci in the Measurement Substudy likely would be most beneficial to the MSHS Survey, since the ultimate goal is to arrive at a set of culturally- and linguistically-appropriate measures that also are psychometrically vigorous.

In addition, a number of translation and adaptation guidelines also are available to be assessed. For example, Bravo's (2003) guidelines for examining the cultural and linguistic characteristics of measures has been used in previous reviews of bilingual measures (Barrueco, López, Ong, & Lozano, under review). Within Bravo's cross-cultural assessment framework, key questions that would be answered through qualitative-focused research questions include:

- Content Equivalence of Items and Measure: Are the domains and items appropriate for the population?
- Semantic Equivalence of Translations: Do the Spanish and English versions maintain the same meaning? How about across Spanish dialects?

In turn, Bravo also notes that quantitative approaches are essential in examining and developing psychometrically solid measures across language (Bravo, 2003). Specific questions that must be answered by the quantitative analyses include the following:

- Technical Equivalence in Reliability: How solid are the reliability statistics for the Spanish and English versions of the measures? How similar are the versions?
- Technical Equivalence in Validity: How solid are the validity statistics for the Spanish and English versions of the measures? How similar are the versions?

These questions were applied by the Design Team to guide the selection of the measures presented in Chapter 11. However, it is apparent that some new measures would benefit from the inclusion in a Measurement Substudy, as they appear very promising but require more evaluation. These are described in the exhibits that come later in this chapter. Specific subquestions targeted for these measures may include:

- What are the reliability, validity, and acceptability of potential staff and parent measures that seek to identify goals, values, and expectations of MSHS families and programs?
    - How are the psychometric characteristics of the measures (and/or individual items), pilot-tested with the MSHS parents and staff, similar to and different from the characteristics found in other large-scale studies of Head Start? What are the

implications of this for implementing each measure (or set of items) as part of the *MSHS Survey*?

  - What is the validity of reports regarding the availability of and access to the community resources that Head Start programs use to meet the needs of MSHS children and their families? What are community attitudes towards participating in the MSHS Survey?

- What are the reliability and validity of measures of child development in a culturally and linguistically diverse group of MSHS children, many whom are English Language Learners with varying levels of English proficiency?

  - What are the reliability, validity, and linguistic and cultural appropriateness of direct assessments of children's school readiness across all five domains assessed (cognitive/general knowledge, language, approaches to learning, social-emotional development, and motor development)? Are there appropriate instruments available for use, or is there a need for the MSHS Survey to facilitate the further development of new measures?

  - What are the reliability and validity of parent ratings of children's behavior and development? What measurement adaptations (e.g., shortening the number of items, adapting the cultural and linguistic appropriateness of the wording of individual items, etc.) can be made to obtain the most reliable and valid information from culturally and linguistically diverse parents about children's social-emotional development and their approaches to learning?

  - What are the reliability and validity of teacher ratings of children's behavior? Which measures of social-emotional competence, problem behaviors, and approaches to learning are most acceptable to, or considered most valid by, teachers in describing the children in their classrooms? What measurement adaptations (e.g., shortening the number of items, adapting the cultural and linguistic appropriateness of the wording of individual items, etc.) can be made to obtain the most reliable and valid information?

  - How are the psychometric characteristics of the measures (and individual items) pilot-tested with the MSHS population similar to and different from the characteristics found in other large-scale studies of Head Start? What are the implications of this for implementing each measure (or set of items) as part of the *Survey*?

- What interrelationships are found among common items across the child assessments, the parent interviews, the teacher reports, and/or the classroom observations? What are the implications for the final selection of measures, if multiple sources are shown to be tapping similar constructs?

9.2 Sampling Plan for the Measurement Substudy

There are several ways to approach the design of a Measurement Substudy. One option is to undertake a full-scale feasibility study that would yield the most information possible on the full range of different measures and items, as well as study procedures. While this is optimal scientifically, it carries financial and time implications, mainly due to the larger sample size requirements (which could require several hundred children, depending upon the characteristics, currently available psychometrics, and related requirements of the measure[s] being assessed). Similarly, a large sample definitely would be required, given the three distinct age groups within MSHS that would require independent samples due to the differences in children's developmental levels and the respective measures used. A second option is to strike a balance between cost and the ability to examine the logistical issues and a reasonable range of psychometric analyses to guide final decision-making regarding the selection of the best set of measures for the *Survey*. The proposed Measurement Substudy is focused more on the latter approach, balancing out costs against the ability to obtain enough psychometric information on the various measures under consideration.

Given the nature of the research questions that would likely guide the proposed Measurement Substudy (primarily focused on the properties and functioning of measures), a representative sample is not required. For studying the reliability, validity, and the cultural and developmental appropriateness of measures, it is most important to have a sample that includes variability across some of the key dimensions of the MSHS program and the population served, such as geographic regions. Inclusion of children representing the three age groups served by MSHS should depend on whether the measures being evaluated link to each age group.

As such, the MSHS Design Team again suggests the following sampling stages to ensure a mix of programs across the three major migratory streams: 1) East to West, 2) upstream vs. downstream, and 3) representation of the three age groups served in MSHS programs. For the Substudy, sampling procedures were designed such that findings are more generalizable, the cumulative burden is reduced for any one program, and Survey travel costs are minimized.

9.2.1 Stage 1: Selection of a Sample of Programs

In each of the six strata (geographic regions that roughly correspond to the northern versus southern half of the country, as well as the western, middle west and eastern sections of the country), list all programs[6] that 1) are NOT selected for other MSHS Survey activities, and 2) have two or more centers currently open and serving children, and which are located within 30 miles from the program office (to mitigate travel costs). Randomly select one program per strata (which, as noted above, are based on geographic region).

[6] The 2006-07 PIR reports separate data on 23 grantees and 37 delegate agencies in operation for a total of 62 programs. While two of the 62 programs do not directly serve children (and are not included in the sampling frame for the CFCC), they should be included in the administrative data collection suggested as part of the Program/ Center Component as they administratively oversee delegate agencies which directly provide services to children and families and would provide valuable information.

9.2.2 Stage 2: Selection of Centers within Six Selected Programs

In each selected program, list all centers within the program that are currently open and serving children and located within 30 miles from the program office. Randomly select one or two centers (depending on enrollment numbers) to participate in the Measurement Substudy.

9.2.3 Stage 3: Selection of Students within Selected Centers

In each selected center, list children by each main age group (infants, toddlers, and preschoolers) and randomly select from that list the number of children required for an adequate sample. The specific sample sizes will be determined based on the number, types and characteristics of the various measures being tested.

In a situation where ACF chooses to evaluate measures that address children (or parents of children) from each of the three age groups, the goal would be to have at least 120 children from each age group, for a total sample of 360 children across all participating programs. Based on the expectation of being able to recruit an average of three classrooms per center (with each center containing at least one participating classroom each for the infants, toddlers, and preschool aged children), we would target the recruitment of 34 classrooms, across approximately 12 centers.

9.3 Child Assessments

The child assessment measures suggested for consideration in the Measurement Substudy were reviewed and met one or more of the following criteria requiring additional follow-up work:

- Promising, but has not been used with a population comparable to the children served in MSHS programs
- May be too long and would benefit from efforts to try and develop shorter versions or subscales that maintain similar psychometric properties
- Has more than one measure per domain/construct was promising (these alternatives are listed as well)
- Has been used in a paper and pencil format (parent-report measures), but may need to be tested via an interview format due to the language and literacy considerations of the MSHS population

The list of measures presented in Table 9.1 for infants and toddlers and Table 9.2 for preschool age children represent some of the measures which are being recommended for the *MSHS Survey* (see Chapter 11 for a detailed review). However, as noted in several of the descriptions, our understanding of these measures would be improved by further examination and analysis through the proposed Measurement Substudy, as well as by solicitation of additional feedback from parents, MSHS program staff, and research experts. In addition to evaluating a set of recommended measures, a number of potential measures could be evaluated to assess their viability as appropriate future alternatives. These additional data not only would contribute to informed measurement selection for the *Survey*, but may help identify measures that are promising for the field.

Table 9.1 Suggested Infant & Toddler Measures for the Measurement Substudy

Infants & Toddlers (0-3 years)		
Measure		**Alternative Measure (when indicated)**
Parent Report		
Ages & Stages (ASQ-3)	OR	Minnesota Infant Development Inventory-MIDI
MacArthur-Bates CDI/IDHC - short form (for children > 12 months)		-
BITSEA (only for children > 12 months)	OR	Ages & Stages-SE (ASQ-SE)
Teacher ratings		
Ages & Stages (ASQ-3)		-
MacArthur-Bates CDI/IDHC - short form (for children > 12 months)		-

Table 9.2 Suggested Preschool Measures for the Measurement Substudy

Preschoolers (3-5)		
Direct Child Assessment		
Measure		**Alternative Measure (when indicated)**
EOWPVT-SBE (conceptually scored) (for 4-5 yr olds only)		-
Woodcock-Munoz - Problemas Aplicadas	OR	ECLS-B Math (conceptually scored)
Parent-report		
MacArthur-Bates CDI - short forms (for 3 yr olds only)		-
Preschool Kindergarten Behavior Scales–2 (PKBS-2) – *adapted*		-
Teacher ratings		
MacArthur-Bates CDI - short forms (for 3 yr olds only)		-
Preschool Kindergarten Behavior Scales–2 (PKBS-2)		-
Preschool Learning Behaviors Scale - PLBS	OR	ECLS-K Approaches to Learning

9.4 Parent Interviews

Given the potential number of children in the Substudy, we would assume there would be an opportunity for up to 360 parent interviews, potentially followed by focus group(s) of parents at each center. However, the actual number of parents needed likely would be lower, depending on several factors, most importantly the questions/measures being evaluated. Keeping in mind that the proposed number of children was based on involving children from all three age groups represented in MSHS, the number of parent required would likely depend on how questions are linked to the age of the children. We understand that some families will have multiple children in the selected centers, but this should be seen as an opportunity to learn more about the measures as well as the response burden placed on parents.

As described in the Chapter 11, there are particular measures that are quite promising for use in the *MSHS Survey* and, thus, could benefit from specific examination in a Measurement Substudy. These specific measures are listed in Table 9.3 (for more description and discussion about each individual measure, please see Chapter 11):

Table 9.3: Suggested Parent Measures for the Measurement Substudy

Parent Measures		
Measure		**Alternative Measure**
Domain 1: Home and Family Environment: Social Support (Mother and Father report)		
Multidimensional Scale of Perceived Social Support (Zimet et al., 1988)	OR	Developing Strong Migrant Families Resiliency Scale (Barrueco, 2007) OR ACF Social support questions (FACES, 2006)
Domain 2: Culturally-Related Activities and Routines: Family Activities (Mother report)		
Questions from 2004 MSHS Design and Development study, ECLS-B and FACES 2006	AND/ OR	Items or subscales from Taylor's (2000) **Familia Scale**
Domain 3: Culturally-Related Activities and Routines: General Parenting Approach (<u>Mother and Father report</u> with parents of children that are at least two years of age)		
Short form of **Block's Childrearing Practices Report** (1965) used in ECLS-B		
Domain 4: Culturally-Related Activities and Routines/Cultural Experiences and Processes: Cultural values (<u>Mother and Father report</u>)		
Mexican Cultural Values (Gamble & Modry-Mandell, 2008)		
Domain 5: MSHS Characteristics & Child Characteristics: MSHS Experience (<u>Mother report</u>)		
Validity of following questions from 2004 MSHS Design and Development study: Approximately how long has [CHILD] gone to any Migrant and Seasonal Head Start program—how		

many months or years altogether? When did [MSHS CHILD] start attending this Migrant and Seasonal Head Start Center?		
Domain 6: Family Characteristics: Farmworker Stress (Mother and Father report)		
Migrant Farmworker Stress Inventory (MFWSI, Hovey, 2000)		

9.5 Further Potential Details of the Measurement Substudy Design

9.5.1 Classrooms Observations

The primary goal of classroom observation activities within the Measurement Substudy would be to assess the different options for best capturing the types of important instructional practices which have been examined in prior research with classrooms containing linguistically diverse children (August & Shanahan, 2006; Genesee, Lindholm-Leary, Saunders, & Christian, 2006). For example: What is the proportion of home language use versus English for instructional activities? Do teachers provide targeted support for English language vocabulary development? What instructional accommodations do teachers use to help support English language learners when instructed in English, etc.?

Approximately 34 classrooms would be recruited across 12 centers (14 infant, 10 toddler, and 10 preschool age classrooms). Classroom observations (evaluating instruments appropriate for the age group of each classroom), along with some overlapping measures, may be conducted in each of the selected classrooms. These classroom observations would be supplemented with self-reported information collected from teachers on their use of ELL instructional practices in the classroom.

9.5.2 Program Staff Interviews

It would be important to gather feedback from the range of key MSHS program staff, particularly as it is our desire that the *MSHS Survey* be able to describe the comprehensive array of services that MSHS programs provide to the families they serve. Staff interviews would include up to 34 teacher interviews, 34 assistant teacher interviews, 12 Center Director interviews, 36 Coordinator interviews (e.g., Health, ECE, FSC, etc.), and 6-10 Family Service Worker interviews (e.g., family services, early childhood education, community outreach, etc.). Teachers and assistant teachers also would be asked to participate in focus groups about their respective interviews and the *MSHS Survey* methods and questions.

9.5.3 Administrative Record Reviews (Program level)

Following our past experience with record reviews and based on the records of interest as determined by the Design Team, ACF, and the Expert Consultants, we suggest accessing records in each of the centers, either by reviewing hard copies of files, or working with MSHS staff to access electronic records. This information would help determine the availability and completeness of information that may be of interest to ACF and if a standardized data collection form could be created for later use.

9.5.4 Community Data Review

For each of the participating programs we recommend collecting a copy of the community assessment. This should provide information on the context of the program population as well as the services available in the local community. Through discussions with program staff, methods for approaching community measurements and a follow-up set of interview questions regarding the community-MSHS relationship could be developed during the Measurement Substudy.

9.5.5 Data Collection Procedures

It is anticipated that only 80%-90% of invited families would participate in the *MSHS Survey*. This would be due to effects of migration, scheduling difficulties, and voluntary decisions not to participate. Efforts would be made to engage all families, including addressing transportation, meal, location, childcare, time, and compensation considerations, as would be done in a larger study (see Chapter 12).

Children. Assessments of the children whose parents had given consent to participate in the study would take no longer than 30 minutes. Children would be asked for verbal assent and would be able to discontinue participation at any time. The first 5 minutes would be spent playing or talking with the child to solidify rapport and to help the child become accustomed to the assessor. Breaks would be allowed for children who become restless or fatigued. In addition to administering the age appropriate set of measures selected for the Measurement Substudy, the assessors would take notes describing how the children responded to the various assessment tasks, including how comfortable they were with the various tasks when presented in English versus Spanish. Following completion of the assessment sessions, children would receive a gift (e.g., a book) to thank them for their participation. If the sessions are audiotaped, safeguards must be in place to ensure confidentiality.

Parents. In a pilot test of the methods expected to be used for the larger Survey, the parents would be invited to meet with the interviewer at the center or the parents' home, depending on parental preference. They would be invited through a flyer sent home with their children (in Spanish and English) and verbally invited by the staff to participate. The MSHS staff would be trained in presenting the study—including its voluntary and confidential nature. Since many MSHS children are transported by bus to the centers, staff accompanying the children on buses will likely need training in facilitating implementation of this protocol. Interested parents would be assisted in signing up for a date and time to participate in parent interviews (likely in the evenings or weekends).

At the beginning of the parent interview, a study team member would distribute two copies of the consent form to each of the participants. The consent forms would be made available in Spanish and English. The bilingual study team member would read the contents of the consent forms as the parents read their own copy. The study would be fully described and discussed, and all questions would be answered. The study team member would assure each of the parents that their decision would not affect the services that they are receiving currently or in the future at the MSHS program. Parents would be told that they can skip questions or withdraw whenever they elect. They subsequently would be asked if they would like to participate.

Each parent interview and follow-up would last no longer than one hour. As part of the process, we would administer the questions of interest, followed by cognitive interviews to fine-

tune the wording of items that are potentially problematic for parents of various cultural and language backgrounds. If we learn that parents misinterpret the intent of the items (for example, interpreting a social skill as a problem behavior), we suggest considering potential modifications to the wording to obtain a rating that best reflects the intent of the question. During this process, the ordering of measures should be counterbalanced across participants. Each participant should be offered an incentive (e.g., $20) for their time. If the interviews are audio-taped, appropriate safeguards should be in place to ensure confidentiality.

In addition, a random subsample of the parents who participated in the interview could be invited to participate in a separate set of focus groups. This will provide a group context for parents to discuss the items and procedures with one another and focus group leaders. Such groups can be particularly fruitful in providing ideas for any revisions to items or questions.

Staff. Staff interviews would be administered in private spaces at the convenience of the respondents. Informed consent would be collected prior to the start. Following the completion of all the Classroom Teacher and Assistant Teacher interviews, the respondents would be invited to join a one-time focus group at their center during their lunch hour. They would be invited at the end of the interview, as well as verbally by the Center Director. When the Classroom Teachers and Assistant Teachers arrive for the focus group, the study team member would distribute two copies of the consent form to each of the participants. Each teacher focus group would last no longer than 1.5 hours and likely would be comprised of two to four Classroom Teachers and Assistant Teachers. If all the participants speak (or prefer to speak) Spanish, the focus group likely would be conducted in Spanish. However, English would be utilized in cases where not all staff are Spanish speaking. The discussion questions would center on reviewing questions about their training, classrooms, and other key aspects of the MSHS program operations. At the end of the discussion, they would be invited to complete a questionnaire regarding present classroom language, literacy, and socioemotional practices, as well as their educational background. Each participant would be offered an incentive (e.g., $15) for their time. As focus groups typically are audio-taped, appropriate safeguards must be in place to ensure confidentiality.

9.6 Data Analyses

As discussed above, while much attention and effort has been dedicated to identifying and selecting the most promising measures for the *MSHS Survey*, this Substudy is recommended to provide an opportunity for a final examination of selected measures that could benefit from further analyses before determining if and how they are to be used. The analyses for the Measurement Substudy incorporates qualitative and quantitative approaches that match the methodology suggested for arriving at a set of culturally- and linguistically-appropriate measures that are psychometrically vigorous as well.

9.6.1 Qualitative Analyses: Cognitive Interview/Focus Groups

An important component of the Measurement Substudy will be examination of the respondents' opinions and observations about the questions that were posed to them. A primary purpose of the cognitive interviews and focus groups would be to investigate how well questions function: Do respondents understand the question correctly and can they provide accurate answers? Do they appear culturally and linguistically appropriate? Cognitive testing helps en-

sure that a survey question or assessment item captures the intent of the question and, at the same time, makes sense to respondents. Questions that are misunderstood by respondents or that are difficult to answer can be improved prior to fielding the survey or assessment, thereby improving the overall quality of data. Additionally, once respondent data has been collected, cognitive testing results can provide useful information for users by documenting potential sources of response error as well as providing a richer understanding of the type of data that has been collected.

In evaluating a question's performance, cognitive testing examines the question-response process (a process that can be conceptualized by four stages: comprehension, retrieval, judgment, and response) and considers the degree of difficulty respondents experience as they formulate a response to the question. In each of the four stages, various types of response errors can occur (Tourangeau, 1984). Table 9.4 outlines some of those problems.

Table 9.4: Cognitive Model of Question-Response

Cognitive Stage		Definition	Response Errors/ Question Problems
Stage 1	Comprehension	Respondent interprets question	Unknown terms, Ambiguous concepts, Long and overly complex
Stage 2	Retrieval	Respondent searches memory for relevant information	Recall difficulty
Stage 3	Judgment	Respondent evaluates and/or estimates response	Biased or sensitive, Estimation difficulty
Stage 4	Response	Respondent provides information in the format requested	Incomplete response options

Typically, cognitive testing is performed by conducting in-depth, semi-structured interviews with a small number of respondents similar to those targeted in the survey. The interviews are designed to elicit respondents' thought processes when answering the tested question; specifically, how they understood a question and how they arrived at their answer. Analysis of qualitative data from cognitive interviews can indicate the sources of potential response error, as well as various interpretations of the question. A comparative analysis of cognitive interviews is likely to identify patterns of error and patterns of interpretation across groups of people. This type of analysis is especially useful when examining the comparability of measures, for example, between countries (migrant streams) or between social classes.

A similar approach can be used to examine the data stemming from the parent and staff focus groups. In addition, the analytic approach described in the previous chapter (Chapter 8) also applies to the Measurement Substudy.

With respect to the administrative records and the community assessments, separate summaries should be generated for all the available data. Careful attention should be given to noting the differences across programs in the availability of data, the format in which data are provided, and what the data actually represent. ACF should use these summaries to determine if there is enough reliability in particular data items and sources from one MSHS program to another to warrant further collection of reports and assessments during subsequent phases of the Survey.

9.4.2 Quantitative Analyses: Psychometric Analysis of Measures, including Item Response Theory (IRT)

While qualitative analyses are needed to examine content and semantic equivalence, quantitative approaches are essential for examining and developing psychometrically solid measures across languages (Bravo, 2003). As described above, reliability and validity are essential features of any measure. Since many measurements are being conducted in Spanish and less research has generally been conducted in this area, it is an area that should not be overlooked in this work.

The data analyses for the Substudy will likely include the following:

- Descriptive statistics from all sets of instruments, including frequencies, means and measures of variability, and comparisons of mean scores across subgroups of interest.
- Psychometric statistics of measures by examining internal consistency, inter-rater reliability, convergent and divergent validity, and differential item functioning (DIF) of instrument items for different subgroups of children.
- Bivariate comparisons of children's performance by subgroups (program-level and child-level).

The descriptive analysis would provide information about average performance of the MSHS children participating in the Substudy. Descriptive analysis can consist of calculating total scores, where appropriate, for all assessments. Recommendations include calculating standard scores—where possible—for all assessments (that is, following standard scoring procedures prescribed by each test publisher), and calculating modified scores that omit any items exhibiting DIF (Camilli & Shepard, 1994; Holland & Wainer, 1993). For measures that do not have standard scores, item response theory (IRT)/Rasch modeling is required to compute total and/or subscale scores (e.g., Embretson & Reise, 2000; Hambleton & Swaminathan, 1985; Van der Linden & Hambleton, 1997).

Psychometric analyses will provide information about the reliability and concurrent validity (convergent and divergent) of the measures included in the Substudy assessment battery. The DIF analyses will plot item difficulty curves for subgroups, and statistical tests will identify whether these curves differ significantly for any particular subgroup of children. Taken together, these approaches will further guide the recommendations about which assessments would be most appropriate for the MSHS population.

Given that one of these methods, Item Response Theory (IRT) or Rasch modeling, can be particularly confusing to understand at first, a more detailed description is provided. The IRT approach to factor analysis is a statistical technique that is applied after data (often dichotomous) have been collected, in order to determine the association between an individual's response to survey questions) and an underlying latent trait that is measured by the items. For multi-item scales, IRT models provide a clear picture of the performance of each item (or question) in the scale and how the scale functions overall at measuring the construct of interest.

IRT is especially appropriate for addressing the increasing need for psychometrically-sound measures in the ELL field. IRT use has increased considerably in other fields because of its utility in item and scale analysis, scale scoring, instrument linking, and adaptive testing. IRT also is

being applied in social science research to develop new measures or improve existing measures, to investigate group differences in item and scale functioning, to equate scales, and to develop computerized adaptive tests. The results of IRT analysis can be used to determine whether scale items are appropriate for measuring a particular trait, how well items in the scale cluster or "hang together" and characterize the continuum of the underlying construct, and how strongly each of the items is connected to the underlying construct. Finally, IRT methods can lead to short reliable questionnaires that are tailored to the response patterns of the population of interest (Reeve & Mâsse, 2004).

Taken in total, the analyses of the Measurement Substudy data could result in ACF having the results of the field testing and development of child assessments, parent or staff interview questions and ratings, and classroom observation tools, allowing the agency to make sound judgements about the final measures to receive full implementation in the field during the subsequent portions of the *MSHS Survey*.

DESIGN FOR MIGRANT AND SEASONAL HEAD START SURVEY

FINAL DESIGN REPORT

SECTION III:

CLASSROOM/FAMILY/CHILD COMPONENT

SECTION III

CLASSROOM/FAMILY/CHILD COMPONENT

While Section II focused on learning about the operations of programs and centers within MSHS, Section III reports on the research activities designed to capture the unique characteristics of MSHS classrooms, children, and families. A priority for these efforts was selecting research strategies that were culturally-sensitive while capable of respectfully capturing the details of the programs and of the families' lives and experiences. The literature review, the design team's experience, and the specialized knowledge brought forth from the Program staff, as well as the Research and Community Consultants, all contributed to refining the suggested approaches.

The exhibit below was pulled from the overall Survey Design (see Exhibit 4.1 in Chapter 4) and outlines the possible data collections activities that could be conducted for ACF in a Classroom/Family/Child Component. The design descriptions in chapters 10 through 14 include details on possible survey options, assuming that site visits of up to five-days could be made to 73 centers, and all the Classroom/Family/Child Survey options were implemented simultaneously. Features of the design include collection of information via in-person interviews with program staff and parents; classroom observations; child assessments; and focus groups of parents in selected centers. In addition, to further enrich our understanding of the broader context within which programs operate and families live, it is suggested that telephone interviews be conducted with local community providers. Details for these features are offered in the ensuing chapters.

Options for MSHS Survey: Classroom/Family/Child Component

Construct Sampling Frame	• Select Nationally Representative Sample Using Data from Center Director Interviews
Site Visits to Selected Centers including:	
Teachers and Staff	•Teacher & Assistant Teacher Interviews • Family Service Staff Interviews • Community Observations
Infants, Toddlers, Preschoolers	• Teacher Ratings of Children • Toddler/Preschool Direct Assessments • Parent Reports of Infants • Classroom Observations
Parents and Families	• Mother and Father Interviews • Parent Focus Groups at Subset of Sample Topics: Classroom/Community
Community Providers	• Community Provider Interviews

CHAPTER 10:

SAMPLING PLAN FOR THE CLASSROOM/FAMILY/CHILD COMPONENT

As the starting point for designing the recommended sampling plan for the *MSHS Survey*, the Design Team reviewed the sampling strategies for all of the previous large, national studies completed for Head Start, including the *Descriptive Study of the Children and Families Served by Migrant Head Start Programs* (ACF, 1999). The 1996 *Descriptive Study of the Children and Families Served by Migrant Head Start Programs* provided dated, yet useful, basic descriptive information on programs and operational issues; characteristics of the children and families served by programs; as well as estimates of the broader universe of need for MSHS services.. However, the sampling approach used in this earlier study was not designed to measure the children's abilities or classroom quality. The proposed *MSHS Survey* design must account for these additional components.

Building and expanding on the 1996 framework, however, requires a renewed focus on the unique features of the MSHS programs, children and families. One goal of the *MSHS Survey* Plan is to develop a sampling design that ensures the *MSHS Survey* results in valid and reliable findings. To accurately describe classrooms, children, and families, the design must include a sampling plan that yields a national probability sample of programs, centers, classrooms, families, and children. The design presented here was created to maintain a balance among scientific credibility, feasibility, and cost while resulting in unbiased national estimates of the MSHS programs and the children and families they serve.

This chapter first reviews MSHS and MSFW family characteristics that influence sampling plan decisions and then presents a possible sampling plan for collecting data on classrooms, children, families, and communities. Additional details on most of these issues are available in Chapter 2.

10.1 Sampling from Migrant and Seasonal Populations

If the classroom, family, and child options for the *MSHS Survey* are implemented, it should include a nationally representative sample of the families engaged in MSHS. As such, migrant and seasonal MSHS families should be represented proportionally in the sample. For example, if 10% of MSHS families are seasonal farmworking families, 10% of those in the *MSHS Survey* should also be seasonal farmworking families. Seasonal families are significantly less present in MSHS programs, and the Survey Design team might have recommended oversampling these families in order to gather a potentially equal sample of migrant and seasonal (allowing for easier comparison). However, for the first Survey at least, the team recommends matching the sample to the program distribution of migrant and seasonal families in MSHS.

This is preferable to an over-sample of seasonal farmworkers for a variety of reasons. First, there is a relatively small prevalence of seasonal families: to oversample would require going to many more classrooms and programs to gather data. Second, there is inherent difficulty in verifying migrant or seasonal status; therefore, it may be difficult to produce an accurate oversample. In addition, functional increase of the seasonal sample would mean more data collection teams and increased time for the Survey activities. The related costs would be significant. Using the proportional sampling plan, preliminary data can be gathered about seasonal families that inform decisions relative to their need for MSHS services. In addition, this approach allows the study to examine questions related to migrancy from multiple perspectives across an accurate representation of MSHS families. For example, information gathered on mobility frequency could be used to understand how length of time since the last move relates to child and family functioning across the whole sample of MSHS families (i.e., both migrant and seasonal).

10.1.1 MSHS and Traditional Sampling Methods.

Traditional sampling methods applied in large scale studies expect that families will remain in one geographic location; that is, they will not move, thereby eliminating the possibly of being selected again further down the line. That is not the case here. Kalsbeek et al. (1989) and Chi (1984) identified the dynamics of migrant *mobility* as the key factor in developing sampling methodologies of migrant populations due to the potential for "multiplicity." A member of the target population therefore has multiple opportunities to be selected into the sample. Another important consideration for sampling migrant families is the variability of *transitional periods* during which MSHS families travel from one agricultural community to another. This variation results from differences in travel time, difficulty finding work, and possible delays in establishing participation in new MSHS programs. In turn, this variation is linked to differences in exposure to MSHS programs. Thus, mobility factors confound traditional sampling methods that expect finite periods of time and consistent levels of exposure to an "intervention." Another typical sampling assumption is a fixed linkage between population members and sampling units (e.g., a given MSHS center); In other words, each family is expected to be consistently associated with one center. However, this linkage is very dynamic within the MSHS context and further undermines selection of a sample that has received a standard intervention exposure.

Programs themselves have marked timing variations that affect the sampling plan. The operating period of MSHS programs are highly influenced by meteorological and agricultural factors. Therefore programs monitor the timing of the harvest periods within communities to determine when MSHS programs open and close, and when migrant families are expected to arrive at the centers. To complete a functional sampling plan, these potential unexpected variations in program timing must be taken into account.

Compounding these variations, there is also a tendency within the target population of migrant farmworkers to avoid researchers, fearing that participation in a study could adversely affect their current security, immigration status, employment, or housing (Kalsbeek et. al. 1989). Such avoidance of research undermines accurate sampling and selection. Finally, in order to accurately capture the MSHS context, the sampling plan must take into account the various ages (infant, toddler, preschool) of the children served.

Large, national, early childhood development studies most often involve multi-stage sampling. The general approach is to select a sample of programs and then, from within this sample of

programs, select centers, classes, and finally, children (and their families) within classes. The primary advantage of multi-stage sampling is that a complete sampling frame of all the children and families enrolled in all MSHS programs is not required, as the children and families are selected only after the preceding stages are complete. In addition, a multi-stage design is more cost efficient, as it reduces the geographical dispersion of the target population to a much smaller sample of catchment/service areas. This reduces travel time as well as materials and labor costs. One disadvantage of multi-stage sampling is the increase in the sampling variance of the estimates due to separate samples at each stage, which increases the amount of sampling error associated with the final sample. This increase in variance of the estimates (as compared to variance of the estimates from a simple random sample) is known as the *design effect*.

Anecdotal evidence, including discussions with the MSHS Community Consultant Group and the Design Team's research consultants, suggests that geographic location, size of programs, and length of the program seasons all could be related meaningfully to MSHS program and family differences. Identification of such meaningful variables could improve the sampling plan. Stratification[1] of the population and sorting[2] within strata prior to sampling can improve the representativeness of the sample if the stratification variables are known to correlate with major study variables. For example, if one goal of the sampling plan is to ensure adequate representation of the diversity of MSHS programs, the selection would include programs from various geographic locations (i.e., programs from upstream, downstream, and each of the three major migratory streams) according to their proportionality relative to the total population of programs. After this stratification, further sorting on additional key characteristics of interest, such as length of program operation (number of months open) or program size (number of children enrolled) would further improve the representativeness of important program variations. In addition, stratification could help adjust the representativeness of the family sample, as there is the possibility that families within streams may differ consistently in terms of home bases and cultural backgrounds.

The Design Team considered additional factors in developing the proposed sampling design:

- Data Linkages
- Time Constraints
- Unit of Analysis
- Geographic Clustering

[1] Stratification is the process of grouping members of the population into relatively homogeneous subgroups before sampling. In this case, all programs are grouped together by membership in a specific major migratory stream and whether or not they are an upstream or downstream program.

[2] Sorting is the process of ordering the members of a population or a population subgroup to facilitate the sample selection. For example, when sampling from a list of children from three age groups 0-18 months, 18 months-3 years, 3 years-5 years, the list is reordered or sorted by the three age groups. In the resulting list, all children of age group 0-18 months appear first, all children in age group 18 months-3 years appear next on the list, and all children of the third age group 3 years-5 years appear last on the list. A systematic sample is selected from this list. This method gives proportional representation to children across all three age groups in the sample.

This method can be thought of as 'implicit stratification.' If the list is simply stratified across these three age groups, then independent samples need to be selected from each stratum. In systematic sampling, sorting achieves the same objective without independent selection of the samples from each stratum. A list also can be sorted using more than one variable. For example, children can be sorted by gender first, and within each gender group, children can then be sorted by age. A systematic sample is then selected, ensuring representation of both gender and age.

- Precision Requirements for Sample Size Considerations

Each of these is discussed below in more detail.

Linkages between Data at Different Levels. The hierarchical organization of the different levels within MSHS (programs, centers, classrooms, children, and families) argues for a similarly structured or nested sampling design. Currently, there is no national source of MSHS data that systematically and accurately reports information about centers, classrooms, and children that would allow for the construction of an accurate sampling frame in this report. The national Head Start Program Information Report (PIR) contains data about the types of classes (full-day, part-day), service options (center-based, family day care) and children served, but these data are aggregated only at the program level and not at the individual center level. Given the size and wide geographic coverage of some of the MSHS programs, it becomes apparent that new, center-specific information would be necessary to develop an accurate sampling frame for the Classroom/Family/Child options of the Survey plan. These data potentially could be gathered during the Center option described in Section II—if that option is pursued by ACF in its entirety—but they also could be collected through a set of calls to Center Directors prior to initiating sampling for classrooms, families, and children.

Time Issues. Designs of previous studies of regional Head Start and Early Head Start conveniently scheduled data collection activities during a typical academic school year, where the majority of children enroll in the fall and stay in the program through late spring. However, the *MSHS Survey* Design must take into account the considerable variability in program operational periods. Programs vary dramatically on start and end dates, as well as times for expected family arrival and departure. The proposed study design accounts for the constraints placed on the data collection by the variable operating periods of the MSHS programs and centers, thereby increasing the efficiency of the data collection process.

Units of Analysis. In designing the sample, the Design Team considered differences in the desired precision of analyses addressing child and family level research questions versus those analyses addressing questions at the classroom, center, or program levels. In quantifying measures at the program/center level, consideration was given to program differences such as the length of operation. However, since the sampling plan called for gathering data at all programs, there was no concern over accuracy of representative estimates or artificially limiting power. On the other hand, the sampling plan, survey design, measures, and data collection approaches for classrooms, children and families should be shaped to effectively address their relevant research questions. These data collections will need to result in acceptably accurate estimates and sufficiently powered analyses. Therefore, the sample selected should provide a representative sample of centers, classrooms, and children at all ages served by MSHS that provides adequate precision in estimates.

Geographic Clustering. As mentioned very briefly in Chapter 4, the options suggested for classroom, family, and child data collection potentially include site visits. Given the relatively costly nature of site visits, the sampling methodology selected has a substantial impact on the logistical efficiency of the study. In particular, the in-person field survey costs and scheduling difficulties are partially a function of the distance the interviewer has to travel to the site. Hence, studies that include onsite visits typically attempt to cluster the sites geographically as a

means of reducing cost and maximizing efficiency. Because this approach tends to reduce the sampling precision in the estimates, one must strike the appropriate balance between the two competing factors.

Precision Requirements and Sample Size Considerations. Precision of the estimates resulting from the survey depends on the sample size and the sampling design adopted for the *MSHS Survey*. It is important to gather data that is sufficiently precise to make definitive statements regarding MSHS; however, maximum precision would be an impractical solution for these levels of data collection (i.e., classroom, family, and children).

For the sampling plan for this component of the *MSHS Survey*, two options are proposed for ACF to consider. The first option is a sample of 1,400 children and the second option is to select a smaller sample of 1,000 children. In the first option, the plan would be to have a sample of 467 children in each of the three age groups served by MSHS: 1) preschoolers, 2) toddlers, and 3) infants. The second option would pursue a sample of 500 children in each of two age groups: 1) preschoolers, and 2) infants and toddlers combined. The resulting precision of the estimates in terms of the widths of a 95% confidence interval for the population percentages are shown in Table 10.1.[3]

Table 10.1 The 95% Confidence Intervals for Population Percentages with Estimated Design Effect=1.78

Total Sample: 1,400 children	
Estimated Percentage	**95% Confidence Interval**
10	± 2.1 percentage points
20	± 2.8 percentage points
30	± 3.2 percentage points
40	± 3.4 percentage points
50	± 3.5 percentage points
60	± 3.4 percentage points
Total Sample: 1,000 children	
Estimated Percentage	**95% Confidence Interval**
10	± 2.5 percentage points
20	± 3.3 percentage points
30	± 3.8 percentage points
40	± 4.0 percentage points
50	± 4.1 percentage points

[3] Precision estimates are based on the two total sample sizes assuming an average design effect of 1.78. Given the limited data on MSHS children, the design effects were estimated from the *Head Start Family and Child Experiences Survey (FACES 2003)* data using three variables: 1) Test de Vocabulario en Imagenes Peabody (TVIP), 2) Woodcock-Munoz Letter Word Identification (WMLW), and 3) Woodcock-Munoz Dictation (WMDICT) for Dual Language Learner (DLL) children who did not pass the English language screener.

Total Sample: 1,400 children	
Estimated Percentage	**95% Confidence Interval**
60	± 4.0 percentage points

In a simple random sample of 1,400 children, the margin of error for an estimated percentage of 50% would be ± 2.6 percentage points. When considering the estimated design effect, the margin of error would be ± 3.5 percentage points. Since it would not be practical to select a simple random sample of children, these confidence intervals suggest that the proposed sample size would be more than adequate for producing unbiased national estimates.

The confidence intervals for population percentages of characteristics relating to children in the three age groups will be wider, because each age group is a subset of the overall sample. That is, the confidence intervals are larger when subsamples of the larger group are being considered. For example, if there are three age groups and sample size in each group is 467 children, then assuming a design effect of 1.78, then the 95% confidence interval based on estimated percentage of 10 would be plus or minus 3.63 percentage points instead of 2.5. Similarly if the estimate is based on a sample size of 500, the interval would be ± 3.5 percentage points. If the estimated percentage is 50, then the intervals based on the two sample sizes (467 and 500) would be ± 6 percentage points and ± 5.8 percentage points respectively.

Oversampling. Assuming an 80% response rate to the survey, to achieve the final proposed numbers, 1,750 children would need to be selected in the first option to obtain 1,400 children with completed data and 1,250 children would need to be selected in the second option to obtain 1,000 completes.

10.2 The Sampling Design

The target universe—from which the classroom, family or child sample would be drawn—is all MSHS programs (grantees and delegates), all centers within selected programs, all classrooms within the selected centers and all students within selected classrooms. Families associated with the students in the classrooms and the communities in which they live also are of interest. The objective of the sampling design proposed involves randomly selecting a stratified, representative sample of programs, centers, classrooms, and students and families to provide accurate and valid information on MSHS programs and families. ACF will choose from these ranges of study options, but the following sampling frame requires little modification regardless.

For selecting samples of classrooms, children, families and communities, the Design Team recommends a multi-stage sampling design be adopted, with the following sampling stages:

- Stage 1: Select a nationally representative, random sample of programs
- Stage 2: Select a sample of centers from each selected program in the sample
- Stage 3: Select a sample of classrooms from each selected center
- Stage 4: Select a sample of children (and their families) from each selected classroom

The carefully designed sampling approach allows the ability to capture a deep understanding of a representative group of MSHS children and families across the country. This approach also takes into account the variability along several important dimensions (such as children's ages, upstream/downstream, region of the country, and crop cycles or crop specialization).

Stage 1: Selection of a Sample of Programs[4]

In the first step for the selection of the sample for the Classroom/Family/Child Component, a stratified, random sample of 24 programs would be selected from the total universe of 62 programs. The decision to select 24 programs was based on a balance between the variance of the estimates and minimizing the cost of data collection. While a smaller number of programs in the sample would increase the design effect and therefore reduce the precision of the estimates, it also could reduce the cost of the Survey. However, the estimates presented earlier in Table 10.1 demonstrate that the reduced sample size would still provide acceptable precision levels for national estimates of MSHS children and families.

First, a sampling frame of all programs in the MSHS universe would be constructed, using the information gathered from the Head Start PIR, the Academy for Educational Development (AED) locator directory, the Head Start Program Directory Web site, and the MSHS Branch of the OHS. The universe of programs would be stratified into six geographic regions that roughly correspond to the northern versus southern halves of the country, as well as the western, middle west, and eastern sections of the country (resulting in a 2x3 geographical configuration). As noted, these six strata should ensure adequate representation of programs across the three major migratory streams and include both upstream and downstream programs. This stratification also helps to ensure adequate representation across broadly-defined program operational periods (summer, winter, summer/winter) as well as different regions of the country.

Programs that are considered 'Super-delegates' (Texas Migrant Council and East Coast Migrant Head Start) and programs that span multiple regions (such as United Migrant Opportunity Services and Telamon) would be sampled with certainty so they are a guaranteed part of the sample but do not overwhelm the sample[5]. The remaining number of programs that need to be sampled would then be allocated to each stratum in proportion to either total enrollment in programs in each stratum or the square root of the total enrollment in that stratum. In the first allocation, strata with a larger proportion of total enrollment would get a larger sample of programs whereas strata with a small proportion of total enrollment will get a small sample. The second allocation method modifies this allocation by slightly increasing the sample in smaller strata and reducing the sample size in larger strata. This is to ensure a minimum number of programs are select in each stratum. Both allocations are described in detail below.

[4] Program = PSU – Primary Sampling Unit.

[5] Sampling with certainty assures that certain programs are included in the sample. Only the 'super–delegates' with centers that are providing direct services would be sampled with certainty, as their corresponding delegates would be considered separately in the sampling frame.

For the sampling process, let N represent the total number of programs (in this case N =62) and let n represent the number of programs sampled (in this case, n =24). Let the number of programs selected with certainty be N_c while $N_r = N - N_c$ is the remaining number of programs from which to draw the program sample $n_r = n - N_c$. Let N_{rh} denote the number of programs in stratum h (where h =1, 2, 3, 4, 5, or 6) after excluding the programs selected with certainty. Let n_{rh} denote the number of programs to be sampled from stratum h. Let X_{rh} denote total enrollment in N_{rh} programs. Let X_r denote the total enrollment in all the programs excluding the certainty programs. Under an allocation that is proportional to total enrollment, the result is $n_{rh} = n_r \frac{X_{rh}}{X_r}$ $(h = 1, 2, ..6)$.

Table 10.2 represents the first allocation method of population and sample sizes based on proportional distribution in each stratum.

Table 10.2 First Allocation Method: Proportional Allocation across Strata[6]

Stratum	Number of Programs	
	Population	Sample (n_{rh})
Northeast	7	1
North-Midwest	14	3
Northwest	4	4
Southeast	13	5
South-Midwest	7	6
Southwest	15	5
Total	**60**[7]	**24**

In the square root allocation, the sample in stratum h is given b is given by

$$n_{rh} = n_r \frac{\sqrt{X_{rh}}}{\sum_{h=1}^{6} \sqrt{X_{rh}}}.$$

[6] Numbers based on 2006-07 PIR data and data provided by MSHS.
[7] There are 62 total programs reported in the 2006-97 PIR; however, only 60 reports show enrolled children available for sampling. The two programs not directly serving children are the East Coast Migrant Head Start Project (administrative offices) and the Illinois Migrant Head Start Program.

Table 10.3 shows the population and sample sizes based on square root allocation in each stratum.

Table 10.3 Second Allocation Method: Square Root Allocation across Strata[8]

Stratum	Number of Programs	
	Population	Sample (n_{rh})
Northeast	7	2
North-Midwest	14	3
Northwest	4	4
Southeast	13	5
South-Midwest	7	5
Southwest	15	5
Total	**60**	**24**

The total sample of programs = $n = n_c + n_r$ =24. For the actual selection of the sample of programs, first the largest programs would be represented (selected with certainty), then the remaining programs would be sorted by length of operation (# of months open) and size (total number of children served by all respective centers within the program). This assures representation of programs that operate for short or long periods as well as both large and small programs. The allocated number of programs would then be selected within a stratum with probability proportional to size (PPS) using systematic sampling.

Programs selected with certainty have a probability of selection of 1.0. The probability of selecting a 'noncertainty' program is given below. Let X_{rh} denote the total number of children served by all the centers in N_{rh} programs in stratum h. Let X_{rhi} denote the number of children served by all centers in program i in stratum h. The probability of selecting Program i in stratum h is

$$\pi_{rhi} = n_{rh} \frac{X_{rhi}}{X_{rh}}.$$

Stage 2: Selection of Centers within Selected Programs

Allocation of the Sample of Centers to Programs. Recall, as discussed above, the two overall sampling design options: Option 1 resulting in 1,400 children and Option 2 yielding 1,000 children. To address the first option, the selection of a total of 73 centers from the 24 programs selected is suggested. Therefore, on average, three centers would be selected from each selected program. In the second option, a total sample of 52 centers would be selected from the 24 programs, with an average of two centers per program (see Table 10.4).

[8] Numbers based on 2006-07 PIR data and data provided by MSHS.

Table 10.4 Comparison of Two Sampling Design Options[9]

Number of…	Option 1,400	Option 1,000
…Programs	24	24
…Centers	73	52
…Classrooms	219	154
…Children	1,400	1,000

Regardless of the plan pursued, at least one center must then be selected from each sampled program in the multi-stage design, using the same stratification of programs used for the selection of programs (i.e., geographic location). Some very small centers[10] in each program could be combined into a 'center group,' depending on their geographic proximity. For sampling purposes, a 'center within a program' could then be either a center group or an individual center.

The following procedure for the selection of centers from the selected programs in the sample is recommended.

Let n_h represent the number of programs in the sample, including those selected with certainty in stratum h, while m_h represent the number of centers (or center groups) in stratum h in all the selected programs and m_h^* represent the number of centers to be sampled in stratum h.
Let n represent the total number of programs in the sample and m represent the total number of centers in the selected programs. m^* is the number of centers to sample.

Since at least one center from each selected program in each stratum must be selected, at least n_h (which is the number of programs in the sample in stratum h) centers must be allocated to stratum h. This means that the remaining $(m^* - n)$ centers need to be allocated to strata. Allocate the remaining centers to each stratum in proportion to the total number of remaining centers in the stratum. This will give the additional centers that need to be selected.

$$(m_h^* - n_h) = (m^* - n) * \frac{(m_h - n_h)}{m - n}$$

The following is an illustration of the allocation of centers for Option 1 (the sample of 1400 children). The values for this example are represented in Table 10.5. It is assumed that the number of programs in the sample is obtained by allocating the total sample of programs to each stratum in proportion to the number of programs in the population in that stratum. There are 24 programs in the sample. The number of centers to be sampled is m^*=73. At least one center in each program needs to be sampled. Therefore, 24 centers out of the 73 to be sampled are immediately allocated in the first round, since there are 24 programs in the sample. For example, in Stratum 3 (Northwest) there are 4 programs. If the goal is to have at least one center

[9] Numbers based on 2006-07 PIR data and data provided by MSHS.
[10] Very small should be defined based on information collected in preliminary interviews with Center Directors

from each program, at least 4 centers need to be allocated to the Northwest strata (similarly for other strata). After completing this first round of allocation, 49 centers would be left to be allocated to the 6 strata.

To allocate the remaining 49 centers, they must be distributed to the strata based on the proportion of programs in each stratum. For example, when more centers are assigned to a stratum then there are programs within the stratum, centers will be drawn from the programs based on program size. Continuing to use the Northwest stratum as an example, 17 centers would need to be selected from 4 programs. As discussed above, one center from each of the four programs in this stratum would be allocated. The remaining 13 centers would be allocated to the 4 programs in proportion to the number of centers in each program (e.g., if Program A has 50% of the centers in the Northwest strata sample, it therefore would receive 50% of the remaining 13 center allocation). Through this method, programs with larger number of centers will contribute more to the sample.

Looking at Table 10.5, there is one program in the first stratum (Northeast). Since at least one center must be selected from each program, a minimum of one center must be allocated to the Northeast stratum. In the last stratum (Southwest), there are 5 programs in the sample. Therefore, a minimum of 5 centers must be allocated. This first allocation results in a total of 24 centers which is equal to the total number of programs in the sample. Since 73 centers need to be selected, the remaining 49 centers will be allocated in proportion to the total number of remaining centers in each stratum. This is shown as the second allocation. The total number of centers to be sampled in each stratum is the sum of the two allocations.

Table 10.5 Distribution of Programs and Centers, by Strata

Stratum	Number of Programs in the Sample (certainty + noncertainty)	Number of Centers		
		Assumed Population (in selected programs)	Sample First Allocation	Second Allocation and Total
Northeast	n_1 (1)	m_1 (4)	1	0 (1)
North-Central	n_2 (3)	m_2 (12)	3	1 (4)
Northwest	n_3 (4)	m_3 (54)	4	13 (17)
Southeast	n_4 (5)	m_4 (26)	5	3 (8)
South-Central	n_5 (6)	m_5 (86)	6	22 (28)
Southwest	n_6 (5)	m_6 (45)	5	10 (15)
Total	n **(24)**	m **(227)**	**24**	**49 (73)**

Selection of the Centers Based on Number of Children and Operational Periods within Programs: For example, perhaps only one center will be selected from a program. To perform this selection, all the centers in that program will be listed and the one center will be selected, using probabilities of selection proportional to the number of children in the center. If two centers are

to be selected in a program and they have the same operational period, the selection is based simply on the process described (i.e., proportional to the number of children in the center). However, to ensure representation across the varying operational periods of MSHS centers (i.e., length of operational time and months of operation), stratification also could be used within a program if the operational periods for the centers within that program varied along these dimensions. If two or three centers are to be selected from a program and those centers vary in operational periods, then all centers within that program would be stratified into two or three groups by center operational period, and one center could then be selected from each group. If more than three centers are to be selected, selection should still be done from three strata groups organized by the center operational period. However, if it is necessary to select more than one center from within a strata defined by operational period, it is recommended that the centers within that strata be selected using probability proportional to size.

The strata would be formed according to operating periods if that program has centers operating at substantially varying times or if the program operates centers in multiple states.

Stage 3: Selection of Classrooms within Selected Centers; Stage 4: Selection of Children within Classrooms

- **For Option 1,400:** to get a sample of 1,750 children, it is proposed to select 3 classrooms (1 classroom for infants, toddlers and preschoolers, respectively[11]) within each selected center, resulting in a sample of 219 classrooms.

- **For Option 1,000:** to get a sample of 1,250 children, the recommendation is to select 2 classrooms (one classroom for preschoolers and another combined classroom for selecting infants and toddlers) from each of 52 centers for a total of 156 classrooms.

Two features of MSHS influence selection at this level: timing of families' arrival and ages of the children. First, it is important to have representation for the different age groups served by MSHS in the proposed sample of children. Most MSHS programs are configured to serve up to three distinct age groups (infants, toddlers and preschool aged children) in separate classrooms. One method of ensuring that the sample of classrooms accurately represents these age groups in the sample of children is to link the selection of classrooms (sampling Stage 3) to the selection of children in distinct age groups (sampling Stage 4) during the sampling process.

When sampling classrooms (third stage sampling) within centers and then sampling children (fourth stage sampling) within classrooms, consideration must also be given to selecting children from across waves of migrant or seasonal families who are attending the centers during different periods. For example, if there are 12 children in a classroom and 6 more are expected at a later date, then 5 children would be selected from the 12 that are present currently and 3 children from those who join the center later would be sampled so the 8 children to be sampled from that classroom accurately represent the types of families served by that classroom throughout the year. It should be noted, however, that this inclusive strategy will likely increase the chances that a child could be selected in more than one center and the weights would have to be

[11] Anecdotal evidence suggests that most MSHS centers organize classrooms around these three age groupings. This needs to be confirmed during the Program/Center Component

adjusted appropriately. It also should be noted that while the Design Team believes considering a second data collection visit to each of these centers will provide valuable information on "short term families" that are served by MSHS, it will be challenging to arrange. A final decision about this will have to be considered by ACF based on available resources.

While keeping these MSHS specific issues in mind, the two options for selecting classrooms and children are described below.

- **Option 1,400: Select a sample of classrooms and children in each of the three age groups (infants, toddlers and preschool age) (N=1,400)**
  For the selection of the sample in each of the three age groups, first list classrooms in each of the three age categories. While listing classrooms, classrooms that contain less than 8 children within an age stratum will be subgrouped so as to form a classroom-group, which combined contains at least 8 children.[12] For sampling, either individual classrooms or classroom- groups will be considered the same. In essence, this creates three strata of classes, as shown in Table 10.6.

Table 10.6 Classrooms by Strata within a Center

Stratum 1 thru 3	Number of Classrooms	Number of Children
Classes containing Infants	c_1	h_1
Classes containing Toddlers	c_2	h_2
Classes containing Preschoolers	c_3	h_3
Total	c	h

Stage 3: One classroom is selected at random from each stratum for a total of three classrooms in each center (one per each age group of infants, toddlers and preschoolers). This yields a total sample of 219 classrooms (73 for each age group). It is possible that a stratum within a center has only one classroom with less than 8 children.

Stage 4: Select 1,750 children from 219 classrooms; 8 students should be selected from each classroom. Because infant classrooms can have no more than 8 students, slightly more centers with infant classrooms may need to be selected to obtain the required sample of 467 infants. If there are classrooms containing only infants, only toddlers, or only preschool-children, then the total number of classrooms is c (Table 10.6). If a classroom has both infants and toddlers, then it will be listed twice: once in stratum 1 and once in stratum 2 (c-1). If the class is selected in stratum 1, only infants will be selected. If this classroom is selected in Stratum 2, then only the toddlers would be selected. If selected for both, infants and toddlers would be selected.

In summary, the plan for Option 1,400 is to select 8 students each from 219 classrooms for a total of 1,750 students. With a response rate of 80%, 1,400 completes are expected.

[12] It is possible that a stratum within a center has only one classroom with less than 8 children. In such cases, a slightly larger sample than 8 children would be selected from an adjacent center within the same program.

Details of selection of children will be finalized after creating the sampling frame of all classrooms in selected centers.

Alternatives: Much of this information about the configuration of MSHS classrooms nationally is unknown. If it turns out that the number of students in each classroom of a selected center varies somewhat, an alternate strategy to consider for Stage 3 selection would be to choose each classroom with probability proportional to size, so that when a constant number (8) of students is chosen within classroom, the combined selection probabilities for children would be more nearly equal. This would make the sample weights less variable and survey estimates more precise. The current suggestion for Stage 4 sampling is to select the samples of children as a stratified cluster sample of classes. An alternate method would be to select a stratified sample of *children* by listing all children in the center by age and then selecting. Both methods should be considered once current and accurate configuration data has been gathered from Center Directors.

- **Option 1,000: Select a sample of classrooms and children using two age groups (N=1,000)**
  The other option for ACF's consideration is to select a slightly smaller overall sample (1,000 children versus 1,400 children) to reduce the overall cost of the data collection. This could be accomplished by dividing the sample of 1,000 into two age groups of 500 children each instead of three age groups of 467 children. For example, preschool children could be treated as a single age study group (n=500) while infants and toddlers (n=500) could be combined into a second age study group. However, this presumes that infants and toddlers are a better fit together than toddlers and preschool children would be, in terms of the available assessments spanning the combined age ranges and how children typically are grouped within the centers. If this option is considered, ACF would need to decide if it is acceptable to them to place a greater emphasis on one of the three age groups in the inaugural *MSHS Survey* to save money.

  In each selected center, all the classrooms in each of the two strata (preschool and infant/toddler) will be listed. If there are classrooms with less than 8 children, then the smaller classrooms would be combined into a single classroom with at least 8 children for sampling classrooms.

  Therefore, the plan for Option 1,000 is to select 8 students each from 156 classrooms for a total of 1,250 students. With a response rate of 80%, 1,000 completes is expected. Details of selection of children will be finalized after creating the sampling frame of all classrooms in selected centers, using data collected from Center Directors.

10.3 Sampling Plan for Community Service Provider Interviews

When considering the center level of the research design, a range of center-oriented research questions could be addressed, depending on ACF's priorities. One issue that may be very informative to OHS and to the local centers would be a focus on community resources and their relationships with MSHS centers. Family Service Workers in the 73 centers would be asked to provide a directory of the community agencies with whom they work, and to whom they referred their MSHS families for services. Using those directories, agencies from each community

would be selected for telephone interviews via CATI. In order to represent a variety of agencies that provided services to MSHS families, five types of agencies/resources could be targeted:

- Housing and utilities services
- Medical, dental, and mental health services
- Income and food assistance programs
- Child and parent education, job training, and employment services
- Drug and alcohol treatment centers and family violence centers

Up to three agencies would be randomly selected from within each of five types of agencies for interviews (maximum N=15). In addition, interviews should be conducted with Migrant Health and Migrant Education Offices, if located in the community. The total possible number of interviews would be 1,241, with 146 interviews conducted with Migrant Health and Migrant Education and 1,095 conducting with various community service providers.

10.4 Sampling Plan for Follow-up Focus Groups

The Design Team is recommending that 12 focus groups be conducted with MSHS parents. These focus groups, in addition to those conducted during the Program/Center Component, would provide qualitative data that specifically expand upon parent interview questions used during the Classroom/Family/Child Component.

Depending on ACF's interests, the Team suggests that one focus group would be conducted at two randomly selected centers in each of the six main geographic stratification cells to improve the representativeness of the sample and increase the generalizability of the findings. These centers would come from participating programs but NOT from centers participating in other Survey activities. This strategy should keep the time burden minimized on families already participating in the Survey, while keeping these focus group centers near to the centers already engaged in the child assessments, parent, and staff interviews (minimizing cost). Nine parents would be selected for each of the focus groups using simple random sampling from a list of all parents in the center, provided by the center staff. It is suggested that the group be comprised of 3 parents of infants, 3 parents of toddlers, and 3 parents of preschoolers. If a parent can not participate, a replacement parent would be selected from the reserve (substitutes) list of parents sampled.

CHAPTER 11

MEASUREMENT FOR THE CLASSROOM/FAMILY/CHILD COMPONENT

The *MSHS Survey* will encounter many of the same measurement issues that other national studies of programs, children, and families are challenged to address. However, for the MSHS population, these considerations go well beyond the standard requirements for reliability and validity. For example, an understanding of the underlying system and organizational culture must inform staff interview translations and topics. Further, if direct child and parent report measures are implemented, questions regarding cultural appropriateness, appropriate normative samples, and meaningful translations are only some of the additional features that should be addressed. This chapter will describe the following:

- 11.1 The overarching MSHS measurement framework, including linkage to the MSHS Survey conceptual pathway and related research questions
- 11.2 Issues related to the assessment of children
    - 11.2.1 Issues related to the assessment of infants and toddlers
    - 11.2.2 Special considerations related to preschool Dual Language Learners (DLL) and agricultural workers

- 11.3 Measurement Review and Selection Criteria
- 11.4 Child Measures for MSHS Survey
- 11.5 Interviews for Parents of MSHS
- 11.6 Interview Frameworks for Staff
- 11.7 Records Review
- 11.8 Interview Frameworks for Community

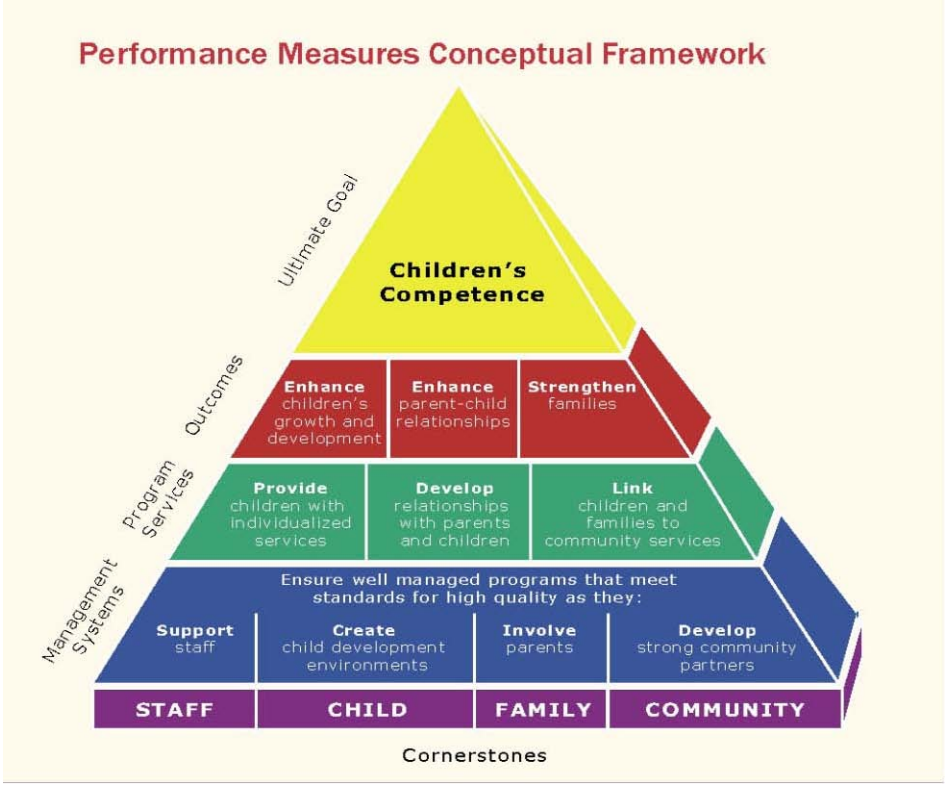
11.1. *MSHS Survey* Measurement Framework

The selection of a recommended set of *MSHS Survey* data collection measures are aligned closely with the key areas addressed by the Head Start Program Performance Measures Conceptual Framework for infants, toddlers, and preschoolers (ACYF, 1994; see Exhibit 11.1). The Head Start Performance Measures Conceptual Framework, as previously mentioned in Chapter 2, graphically portrays the interrelated nature of the Head Start program staff and services, communities, and the children and families they serve. The pyramid (Exhibit 11.1) shows conceptually that high quality, well-managed programs (in combination with supportive staff, active parent involvement and strong community partnerships), enhance parent-child relationships, strengthen families, support children's growth and development, and aim at the ultimate goal of children's competence.

Underlying each of the objectives included in the Program Performance Measures Conceptual Framework are specific indicators that represent key program goals for that objective (see

http://www.acf.hhs.gov/programs/opre/hs/faces/reports/perform_2nd_rpt/meas_98_intro.html#introa). One of the challenges for the *MSHS Survey* Design Project is to offer ways to approach measurement of the relevant areas addressed by the Head Start Program Performance Measures Conceptual Framework for infants, toddlers, and preschoolers (see

Exhibit 11.1: The Head Start Performance Measures Conceptual Framework



ACYF, 1994

http://www.acf.hhs.gov/programs/opre/ehs/perf_measures/reports/prgm_perf_measures/perf_meas_4pg.html), the corresponding set of performance measures, as well as the related Head Start Child Outcomes Framework (see http://www.hsnrc.org/CDI/pdfs/UGCOF.pdf).

When focusing more specifically on the early childhood development and school readiness domains, there have been previous efforts, such as the *Head Start FACES* study and the *EHS Evaluation*, that have identified specific subdomains that are important to children's developmental competence (e.g., school readiness for preschool children).

These efforts outlining targeted domains for Head Start inform the *MSHS Survey's* selection of a battery of child and family outcome measures for each of the age groups. [13] These include the following:

[13] see http://www.acf.hhs.gov/programs/opre/ehs/perf_measures/reports/prgm_perf_measures/perf_meas_4pg.html

- **Programs strengthen parents as the primary nurturers of their children.**
  - Parents' knowledge of child development and awareness of their children's developmental progress.
  - Parents' self-concept and emotional well-being and experiences of parenting stress.
  - Parents' educational, literacy, and employment goals.
  - Adult family members' relationships and collaborations in caring for children.

- **Programs support and enhance parent-child relationships**.
  - Parents' sensitivity and responsiveness in interactions with their children.
  - Parents' time spent with their children in activities that stimulate their children's development, such as reading to their children.
  - Parents' perceptions of home environments and experiences that support their children's development.

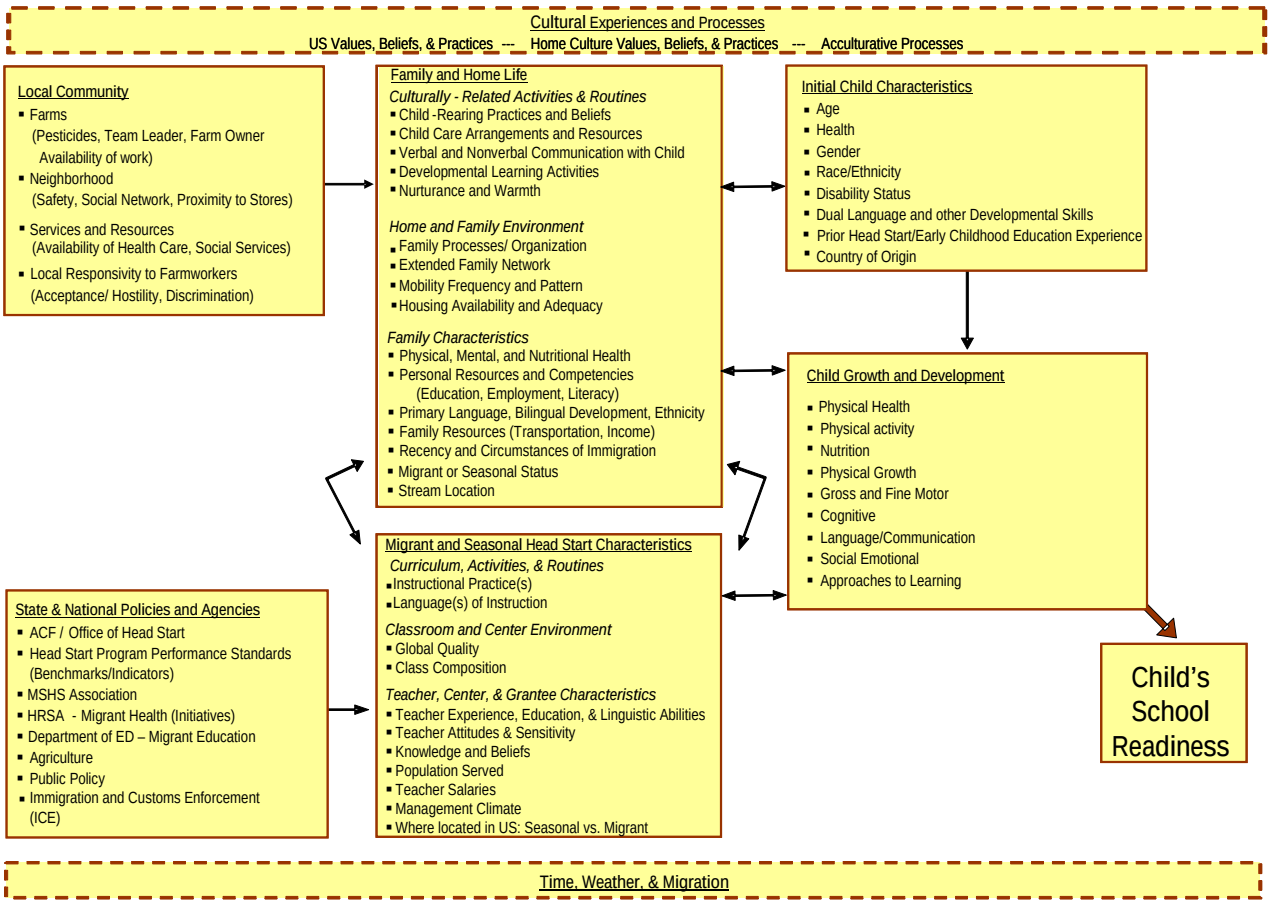
- **Programs enhance children's growth and development**.
  - Children's communication, language, and emergent literacy skills.
  - Children's general cognitive skills.
  - Children's approaches toward learning, including attention skills.
  - Children's social behavior, emotion regulation, and emotional well-being.
  - Children's physical health and development.

Recent Research. Beyond these programmatic frameworks, recent research has identified certain domains of early development that are particularly important with respect to bilingual children, who comprise the primary population of children served by MSHS programs. A growing literature documents the importance of early language and literacy development for later reading and general academic success of all young children, but especially DLL children (see Chapter 2). The bilingual children enrolled in MSHS programs are typically developing such skills in (at least) two languages, and as a result it is not a simple thing to measure accurately and to represent the functioning of these children quantitatively. In order to draw the maximum information from the *MSHS Survey*, a particular focus is placed on planning the measurement of English and home language linguistic and pre-literacy skills of these bilingual children.

MSHS Conceptual Pathway. The development of a set of recommended measures for the *MSHS Survey* that will capture information across the major domains of relevance to the MSHS population of children, families, programs, and communities was guided by the MSHS Survey Conceptual Pathway developed specifically for this report (see Exhibit 11.2). For the supporting theoretical and empirical literature, see Chapter 2. A full set of possible research questions for the Survey, consistent with this Conceptual Pathway, are listed in Appendix C.

It was a combination of EHS/HS performance measure conceptual framework, the highlights of recent research, and the MSHS Conceptual Pathway that provided the structure of the measurement design for the *Survey*.

Exhibit 11.2 Migrant and Seasonal Head Start Survey Conceptual Pathway



11.2. MSHS Measurement Considerations for Children

Beyond the topical domains to be considered for measurement, there are several inherent factors regarding measures that must be carefully examined for a *MSHS Survey*. This always is particularly true when considering any direct and indirect assessments of children, as care must be taken to ensure accurate and meaningful results. Given that the population served by the MSHS programs is predominately comprised of both children from birth to five years of age and culturally and linguistically diverse children and families (mainly Spanish-speaking, but from varied countries of origin and dialectical backgrounds), the corresponding measurement and assessment considerations are increasingly complicated.

In order to accurately and thoughtfully assess MSHS children, the selected set of measures should be (to the greatest extent possible):

- Developmentally appropriate for the various distinct age groups of children served (birth to 5 years of age)
- Appropriate for culturally and linguistically diverse children and their families
- Able to provide an accurate estimation of children's behavior within multiple contexts
- Able to address the major domains of child development, including school readiness

- Based upon state-of-the-art techniques for assessing children's dual language skills and development.

While many of these factors are important to address in the design of the *MSHS Survey*, there are two in particular that require some additional discussion below. These include issues related to the assessment of the youngest children served by MSHS programs, infants and toddlers, as well as factors related to early bilingual development that should inform measurement selection.

11.2.1 Issues Related to the Assessment of Infants and Toddlers

Assessing infants and toddlers is a challenge. The process of developing measures for children at these ages is wrought with theoretical and psychometric obstacles that are further compounded in culturally and linguistically diverse settings, such as MSHS programs. The following section briefly describes some of the major difficulties that are especially relevant for direct assessments of infants and toddlers and the feasibility of using direct assessments for these youngest children within the MSHS Survey design. The report then discusses some of the advantages of alternative, indirect assessment approaches (e.g., parent and provider reports).

A few of the more significant difficulties of directly assessing infants and toddlers are the following:

- Resource-demands of Observational Measures
- Normal temperamental characteristics that often make it difficult for an outside assessor to directly assess infants
- The very limited number of measures that are developmentally appropriate for children across the full range of birth to 5 years of age; assessments at these young ages are often not strongly predictive of later skills and abilities

Without doubt, bilingual infant and toddlers, the youngest children of agricultural workers, are understudied groups and direct assessments should be considered if resources are available. However, indirect assessments may effectively circumvent some of these methodological challenges.

Observational Ratings. One of the most basic difficulties in assessing very young children is their limited expressive language abilities. This is particularly relevant for the verbal abilities of MSHS infants and toddlers who may be simultaneously learning at least two languages, which means examiners often must interpret the meaning of observable behaviors, without the benefit of children's verbal cues. For example, in determining infant emotional states, investigators often judge facial expressions and infer the internal state or need that is being communicated (Best & Queen, 1989). Problems include a) need to learn observational measures to acceptable level of reliability, b) social context factors (i.e.,if child is interacting with other children who influence the observed child's behavior) and c) structural context factors (e.g., naptime vs. snacktime). It is difficult to carefully observe a large enough sample of classroom activities and remain consistent in what types of interactions are being observed for each child. In order to reduce some of these challenges, videotape can be used to film the children during the targeted interactions and coding can occur at a later date, with carefully specified coding schemes and

well-trained coders. Whether such efforts would be possible depends on available project resources, as additional staff and equipment would need to be sent to the center visits to record observational data.

If project resources are available, this portion of the project may utilize promising observational measures. It would be important to consider these as pilot efforts. Care would need to be taken to ensure careful psychometric examination, and cultural review of findings and interpretations. Measures such as the PICCOLO (Roggman, et al., 2008; examines parent-child interactions), the CLASS (Pianta), and other observational measures typical of early care and education measurement would need to be reviewed prior to utilization.

Temperament. Similarly, individual temperamental and behavioral characteristics often are important factors in assessing infants, especially in how they respond and adapt to new people and new experiences. For example, the direct assessment situation may be complicated by infants' and toddlers' normal reactions to strangers known as 'stranger anxiety' and/or separation from their caregiver termed 'separation anxiety'. Children typically begin to develop these normal anxieties at around 8 months of age, which then may persist into the second year of life (Lesser-Katz, 1988; Mahler et al., 1975). However, these behaviors also are variable among children and are influenced by the norms of the culture (Lidz, 2003; Morelli & Rothbaum, 2007).

Thus, great care is needed to have carefully trained assessment personnel, with matched cultural and linguistic backgrounds and with direct skills and experience with working with infants and toddlers. In the 2004 MSHS Study, program staff and parents strongly emphasized their preference for having a parent present with infant/toddlers during any direct assessments. Results would need to be thoughtfully interpreted within the context of these normative variations in children's responses to strangers and the testing situation (Lidz, 2003); given the dearth of research in this domain, a measure of parent- or teacher-report of temperament may be a viable addition to direct assessments of infant/toddlers in MSHS.

Developmental Variation Birth–Five Years. Another challenge when assessing young children is the scarcity of direct measures that have continuous norms covering the full age range from birth to five years of age. Scores for infants and very young children have been shown to have low correlations with future assessment scores (Horner, 1980; Wyly, 1997). Thus, given the lack of currently available data regarding MSHS infants and toddlers, direct assessments would generate novel and meaningful data about these young children. However, these data may have relatively limited usefulness, since they only provide cross-sectional information about development at the cost of substantial effort and skills on the part of the research team and additional burden on the children.

Infant and Toddler Assessment through Indirect Child Measures

Beyond the general infant/toddler issues noted above, the Survey designers indicate that indirect assessments may be a viable option. Indirect assessments have been used in conjunction with direct assessments in numerous studies focused on infant toddlers, especially large-scale, national studies (e.g., *EHS, Baby FACES, ECLS-B*). Indirect assessments include a variety of methods (e.g., questionnaires, rating scales, card sorts, and interviews) with parents, caregivers and teachers to gather reports of the child's behavior across contexts and skill sets. As discussed in greater detail below in Section 11.5, a small measurement study was conducted within

the context of the *2004 MSHS Research Design Development Project.* Despite the limitations of this small measurement study due to the small sample size of infants and toddlers included, they did find that parents' reports on their children's English versus Spanish abilities were not only fairly consistent with the direct child assessments, but also identified potentially important additional information that wasn't available from the direct assessments alone. Thus, the use of indirect measurements addresses some methodological and practical issues in infant assessment.

Indirect assessments will allow the Survey to explore a greater number of early development domains, even for the very youngest children. Psychometric limitations may also be reduced with some indirect measures that have been utilized with bilingual Hispanic populations, and are appropriately standardized.

Indirect Assessments Viable Option for MSHS Survey. Given the paucity of available direct assessments for infants and toddlers, particularly in light of the cultural and linguistic diversity of these children, the limited expressive language of infants and toddlers, the limited number of comprehensive measures across domains and age range, and the need to minimize both the cost for ACF and the burden on the MSHS children and families, indirect assessments appear to be a viable option for the *MSHS Survey*. The recommended measures are described in greater detail below in Section 11.7. If sufficient resources are available for the Survey, ACF should consider supporting additional measurement feasibility work to support the inclusion of some direct assessments for use with MSHS infants and toddlers.

11.2.2 Assessment Approaches for Preschool Dual Language Learners

For preschool children, there are stronger possibilities of collecting meaningful and important data regarding children's skills across domains using direct and indirect assessments, even though there are measurement obstacles. The primary concern: what language will be used, particularly during assessment of language skills. These language assessment issues become increasingly critical as children move from infancy to preschool age. Infant developmental assessments tend to be less language focused and to involve limited verbal instructions; therefore the results are less likely to be influenced by early bilingual exposure and development (López, Barrueco, & Miles, 2006), However preschool assessments (involving more language in both instruction and in scored items) are more likely to be directly influenced by prior bilingual exposure and skills (Barrueco, 2003).

If ACF decides to pursue direct child assessments in the *MSHS Survey* for one or more of the age groups served, a primary concern would be accurate and valid measurement of MSHS children's language development skills and abilities. Identifying and understanding the language variations within the MSHS population will lead to more accurate services supporting bilingual development. However, there are multiple strategies for approaching measurement in young Dual Language Learners (DLL), whether using direct child assessments or parent reports. The following sections discuss:

- Common strategies used in prior studies both to determine a child's primary language with approaches for choosing the best language for assessing DLL children;
- Identifying advantages/disadvantages of language choices for assessment of bilingual children; and

- Recommended procedures for the *MSHS Survey*.

Language Assessment and Language of Assessment
One key consideration for direct child assessments of bilingual children is determining a child's primary or dominant language and then deciding the language(s) in which to conduct the assessments. Some choose to assess in the child's primary language (i.e., screening for the language that the child uses most often and/or most accurately) or a combination of languages. Typically in national studies including bilingual populations, if only English assessments are available, assessors discontinue the assessment if the child does not display adequate English mastery. Each of these approaches results in different information. For the MSHS Survey, accurate determination of the primary language will inform assessment choices and interpretation of the resulting data.

Assessing Primary Language: Reporters' Reliability. Those defining the methods for the *MSHS Survey* must take into account the relative reliability of the available reporters. Many approaches used to determine a young DLL child's primary language proficiency status involve collecting parent, teacher or care-provider reports about both the language(s) spoken most often in the home and the child's level of proficiency in both English and their home language (Espinosa & López, 2007; Guitierrez-Clellan, Restrepo, & Simon-Cereijido, 2006). Depending upon how long a child has been in a given care setting, and the formality of both intake, screening and assessment procedures and teacher-parent interactions, the teacher may or may not be able to confidently report on the primary home language for the child. This is particularly the case for infants and toddlers, given the above noted issues about the more limited expressive verbal abilities of infants and toddlers. Unless the teacher has specifically attempted to gather information from parents about the child's use and proficiency in each language with all household members, it may be difficult to accurately determine either the child's primary language and/or relative proficiencies across different languages.

Sensitivity of Measures to Bilingual Language Dominance. Given the variability in the timing and rates of the developmental sequence of different language skills and abilities, care must be taken when assessing a child's relative language proficiencies at any given single point. The onset and rate of language acquisition is due to factors both within the child and in the child's learning contexts (Anderson, 2004; Pan, Rowe, Singer, & Sow, 2005). The child's personality, aptitude for languages, interest and motivation interact with the quantity and quality of language inputs and opportunities for use to influence the rate of language acquisition and eventual fluency levels (Romaine, 1994). Multiple skills are involved in language use, and the child's profile of dual language skills could be complex, or even contradictory. For example, many young DLL children demonstrate greater proficiency on measures of receptive vocabulary versus expressive vocabulary, as the latter requires a more advanced set of language related skills and abilities (Tabors and Snow, 1994). Therefore, the fact that a child may demonstrate proficiency on a few narrow linguistic skills (e.g., items on a language screener that assess receptive language skills) does not necessarily mean that the child is equally proficient in other areas of language.

Thus, efforts to determine an individual DLL child's primary language(s) should clearly articulate the specific definitions, as well as factors such as informants, exposure to secondary language, and procedures. Within the context of direct child assessments in MSHS, the determina-

tion of a child's primary language(s) would then shape the decisions about all other direct child assessments.

Different Approaches for Choosing Language of Assessment for DLL children
More complex than determining the child's primary language is choosing assessment processes that will gather meaningful information in one or both languages. Many of the approaches used in various studies of dual language learner (DLL) children acknowledge the complexities of bilingual language and literacy development, and try to overcome the limitations of many assessment tools. The different approaches range from total exclusion of non-English-speaking DLL children to relatively sophisticated efforts that take into account an array of developmental skills and abilities both within and across languages (Espinosa & López, 2007). The following sections review three methods of using language in the assessment of DLL children; each results in different information:

- Preliminary screening, followed by single language administration;
- Separate administration of measures in each language; and
- Conceptual scoring of measures administered in a combination of two languages.

The approaches selected for the *MSHS Survey* are guided in large part by the specific developmental and outcome research questions and the types of data that will be necessary to answer those questions. This approach also was informed by in depth review of assessment approaches, and by input from consultants and ACF staff.

Formal Pre-Screening of English Proficiency. Several major evaluation studies utilized initial screening for minimal proficiency in English prior to the administration of each wave of English-language assessments. The *ECLS-K* study (NCES, 2000) provides one illustrative example of this type of DLL assessment approach conducted primarily in a single language, where children from non-English speaking homes were initially screened using the English version of the Oral Language Development Scale (OLDS) that was developed using several subtests of the Pre-LAS 2000 (Duncan & DeAvila, 1998). The non-English speaking children who scored above an empirically derived threshold score on the OLDS, indicating a minimal level of English oral proficiency, were subsequently assessed using the English direct assessments of reading, general knowledge and mathematics. However, those Spanish-speaking children scoring below the cutoff on the OLDS completed only a limited set of assessments in Spanish (e.g., only the mathematics and psychomotor direct assessments).

This type of *monolingual pre-screening* procedure helped ensure that results on assessments better reflected children's abilities in the content areas rather than their English proficiency. In other words, children were directly assessed on the broader array of assessments only when they demonstrated a certain, minimum level of English proficiency. Further, this approach kept children with little to no English from having to complete frustrating assessments that they would not be able to understand. However, it is important to note the differential impact that this screening process had on the composition of the final sample, especially the sample of children from Spanish-speaking backgrounds. Overall, 15% of the total *ECLS-K* sample screened with the OLDS; 62% of those screened were children whose home language was Spanish (9% of the total sample). About half of the children who were screened did not receive the full administration of the direct child assessment battery because their English skills were below

the threshold (NCES, 2000). However, those screened out were primarily Spanish speaking (58% of the children screened out; 4% of the total sample). These screened out children represented almost a 48% reduction in the number of Spanish-speaking children who participated in the full battery. Excluding this number of children significantly undermines the knowledge gained regarding the early childhood development targeted by the *ECLS-K* study. Given the extremely high percentage of Spanish-dominant MSHS children who would be more likely to be screened out using such an approach, clearly following this pre-screening (and subsequent limited assessment) procedure would not be a viable strategy to consider for the *MSHS Survey*.

A similar approach is *bilingual pre-screening* conducted in both English and Spanish, in which a child first completes brief language screening measures in both languages to determine the child's minimal proficiency in either language and/or the more dominant language. Then, the child completes the rest of the assessment battery in the more dominant language, and the results would at least more accurately reflect their peak skills in the more dominant language. One strength of this approach is that the vast majority of MSHS children would then participate in the assessment process either in Spanish or in English, though a small percentage would still be excluded since appropriate measures may not be available in their dominant language (such as Mixteco, Creole, or Vietnamese). For this latter group of children, data still would be collected from parents and teachers regarding the children's development and functioning.

There are some important limitations that pertain to both the monolingual and bilingual pre-screening approaches. First, assessing children only in one language makes it difficult to understand their linguistic proficiency in each separate language. Key understanding of separate (English and Spanish) bilingual developmental trajectories and outcomes would be lost. Potentially, bilingual screening would be most meaningful if it occurred periodically, since children may switch dominant languages over time (McLaughlin, Blanchard, & Osanai, 1995). This may be particularly relevant for migrant children within MSHS programs as they move in and out of different communities and are exposed to varied language experiences within different MSHS centers and communities. For these children, if the pre-screening methods were used, it would potentially result in longitudinal assessments being conducted in different languages over time, as their dominant language changes, rendering the longitudinal results somewhat less meaningful (or, more meaningful but less interpretable). It would not be possible to follow the child's progress over time in each language, unless the English and Spanish assessments had particularly high levels of psychometric concordance. Finally, an important consideration with the pre-screening approach is that, with even a small amount of exposure (10-20%) to a non-dominant language, some linguistic skills may develop differentially across children's different languages and contexts (e.g., Barrueco, 2003). For an extreme example, consider a hypothetical bilingual child whose teacher uses Spanish during math activities and English during reading activities. Administering general knowledge assessments in only one language for such a child likely would underestimate total knowledge and skills.

Dual Language Administration of Assessments. Another DLL assessment strategy overcomes some of the inherent limitations of the pre-screening approaches by conducting assessments in both English and the child's home language (Espinosa & López, 2007; Hammer, Lawrence, & Miccio, 2007; Paez & Rinaldi, 2006, Hammer). This dual administration approach allows for the simultaneous examination of children's performance in both their home language and English at any given point in time, as well as the ability to examine developmental variations at differ-

ent ages, over time. For example, in the small measurement study conducted with 134 preschool age children as part of the *2004 MSHS Research Design Development Project*, children were administered both a Spanish and English language screener to determine whether they should be assessed in Spanish, English or both languages. Based upon the initial language screening, 40% were then assessed only in Spanish, 27% were assessed only in English and 26% were assessed in both languages. Thus, the initial pre-screening facilitated the process of determining when it was appropriate to utilize a dual language assessment approach versus assessing in only one language.

This approach has many obvious advantages to the previously described approaches, mainly with respect to matching the language(s) of assessment with children's actual proficiency in one or more language. However, there also are some real limitations. When young DLL children enter more formal care and education settings, they not only face the challenges of rapidly learning a new language (typically English), but also may experience changes in their rate of acquisition of their home language (Genesee, Paradis, & Crago, 2004; Hammer, Lawrence & Miccio, 2008). If data are gathered at only one point in time, the results from a dual language administration approach would need to be interpreted with extra care for children during this transitional period, as their performance on either measure may be substantially lower than those of either their predominately English or their DLL peers who are not undergoing transitions. Furthermore, there is little current research that provides clear guidance on how to either statistically analyze and/or interpret the separately obtained information on children's English language versus home language developmental trajectories. In addition, a dual administration approach, when considered within the context of the current MSHS Design Project, also could involve extensive additional testing time, cost, practice effects, and/or possibly confusion and frustration for MSHS children who would be expected to complete at least some portion of two similar (although linguistically distinct) assessments.

Conceptual Scoring Approaches. An emerging strategy in the field of multilingual measurement development is the use of standardized conceptual scoring, wherein the child's responses are accepted regardless of the language they use to provide the answer. Some advocate that this approach measures the children's overall knowledge, skills and abilities, irrespective of the language in which their responses are provided (Pearson & Fernandez, 1994). Ideally, for measurement tools developed intentionally for such use, the individual items are developed (written, tested, and refined) simultaneously in both English and Spanish. Extensive care is necessary to ensure that each item, in each language, is answered correctly by the same percentage of children of the same age (developmental equivalency). These matching questions then are used during the actual administration; usually, the tester is allowed to provide prompts in both English and Spanish. In addition to recording the child's response for each item, the assessor also indicates the language of response. Measures that are specifically developed for this purpose also tend to have appropriate normative samples to compare with the child's score. One example is the Expressive One Word Picture Vocabulary Tests-Spanish Bilingual Edition (EOWPCT-SBE; Brownell, 2001). The EOWPVT-SBE was standardized with a sample of 1,050 children, who generally matched the demographic characteristics of the U.S. Hispanic population. The normative sample included an over-sampling of individuals from the Western region whose dialect was Mexican-Spanish while other categories of Region and Hispanic Origin are somewhat under-represented. Thus, the scores derived from the EOWPVT-SBE can be compared to the normative Spanish-speaking, bilingual in the U.S.

The resulting standardized score could be considered to reflect the child's combined or total knowledge within the given domain assessed, irrespective of language. This approach thereby overcomes one of the main limitations of the dual language or pre-screening approaches described above: the possible loss of information about a child's abilities when assessing in only one language. The method may be particularly appropriate for studies that include a substantial high proportion of bilingual children and/or studies designed to assess bilingual children over time, as the relative balance of their respective language abilities also is likely to change (e.g., Hammer, Lawrence & Miccio, 2008; Paez, Tabors, Lopez, 2007). Although this standardized conceptual scoring approach has many advantages (e.g., less burdensome, more cost-effective and captures an overall or combined perspective of the child's language or literacy functioning), there are some limitations. For example, when assessing receptive language, the child is only required to provide a correct response in one language or the other, which does not accurately assess the child's full range of receptive language abilities in each separate language. Thus, the decision to utilize such an approach would need to be guided by the specific question of interest that the assessment is intended to address. Another major limitation is the scarcity of currently available measures that have been developed carefully to reliably and validly gather conceptual scores across languages.

Recommended MSHS DLL Assessment Approach.
The recommended approach for assessing children in the MSHS study draws upon strategies utilized in prior studies and acknowledges the complexities of bilingual language development, especially with respect to the high proportion of monolingual or primarily Spanish-speaking children served by MSHS. Furthermore, the approach also takes into consideration the individual strengths and limitations of the currently available assessment tools, and attempts to address the range of developmental and outcome research questions that are the focus of the *MSHS Survey* (both the cross-sectional, as well as longitudinal issues).

Infant and Toddlers. For infants and toddlers, information regarding language development will be obtained primarily from parent's reports of their children's receptive and expressive communication skills in Spanish and/or English (depending upon the reported home language experiences). This information will be supplemented by providers' reports of the child's primary language use within the classroom.

Preschool. For the preschool age children, the recommended DLL assessment approach includes several distinct steps, as presented in the illustrative example outlined in Exhibit 11.3. These steps include:

- An initial language reporting process to gather information from parents on the child's language use within the home (for both their primary language and English)
- Providers' reports of the child's primary language use within the classroom
- Pre-screening for both minimal language proficiency and language dominance using both the English and Spanish versions of the two Pre-LAS subtests of language proficiency screener

[14] A more detailed discussion of the various direct and indirect measures is presented later in this chapter.

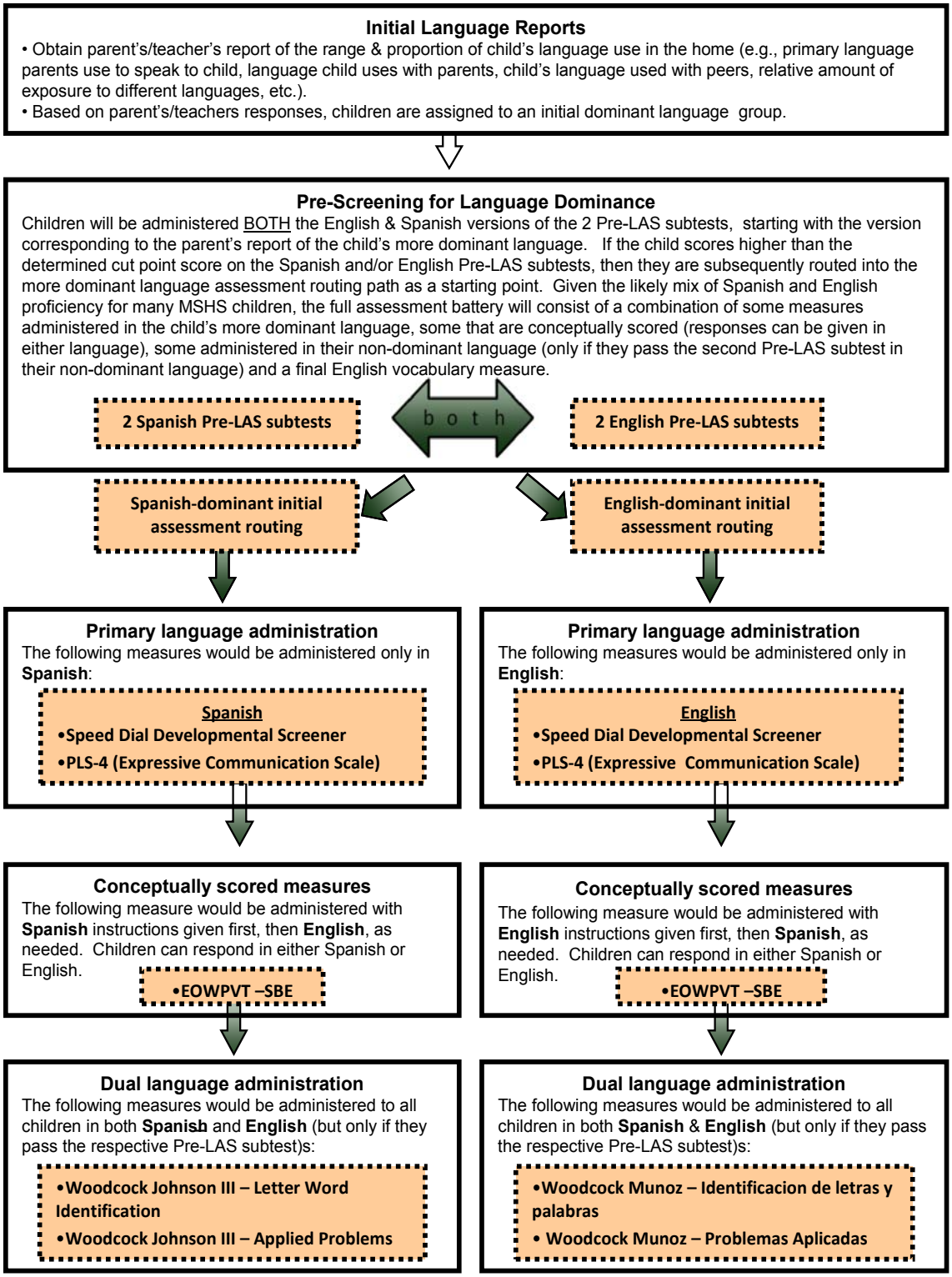
- Routing into either the Spanish OR English-dominant initial assessment routing path based on the child's performance on both versions of the Pre-LAS subtests15
- Administration of at least one conceptually scored measure (expressive language skills) that allows children to respond in either English or Spanish, and which provides a picture of their respective abilities, across both English and Spanish
- Administration of several measures only in the child's primary language in order to assess a range of skills and abilities that are less likely to be language dependent

This recommended DLL assessment approach for preschool age MSHS children utilizes input from the parents and providers, as well as the child's actual performance, to determine the child's primary or more dominant language as accurately as possible and help ensure that a range of skills and abilities of MSHS children are appropriately assessed. It also yields valuable information on a select set of children's skills and abilities, carefully balancing the understanding of children's performance both within and across languages, while also minimizing the overall assessment burden on individual children.

Exhibit 11.2 represents the direct assessment approach to be considered for preschoolers in the *MSHS Survey*.

[15] As noted previously, a small percentage of children would be excluded from both the English and Spanish measures since appropriate measures may not be available in their dominant language (such as Mixteco, Creole, or Vietnamese). For this latter group of children, data would still be collected from parents and teachers regarding the children's development and functioning, although they would not have any direct assessment data.

Exhibit 11.3 The Preschool DLL Assessment Process



11.3 Review of Measures

This section first identifies recent efforts to review measurement of bilingual children, and then specifies the review efforts completed for this design project. These measurement reviews carefully examined the psychometrics, strengths and weaknesses of various child measures of relevance to the *MSHS Survey*. These efforts contributed to our understanding and selection of the child measures.

11.3.1 Recent Reviews and Studies Contributing to Measurement Selection

In addition to the measures review work conducted within the context of the current MSHS Design project, there also were four recent efforts that provided input related to the set of measures and measurement approaches recommended for the *MSHS Survey*. These four efforts included the following:

- *English Language Learners Measures Compendium Project*
- *The 2004 MSHS Research Design Development Project*
- *East Coast Migrant Head Start Project Measurement Feasibility Work*
- *First 5 LA Universal Preschool Evaluation Measurement Feasibility Study*

Each of these measurement projects will be briefly described, followed by an overarching summary of the key findings that are most relevant to the *MSHS Survey*.

English Language Learners Measures Compendium Project

The *ELL Measures Compendium Project* involved a national examination of the psychometric, linguistic, and cultural properties of the available language and literacy measures utilized with preschool aged, Spanish-speaking, English Language Learner (ELL) children (Barrueco & López, 2010). In a collaborative effort with the Pew Charitable Trusts' *Early Childhood Accountability Project* and *First 5 Los Angeles*, each measure was critically examined, including the details of standardization techniques and basic psychometric functioning (e.g., reliability, internal validity, external validity). In addition, the Compendium reviews details of specific cultural and linguistic properties, including item development and translation procedures, adequacy of normative data, and content, semantic, criterion and conceptual equivalences (e.g., Bravo, 2003). This substantial dissection of the measures available for use with young Spanish-speaking children resulted in pessimistic (but unsurprising) conclusions: most such measures possess less than optimal levels of reliability, validity, and linguistic and cultural equivalence. However, a few measures demonstrated acceptable psychometrically- and culturally-solid properties for use with young Spanish-speaking ELL children (as discussed below), including a very small number that included seasonal and migrant children.

The 2004 MSHS Research Design Development Project

As part of the prior *2004 MSHS Research Design Development Project* a small measurement study was conducted to test the feasibility of a number of child and family assessments, for infants and toddlers, as well as preschool aged children (ACF, 2004). Eight different classrooms were observed; interviews were conducted with 194 parents, 19 teachers, 9 center directors/coordinators and 6 grantee directors; and 134 preschoolers and 15 infants-toddlers were directly assessed. The Executive Summary of findings from this study can be found on the ACF website.

One of the major limitations of the *2004 Design Development Project* was that the size of the group of infants and toddlers included was too small to definitively draw conclusions about the functioning of the various direct child assessments in comparison with parent and teacher reports for the youngest MSHS children. It was possible to consistently complete direct language assessments with these young children (PLS-4); parents' reports of language skills both confirmed and highlighted variations in the children's abilities across contexts. The very small sample of infants and toddlers scored in the typical range in receptive and expressive language on the Spanish Preschool Languages Scales (PLS-4). Similarly, the findings from parents reporting on their children's English versus Spanish abilities was not only consistent with the direct child assessments, but also identified potentially important variations in children's skills across languages that may reflect differences in home language abilities versus those more closely associated with academic learning experiences. Findings should be interpreted cautiously due to the rather small number of infants and toddlers included within each of the 3 age groups examined (0-12, 13-24 and 25-36 months). Given the limited data available, this pilot effort served to highlight specific assessment issues that could be examined further within the context of the suggested Measurement Substudy of the MSHS Survey (See Chapter 9).

This 2004 study used several subtests of the Pre-LAS to identify minimal language proficiency of the preschool aged children in both English and Spanish. One important finding was that the use of both language versions of the Pre-LAS language screening subtests appeared to differentiate children with primary dominant languages from children with valid dual language skills. Thus, despite the high proportion of primarily Spanish-speaking children within the MSHS population, this initial screening resulted in just 40% of the children being assessed only in Spanish, whereas 27% were assessed only in English and 26% were assessed in both languages. Through this process, 99% of the preschoolers were able to complete at least one language assessment.

Given the relatively large sample of MSHS preschool children (N=134) the investigators were able to explore the reliability and variability of a number of measures. For example, the preschoolers appeared to attain higher scores on the emergent literacy tasks (such as Woodcock-Johnson Letter-Word Identification and Story and Print Concepts tasks) than on vocabulary tasks (such as on the Peabody Picture Vocabulary Test), although the 2004 report did not present statistical analyses testing these differences. However, another commonly used measure of children's letter knowledge, the Woodcock Muñoz Identificación de Letras y Palabras (Spanish Letter-Word Identification) was found to exhibit a low reliability (0.50) and high standard error of measurement (SEM= 0.86) with this sample. Whether these results reflect the differential rates of bilingual development across the subdomains of vocabulary and emergent literacy or are more reflective of the properties of the respective measures may be the subject of further analyses and future research. Variation was also seen across children's English and Spanish abilities. Within the early literacy domain, MSHS parent reported that the children demonstrated greater letter naming, counting, and color knowledge skills in English than Spanish. However, teacher's reported greater need for improvement in children's overall early writing skills and alphabet recognition. These findings (variation between parent and teacher report) suggest potential areas that could be examined further within the context of the suggested Measurement Substudy (See Chapter 9).

Another methodological finding from the 2004 study was that some parents reported that the 5-point Likert-scale items did not accurately reflect what they wanted to report on parent rating scales; in particular, these parents were unwilling to commit to just one answer on the scale ('it depends'). This problem persisted despite the use of demonstration cards explaining the scale, converting some items into open-ended questions, or switching to a 3-point Likert scale. The open-ended questions caused additional issues, as parents appeared limit the range of responses provided, often to more socially desirable responses. Similarly, while providing demonstration cards and reducing the number of response choices to a 3-point Likert scale helped, there were still concerns that parents continued to find the items difficult to understand and/or often wanted to qualify responses with "it depends".

Taken together, these prior measurement feasibility activities contributed useful but very preliminary information to guide the selection of measures and methods for assessing MSHS children families and programs. An additional highlight from the report for this study was a recommendation that additional piloting work be done to further examine the adequacy of Spanish translations of measures, measurement equivalence, parents' and teachers' interpretation of various constructs, items and response formats, and sensitivity of the measures to change over varying, and sometime very short periods of time in different settings (especially given the typical mobility of MSHS families).

East Coast Migrant Head Start Project Measurement Feasibility Work

Additional useful information was gathered from an MSHS measurement feasibility study (Barrueco, 2008), within the context of a larger set of research activities with the East Coast Migrant Head Start Project (ECMHSP). The measurement study examined the appropriateness, strengths, and feasibility of various methodologies (many of which are utilized in the *FACES*, *ECLS-B*, and *NAWS* studies) for measuring MSHS child, parent, and teacher skills and perspectives on language, literacy, and socioemotional development and practices in early childhood development. In addition to examining the ease and length of administration, specific attention was given to potential biases within questions and, particularly, within measures of child development. The study considered possible sources of bias related to age, multilingualism, unclear wording and/or dialectical differences across distinct Spanish-language subgroups. The relative strengths and weaknesses of each measure were examined using a mix of qualitative methods, including verbal feedback from children, parents, and teachers and quantitative methods such as item and factor analysis.

The language, literacy, and executive function scales administered in English and Spanish with the children were well-received by the children, resulting in 100% completion rates. The direct assessment scales did not appear to have floor or ceiling effects.

For the parent measures, the pictorial procedures Dr. Barrueco developed to assist MSHS parents in responding to 5- and 6-point Likert-scales were successful, with 98% of parents completing the interviews and the results reflecting acceptable reliability. This later finding contrasted with the previously mentioned problems with 5-point Likert scales experienced in the *2004 MSHS Research Design Development Project.* Further, many of the parent measures adopted from the *FACES* and *ECLS-B* studies, as well as the Migrant Family Resiliency Scale developed for the study (Barrueco, 2007), also appeared to function well. While the qualitative ratings and feedback from the parents was overwhelmingly positive (>90% would not change any wording,

delete, or add questions), a few suggested that some items on the parenting scale used in both *FACES* and *ECLS-B* were difficult to respond to and/or not relevant (e.g., "I believe that a child should be seen and not heard").

First 5 LA Universal Preschool Evaluation Measurement Feasibility Study
The final relevant effort is a measurement feasibility study conducted with a large, predominately DLL population served by a universal preschool program in Southern California (Vogel, Aikens, Atkins-Burnett, Martin, Caspe, Sprachman & Love, 2008). The purposive sample consisted of 418 children and parents, served by 14 preschool programs. This project also involved the review, selection, testing, and psychometric analysis of sets of direct child assessment measures, parent and teacher report measures, and classroom observational approaches. This study was part of a larger study, the *Universal Preschool Child Outcomes Study (UPCOS)* that included a representative sample of over 1400 4-year-olds, and answered questions about the quality, intensity, and overall implementation of LAUP programs and how these factors were related to developmental outcomes of children by the end of their preschool experience. (see http://first5la.org/research/UPCOS for additional details).

Summary of Findings Consideration of these reviews and measurement feasibility activities yielded information directly relevant to the recommended measures for any direct child assessments that might be pursued in the *MSHS Survey*, including the following:

- **Normative Sample Composition:** Information on the specific demographic composition (e.g., age, socioeconomic status, parental education, country of origin, proportion of Spanish-speakers, primary language, bilingual vs. monolingual speakers, etc.) of the normative samples used to develop a given measure may not always be readily available in the published assessment manuals. Even when fully specified, however, the normative samples often have limited representation of low-income and/or culturally/linguistically diverse subgroups. Therefore, the resulting norms may be less accurate for use with the MSHS target population, which is composed of a high proportion of more monolingual Spanish-speaking children from low-income families and with lower parental education levels than the average U.S. population (NAWS, 2005). Since a child's individual assessment score is contrasted statistically with the average produced by the measure's normative sample, if the normative sample is not composed of a group of comparable children (i.e., same age, background demographic characteristics, etc.), then the comparison is less meaningful.

- **Language Use**: For assessments targeted towards DLL populations, the language backgrounds of individuals in the normative sample also must be considered. For example, it is not possible to assess a bilingual child's abilities in comparison to his peers, when the comparison group is monolingual Spanish speakers. Across the measures reviewed, there was marked variation as to whether the normative samples were comprised of monolingual Spanish-speaking or bilingual children, or some combination of the two. Comparison to these varied normative samples results in different information; therefore the desirability of these different types of normative samples depends upon the nature of the assessment question. On the one hand, some may be most interested in examining a child's performance on a Spanish measure against the performance of monolingual Spanish-speakers, so as to explore the child's current Spanish skills against the

average monolingual Spanish-speaking child. This information could be of use to those considering broader developmental questions about mono-lingual versus bilingual development. However, others may be interested in examining how a child being raised in a bilingual environment performs on a given measure in comparison to other similar bilingual children. This more closely addresses questions within the MSHS population, in which most of the children served are being raised within a bilingual environment.

- **Validation and Development:** While some assessments contain adequate descriptions regarding the process of measurement development and validation, others provide limited or potentially misleading psychometric information. For example, some assessment manuals recommended using identical psychometric data from the English version of the measure when examining the results from the non-English version, which would be neither statistically nor conceptually acceptable. Unfortunately, many other manuals failed to describe adequately the psychometric analyses related to item development across the two languages. Therefore, in these cases, it is hard to tell if questions or items in Spanish are equivalent (in level of difficulty, ordering and developmental sensitivity, etc.) to the questions or items in English.

- **Cultural/Linguistic Equivalence:** The actual developmental construct being assessed by a measure in English may differ in another language. For example, in several common measures assessing phonemic awareness, a child may be asked either to add or take away parts of words to form new words. On English versions of such tasks, compound words are often used. For example, a child may be asked to say a word such as "mailbox" and then say it without "mail" ("box"), or blend the words "mail" and "box" together to form a new word ("mailbox"). However, since compound words occur much less frequently in Spanish, this particular type of task is simultaneously more complex and less engaging for Spanish-speaking children Thus, unless items for a given task have been carefully selected for use in English and the other language (and the measurement equivalence has been examined), there is a risk that the translation or adaptation process may result in an inadvertent and unintended change in the content, meaning or linguistic complexity of the desired skill or ability that is being assessed.

11.3.2 The Measures Review for the *MSHS Survey*. In the process of selecting a set of recommended measures for the *MSHS Survey*, it was essential to take into consideration psychometric and standardization processes, utilization in prior studies, as well as the content, semantic, cultural, and statistical equivalencies of translated measures (Bravo, 2003). Such a range of judgment criteria severely limited the pool of potential assessment tools. Previous reviews identified some assessment measures that demonstrate acceptable validity, reliability, and appropriateness for the broader population of DLL preschool children (Barrueco & López, 2007; Barrueco, López, Ong & Lozano, 2010). For our purposes, it was essential to review these measures and ensure that they met acceptable criteria for the MSHS population. Unfortunately, even fewer measures have documented prior use with children of migrant and seasonal farmworkers, a population that consists of a greater proportion of monolingual Spanish-speaking children from low-income families and with lower parental education levels than either the average U.S. population or even the U.S. bilingual population (Barrueco & López, 2007).

The final set of recommended measures was selected to meet the greatest number of the following set of "ideal" criteria as possible[16]:

- Collectively, the set of measures will provide adequate coverage of information collected on children's early development and learning across the relevant domains of interest discussed above.

- Available (as much as possible) in both Spanish and English.

- Age-appropriate for use within and/or across one or more of the various age groups of children served (e.g., infants and toddlers, preschool age, etc.).

- Developed with an appropriate standardization sample (e.g., age, racial/ethnic diversity, linguistic diversity, socioeconomic status, geographic and disability representation, etc.).

- Demonstrated evidence of prior use with diverse populations (including cultural and linguistically diverse children).

- Adequate evidence of reliability (e.g., test-retest, internal, inter-rater, etc.) and validity (e.g., construct, concurrent, predictive and convergent, etc.), including those relevant to multilingual and multicultural assessment (e.g., content, semantic, criterion and conceptual equivalences).

- Evidence of prior psychometric and/or measurement equivalence work (e.g., factor analytic, IRT, Rausch, and/or differential item functioning, as appropriate) to examine the functioning of measures and individual items for key subgroups of interest.
- As appropriate, have been shown to be sensitive to capturing developmental status at various ages (in order to allow comparison across age groups).

The final set of recommended measures includes a brief justification for each selection, including a list of available features (e.g., major domains measured, age groups assessed, advantages, disadvantages, relevant research questions that can be addressed, cultural and linguistic appropriateness), psychometric properties (e.g., evidence of reliability and validity; normative population description) and specific suggestions for potential revisions or further measurement development work (additional discussion of this is continued below).

Limitations. Note that in order to address the range of questions of interest to the *MSHS Survey*, and the range of developmental and school readiness domains, some compromises were needed. Despite the identification of some acceptable measures, there are large gaps in the psychometric information available, particularly with respect either to the cultural/linguistic appropriateness and prior use either with a comparable MSHS population or even a Spanish-speaking population. These compromises are noted in the descriptions below. The optional

[16] This list does not include sensitivity to varying amounts of exposure to early educational experiences (since some MSHS children will have received limited exposure to MSHS programs, especially those in upstream programs). However, if ACF chooses at some future point to include a longitudinal component, the sensitivity of measures to varying exposure will be an important additional criterion.

Measurement Substudy, suggested for preliminary work for the Survey, could be a useful solution to fill these gaps (see Chapter 9). It is suggested that this effort could involve a limited pilot testing of a subset of the recommended measures with a subsample of MSHS programs and families. Focus groups and cognitive interviews would be used to collect important information to adapt measures appropriately and reduce potential cultural or linguistic bias; reliability and validity also could be assessed with the various age groups, depending upon the respective sample sizes for different age groups. The goal would be to provide additional information on (1) the psychometrics and cultural and linguistic appropriateness of the measures for MSHS children, parents, and classrooms; (2) the interrelationships among the measures, to assess whether multiple measures tap similar constructs and therefore would be redundant in the overall *Survey*; and (3) the overall feasibility of the battery in terms of both cost, burden and effort of the respondents. Please see Chapter 9 for additional discussion.

11.3.4 Summary of Factors Considered for Recommended Set of Measures

The recommended set of data measures for the *MSHS Survey Design Project* are designed to capture information from across the levels represented in the Head Start Performance Measures Conceptual Framework and further outlined in the *MSHS Survey* Conceptual Model (see Exhibit 11.2), which includes a focus on parents as nurturers, parent-child relationships, and children's growth and development (discussed in more detail in section 11.1).

Consistent with these frameworks, the domains to be considered in the MSHS Survey measures include the following:

- **Parents**
  - Well-being
  - Progress towards family and personal goals
  - Family demographics and history
  - Parent-child relationship, including
    - Parent's perception of their children's development
    - Parent's sensitivity and responsiveness
    - Activity involvement with children
  - Details of the home environment context
- **Children**
  - Infants/Toddlers
    - Language, pre-literacy, other early skills across contexts
    - Social-emotional well-being, including emotion regulation
    - Physical health and development
  - Preschool Children
    - Approaches to learning, including attention skills
    - Language, literacy and other cognitive school readiness skills
    - Social-emotional well being, including emotion regulation
    - Physical health and development
- **Programs and Centers**
  - Recruitment and continuity practices
  - Record review
  - Process for scheduling decisions
- **Teachers/Classrooms**

    - Teacher demographics
    - Teacher perceptions of parents, children, and programs
    - Structures and processes of daily classroom activities
- **Communities**
    - Community partnerships
    - Obstacles, barriers and facilitators of collaborations

The ensuing sections of this chapter describe the set of recommended measures across the child, family, teacher, classroom, program and community levels which are summarized as follows:

- **Child-level** information on MSHS children could be collected through a combination of direct and/or indirect assessments administered in both English and Spanish (see Exhibit 11.2), as well as rating scales completed by parents and teachers. The focus would be targeted mainly towards describing the characteristics of the diverse population of children served as well as information on the developmental status of infant/toddlers and the school readiness of preschoolers served by MSHS.

- **Family-level** measures describe the characteristics of the diverse population of parents and families served, including family strengths, needs and challenges, parenting practices, and other similar areas contributing to the growth and development of their children. Parent interviews would be administered to the primary caregiver of the MSHS child, and tap cultural parenting attitudes, beliefs and behaviors, the socioeconomic characteristics of the family, and parental health and mental health. Parents also will report on their participation in language, literacy and other learning activities in the home and MSHS program, communication with the teacher and MSHS staff, their perceptions of the program's understanding of their home language and culture, and their perception of the responsiveness of the MSHS program to their needs, among other areas. In addition, a smaller subset of interview items also would be administered to the other caregiver (typically the father) in order to capture another source if important information from the family.

- **Teacher/Classroom-level** data could target conducting interviews describing their background characteristics, perceptions and experience. Observational methods would assess the structure and processes of the classroom, such as the type and range of instructional learning opportunities (in both English and Spanish, or other languages, as appropriate), teacher-child interactions and other aspects of classroom quality.

- **Program-level** measures, including review of administrative data, could address the broader programmatic organization, planning and development questions applicable to all MSHS programs (e.g., description of the range of services and service delivery models, identification of both strengths and gaps in current MSHS services, etc.). Interviews also would be conducted with program directors and component coordinators, and will collect data on staff education, experience and training.

- **Community-level** data collection could capture information that describes the broader local community context surrounding each program and center, including information on the availability of a range of different types of community service providers.

As with all aspects of the *MSHS Survey Design*, these are options that will be considered by ACF in their implementation of the plan.

11.4 Child Measures

The set of carefully selected child measures are summarized below in Table 11.1 for infants and toddlers and Table 11.2 for preschool age children. More detailed information on the psychometrics of these recommended measures can be found in Table 11.3 at the end of this subchapter. These are possible measures across the key developmental domains and areas of early development and school readiness for infants, toddlers, and preschoolers, including a mix of both direct and indirect assessments as well as information collected from rating scales completed by parents and teachers.

Numerous steps were involved in this selection process. First, the Design Team identified a list of published and unpublished measures for use with young children in general, as well as in local and national studies or surveys. This was followed by a close examination of each measure from multiple perspectives, including the linguistic, cultural, and psychometric considerations detailed above, as well as administration length and ease. This information was gathered directly from publishers and authors, research literature articles, and consultant feedback, and then deliberated upon in order to narrow the list to the ones presented below.

Perhaps not surprisingly, there are few measures that currently meet many of the ideal criteria of already being reliable and valid for MSHS children and established as an appropriate for use in a national survey (see Section 11.6). However, there are some promising measures that are already validated with Spanish-speaking young children that are expected to prove functional and informative, although they might be strengthened further with additional validation or adaptation (e.g., shorter forms) within the MSHS population. Other measures suggested are new but address key domains. Of course, these also would be strengthened with further psychometric analyses and development.

The best set of measures that currently could be used for the *MSHS Survey* were selected. If a measure is recommended, it is because it would be appropriate, within the limited realm of measures available, for the *MSHS Survey*. Measures that seemed to have potential but did not make this final list are described in the chapter on the proposed Measurement Substudy (Chapter 9).

In the ideal set of recommended measures, there would be a great deal of continuity and comparability across the full range of ages from birth to 5 years. However, given both the narrow selection currently available and the cross-sectional design of the proposed *MSHS Survey* design, a stronger emphasis was placed on selecting the best measures for each of the respective age groups. If ACF chooses to pursue a longitudinal study design (Section IV), it may be important to review measurement selection and perhaps make different choices to gather the strongest set of measures that will support such a study design.

Also, as noted at the beginning of this chapter, given a number of difficulties associated with the direct assessment of infants and toddlers, as well as the even more limited number of avail-

able measures, the current set of recommended measures for infants and toddlers consists primarily of parent and provider reported measures. However, if infant/toddler information is identified as a key requirement of the *MSHS Survey*, ACF may want to pursue further review and development of direct assessments for infants and toddlers, their classrooms and families.

Table 11.1. Overview of Infant & Toddler Child Indirect Assessment Measures

Infants & Toddlers (0-2 years, 11 months)			
Domains covered under *Child Growth and Development*	**Measure**	**Who responds?**	**Time**
Overall communication & language (English, Spanish, and/or other languages)	**MacArthur-Bates CDI/IDHC** - short forms (for children > 12 months): Receptive & expressive language & communication skills in Spanish &/or English, as appropriate.	Parent & Teacher	10
	Ages & Stages Questionnaire (ASQ-3): **Communication subscale** in preferred language of parent & teacher.	Parent & Teacher	10
Emotional / behavioral regulation & social behavior	**Brief Infant-Toddler Social & Emotional Assessment - BITSEA** (only for children > 12 months): Social-emotional & behavioral problems &/or delays in social-emotional competence in preferred language of parent & teacher.	Parent & Teacher	7-10
	Ages & Stages Questionnaire (ASQ-3): **Personal-Social Functioning subscale** in preferred language of parent & teacher.	Parent & Teacher	*
Approaches to learning	**Ages & Stages Questionnaire (ASQ-3)**: **Problem Solving subscale** in preferred language of parent & teacher.	Parent & Teacher	*
Motor skills	**Ages & Stages Questionnaire (ASQ-3): Gross/Fine Motor subscale** in preferred language of parent & teacher.	Parent & Teacher	*
Physical Growth, Health, Safety, Nutrition, Sleep, etc.	***(See items from Parent Interview in Section 11.9)***	Parent	*

Notes: Time is reflected in minutes needed to administer the measure. An "*" indicates the time for this instrument has already been included in another item.

Table 11.2. Overview of Preschool Child Assessment Measures

Preschoolers (3-5 years)			
Domains covered under *Child Growth and Development*	**Measure**	**Who?**	**Time**
Overall Communication & Language	**2 Pre-LAS subtests (Simon Says & Art Show): *English & Spanish screeners*** - to help determine primary language/language dominance	Direct Child	8

Preschoolers (3-5 years)			
Domains covered under *Child Growth and Development*	**Measure**	**Who?**	**Time**
(English, Spanish, and/or other languages)	**PLS-4 -Auditory Comprehension Subscale** - (*for 3 -5 yr olds*): Receptive language in ***dominant language (English 7 or Spanish)***. Receptive vocabulary, morphology, syntax, investigative language skills, phonological awareness, and a variety of additional concepts.	Direct Child	15
	EOWPVT-SBE - (for 4-5 yr olds only): Expressive vocabulary conceptually scored ***across both English & Spanish***.	Direct Child	15
Early Literacy, Biliteracy, & Math Skills	**WJ-III – Letter-Word ID & WM *Identificacion de Letras y Palabras –*** (*administered in **both** **English and Spanish**, starting with the dominant language based upon the screener**)**.* Early literacy skills - identifying letters and words.	Direct Child	5
	WJ-III – Applied Problems & WM *Problemas Aplicadas –* (*administered in **both** **English and Spanish**, starting with the dominant language based upon the screener).* Early math skills, including simple counting, addition or subtraction operations.	Direct Child	5
	Child's Accomplishments (items from FACES 2006 Parent interview). Report on child's ability to identify colors by name, letters and own name in print, as well as pretends to write, write/draw, writes name.	Parent & Teacher	3
Motor Skills	**Speed Dial** developmental screener (**Motor Scale**) administered in ***child's primary language (English or Spanish).*** Gross & fine motor skills & visual spatial functioning.	Direct Child	5
Emotional / Behavioral Regulation	**Preschool Kindergarten Behavior Scales–2 (PKBS-2) – Problem Behaviors subscale, *adapted*:** Rating of children's problem behaviors in preferred language of parent & teacher.	Parent & Teacher	5
	Leiter-R Examiner Rating Scales – Cognitive-Social Scale: Assessor rating of children's attention, activity level, and sociability.	Assessor Rating	5
Social Behavior	**Preschool Kindergarten Behavior Scales–2 (PKBS-2) – Positive Social Skills subscale, *adapted*:** Rating of positive social skills in preferred language of parent & teacher.	Parent & Teacher	5
Approaches to Learning	**Preschool Learning Behaviors Scale (PLBS)**: Learning behaviors across 3 factors: competence motivation, attention/persistence, & attitudes as rated by teachers in their preferred language, English or Spanish.	Teacher	5
Physical Growth, Health, Safety, Nutrition, Sleep, etc.	***(See items from Parent Interview in section below)***	Parent	*

Notes: Shaded cells reflect measures that are direct child assessments. Time is reflected in minutes needed to administer the measure.

11.4.1. Detailed Descriptions of Child Measures

The following section provides summaries of each of the child measures suggested for the *MSHS Survey,* including the key constructs/domains assessed, psychometrics and available in-

formation on any prior use with Spanish-speaking and/or agricultural populations. The brief measures descriptions are sorted into two groups of recommended measures: for infants and toddlers and for preschoolers, respectively. Tables containing more detailed psychometric information are presented after the brief summaries and include the following information:

- Available language(s) for each measure
- Standardization information
- Key prior studies
- Key constructs/domains covered
- Estimated time
- Reliability & validity

It is important to reiterate here that the list presented immediately below is a set of the most promising ones for the *MSHS Survey*. This selection of measures could be strengthened by additional validation and development efforts. Suggestions noted in the respective brief measures descriptions include:

- Ideas for developing the measurements and their psychometric data further in the optional Measurement Substudy (Chapter 9)
- Ideas for receiving additional input from parents/staff and research experts.

INFANTS & TODDLERS (0 – 2 YEARS, 11 MONTHS)

Overall Communication & Language Development in English, Spanish, and/or Other Languages

Recommendation: MacArthur-Bates Communicative Development Inventories (CDI - English) *and/or* **MacArthur Inventarios del Desarrollo de Habilidades Comunicativas (IDHC - Spanish)**. *(Parent and teacher report in **English &/or Spanish**; 5-10 minutes for short forms; for children > 12 months)*

Description & Rationale: The CDI (English) and IDHC (Spanish) are parent and/or provider reports that ask about children's receptive and expressive vocabulary and language development and skills in Spanish and/or English. When both the English and Spanish forms are used together, it allows for the examination of three different vocabulary scores: (1) the number of words in Spanish; (2) the number of words in English; and (3) the total number of concepts known, regardless of which language (referred to as the Total Conceptual Vocabulary). It has been used in several prior studies (e.g., ECLS-B, Early Head Start, and the 2004 MSHS Research Design Development Project).

If ACF decides to use direct assessments with the younger infants and toddlers versus indirect parent and teacher reports, the PLS-4 Auditory Comprehension subscale may be a good addition to the language measurements, either replacing or adding to the MacArthur-Bates CDI/IHDC in English and/or Spanish. See further discussion of the PLS-4 within the preschool section below.

Recommendation: Ages and Stages Questionnaire (ASQ-3) – Communication subscale. *(Parent and/or teacher report available in **English & Spanish**; for children birth - 3 years old; 10-15 minutes for total ASQ-3)*

Description & Rationale: The ASQ-3 is a general developmental screening instrument that can be used with children ranging in age from 2 months to 60 months and, as noted by the publisher, it was designed for early identification of children requiring further assessment for potential disabilities. It is available in English and Spanish, as well as French and Korean. The Communication subscale assesses a range of efforts by the child to communicate either nonverbally or verbally with others. The previous version was used in the 2004 MSHS Research Design Development Project with a small subsample. The recently revised version of the Spanish ASQ-3 has corrected some translation errors from the ASQ-2, as well as made a few minor wording changes and substitutions to better reflect a range of Spanish dialects (Squires, 2009, unpublished document). Similarly, the normative sample included several hundred parents of MSHS children from Oregon, Washington and California. It also is a measure commonly used by Head Start programs, which may help improve parents' receptiveness to the measure.

Implications for a Measurement Substudy: Although, the ASQ was used in the 2004 *MSHS Research Design Development Project* (ACF, 2004), the sample of infants and toddlers was very small (n=15). Nevertheless there was some indication of correspondence between teacher's reports of children's language and social skills on the ASQ and those obtained from the direct child assessments. The Spanish version of ASQ is being used currently in a study with MSHS children in North Carolina (J. Squires, Personal communication, 2009). Thus, while it is recommended for the MSHS Survey, it would be helpful to review any new data on the ASQ-3 at the time of implementation of the Survey. The Technical Report on the revised Spanish version of the ASQ-3 indicates that the psychometric analyses resulted in the development of similar cutoff scores for the English and Spanish versions, with a few exceptions. However, it would be helpful to obtain additional information on how these cutoff scores were derived.

Social-Emotional Development

Recommendation: Brief Infant-Toddler Social and Emotional Assessment- BITSEA *(Parent & teacher report available in **English & Spanish**; for children 1 - 3 years old; 7-10 minutes)*

Description & Rationale: The BITSEA is a parent and/or teacher report of children's social-emotional competence and social-emotional and behavior problems for children between the ages of 12 to 36 months. It is a 42 item screener version of the longer ITSEA measure (Carter, Briggs-Gowan, Jones & Little, 2003). The BITSEA, like the ITSEA, assesses the development children's emerging social and emotional competencies (e.g., follows rules, expresses affection with loved ones, hugs or feeds dolls or stuffed animals, etc.), as well as externalizing behaviors (activity, aggression), internalizing behaviors (inhibition, separation, depression), dysregulation (sleeping, eating), maladaptive habits, and fears. Strengths of the BITSEA include that it is available in English and Spanish; can be administered to both parents and primary caregivers and takes approximately 7 to 10 minutes to complete.

Implications for a Measurement Substudy: A Spanish version is available and although limited psychometric data for this version is currently available, the authors have indicated that they are in the process of examining the psychometrics of the Spanish version that has been administered to at least 500 Spanish-speaking parents (M. Briggs-Gowan, personal communication, November, 2008). Therefore, this may need further examination in the Measurement Substudy regarding the feasibility of its use in the *MSHS Survey*.

Recommendation: Ages and Stages Questionnaire (ASQ-3) –Personal-Social Functioning subscale. *(Parent and/or teacher report available in **English & Spanish**; for children birth - 3 years old; 10-15 minutes for total ASQ-3)*

Description & Rationale: The Personal-Social Functioning subscale of the ASQ-3 assesses a number of personal, social and adaptive behaviors such as the child's feeding and undressing him/herself, playing interactively with dolls or stuffed animals, attempts to elicit a parent's attention or request assistance, etc.

Implications for a Measurement Substudy: Issues regarding the ages and stages ongoing validation work are discussed above (see section on ASQ-3 Communication Subscale). It is recommended that prior to implementation, any new data from validation of the ASQ-3 be reviewed.

Approaches to Learning

Recommendation: Ages and Stages Questionnaire (ASQ-3) –Problem-Solving subscale. *(Parent and/or teacher report available in English & Spanish; for children birth - 3 years old; 10-15 minutes for total ASQ-3)*

Description & Rationale: The ASQ-3 Problem-Solving subscale assesses age-appropriate reasoning or problem solving skills. For example, at 16 months, parents are asked if their child solves developmentally appropriate tasks (e.g., will imitate the parent's scribbling with a crayon on paper, can figure out how to retrieve an item out of reach, or retrieve items that have been dropped into a clear bottle).

Implications for a Measurement Substudy: Issues regarding the ages and stages ongoing validation work are discussed above (see section on ASQ-3 Communication Subscale). It is recommended that prior to implementation, any new data from validation of the ASQ-3 be reviewed.

Motor Skills

Recommendation: Ages and Stages Questionnaire (ASQ-3) –Motor Skills subscale. *(Parent and/or teacher report available in **English & Spanish**; for children birth - 3 years old; 10-15 minutes for total ASQ-3)*

Description & Rationale: The ASQ-3 Motor Skills subscale assesses both gross and fine motor skills. For example, at 16 months, the items ask about how well the child walks, whether

the child climbs on objects to reach things, whether the child can stack blocks, throw a ball, turn pages in a book, etc.

Implications for a Measurement Substudy: Issues regarding the ages and stages ongoing validation work are discussed above (see section on ASQ-3 Communication Subscale). It is recommended that prior to implementation, any new data from validation of the ASQ-3 be reviewed.

PRESCHOOLERS (3-5 YEARS)

Overall Communication & Language Development in English, Spanish, and/or Other Languages

Recommendation: English & Spanish Pre-LAS Language Screener: Simon Says/ Tio Simon Dice & Art Show/ Exposición de Arte subtests *(Direct child assessment in **English &/or Spanish**; 4 minutes each)*

Description & Rationale: The Simon Says and the Art Show tasks are two subtests from the Oral Language Development Scale (OLDS) of the Pre-LAS 2000 (Duncan & DeAvila, 1998). These 2 subtests briefly measure children's auditory comprehension, expressive vocabulary, and receptive and expressive language in either English and/or Spanish. The English versions were used in the *ECLS-K* study to determine whether children had a minimum level of English proficiency required to meaningfully take part in direct child assessment (NCES, 2001), and both versions were used in the *MSHS Research Design Development Project* (ACF, 2004). Although the Simon Says and Art Show subtests are intended for use with children ages 4 to 6 years of age, they also were used successfully with 3 year old children in the *Head Start Impact Study* (ACF, 2005) and the *MSHS Research Design Development Project* (ACF, 2004).

It is suggested that both the English and Spanish Pre-LAS subtests could be used in the *MSHS Survey* as basic indicators of language dominance and minimal oral proficiency in each language in order to help guide language routing decision-making for the other direct child assessments (see Figure 11.3). Although a very large majority of the MSHS population is comprised of children from Spanish-speaking homes, there is considerable variability in children's relative proficiency in Spanish and/or English. In order to explore this variability, screening and assessment across languages is necessary. For example, based upon the results of the initial language screening used in the *2004 MSHS Research Design Development Project*, 40% were assessed only in Spanish, 27% were assessed only in English and 26% were assessed in both languages. Thus, the initial pre-screening facilitated the process of determining when it was appropriate to utilize a dual language assessment approach versus assessing in only one language.

Recommendation: Preschool Language Scale - 4th Edition (PLS-4) – Auditory Comprehension Subscale (*Direct child assessment in **dominant language – English or Spanish** for 3-5 year olds; 15 minutes)*

Description & Rationale: The PLS-4 Auditory Comprehension subscale assesses children's receptive language or their ability to process and understand spoken language, including receptive vocabulary, morphology, syntax, investigative language skills and phonological awareness. There are English and Spanish versions. The Spanish version is one of the few available measures that was concurrently developed along with the English version, and is not a translated or adapted version. As such, the content and psychometric validity of PLS-4 for Spanish-speaking children is generally higher than for other measures. However, given the final refinement and selection of items and use of separate normative samples to improve the respective content validity of each version, the scores from the Spanish and English versions are not directly comparable. Nevertheless, they are more comparable than the scores derived from many other English and Spanish versions of measures. For example, the PPVT-4 was another strong candidate for a receptive language measure. However, in the corresponding Spanish version, Test de Vocabulario en Imágenes Peabody (TVIP) neither the items, nor the normative data have been updated since the 1983 version was published.

The previous version, the PLS-3, was successfully used in the National Survey of Child and Adolescent Well-Being (NSCAW; Administration for Children and Families, 2003). The PLS-4 was used in the small pilot study of the 2004 *MSHS Research Design Development Project* (ACF, 2004). Finally, Boyce, Roggman, Jump, and Innocenti (2008) successfully used the Spanish PLS-4 with a sample of 72 MSHS children between the ages of 2-5 years old. As noted in the previous section, if ACF were to decide to use direct assessments with the younger infants and toddlers versus indirect parent and teacher reports, the PLS-4 Auditory Comprehension subscale may be a good addition either replacing or adding to the MacArthur-Bates CDI/IHDC in English and/or Spanish.

Recommendation: Expressive One-Word Picture Vocabulary Test-Spanish Bilingual Edition (EOWPVT-SBE)**.** *(Direct child assessment* ***conceptually scored across both English & Spanish, for 4-5 year olds only****; 5-10 minutes)*

Description & Rationale: The EOWPVT-SBE assesses children's total expressive vocabulary abilities across both English and Spanish by allowing children to provide answers in either English or Spanish. Thus, the measure assesses bilingual children's overall ability to name pictures rather than the ability to name pictures separately in English or Spanish. This is a feature that is not present in other measures of its kind and therefore is ideally suited for the wide range and variability of MSHS children's bilingual language abilities. The EOWPVT-SBE has been shown to be a promising measure of overall expressive language in an evaluation of a preschool initiative currently serving a large proportion of 4-year old, Spanish-speaking DLL children (Love, Atkins-Burnett, Vogel, Xue, Mabutas, Carlson, Martin, Paxton, Caspe, Sprachman & Sonnenfeld, 2009). Although not available for 3 year olds, inclusion of the EOWPVT-SBE for the older 4-5 year olds uses one of the only available conceptually scored measures of children's abilities across languages. Thus, given the variability in MSHS children's linguistic proficiencies across English and Spanish, the conceptually scored EOWPVT-SBE would yield the most comparable overall language scores for the greatest proportion of MSHS children in the MSHS Survey.

Early Literacy Development, Biliteracy, & Math Skills

Recommendation: Woodcock Johnson Psycho-Educational Battery – Third Edition (WJ-III) Letter-Word ID subtest & Woodcock Muñoz Batería III (WM III) *Identificacion de letras y palabras.* *(Direct child assessment administered in **both English and Spanish**, starting with the dominant language based upon the screener; 3-5 year olds; 5 minutes each).*

Description & Rationale: The WJ-III Letter-Word ID & WM-III *Identificacion de letras y palabras* captures children's early literacy skills, namely alphabet letter knowledge (at the younger ages) and reading of single words (at the older ages). These subtests were used successfully in at least four large-scale studies—Head Start FACES (e.g., ACF, 2003; ACF, 2006), Head Start Impact Study (ACF, 2005), and the Early Head Start pre-kindergarten follow-up study (ACF, 2006). Since many of the MSHS children have developing bilingual skills and also may be in classrooms with a mix of English and Spanish instructional activities, we recommend a dual administration of the WJ-III Letter-Word ID in English and the WM-III *Identificacion de letras y palabras subtests* in Spanish.

Recommendation: Woodcock Johnson Psycho-Educational Battery – Third Edition (WJ-III) Applied Problems subtest & Woodcock Muñoz Batería III (WM III) *Problemas Aplicadas.* *(Direct child assessment administered in **both English and Spanish**, starting with the dominant language based upon the screener; 3-5 year olds; 5 minutes each).*

Description & Rationale: The WJ-III Applied Problems & WM-III *Problemas Aplicadas* subtests assess children's early math skills, including simple counting, addition or subtraction operations. These subtests established reliability and validity and have been used successfully in at least five large-scale studies—Head Start FACES (e.g., ACF, 2003; ACF, 2006), Head Start Impact Study (ACF, 2005), Early Head Start prekindergarten follow-up study (ACF, 2006), and the First 5 LA UPCOS study (Love, et al, 2009). Again, the variations in bilingual skills and bilingual classroom practices suggest that it would be appropriate to use a dual administration of the WJ-III Applied Problems in English & WM-III *Problemas Aplicadas* in Spanish.

Implications for the Measurement Substudy: There are two potential alternative recommendations that might be examined prior to implementation of the Survey. One possible alternative would be to administer only the version of the subtest in the child's primary language or more dominant (as determined by the language screening process), and then allow children to respond in either English or Spanish. This would be similar to the approach used in the First 5 LA UPCOS study with a linguistically diverse sample of preschoolers (Love, et al, 2009). However, since this approach deviates from the standardized administration procedures, it may not be possible to use the publisher norms.

The applied problems subset covers simple math skills, be leaves off other early learning skills that are important constructs. A second alternative is to consider supplementing the WJ-III Applied Problems & WM-III *Problemas Aplicadas* subtests with a few extra items from the ECLS-B and ECLS-K mathematics assessments that tap additional areas of mathematics skills not covered by the subtests, such as spatial abilities, data analysis, and measurement. This approach is also being used in the First 5 LA UPCOS study (Love, et al, 2009), although

it would require a special arrangement with the Educational Testing Service (ETS) for the scoring of the items.

Recommendation: Child's Accomplishments (*Parent report; 3-5 year olds; 3 minutes; captures information on child's ability to identify colors by name, letters and own name in print, as well as pretends to write, write/draw, writes own name*).

Description & Rationale: The parent report of children's emergent literacy skills consists of a series of 9 questions that asks parents how many letters of the alphabet the child knows, how many colors he or she can identify, how high he or she can count, whether the child can write his or her first name, etc. The set of questions was first developed for the 1993 National Household Education Survey on School Readiness, and has since been used successfully in both the Head Start Impact Study (ACF, 2005) and the Head Start FACES Study (e.g., ACF, 2003; ACF, 2006). In the Head Start Impact study, there were significant impacts found for children at the end of a year in Head Start, for both the English and Spanish speaking children in the study sample (ACF, 2005). These items will supplement the information obtained from the direct assessments listed above.

Motor Skills

Recommendation: Speed DIAL: Screening version of the Developmental Indicators for the Assessment of Learning – 3rd Edition (DIAL—3) – Motor Subscale. (*Direct child assessment in child's dominant language, **English or Spanish**; 5 minutes)*

Description & Rationale: The Speed DIAL is a brief developmental screening tool designed to determine the need for further developmental assessment for potential disabilities for children between the ages of 3 years to 6 years, 11 months. The brief version consists of 10 sets of items derived from the full DIAL-3 (correlations between versions was .94) and examines the areas of Motor, Concepts, and Language. The Motor subscale includes 4 sets of items assessing gross motor skills (jumping, hopping, skipping and catching), as well as fine motor skills (building with blocks, cutting, copying shapes and letters, and writing, and pointing to body parts). The Spanish version of the DIAL-3 was developed concurrently with the English version, and bias reviews were conducted to ensure the cultural, socioeconomic, and ethnic appropriateness of the measure (Chen, Wang, & Czudnowski, 2000). The English and Spanish versions were statistically equated such that their scores are comparable across languages. The DIAL-3 has been successfully used in a study with 1,236 native Spanish-speaking children in Head Start (Anthony & Assel, 2007), where the authors suggested that the Motor scale may tap into not only gross and fine motor skills, but also visual spatial functioning.

Emotional/Behavioral Regulation

Recommendation: Leiter-R Examiner Rating Scales – Cognitive-Social scale *(Assessor Rating, 5-8 minutes)*

Description & Rationale: The Cognitive-Social Scale from the Leiter-R Examiner Rating Scales is comprised of 4 subscales that ask the assessor to rate the child's attention, activity level, self-regulation, and sociability during the direct child assessment session. The scales have been used successfully in three large-scale studies (FACES 2006, Early Head Start

Transition to Prekindergarten [ACF 2006]) and Home Visiting 2000 [Olds et al. 2004]). The 27 items on these four subscales make up the cognitive/social scale and have demonstrated good reliability and predictive validity. The Leiter rating scales have been used successfully in at least five large-scale studies—Head Start FACES 2006 (ACF, 2006), Head Start Impact Study (ACF, 2005), Early Head Start prekindergarten follow-up study (ACF, 2006), Home Visiting 2000 (Olds et al. 2004) and the First 5 LA UPCOS study (Love, et al, 2009).

Social Behavior

Recommendation: Preschool and Kindergarten Behavior Scales–2 - Positive Social Skills and Problem Behavior subscales. *(Parent and Teacher report in preferred language of* ***English or Spanish****; full version: 8-12 Minutes; short version: 2-3 minutes)*

Description & Rationale: The PKBS-2 provides a measure of social-emotional competence. The full PKBS-2 measure is comprised of 34 positive behaviors and 42 problem behaviors along five scales (five supplementary problem behavior scales are also available): social cooperation, social independence, social interaction, externalizing problem behaviors, and internalizing problem behaviors. The measure is available in both English and Spanish. A 16-item adapted version of the English and Spanish versions of the PKBS-2 Positive Social Skills subscale is being recommended for the *MSHS Survey*. In *ECLS-B*, the 16 items were selected from the PKBS-2 to use in its national study with preschoolers. This short measure was then translated and field tested in Spanish prior to use in the *ECLS-B*. An adapted Spanish version of the PKBS-2 positive social skills subscale also has been successfully used in the evaluations of 2 preschool initiatives currently serving large proportions of Spanish-speaking DLL children in Los Angeles (Love, Atkins-Burnett, Vogel, Xue, Mabutas, Carlson, Martin, Paxton, Caspe, Sprachman & Sonnenfeld, 2009) and Chicago (Ross, Moiduddin, Meagher & Carlson, 2008). Cognitive interviews and focus groups were used to examine the individual items for any potential cultural and/or linguistic concerns, and adapt them accordingly.

Implications for a Measurement Substudy: Though promising and used with both English and Spanish speaking children and parents in several major preschool evaluations, it would be helpful to have some additional psychometric information about its use with Spanish-speaking parents of 3-year old children. Secondary analyses of ECLS-B data could further confirm the reliability and validity of this measure for Spanish-speaking three-year-olds. If considered for the *MSHS Measurement Substudy*, it also might be useful to further examine the psychometrics of the measure with the MSHS population.

Approaches to Learning

Recommendation: Preschool Learning Behavior Scale (PLBS) (McDermott, Leigh & Perry, 2002). *(Teacher Report; 5 minutes)*

Description & Rationale: The PLBS is a teacher rating of learning-related behaviors for children between the ages of 3 and 5-1/2 years. The PLBS assesses the child's approaches to learning, including the child's motivation to learn and behaviors that enhance the child's learning. The PLBS has been designed to be utilized by classroom teachers to rate individual

children on a series of 29 questions pertaining to learning-related behaviors. It contains three subscales: Competence Motivation, Persistence/Attention, and Attitudes Toward Learning. Teachers are asked to indicate the extent to which a given statement (e.g., "Pays attention to what you say") is characteristic of the child in the past month, from 1"not true" to 3 "very true" or "often true". An examination of the factor structure invariance across ethnic groups found no differences, thereby supporting its use with diverse populations. There also is a Spanish version, the *Escala de Conductas de Aprendizaje Prescholar* or ESCAP, which has been shown to have a comparable 3 factor structure and good psychometric properties (Hahn, Schaefer, Merino & Worrell, 2009). The PLBS was used in the pilot test of the *MSHS Research Design Development Project* (ACF, 2004) and MSHS children's scores were comparable to those from other preschool studies.

The list of measures presented above represents a set of the most promising ones for the *MSHS Survey*. However, as noted in several of the descriptions, a few additional steps would improve the selection. Suggestions ranged from adapting to create shorter versions, confirming cultural appropriateness, confirming linguistic consistency, and gathering preliminary psychometric data with the MSHS population. Chapter 9 describes the proposed Measurement Substudy which would allow for the piloting and further examination of many of the above measures, as well as possible alternative measures that are worth considering for the larger *MSHS Survey*.

Table 11.3 Psychometric Properties of the Child Outcome Measures Recommended for the MSHS Survey Design Project: Infant & Toddler in Section A and Preschoolers in Section B

- Information in the following tables is drawn from publisher's manuals, unless otherwise indicated.
- The "Standardization" section includes the measure's year of standardization and sample size (N) and, whenever possible, information about representativeness and other standardization sample characteristics
- "Key Studies" that have utilized the measure, including large-scale or national studies, studies using a Head Start or MSHS sample, and studies conducted in Spanish.
- Correlations are listed as Cronbach's alphas, unless otherwise indicated

Table 11.3 Section A: Review of Possible Infant & Toddler Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
MacArthur-Bates Communicative Development Inventories (CDI) — Short Forms English Version 8-30 mos. (Fenson, Marchman, Thal, Dale, Reznick, & Bates, 2007)	**Standardization** N: 1,379 children without disabilities Representativeness: Not nationally representative, as parents were more educated and less ethnically diverse than the general population **Key Studies** *Early Head Start Research and Evaluation Project (EHSREP), ECLS-B*, & recommended use in *Baby FACES*. The *2004 MSHS Research Design Development Project* used the long forms which are highly correlated with the short forms (ranging from .97 to .99).	Parent report of early receptive & expressive language skills: Infant Form (8-16 mos): - Production & understanding of words & phrases Toddler Form (16-30 mos.): - Production & understanding of words & phrases - Development of complex sentences	5-10 min.	Infant form: .97 Toddler form: .99	Infant Form: .88- .90 Toddler Form: .74 (Form A) .93 (Form B)	Not Available	Not Available	In the *Early Head Start Research and Evaluation Project (EHSREP)*, the 24-month old children's scores on the CDI improved after Early Head Start intervention.	Concurrent validity established between the full measure and the PLS, Expressive One Word Picture Vocabulary Test, and BSID language subscales .97 to .99 correlation with full CDI measure, across scales and versions

Table 11.3 Section A: Review of Possible Infant & Toddler Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
MacArthur-Bates - Version Breve del Inventario del Desarrollo de Habilidades Comunicativas – Palabras y Anunciados Spanish Version (Jackson-Maldonado, Thal, Marchman, Newton, Fenson, Conboy, 2003)	**Standardization:** Norming of Spanish short forms is in progress. **Key Studies** *Early Head Start Research and Evaluation Project (EHSREP), ECLS-B,* & recommended use in *Baby FACES.* The 2004 MSHS Research Design Development Project used the long forms which are highly correlated with the short forms (ranging from .97 to .99).	Parent report of early receptive and expressive language skills	5-10 min.	Not Available for short form	Not Available for short form	Not Available for short form	Not Available for short form	Not Available for short form	Not Available for short form

Table 11.3 Section A: Review of Possible Infant & Toddler Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
Ages & Stages Questionnaire, 3rd Edition (ASQ-3) English Version 1-66 mos. (Squires, Twombly, Bricker, & Potter, 2009)	**Standardization** Year: 2009 N: 18,572 questionnaires filled out by parents and caregivers of 12,695 children, aged 1 mo. – 5 yrs. 6 mos. Representativeness: Sample included children from 50 states, and mirrored the U.S. population in terms of race/ethnicity Other sample characteristics: All socioeconomic groups were represented. **Key Studies** *2004 MSHS Research Design Development Project* (with a small subsample)	Parent Report; Screener Subscales include (6 items per subscale): - Communication - Gross Motor - Fine Motor - Personal-Social - Problem-solving	10-15 min.	.51-.87	.92	.93	Pearson correlations between developmental areas and overall score: .51-.85	Identifying eligibility for services: Sensitivity: .86, Specificity: .85	Moderate to high agreement with the developmental level classifications of the Battelle Developmental Inventory (BDI).

Table 11.3 Section A: Review of Possible Infant & Toddler Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
Ages & Stages Questionnaire, 3rd Edition (ASQ-3) Spanish Version 1-66 mos. (Squires et al., 2009)	**Standardization** (see above) Spanish speaking families were included in the overall norming sample, but separate psychometrics were not examined for this the Spanish-speaking subsample. Several hundred questionnaires in the norming sample were from the parents of MSHS children from Oregon, Washington, and California (Squires, 2008). **Key Studies** Currently being used in a study with MSHS children in North Carolina (Squires, 2009, personal communication).	Parent Report; Screener Subscales include (6 items per subscale): - Communication - Gross Motor - Fine Motor - Personal-Social - Problem-solving	10-15 min.	Not Available	Not Available	Not Available	Not Available	Spanish risk and English risk samples appear to have similar cutoff scores (Squires, 2008)	Not Available

Table 11.3 Section A: Review of Possible Infant & Toddler Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
The Brief Infant Toddler Social Emotional Assessment (BITSEA) English version 12-36 mos. (Briggs-Gowan & Carter, 2006) (Psychometric information from Briggs-Gowan, Irwin, Wachtel, & Cicchetti, 2004)	**Standardization** Year: 1998 N: 1,237 children, aged 12-36 mos. Representativeness: Not nationally representative, as children who were likely to have significant developmental delays or whose parents did not speak English were excluded. Other Sample Characteristics: Participants lived in Connecticut.	Parent Report; Screener (42 items) Domains: 1) Social-Emotional Competence (11 items) 2) Social-Emotional & Behavior Problems (31 items)	7-10 min.	Problem Scale: .79 Competence Scale: .65	.79 - .92	.55-.78 Mother-Father: - Problem: .68; - Competence: .61 Parent-Child-care Provider: - Problem: .28; - Competence: .59	Not Available	Significant increase in Competence Scale scores with age group. No age effect observed for the Problem Scale. On average, lower scores are seen in boys than in girls.	Significant correlation between BITSEA Problem Scale and: CBCL/1.5-5y, ITSEA Problem Scale, and independent evaluator ratings Significant correlation between Competence Scales on the BITSEA and ITSEA
The Brief Infant Toddler Social Emotional Assessment (BITSEA) Spanish Version 12-36 mos.	**Standardization** Information not yet available.	Parent Report; Screener Domains: 1) Social-Emotional **Competence** 2) Social-Emotional & Behavior **Problems**	Unknown	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
Pre-LAS 2000, Art Show & Simon Says subtests English Version 4-6 yrs. (Duncan & DeAvila, 1998)	**Standardization** Year: 1997 N: 956 children Representativeness: Participants were from 17 schools in 6 states and the District of Columbia Other Sample Characteristics: Primarily low to middle SES **Key Studies:** *2004 MSHS Design Study, FACES '03 & '06, HSNRS, ECLS-K, ECLS-B, NCEDL, First 5 LA UPCOS Study* Full Pre-LAS 2000 used by Boller et al (2007) for program evaluation. López & Greenfield (2004) used the Pre-LAS 2000 to examine cross-language transfer in Head Start preschoolers.	These two direct assessment subtests are used as a screener of receptive & expressive language. The subtests belong to the Oral Language component of the full measure, which also contains a Pre-Literacy component.	4 min.	.92 - .93	The Technical Report presents the data comparing Forms C and D as test-retest reliability: Oral Language: .99 (total score), .95 (proficiency level)	Not Available for these subtests, though more subjective components of the full measure have inter-rater reliabilities of .88-.90	Subtest intercorrelations within the Oral Language component of the full measure: .61 - .67	Age- and grade-related differences suggest that older children perform better than younger children on the full measure. Children from English home backgrounds score higher than language-minority children on the full PreLAS 2000.	.63 correlation between the full Pre-LAS 2000 and the Preschool IDEA Proficiency Tests (PreIPT-2) in DLL preschool children (Siders, 2003)
Pre-LAS 2000, Art Show & Simon Says subtests Spanish Version 4-6 yrs.	**Standardization** Year: 1997 N: 397 children, aged 3-8 yrs. Representativeness: Participants lived in 5 countries: Colombia, México, Rep. de Panamá, Puerto Rico & the US. A greater proportion of younger children were in-	These two direct assessment subtests are used as a screener of receptive & expressive language. The subtests	4 min.	Oral Language Component of full measure: .66 - .88 Correla-	Not Available	Not Available for these subtests, though more subjective components of	Oral Language Component subtest intercorrelations: .71 - .79	On the full PreLAS 2000, children from Spanish-speaking countries scored higher than language-minority children in the US.	Not Available

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
(Duncan & DeAvila, 1998)	cluded in the Spanish sample than in the English norming sample. **Other Studies** *2004 MSHS Design Study, FACES '03 & '06, HSNRS, First 5 LA UP-COS Study* Used by López & Greenfield (2004) to examine cross-language transfer in Head Start preschoolers.	belong to the Oral Language component of the full measure, which also contains a Pre-Literacy component.		tions of subscales to total score: .60 - .83		the full measure have inter-rater reliabilities of .87-.88			
Preschool Language Scale-4 (PLS-4), Auditory Comprehension subscale **English** version Birth – 6 yrs., 11 mos. (Zimmerman, Steiner & Pond, 2002)	**Standardization** Year: 2001 N: 1,564 children, aged 2 days. – 6 yrs., 11 mos. Representativeness: Sample was comparable to the 2000 US Census in terms of parent education, geographic region, and race. **Key Studies** *2004 MSHS Design Study, NICHD*	Direct assessment of auditory comprehension skills, including: - Receptive Vocabulary - Morphology - Syntax - Investigative Language Skills - Phonological Awareness	15-20 min for each of 2 subscales	.66 - .94	.83 - .96	Not Available for this subscale	Not applicable (only one construct examined).	Sensitivity/specificity in identifying language disorders: .80/.92 Children with Developmental Language Delays, Autism, and Hearing Impairments scored lower than norm groups on the full version of the PLS-4. (Berry, Bridges, & Zaslow, 2004)	Moderate to high correlations with the Denver-II screener (Frankenberg & Bresnick, 1998) Correlation between the Auditory Comprehension subscales of the PLS-3 and PLS-4: .65

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
Preschool Language Scale-4 (PLS-4), Auditory Comprehension subscale **Spanish** version Birth – 6 yrs., 11 mos. (Zimmerman et al., 2002)	**Standardization** Year: 2001 N: 1,334 children Representativeness: Sample was based on U.S. 2000 census. Other Sample Characteristics: 99.2% of sample was Hispanic children from 15 states. A majority of these children were of Mexican origin. **Key Studies** Boyce, Roggman, Jump & Innocenti (2008) used the Spanish PLS-4 with MSHS children. Bunta & Ingram (2007) used the Spanish PLS-4 to examine speech rhythm acquisition of bilingual Spanish-English speaking children.	Direct assessment of auditory comprehension skills, including: - Receptive Vocabulary - Morphology - Syntax - Investigative Language Skills - Phonological Awareness	15-20 min for each of 2 subscales	Among all age groups: .79 Among preschoolers only: .77-.89	Full Measure Subscales: .73-.89 Full Measure Total Language Score: .80-.89	Not Available for this subscale.	Not applicable (only one construct examined).	Sensitivity in identifying a child with a language disorder = .91, Specificity = .63 Children with more consistent exposure to Spanish may score higher on the full measure, as evidenced by the generally superior performance by children living in Peru and Puerto Rico as compared to children residing in the U.S. Children with language disorders scored lower than norm groups on the full measure.	Correlations between PLS-4 Spanish and PLS-3 Spanish: Auditory Comprehension: .67 Expressive Communication: .71

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
Expressive One-Word Picture Vocabulary Test, Spanish Bilingual Edition (EOWPVT-SBE) **Spanish/English** 4 yrs., 0 mos. – 12 yrs., 11 mos. **Brownell, R. (2001).**	**Standardization** Year: 2000 N: 1,050 children Representativeness: Participants matched the demographic characteristics of the U.S. Hispanic population, with an overrepresentation of individuals who speak a Mexican dialect. **Key Studies:** *First 5 LA UPCOS Study, Early Reading First*	Direct assessment of: Expressive language ability (in this case, ability to name pictures) for children bilingual in English and Spanish	10-15 min.	.92-.93 among preschoolers Corrected split-half (odd- vs. even-numbered items): .96 overall and .93-.95 among preschool children.	***.91***	Not Available	Not Applicable (only one construct examined.)	Older children perform better than younger children (uncorrected correlation of raw scores to chronological age = .75). Significant difference in performance among mental retardation, language disorder, & learning disorder groups. Individuals with articulation difficulties did not perform differently than normative group.	Correlation of .43 with the Receptive One-Word Picture Vocabulary Test, Spanish Bilingual Edition (ROWPVT-SBE). Corrected correlations with SAT-9 subtests: Language Achievement (.75), Reading Achievement (.67), & Receptive Vocabulary (.57), indicating that English academic achievement relates significantly to children's vocabulary across English and Spanish (sample didn't include preschoolers).
Woodcock Johnson -III (WJ- III) **Letter-Word Identification** & **Applied Problems** Subtests	Batteries co-normed on same population; a "nationally representative sample" of 8,818 participants in 100 communities (including 1,143 pre-k children) (See Woodcock-Muñoz below for Spanish version)	Tests of Achievement (e.g., Applied Problems, Letter-Word Identification, story recall, understanding directions,	5 min. per subtest	.82 - .98	.70s-.90s	Not Available	Not Available	Not Available	Concurrent: Compared with Wechsler Preschool and Primary Scale of Intelligence (Standard batteries .73)

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
English versions **(Mather and Woodcock 2001)**	**Key Studies**: *NJ Abbott Preschool, NCEDL, FACES, PCER*	passage comprehension spelling, word attack, academic knowledge, sound awareness)							
Batería III Woodcock-Muñoz **Identificacion de Letras y Palabras & Problemas Aplicadas subtests** **Spanish** versions **(Woodcock and Muñoz-Sandoval 2005)**	Publisher's website refers to 8,800 participants used to norm WJ-III. Spanish adaptation/ translation of the Woodcock-Johnson (See Woodcock-Johnson III above for English version) **Key Studies**: *NJ Abbott Preschool, NCEDL, HS FACES, PCER*	Tests of Achievement (e.g., Applied Problems, Letter-Word Identification, story recall, understanding directions, passage comprehension spelling, word attack, academic knowledge, sound awareness)	5 minutes per subtest.	Publisher website reports WJ-III reliabilities of .80 or higher, with most higher than .90.	Not Available	Not Available	Not Available	Concurrent: Several small studies conducted; while some subtests of survey strongly correlated, others not examined.	Not Available
Child's Accomplishments	Standardization information not available. **Key Studies:** *1993 National Household Education Survey on School Readiness; Head Start Impact Study (ACF, 2005) and the Head Start FACES Study* (e.g., ACF, 2003; ACF,	Parent Report: Child's ability to identify colors, recognize name, recognize letters, pretend to write, write/ draw, write	3 min	Not Available	Not Available	Not Available	Not Available	Has been shown to correlate with children's age and disability status, socioeconomic family characteristics, and with other measures of children's cognitive and social development.	Not Available

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
	2006).	name, pretends to read							
Speed DIAL from DIAL-3 **Motor Subscale** **English** Version 3 yrs., 0 mos. – 6 yrs., 11 mos. (Mardell-Czudnowski & Goldenberg, 1998)	**Standardization** *Note:* These standardization data are from the DIAL-3 standardization. Year: 1995-1997 N: 1,560 children, aged 3-6 yrs. Representativeness: Sample was comparable to 1994 U.S. census data. Other Sample Characteristics: English language learners were only included if their English language ability was determined to be age-appropriate. **Key Studies** Pretti-Frontczak, Kowalski, & Brown (2002) used the DIAL-3 in a statewide preschool survey.	10 direct assessment items from the full Speed DIAL-3, which cover following areas: - Motor: gross and fine motor (4 items); - Language: receptive and expressive (2 items); - Concepts: (e.g. sorting, color naming (3 items)	5 min. for Motor Scale	.80 (Emmons & Alfonso, 2005)	.82-.84	Not Available	DIAL-3: Anthony, Assell, & Williams (2007) suggest that a different factor structure (Verbal Ability, Nonverbal Ability, & Achievement) might be more appropriate than the original DIAL-3 theoretical model for use with low-income Head Start children – although the items on the original Motor Scale and Non-Verbal Ability scale were the same.	According to the manual, there is a correlation of .94 between the DIAL-3 scores and Speed Dial scores. Children with physical, cognitive, communication, social/emotional, or adaptive special needs score lower than their peers on the DIAL-3	Correlations between the DIAL-3 and: 1) Early Screening Profiles (.61), 2) Battelle Screening Test (.51), 3) Bracken Screening Test, Brigance Preschool Screen (.66-.79), 4) Differential Ability Scales, 5) PPVT-3 (.57-.69).
Speed DIAL from DIAL-3 **Motor Subscale** **Spanish** Version	**Standardization** *Note:* Item Response Theory (IRT) was used to equate norms between the English and Spanish samples. Year: 1995-1997	10 direct assessment items from the full Speed DIAL-3, which cover following areas:	5 min. for Motor Scale	DIAL-3 Spanish: .86 (Chen et al, 2000)	DIAL-3 Spanish: .87 (Chen et al, 2000)	Not Available	DIAL-3 (Spanish): Anthony, Assell, & Williams (2007) reported that a different factor structure (Verbal Ability,	DIAL-3 (Spanish): The statistical equating approach utilized in developing the Spanish norms suggests that similar results may be found as in	Not Available

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
3 yrs., 0 mos. – 6 yrs., 11 mos. (Mardell-Czudnowski & Goldenberg, 1998)	N: over 600 children, aged 3 yrs. 0 mos. – 6 yrs. 11 mos. Representativeness: Because of the Rasch modeling approach used, participants were not chosen on the basis of demographic characteristics. Other Sample Characteristics: Participants were monolingual Spanish speakers from the U.S., Puerto Rico, and Panama. **Key Studies:** Anthony & Assel (2007) used the DIAL-3 in a study with 1,236 native Spanish-speaking children in Head Start.	- Motor: gross and fine motor (4 items); - Language: receptive and expressive (2 items); - Concepts: (e.g. sorting, color naming (3 items)					Nonverbal Ability, & Achievement) better described Spanish-speaking Head Start attendees than did the original DIAL-3 theoretical model – although the items on the original Motor Scale and Non-Verbal Ability scale were the same.	the English version.	
Leiter-R Examiner Ratings - Cognitive-Social Sca (Roid & Miller, 1997)	**Standardization** The Leiter-R was standardized on 1,719 typical children & 692 atypical children (representing nine clinical groups) ages 2 to 20.11 years, using a national stratification plan based on 1993 U.S. Census Bureau statistics. **Key Studies** *FACES, EHS, Home Visiting 2000* (Olds et al. 2004). Also, the *HSIS* & *First 5 LA UPCOS Study* (Love, Atkins-Burnett, Vogel, Xue, Mabutas, Carlson, Martin, Paxton, Caspe, Sprachman	Observer rating of: - Sustained attention - Organization/ Impulse control - Activity level - Sociability	5-8 min.	.81 .98 in First 5 UPCOS (Vogel et al., 2008)	Not Available	Not Available	Not Available	Not Available	Correlates .85 with WISC-III Full Scale IQ

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
	& Sonnenfeld, 2009), both which included large numbers of children who spoke Spanish.								
Preschool and Kindergarten Behavior Scales –2 (PKBS-2) – **Positive Social Skills & Problem Behaviors subscales** **(using *adapted items from the UPCOS study version*)** 3-6 yrs. (Merrell, 2002)	**Standardization** Year: 2002 N: 3,317 preschool & kindergarten children (ages 3 to 6 years). Representativeness: Ethnically representative of the U.S. Census population. The Western U.S. was overrepresented & made up 77% of the sample. The same measure is used for ratings by parents & teachers, with separate norms provided for the home & school environments. **Key Studies:** *ECLS-B* & the *First 5 LA UPCOS Study*. In the *UPCOS* study, some items were adapted based on feedback on cultural and linguistic appropriateness of from focus groups and cognitive interviews.	Parent & teacher report of: (76 items total) - Cooperation - Interaction - Independence - Internalizing Problems - Externalizing Problems	8-12 min.	.84 - .97	.58 -.87	.36 -.63 between teachers & paraprofessionals; lower between home & school	Not Available	Not Available	Moderate to strong correlations with seven different assessments, across multiple studies
Preschool Learning Behaviors Scale (PLBS) **(McDermott, Green, Francis, and Stott**	**Standardization:** The normative sample of 3-5 year old preschoolers reflected the demographics of the preschool aged population in the U.S. at the time, including racial/ethnic diversity. An examination of factor structure invariance across ethnic groups found no differences, thereby sup-	Teacher Ratings of approaches to learning (29 items) across 3 Subscales: - Competence Motivation,	5 min.	.75-.85 for the Subscales & .88 for the Total Score	.82-.94	.57-.73	The original 3 factor structure was replicated with a large urban Head Start sample (n=642) (Fantuzzo, Perry & McDermott,	Not Available	Correlations between PLBS and: PKBS Total Social Skills: (.63), Total Problem Behaviors: (-.52), & Total Externalizing: (-.50)

Table 11.3 Section B: Review of Possible Preschool Measures for the MSHS Survey									
Measure	**Standardization & Key Studies**	**Key Constructs/ Domain**	**Time**	**Reliability**			**Validity**		
				Internal	**Test-Retest**	**Inter-rater**	**Internal Construct**	**External Construct**	**Criterion**
2000; McDermott, Leigh & Perry, 2002).	porting its use with diverse populations. **Key Studies:** *Head Start FACES, & PCER* studies	- Persistence/ Attention, and - Attitude Toward Learning					2004)		Differential Abilities Scale: (.32) Revised Social Skills Rating Scale Factors: -Self-control: (.76); -Interpersonal Skill: (.62); -Verbal Assertion: (.41); -Externalizing: (-.65) -Internalizing: (-.46)
Escala de Conductas de Aprendizaje Prescholar (ESCAP) Spanish **version of PLBS** **(Hahn, Schaefer, Merino & Worrell, 2009)**	**Standardization:** The Spanish version was examines with a sample of 359 preschool aged children in Peru (between the ages of 2-6 years old).	Teacher Ratings of approaches to learning (29 items + 5 new items on the Spanish version) across 3 Subscales: - Competence Motivation, - Persistence/ Attention, and - Attitude Toward Learning	5 min.	.73- .95 for the 3 Subscales & .92 for the Total Score.	Not Available	Not Available	It has been shown to have a comparable 3 factor structure as compared to the PLBS	Not Available	Not Available

11.5 Overview of Parent Interviews about Child, Family, and the MSHS Program

MSHS parents (and other caregivers in the absence of parents) are essential components of the MSHS program. Further, they are instrumental in their children's lives and possess a unique understanding of the well-being of their children and their families. As such, if ACF pursues program visits, parents will be interviewed to provide their perspectives on the overall MSHS experience, their child's participation in MSHS, and the family.

The development of the parent interview was guided by the *MSHS Survey* conceptual pathway, which highlights primary characteristics and experiences in the lives of MSHS children. It is presented pictorially in section 11.1. The parent interview was developed to specifically target the following areas from the model:

- Family and Home Life (Activities and Routines, Home and Family Environment, Family Characteristics)
- Child Characteristics
- Cultural Experiences and Processes
- Time, Weather, and Migration

Additionally, a few questions related to the Local Community and MSHS Characteristics are also present in the interview. It should also be noted that parents will be asked about Child Growth and Development during their interview. Descriptions of the child development questions are presented in the Child Measures Section above.

In addition, the questions of the MSHS parent interview are designed to address the set of research questions that will guide the Survey. These research questions were developed in collaboration with the academic consultants and the MSHS staff and parent consultants, and were shared and adapted further with stakeholder groups at various community meetings. The questions are listed in Appendix C.

Key Considerations for Parent Interviews about Child, Family, and MSHS Program
Before presenting the parent interview and the rationale for specific questions, attention should be paid to the following considerations:

- Interviews with both mothers and fathers are suggested. As such, questions are noted below as primarily for mothers (*M*), for Fathers (*F*), or Mothers and Fathers (*M+F*).
- The parent interview presented below is extended draft form. It is expected that the parent interview will need to be further refined before use in the *MSHS Survey*. Specifically, pilot testing is strongly recommended for the interview as a whole, with particular consideration paid to length, pace, order of questions, responses, and psychometrics. Further, some suggested measures are specifically recommended for further examination and development if they are included in the interview
- Although this section focuses on the questions themselves, the approach and method of engaging MSHS parents in an interview also necessitates consideration and examination. Specific approaches based on cultural and linguistic understanding, experience en-

gaging in research with MSHS parents, and discussions with the MSHS Community Consultant Group identified multiple facets to this approach. These include logistical considerations related to setting up the interview conveniently for the family (e.g., including both parents and possibly extended family members; scheduling appropriate days of the week). In addition, methodological approaches such as utilizing pictorial response cards should be considered. (See Chapter 12 for more discussion.)

- The interview questions are presented here in English only, to minimize the report length. However, all of the questions and measures selected are available in Spanish, unless otherwise indicated. Further, the Spanish forms were systematically examined and reviewed prior to their selection. Specific attention was paid to both linguistic and cultural appropriateness, and psychometric properties. While a greater number of parent measures are now available in Spanish than there were a decade or two ago, there remains a dearth of measures across the indigenous languages that are present within the MSHS community. This is an important concern since these parents should not be systematically excluded from engaging in the *MSHS Survey*. As such, it is suggested that, if funding is available, the interview be translated and pilot tested in the most prevalent indigenous language(s) at the time that this study is coming to fruition. Translators may also be used, as discussed in Chapter 12. Since that information is not available from PIR, the *NAWS* is likely the best source for this estimate.

11.5.1 Sources of Questions and Measures

The parent interview from the 2004 *MSHS Research Design Development Project* served as a foundation to the *MSHS Survey* parent interview, since it had already undergone reviews by a variety of expert and program consultants and some pilot testing with MSHS parents[17]. It was subsequently adjusted after the following steps:

- Reviewing the results stemming from the *MSHS Research Design Development Project* (ACF, 2004),
- Identifying missing key domains stemming from the literature review and consultant discussion for the *MSHS Survey*, and
- Examining all measures for psychometric and cultural appropriateness, as well as appropriateness with children between birth and five years of age.

In the process of adapting the parent interview, questions and measures were considered from the additional sources:

- Review of items utilized in published national and international articles and reports with farmworker and/or Latino families, including a selection of reports and articles only available in Spanish.
- Review of items used in other MSHS, Early Head Start, Head Start, and agricultural studies *(e.g., A Descriptive Study of Children and Families Served by Head Start Migrant Program; The Descriptive Study of Migrant and Seasonal Farmworkers;; Early Head Start Family and Child Experiences Study (Baby FACES); Family and Child Experiences Survey (FACES);*

[17] The 2004 MSHS Research Development Project's parent interviews can be accessed at http://www.acf.hhs.gov/programs/opre/hs/migrant_designproj/index.html .

the *Head Start Impact Study;* the *National Agricultural Worker Survey (NAWS);* and Dr. Barrueco's studies with MSHS families*)*

- Review of items used in other recent large-scale early childhood studies that included significant non-English speaking or bilingual parents *(e.g., First5 LA UPCOS study;* 9-months, 2-years, and preschool interviews with parents in *ECLS-B).*

Description of Tables.
After the review was completed, two tables were created:

- The first one lists the recommended domains and items for the parent interviews. The rationale for the listed measures is presented, including any recommended changes from the parent interview used in the 2004 *MSHS Research Design Development Project*. As often as possible, the number of questions was reduced in consideration of minimizing interview length. Designated variations for maternal and paternal interviews are provided, as well as those appropriate for variations in child age. Also, specific measures that could benefit from additional analysis in a potential Measurement Substudy are described (See Chapter 9). A second table, which is included in Appendix M, details the domains and instruments considered but ultimately eliminated, as well as the rationales that led to these decisions.

Table 11.4 Parent Interviews about Children, Family, and the MSHS Program

Domain Listed in Conceptual Pathway & Respondent *(M=Mother, F=Father)*	Rationale and Questions for Consideration for Parent Interviews about Child, Family, and the MSHS Program
Child Characteristics: Name (M+F)	*Rationale*: As described in Chapter 12, MSHS families may use the traditional Latino conventions for their own names and that of their children. This often results in four or five given names. Thus, it is recommended to ask specifically about full names, as well as the multiple ways a child may be known, in order to reduce data collection errors and ensure accurate identification. *Questions:* ▪ What is your child's full name, including all first and last names? And yours? (*New Question)* ▪Are there other first and/or last names that your child is known by? What are they? (*New Question)* ▪What first and last names do you usually use for your child? And for yourself? (*New Question)*
Child Characteristics: Racial/ ethnic background(M)	*Rationale*: Country of origin information was missing in the *2004 MSHS Research Design Development Project* for Latino families of 2nd or 3rd generation. As such, this question is added. Additional countries from Central America may also be considered for inclusion. *Questions:* ▪Is [MSHS Child] of Spanish, Hispanic, or Latino origin? ▪Which one of these best describes [MSHS CHILD]? 1) Mexican, Mexican American, Chicano, 2) Puerto Rican, 3) Cuban, 4) another Spanish/Hispanic/ Latino group? (SPECIFY) **(***FACES 2006* and other Studies**)** ▪What is [MSHS CHILD'S] race? You may name more than one if you like. 1) White, 2) Black or African American, 3) American Indian or Alaska Native

Domain Listed in Conceptual Pathway & Respondent *(M=Mother, F=Father)*	Rationale and Questions for Consideration for Parent Interviews about Child, Family, and the MSHS Program
	(SPECIFY), 4) Asian or Pacific Islander (SPECIFY), 5) another race (SPECIFY)
Child Characteristics: Age, Gender, Country of Origin (M)	*Rationale*: Obtaining the following information will help to verify children in databases when others have the same or similar names. These questions on respondent characteristics were in the *2004 MSHS Research Design Development Project* parent interview. During this earlier project, no concerns were reported regarding the effectiveness of these questions. However, the full birthdate is now asked which is needed for accurate calculation of children's scores on measures. *Questions:* ▪ Is [MSHS Child] male or female? (*2004 MSHS Research Design Development Project*) ▪ What is your child's birthdate? ▪ Where was (MSHS Child] born? (*2004 MSHS Research Design Development Project*) ▪ If foreign born: In what year did [MSHS CHILD] first enter the U.S.A.? (*2004 MSHS Research Design Development Project)*
Child Characteristics/Home & Family Environment: Language and Literacy with Child at home (M)	*Rationale*: The *2004 MSHS Research Design Development Project* parent interview asked parents to list the languages spoken to the MSHS child. Given the importance of understanding the language context of young bilingual children, additional questions are suggested. A linear response scale was considered such as "Only Spanish, Mostly Spanish, English and Spanish Equally, Mostly English, Only English") but this type of scale will not function properly for the families in which three languages are spoken (e.g., indigenous families). As such, the following approach is suggested, which is adapted from the *Baby FACES* study. *Questions:* ▪ At home, including all your relatives, what languages are spoken to [MSHS CHILD]? ▪ How often does your child HEAR [Language/s] at home? (Very little, Sometimes, Most of the time, All of the time) ▪ [For children older than 1]: How well does your child understand [Language/s}? (A little, Somewhat, Well) ▪ [For children older than 1]: How well does your child speak [Language/s}? (A little, Somewhat, Well) ▪ How often does your child hear English at home? (Never, Very little, Sometimes, Most of the time, All of the time) ▪ [For children older than 1]: How well does your child understand English? (Not at all, A little, Somewhat, Well) ▪ [For children older than 1]: How well does your child speak English? (Not at all, A little, Somewhat, Well) ▪ What language does [MSHS CHILD] usually use to speak at home? ▪ What language do you usually use to speak to [MSHS CHILD] at home?
Family Characteritics/Cultural Experiences and Processes:	*Rationale*: These questions on respondent characteristics were utilized in the 2004 *MSHS Research Design Development Project* parent interview, and gather information about important aspects of family demographics During the this earlier project, no concerns were reported regarding the effectiveness of these

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Respondent (M+F)	questions. *Questions:* ▪Are you male or female? ▪How old are you? ▪What is your relationship to the [MSHS CHILD]? 1) Parent (birth), 2) Parent (adoptive), 3) Parent (step), 4) Parent (foster), 5) Parent's partner, 6) Grandparent, 7) Great grandparent, 8) Sibling (full, half, adopted, foster), 9) Godparent, 10) Aunt/uncle, 11) Non-relative, 12) Other (SPECIFY) ▪What is (your) current marital status? 1) Married (including common law), 2) Separated, 3) Divorced, 4) Widowed, 5) Other Single ▪Where were you born? (Write country and state) ▪If foreign born: In what year did you first enter the U.S.A. to work or live? ▪What is the highest grade level you completed? ▪In what country did you complete highest grade?
Family Characteristics: Parents' own Language and Literacy (M+F)	*Rationale*: Most of the questions are from the *MSHS Research Design Development Project*. The response categories were edited by the Survey Design Team to improve their functioning with MSHS families. For example, the "not at all" response category should be used in the literacy questions given the frequency of illiteracy in this population. In addition, a question about receptive English ability is added since receptive skills develop earlier in language acquisition. (Note: The wording of "parents' "home" and "first" languages is consistent with the *NAWS*, but differs from *FACES* and *ECLS-B*. It is likely preferable to remain consistent with *NAWS* as identification of indigenous populations can be used with a mix of these language and country/state of origin questions (Gabbard et al., in press). This may allow a comparison of indigenous population prevalence rates between the *NAWS* and MSHS.) *Questions:* ▪How well do you understand English? (Not at all, A little, Somewhat, Well) ▪How well do you speak English? (Not at all, Somewhat, Well) ▪How well do you read English? (Not at all, Somewhat, Well) ▪When you were a child, in what languages did adults speak to you at home? ▪Now, as an adult, what languages do you speak? ▪[For each language]: How well do you speak it? (A little, Somewhat, Well, Very Well) ▪[For each language]: How well do you read it? (Not at All, A little, Somewhat, Well)
Family Characteristics: Composition (M)	*Rationale*: Questions about family composition from the 2004 *MSHS Research Design Development Project* were streamlined by the Survey Design Team in consideration of interview length. A question was added to identify which households have multiple children enrolled in MSHS, an important consideration for sampling and analyses *Questions:* ▪We want to learn about your relatives and family members, those who are liv-

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	ing with you and [MSHS CHILD] and those who are not living with you and [MSHS CHILD]. ▪ What are the names of family members] who you share INCOME and expenses with *and* are currently living with you? What are the names of all immediate family members who are living elsewhere? This should include your spouse, as well as any biological, adopted, and other children whom you support. ▪ For each person listed above, ask the following questions substituting the word "name" with the name of the family member. o [NAME] is male or female? o What is the relationship of [NAME[to the [MSHS CHILD]? o How old is (NAME)? o Is [NAME] currently living with [MSHS CHILD]? o [For children <6]: Does s/he attend MSHS with [MSHS CHILD]?
Home and Family Environment: Other Household Composition (M)	*Rationale*: These questions about other members in the household were utilized in the 2004 *MSHS Research Design Development Project* parent interview; they are culturally appropriate for families that tend to live with extended relatives and with other agricultural workers During the *MSHS Research Design Development Project*, no concerns were reported regarding the effectiveness of these questions. *Questions:* ▪ Now I would like to ask you about other people who live in the same house with [NAME OF MSHS CHILD] but who do not share the income or expenses with you. o Other than those you have already mentioned, how many other people live in the same place with [NAME OF MSHS CHILD]? ___ (individuals) o Out of total above, how many are adults (18 and older)? And how many of these are relatives? o How many are 6 yrs old or younger? And how many of these are relatives? Do they attend MSHS?
Home and Family Environment: Migration Patterns over prior year (M+F)	*Rationale*: Questions 1-6 were utilized in the 2004 *MSHS Research Design Development Project* parent interview with no specific concerns reported. Two additional questions were added in order to increase understanding of why families migrate. These additional questions were used in the 1996 *Descriptive Study of the Children and Families Served by Migrant Head Start Programs*. *Questions:* ▪ Now, let's talk about all the places and times you have worked, not worked in the past year, beginning with right now and working back. (*2004 MSHS Research Design Development Project*) o For what period of time did you work/not work? o What type of work was it? (Farm Work; Non-Farm Work) o (If FW) What crop are/were you working in? o What date did you start? (Month/Year) o Date stop/leave (Month/Year) o City and State. If Abroad, ask for country and state o Why did you choose [Name of Location]? (DO NOT READ OPTIONS. CIRCLE ALL THAT APPLY.)

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	▪ I knew or thought my spouse or I would have a job when we arrived ▪ I/We heard that there were jobs available ▪ I/We have friends who live in this area ▪ I or my spouse have relatives who live in this area ▪ I/We knew there was a place for our family to live while in the area ▪ I/We knew that Migrant Head Start services would be available ▪ I/We knew that other child care would be available ▪ I/We knew that health care services were easy to get when needed ▪ I/We knew that social services (such as welfare or food stamps) were easy to get ▪ It is cheap to live here ▪ This is my home base [Considering moving this response 1st] ▪ Other Specify: _____ (*Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996)* o Why did you leave [Name of Location]? (DO NOT READ OPTIONS. CIRCLE ALL THAT APPLY.) ▪ My job or my spouse's job ended, or would be ending soon, and we heard of another opportunity ▪ We no longer had a place to live ▪ The Migrant Head Start center closed ▪ We were not able to get health care services ▪ We were not able to get social services (such as welfare, food stamps) ▪ It was expensive to live there ▪ Other Specify: _____ *(Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996)*
Culturally-Related Activities & Routines: Care of MSHS Child during past year (M)	*Rationale*: Child care questions from the 2004 *MSHS Research Design Development Project* were streamlined by the Survey Design Team in consideration of interview length. In addition, three questions were added by the Survey Design Team to allow for better understanding about MSHS enrollment patterns and potential exposure of children to harsh conditions when they are not in a MSHS center, a key risk factor for these children *Questions:* ▪For each location identified above, ask the following questions: o Was [MSHS Child] with you? o In this location, was [MSHS CHILD] enrolled in MSHS?: a. What was the name of the center? …[INTERVIEWER: CHECK IF CENTER IN "d" is in MSHS LIST] (*New question)* o While you were (at location) what kind of child care did [MSHS CHILD] receive (besides MSHS, if used)? o While you were (at location), how many days did you bring your [child] to the field (work) because you could not make arrangements for child care? *(New question)*
Home and Family Environment: Migration Frequency in year prior to last (M+F)	*Rationale*: These questions about prior migrancy patterns were utilized in the 2004 *MSHS Research Design Development Project* parent interview. Some parents may be concerned that these questions probe about their eligibility since similar types of questions are asked during the MSHS application process. However, no concerns were reported during the *MSHS Research De-*

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	sign Development Project. . As such, they were not edited by the Survey Design Team. *Questions:* ▪ And the year before last (YEAR BEFORE THE ONE COVERED IN THE PREVIOUS GRID), from (MONTH and YEAR) until (month) of last year: o How many times did you move? o To what locations? o What type of work did you do?
Home and Family Environment: Future Migration Patterns (M)	*Rationale*: These questions about future migrancy patterns were used in the 2004 *MSHS Research Design Development Project* parent interview. During the *MSHS Research Design Development Project*, no concerns were reported regarding the effectiveness of these questions. *Questions:* ▪ Now, let's talk about all the places and times you may move or travel in the next six months. o Are you planning to move or travel to another location? o If yes, ask the following: ▪ Where will you move? ▪ What date will you arrive and what date will you depart? ▪ What type of work will your family do?. ▪ At this location, will child attend MSHS? IF No, what kind of child care will [MSHS CHILD] receive?
Family Characteristics: Employment and Income (M+F)	*Rationale*: Questions about employment and income from the 2004 *MSHS Research Design Development Project* were streamlined in consideration of interview length. In addition, one question was added from the *NAWS* Survey to increase understanding of the amount of hours that parents work. *Questions:* ▪ Approximately how many total years have you done more than two weeks (per year) of farmwork in the U.S.? ▪ With your current employer, do you work year-round, or for a few weeks/months at a time? ▪ How many hours did you work last week at your current farm job? (*NAWS*) ▪ Last year - in 20XX– what was your total income from all types of work you did in the U.S., in U.S. dollars? ▪ How much of that income was from agricultural employment? ▪ Last year - - what was your family's total income earned in the U.S., in U.S. dollars?
Family Characteristics/ Farms: Pesticides (M+F)	*Rationale*: While a question about pesticide safety training was present in the 2004 *MSHS Research Design Development Project* parent interview, a question about exposure was missing. A relevant question from the *NAWS* Survey was selected to provide continuity across the studies and to provide further information about this key risk factor. *Questions:* ▪ In the last 12 months, have you loaded, mixed or applied pesticides? o If yes, which of the following classes of pesticides have you loaded, mixed or applied in the last 12 months? (Insecticide, Herbicide, Fungicide, Ro-

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	denticide, Other: Specify, Don't know the type) (*NAWS*) ▪ In the last 12 months, has anyone from your household been given any training or instructions in the safe use of pesticides (through video, audio recordings, classroom lectures, written materials, informal talks, or by another way)?
Home & Family Environment: Housing (M) *If 'red flag' item endorsed,indicating young child at risk, please give family relevent pamphlet and contact information at end of interview.*	*Rationale*: Housing questions from the 2004 *MSHS Research Design Development Project* were streamlined in consideration of interview length. In addition, one question was added from the *NAWS* survey to allow for an understanding of the family's housing location. (Questions about housing condition are included later in the survey in the section assessing migratory stress factors). The questions for parents of infants about location and position of sleep are asked to assess need for distribution of Sudden Infant Death Syndrome (SIDS) prevention information to families, rather than to measure culturally-related sleep activities. For example, children may sleep with parents for many reasons but it is helpful for parents to learn safe methods of doing so. *Questions:* ▪ Currently in what type of living quarters does [MSHS CHILD] live now? (Mobile home, Single-family home, Townhome/ duplex, Apartment, Dormitory or barracks, Campsite or tent, Motel or hotel, Without shelter, Other) ▪ Where are your living quarters located? (Off farm and not owned/administered by employer, Off farm and owned/ administered by employer, On farm, Other (*NAWS*) ▪ In your current living quarters, how many rooms are used for sleeping? ▪ How many people in total sleep in these rooms? *Ask the following questions if child is under 1:* ▪ Where does [MSHS CHILD] usually sleep at night? (In bed with parents, In bed with family members, Own bed, In crib, On sofa, On floor) ▪ [If MSHS Child is a Newborn]: In what position did you put {him/her} to sleep? (On Stomach with Face to Side, On Stomach with face down, On back, On Side, Propped in a sitting position, No Special Way) (*Baby FACES*) ▪ [If MSHS Child is no longer a Newborn]: When {MSHS CHILD} was a newborn, in what position did you put {him/her} to sleep? (On Stomach with Face to Side, On Stomach with face down, On back, On Side, Propped in a sitting position, No Special Way) (*Baby FACES*)
Family Characteristics: Health Insurance (M)	*Rationale:* An additional question from the *Baby FACES* study was added in order to provide a broader picture of health care for MSHS children. *Questions:* ▪ Was there ever a time when [MSHS CHILD] needed health care, but you couldn't obtain it? About how many months? Why? ▪ Who has Health Insurance in your family (in the U.S.A.)? (You, Spouse, MSHS Child, Other Children? o If a member does not have insurance, why not? o Who pays for it? (*Baby FACES*)
Family & Child Characteristics: Past Health and	*Rationale:* Questions about prenatal care and prematurity were missing from previous MSHS interviews, although they are needed for understanding development, particularly in the first two years of life. Pertinent questions were se-

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Feeding	lected from *ECLS-B* and *Baby FACES*. *Questions for Children under 2:* ▪ During your pregnancy with [Child], did you see a physician or go to a clinic for prenatal care? (*ECLS-B*) ▪ In which month of (this/your most recent) pregnancy did you first see a physician or go to a clinic for prenatal care? (*ECLS-B*) ▪ Was [MSHS CHILD] born more than two weeks before or two weeks after the doctor expected? (*Baby FACES*) ▪ How many weeks (early/late) was [MSHS CHILD]? *(Baby FACES)*
Child Characteristics: Present Child Health and Health Care (M)	*Rationale:* As presented in the literature review, dental health is quite important in MSHS as toddlers and young children of agricultural families frequently have caries. Therefore a specific question about the state of their child's dental health was added. The other questions were utilized successfully in the 2004 *MSHS Research Design Development Project*. *Questions:* ▪ Overall, would you say [MSHS CHILD]'s health is…(Excellent, Very Good, Good, Fair, Poor, Don't Know) ▪ About how long has it been since [MSHS CHILD] last saw a medical doctor or other health professional for a checkup, or other routine care? Would you say...(Less than 3 months, 3 to 6 months, 6 months to 1 year, Between 1 and 2 years, 2 years or more, DK) ▪ Does [MSHS CHILD] have an illness or condition that requires regular, ongoing health care? o (If yes) What kind of illness or condition? ▪ Has a doctor, other health or education professional, or someone from MSHS ever told you that [MSHS CHILD] has any physical or learning disability? o (If yes) What kind of disability? *Ask the following questions if child is 2 or older:* ▪ Has [MSHS CHILD] ever been to a dentist or dental hygienist for dental care? o (if Yes), about how long has it been since [MSHS CHILD] last saw a dentist or dental hygienist for dental care? (Less than 1 year, 1 year, but less than 2 years, 2 years or more, DK) ▪ How many of your child's teeth have fillings or need them? *(new question)*
Family Characteristics: Parent Health (M+F)	*Rationale:* Questions about parent health from the 2004 *MSHS Research Design Development Project* were streamlined in consideration of interview length. In addition, a question about parent's pain from the SF-8 was added since it has been found to correlate with migrant stress and depression, as presented in the literature review, Further, bodily pain (rather than health) reported at the beginning of a season significantly predicts later parental engagement at MSHS as well as home learning activities (Cumba & Barrueco, 2008). *Questions:* ▪ Would you say your health in general is … (Excellent, Very Good, Good, Fair, or Poor)? ▪ How much bodily pain have you had during the past 4 weeks? (None, Very Mild, Mild, Moderate, Severe, Very Severe) *(SF-8)*

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	▪ About how long has it been since you last saw a medical doctor or other health professional? Would you say...(Less than 3 months, 3 to 6 months, 6 months to 1 year, Between 1 and 2 years, 2 years or more, DK)
Home and Family Environment: Food Sufficiency (M)	*Rationale*: These questions were utilized in the 2004 *MSHS Research Design Development Project* parent interview. During the *MSHS Research Design Development Project*, no concerns were reported regarding the effectiveness of these questions. *Question:* ▪ In the last 12 months, was there ever a time that you and your household members did not have enough food because there wasn't enough money to buy food? o (If Yes), how often did this happen? (Almost every month, Some months Only one or two months)
Services and Resources: Use and Portability (M)	*Rationale:* The 2004 *MSHS Research Design Development Project* questions about service were lengthy, as they assessed knowledge, use, as well as the role that MSHS played. The researchers reported that the questions were mixed in their effectiveness. To minimize the interview's length, the approach utilized in *FACES 2006* is suggested. This approach focuses on service utilization and MSHS' general role in assisting in obtaining these services. The *FACES 2006* questions were edited to include services relevant to the needs of the MSHS population. Finally, verifying the utilization of these services may be considered through the review of MSHS records and administrative data. *Questions:* Families with young children sometimes need help of various kinds. Now I'd like to ask you some questions about ways in which MSHS may have helped your family. ▪ Have you or anyone in your household received any of these community or government services? o Help with housing? o Help with utilities (running water, hot water, heat, telephone service)? o Food and nutrition assistance—like Food Stamps or WIC? o Income assistance--like welfare TANF, SSI? o Training for a job? o Help finding a job? o Help to go to school or college? o Classes in English as a Second Language? o Child care? o Medical or dental care for [MSHS CHILD]? o Medical or dental care for adults? o Advice from a lawyer? o Help or counseling for personal or family problems? ▪ Did Head Start make you aware of or help you to obtain this/ these services?
Family Resources/ Services and Resources: Transportation Safety (M)	Rationale: Given the extent of traveling in the population, car safety is a potential concern for these families. In addition, seatbelt use might be a family health issue addressed by some MSHS programs. The following questions were adapted from *ECLS-B*.

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If 'red flag' item endorsed,indicating young child at risk, please give family relevent pamphlet and contact information at end of interview.	Questions: ▪ Do you have a car/booster seat for [MSHS CHILD]? ▪ How often does [MSHS CHILD] sit in a car/booster seat when traveling when s/he is with your family (not when coming/going to the center)? (Never, sometimes, most of the time, or always) ▪ Have you received a car/booster seat or learned about car seat safety through MSHS? o I received a car/booster seat o I learned about car seat safety o Neither
Home and Family Environment: Social Support (M+F)	*Rationale*: Three measures are suggested as potential assessments of perceived social support and needs of parents. These could be selected based on their length and consistency across studies (i.e., *FACES* questions), or their functionality could be compared within the Measurement Substudy (see Chapter 9). First, the **Multidimensional Scale of Perceived Social Support (**Zimet et al., 1988) has been translated and validated with large samples of Mexican-American youth (Edwards, 2004) and Spanish adults (Landeta & Calvete, 2002). This scale would need to be shortened for the *MSHS Survey*. Selecting the highest loading items from the family, friends, and significant other scales may be considered. Further, other sources of support for MSHS families (e.g., care providers, agencies, religion) may need to be added. Second, the **Developing Strong Migrant Families Resiliency Scale** (Barrueco, 2007) was developed to capture the resources MSHS parents identify that contribute to their families' positive development and coping ability. Developed from qualitative data analysis of MSHS parent focus group data, these items ask about social support, acculturative processes, and personal beliefs. Its alpha is .75 among a small sample of MSHS mothers (n=20) and .77 among MSHS fathers (.77; n=12). Even in a small father sample, the scale total is significantly correlated with fathers' engagement with their children in activities such as singing, reading, and storytelling (r =.56-.75), even when controlling for depression. Among mothers, the correlations with parent activities are less extreme in the .20-.30 range. Third, the social **support questions used in the *FACES 2006* study** are potentially useful with MSHS families in order to provide consistency across ACF families. They are focused on the past month, which may be adapted to a longer range given the mobility of some families. Also, the question about helpgivers may not likely be understood by or relevant to MSHS families. Since many families may be away from grandparents, a general question about relatives may be preferable. [Note: Numerous other scales available in English and/or Spanish were considered for use in the *MSHS Survey*, but eliminated. Descriptions of these eliminated measures are in Appendix M.] *Questions:* *Multidimensional Scale of Perceived Social Support (Escala Multidimensional de Apoyo Social Percibido)(* Edwards, 2004; Landeta & Calvete, 2002; Zimet et

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	al., 1988) (Scale available from authors) OR *Developing Strong Migrant Families Resiliency Scale (Barrueco, 2007)* (Scale available from author) OR *Social Support Questions adapted from FACES 2006:* Many people and groups can be helpful to members of a family raising a young child. We want to know how helpful different people and groups are to your family. ▪ Please tell me how helpful each of the following have been to you in terms of raising (CHILD) over the past month. How helpful (have/has) {INSERT a – l} been? o a. [CHILD]'s father o b. [CHILD]'s mother o c. Your current spouse or partner o d. [CHILD]'s grandparents o e. Other relatives o f. Your friends o g. Co-workers o h. Professional helpgivers like counselors or social workers o i. Head Start staff o j. Other parents you have met through Head Start o k. Other child care providers o l. Religious or social group member o m. Is there anyone else who has been helpful? (SPECIFY)
Culturally-Related Activities and Routines: Family Activities (M)	*Rationale:* The family activity questions from the 2004 *MSHS Research Design Development Project* were edited to include additional ones that are relevant to Latino, bilingual, and or general child development. For example, reading frequency question should be asked for all children, rather than only for children older than one year of age, since reading is a strong predictor of development even within infancy, as discussed in the literature review. Other questions were adapted from *ECLS-B* and *FACES 2006*. Items or subscales from Taylor's (2000) **Familia Scale** may also be considered to provide a wider lens of MSHS family's language environment. Percentile rank norms are available for different racial/ethnic groups (including Latinos), as well as for families with children of different age ranges (including preschool). Specifically, the Familia scale may be examined in the Measurement Substudy: 1) to assess whether literacy frequency questions are better asked using the ACF questions, or those from this scale, 2) to identify statistically sound subscales or items that could provide a broader picture of the MSHS family environment. [Note: Numerous other scales available in English and/or Spanish were also considered for use in the *MSHS Survey*, but eliminated. Descriptions of these eliminated measures are in Appendix M.] *Questions:* ▪ In the past week, have you or someone in your family done the following things with [MSHS CHILD]? How many times per week? (*italicized items are*

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	asked for children 2 and older) o Played with toys or indoor games? o Played any game or sport together? o Sung to or with (him/her) songs or music? o Told (him/her) a story? o Helped (him/her) learn letters, words, or numbers? o Played counting games like singing songs with numbers or reading books with numbers? o Talked about TV, radio programs, or videos? o Talked about what happened at the center? o Cooked or prepared a meal together? o Watched *a children's movie together?* ▪ How many times have you or someone in your family read to [MSHS CHILD] in the past week? (Not at all, Once or twice, Three or more times, or Every day?) ▪ On the days someone reads to {MSHS CHILD}, about how many minutes per day is she/he read to? (*ECLS-B* and *FACES 2006*) ▪ How often does an adult/older sibling read or look at books with your child in SPANISH [or Other Language/s]? (Almost never, Once a month, 2-3 times a month, 1-2 times a week, Almost every day)(*ECLS-B* and *FACES 2006*) ▪ How often does an adult/older sibling read or look at books with your child in ENGLISH? (Almost never, Once a month, 2-3 times a month, 1-2 times a week, Almost every day)*(ECLS-B* and *FACES 2006)* <u>AND/OR</u> Subscales or Items from the Familia Scale (Taylor, 2000) (Scale available from author)
Culturally-Related Activities and Routines: General Parenting Approach (M+F)	*Rationale:* General parenting style will be asked of parents with MSHS children who are older than two since there is a scant body of literature in this area among Latino or immigrant parents of infants. Rather, parenting behaviors (such as those asked in the previous row) have shown demonstrable relationships with infant development. This approach is similar to those in other national studies. However, general parenting style should be examined among toddlers and preschoolers. For example, versions of the Block parenting measure have been shown to relate to some parent and child outcomes in past ACF studies. Five scales have been derived using a mix of items: Authoritarian, Authoritative, Warmth, Control, and Energy. Overall, MSHS parents in the 2004 study scored higher on authoritative and warmth and lower on authoritarian and energy. The 2004 report suggested that agricultural workers heavy work schedules may make parent less authoritarian and energetic. Given that there are many other domains to assess in the parent interview, the short form of **Block's Childrearing Practices Report** (1965) used in *ECLS-B* may be considered for various reasons. First, It is shorter than the version previously used in the 2004 *MSHS Research Design Development Project* (4 items vs. 12 items). Second, it excludes problematic items, such as one about physical punishment that some MSHS parents qualified their responses to during the

Domain Listed in Conceptual Pathway & Respondent *(M=Mother, F=Father)*	Rationale and Questions for Consideration for Parent Interviews about Child, Family, and the MSHS Program
	MSHS Research Design Development Project. Third, the question about physical demonstration of affection may be particularly culturally appropriate for the MSHS population. Finally, using a shortened form may allow the inclusion of other parenting items that measure Mexican or other cultural values and caretaking behaviors. Given the changes in this measure, it would be useful to examine it in the Measurement Substudy. However, some preliminary psychometric data may be available from the national subsample of Latino families participating in *ECLS-B*. [Note: Other scales available in English and/or Spanish were also considered for use in the *MSHS Survey*, but eliminated. Descriptions of these eliminated measures are in Appendix M.] *Questions for Children older than two:* ▪ The next questions are about raising children. Here are some statements that parents of young children say about themselves. For each statement, please tell me if it is exactly like you, very much like you, somewhat like you, not much like you, or not at all like you. o I express my affection by hugging, kissing, and holding my {child/children} o I am easygoing and relaxed with my {child/children} o There are times I just don't have the energy to make my {child/children} behave as {he/she/they} should o I have little or no difficulty sticking with my rules for my {child/children} even when close relatives, including grandparents, are there. (*ECLS-B Preschool,* with similar item in *ECLS-B Toddler*)
Culturally-Related Activities and Routines/Cultural Experiences and Processes: Cultural values (M+F)	*Rationale:* There is a need to understand parenting practices and children's behavioral functioning within the context of MSHS families' culturally-relevant beliefs and practices. Generic measures were examined, but eliminated for various reasons (see Appendix M). However, a promising measure was identified for use with the largest subgroup within MSHS, Mexican and Mexican-American families. If examined in the Measurement Substudy, attention will likely need to be paid to creating a shorter form. *Questions:* **Mexican Cultural Values** (Gamble & Modry-Mandell, 2008) 1. Familism: 12 items that assess family loyalty and interdependence such as "Family members should think of the family before they think of themselves' and 'Even if a child believes a parent is wrong, he/she should not show disrespect'. 2. Simpatía: 10 items that assess interpersonal harmony such as "avoid conflict at all costs," "to make others feel comfortable," and "to obey or fulfill others' wishes or requests." *3.* Respeto: 6 items that assess respect for elders. These include "throughout life, children should obey their parents", "Even if a child believes a parent is wrong, he/she should not show disrespect," "Children should never express anger toward their parents," and "Throughout life, children should obey their parents*.*

Domain Listed in Conceptual Pathway & Respondent *(M=Mother, F=Father)*	Rationale and Questions for Consideration for Parent Interviews about Child, Family, and the MSHS Program
MSHS Characteristics & Child Characteristics: MSHS Experience (M)	*Rationale:* Access to MSHS and the extent of participation in the program are among the most pressing questions for the Survey since families can attend various centers throughout the country over the early childhood years. However, the accuracy (validity) with which MSHS parents can identify their first MSHS experience, and the total time participating may be questionable. As such, the Measurement Substudy may need to examine the validity of these specific questions. In addition, the language questions listed below were utilized in the 2004 *MSHS Research Design Development Project* parent interview. During the *MSHS Research Design Development Project*, no concerns were reported regarding the effectiveness of these questions. *Questions:* ▪ Is this [MSHS CHILD'S] first time in Migrant and Seasonal Head Start? o (If No): When did [MSHS CHILD] first go to any Migrant and Seasonal Head Start program—what month and year? ▪ Approximately how long altogether has [CHILD] gone to any Migrant and Seasonal Head Start program—how many months or years altogether? ▪ When did [MSHS CHILD] start attending this Migrant and Seasonal Head Start Center? ▪ Was there a waiting period before [MSHS CHILD] was able to enroll in this Migrant and Seasonal Head Start program? o (If yes) Why? [USE CODES] o How long was the waiting period? o During the waiting period, who provided child care for [MSHS CHILD]? (Home alone, Cared for by adult in home, Cared for adult out of home, Cared for by other child, Taken to work with parent, Attended day care program) ▪ At MSHS, in what languages do teachers and aides speak to [MSHS CHILD]? ▪ At MSHS Center, is someone ALWAYS available and able to speak to you in (Language/s)?
Family Characteristics: MSHS Participation (M)	*Rationale:* The MSHS participation questions from the 2004 *MSHS Research Design Development Project* were streamlined. In addition, two questions were added from the 1996 *Descriptive Study of the Children and Families Served by Migrant Head Start Programs.* These were adapted using wording from FACES Added questions addressed barriers to participation are a particular concern in MSHS programs. [Note: Numerous other scales available in English and/or Spanish were also considered for use in the *MSHS Survey*, but eliminated. Descriptions of these eliminated measures are in Appendix M.] *Questions:* ▪ Why did you want [MSHS CHILD] to attend Migrant Head Start? (DO NOT READ CHOICES; CIRCLE ALL THAT APPLY.) *(Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996)* (To prepare my child for a school education; To access health and dental services; Because I knew my child would receive meals and snacks during the day; My child has a disability, and MSHS Start knows how to work with children

Domain Listed in Conceptual Pathway & Respondent *(M=Mother, F=Father)*	Rationale and Questions for Consideration for Parent Interviews about Child, Family, and the MSHS Program
	with disabilities; Because it is free/there is no cost, It is the only full-day care available; I needed child care services for my child; MSHS provides quality care, safety, good staffing; MSHS helps my child's development (socialization, communication); To learn English; So my child does not need to go to the field/ keep my child safe; Other) ▪ Do you receive information from the MSHS Center about (MSHS CHILD) or the program's activities… (in person at the Center; in person at home; by telephone; in writing)? (IF YES) How often does that happen? (Daily, >2 per Week, Weekly, Every other week, Monthly, Other) ▪ Since [MSHS CHILD] started attending this Migrant and Seasonal Head Start program, have you (or [MSHS CHILD]'s (other parent/guardian)... [If yes, ask how many days] o Attended a general Migrant and Seasonal Head Start meeting, for example, an open house or a meeting of a parent-teacher organization? o Gone to a regularly scheduled parent-teacher conference with (child)'s teacher at the center? And at home? o Met with your Family Service Coordinator (FSC) [NAME/S of CENTER FSCs]? o Acted as a volunteer in a Migrant and Seasonal Head Start classroom? o Served on a committee or parent policy council? o Chaperoned a field trip of [MSHS CHILD]'s class? o Helped with facility: repair, gardening, and painting? o Helped in kitchen or menu-planning? o Donated money, materials or goods to the MSHS program? ▪ Some parents have a hard time participating in their child's Head Start program. Please tell me if any of the following things kept you from participating as much as you would like in [MSHS CHILD]'s MSHS program this past year? *(Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996; FACES 2006)* o Your need for child care interferes? o Your work schedule? o Your need for transportation? o You don't know others at center? o You have health problems that interfere? o Head Start doesn't provide enough opportunities for you to participate? o You are uncomfortable because of language or cultural differences? o You have concern for your safety while getting to the center? o You need more support from your spouse or partner? o Other (PLEASE SPECIFY)
MSHS Characteristics: Transportation and Length of Day (M)	*Rationale:* Transportation is a concern for MSHS programs and families given the spread of housing, work, and centers in rural areas. The question asking about the mode of transportation was used in the 2004 *MSHS Research Design Development Project*. An additional question was added to increase understanding of the full MSHS experience for children, given the long distances that some of them travel to attend the program. *Questions:* ▪ How does [MSHS CHILD] usually get to and from the Migrant Head Start center? (MSHS bus, Other MSHS transportation, Parent or Relative drives, Em-

Domain Listed in Conceptual Pathway & Respondent *(M=Mother, F=Father)*	Rationale and Questions for Consideration for Parent Interviews about Child, Family, and the MSHS Program
	ployer drives, Public transportation, Walk, Other) ▪How long is the trip for your child between your home and the center?
MSHS Characteristics: Parent satisfaction (M+F)	*Rationale:* The 2004 *MSHS Research Design Development Project* reported various issues with parents' responses to questions about their satisfaction with MSHS. For example, parents' report of teacher-child behavior (like those used in *FACES*) did not yield useful information, perhaps because parents may be not be able to visit the classrooms due to their work schedules and transportation. Therefore, these general satisfaction questions were eliminated. The order of the remaining questions was switched since MSHS parents prefer to talk about their children before themselves. In addition, it may be more likely to obtain responses about recommended changes after discussing the positive aspects of MSHS services. It should be noted that these questions are open-ended. A coding scheme may need to be developed so that it can be quantitatively analyzed. Codes should probably include child safety, child development, food, English development among the positives and concerns about transportation, hours of operation, eligibility, connection with teacher, etc for negatives. *Questions:* ▪What are the major ways you feel Migrant and Seasonal Head Start helped [MSHS CHILD] this year? PROBE: What else? (2004 *MSHS Research Design Development Project*) ▪What are the major ways you think Migrant and Seasonal Head Start helped your family this year? PROBE: Did they help your family in any other areas besides educating [MSHS CHILD]? PROBE: What else? (2004 *MSHS Research Design Development Project)* ▪If MSHS programs were to receive more money, how should the programs use the money to help it better serve children and families?
Family Characteristics: Mood (M+F)	*Rationale:* A short-form of the **The Center for Epidemiologic Studies Depression Scale** (CES-D) is recommended to replace the CIDI (which was used in the 2004 *MSHS Research Design Development Project*) for numerous reasons. First, MSHS parents reported that the CIDI's questions were redundant and difficult to answer (ACF; 2004), though the CIDI scale has been used to identify clinical depression among rural Mexican Americans in California (Vega, et al., 1998). Second, the CES-D has been validated in samples of migrant farmworkers (see Grzywacz et al; 2006) and found to be the most valid screener among a sample of Latinos, albeit an elderly Puerto Rican sample (Robison et al., 2002). Finally, the CES-D was well-received in a recent study of MSHS parents. Depression, along with bodily pain, predicted future engagement in the program and with their child (Cumba & Barrueco, 2008). A question arises in terms of which short form of the CES-D to utilize. Presently ACF studies utilize a different version from *NAWS*, which uses the "Boston Form" (Kohout et al., 1993). The choice between the two short forms may come down to whether scores should be directly comparable to *NAWS* or ACF studies. *Questions:*

Domain Listed in Conceptual Pathway & Respondent *(M=Mother, F=Father)*	Rationale and Questions for Consideration for Parent Interviews about Child, Family, and the MSHS Program
	Boston Form of CES-D used in *NAWS* OR CES-D Form used in *ECLS-B* and *FACES*
Family Characteristics: Farmworker Stress (M+F)	*Rationale:* The **Migrant Farmworker Stress Inventory** (MFWSI) measure was developed from interviews with farmworkers and assesses a range of farmworker experiences. These include work and housing conditions, social isolation, discrimination, and family concerns. Its alpha was .91 in original study (Hovey, 2001; n =23; split across genders) and .88 in Hiatt et al (2008; n=125; all males). MFWSI correlates with the CES-D (.34; Hovey, 2001). Due to its length, Barrueco (manuscript in preparation) utilized 27 out of the 39 items in a measurement pilot study with MSHS parents in North Carolina. The items that were excluded include questions about language proficiency (these were being asked about separately), alcohol and drug questions (these were being asked about separately), child questions (since it was a MSHS, less variance on some of these questions may be present), and relationship questions (due to potential sensitivity concerns). However, some of these questions maybe pertinent in a nation-wide MSHS study. The alphas were .91 among MSHS mothers (n=21) and .87 among MSHS fathers (n=12). This version of the MFWSI correlated .50 with the CES-D, -.40 with SF8- Rate of Overall Health, .40 with SF8- Rate of Bodily Pain (Cumba & Barrueco, 2008). Further, MSHS parents' report of migrant stress at the beginning of a season predicted the extent to which they later engaged in literacy activities at that center, along with their depression and extent of bodily pain. The MFWSI should be considered in the *MSHS Survey* given its reliability and predictive validity within the MSHS population. However, the creation of a shorter form is suggested; this work could be pursued in the Measurement Substudy. While it has been previously factor analyzed by Hiatt et al (2008), their work was conducted with an all-male sample and the factor analysis' intent was not to create a short form (personal communication, Grzywacz, 2007). [Note: Another scale of farmworker stress was also considered for use in the *MSHS Survey*, but eliminated (see Appendix M for more).] *Questions:* Migrant Farmworker Stress Inventory (MFWSI, Hovey, 2000) (Scale available from author)

11.5.2 Conclusion

As discussed in the Introduction, the parent interview was based on the *MSHS Survey*'s conceptual model. Questions and measures were selected after careful examination of findings from other national studies, as well as smaller-scale studies conducted in and outside the United States. A few questions were additionally developed if no other source could be found to assess an area critical in the MSHS child and family experience.

As explained above, this table should not considered to be the final set of items for the parent interview. It is likely that the parent interviews will need to be shortened and further refined before use in the *MSHS Survey*. Specifically, pilot testing will need to be completed on the in-

terview as a whole with particular consideration paid to length, pace, responses, and psychometrics. Further, some domains and measures are specifically recommended for further examination and development through the Measurement Substudy, described in Chapter 9.

11.6 Overview of Interviews for Classroom Teachers, Assistant Teachers, and Family Service Workers

MSHS Staff members are the heart of MSHS, serving as the front line of the program, working directly with the enrolled families. For an *MSHS Survey*, it is critical for them to be interviewed regarding the operations of the program, as well as to assess their perceptions of the MSHS families and the services they provide these families. The *MSHS Survey* should include a significant focus on gathering feedback from key staff at both the center and the classroom levels. Understanding the challenges faced by programs and staff in serving families and meeting the requirements of the Head Start Program Performance Standards when serving agricultural workers is an important way to target policy and technical assistance efforts.

11.6.1 Purpose of Staff Interviews about the MSHS Program

In the Classroom/Family/Child Component of the suggested *MSHS Survey* design, one possible set of data collection activities during the site visits to MSHS centers could be interviews with Classroom Teachers, Assistant Teachers, and Family Service Workers – the key staff who are most likely to work directly with families. These interviews potentially would yield detailed information on MSHS classroom operations (including curricular practices); the experience, education, and training of classroom staff; as well as staff attitudes towards and perceptions of MSHS children and parents. This comprehensive set of interviews also would allow particular emphases to be placed on understanding classroom quality, teacher behaviors, and DLL pedagogical approaches regarding how English and home languages are used during instructional practices with MSHS children. As MSHS staff members who were part of our MSHS Community Consultant Group noted, it would be very useful for the Survey to identify variations across and promising practices within MSHS classrooms nationwide.

11.6.2 The Development of the Staff Interviews from the Conceptual Pathway

As with the parent interview, the *MSHS Survey* conceptual pathway (see Chapters 2 and 11) has guided the development of the staff interviews. These interviews were developed specifically to target the following areas of the model:

- Migrant and Seasonal Head Start Characteristics (Curriculum, Activities, and Routines; Classroom and Center Environment; Teacher, Center, and Grantee Characteristics)
- Local Community
- State and National Policies and Agencies
- Time, Weather, and Migration

The research questions that guided the creation of the *MSHS Survey* are listed in Appendix C while recommendations for the actual interview questions are presented below.

Key Considerations for Staff Interviews about Families and MSHS Programs. Before presenting the specific questions in the staff interviews and their rationale for consideration, attention should be paid to the following considerations:

- Interviews with both Teachers (T) and Assistant Teachers (AT) are suggested, as they often serve different roles within the classroom environment.
- The staff interviews represent recommendations that will require additional discussion and pilot testing, with particular consideration paid to interview length, pace, order of questions, responses, and psychometrics (where appropriate).
- The interview questions are presented here in English only, to minimize the report length. However, all of the questions and measures selected should be available for use in both English and Spanish. The MSHS Community Consultant Group noted that many of the local staff are more comfortable speaking in Spanish, and recommend interviews be conducted in each staff member's primary language. As such, it is suggested that after the interviews are translated, they should be pilot tested to ensure the integrity of the translations.

11.6.3 Sources of Questions and Measures for consideration

Throughout the range of national Head Start studies over the past decade, many of which are described above, researchers have conducted interviews with a limited set of Head Start staff members. Important insights into classroom operations and family services have come from interviews with both Teachers and Family Service Workers. *FACES* as well as the Early Head Start studies focused primarily on child outcomes, with a corresponding focus on staff perceptions. *The Descriptive Study of Children and Families Served by Migrant Head Start Programs (1996)* limited staff interviews to just Center Directors, while the *MSHS Research Design Development Project* (2004) met with only a very small sample of Teachers, Center Directors, and Area Managers in an effort to pilot test potential interview questions. Two previously used sets of staff interviews, *FACES* and the 2004 *MSHS Research Design Development Project* served as the base for the proposed *MSHS Survey* staff interviews. We used these in acknowledgement of the fact that these interviews were previously reviewed and tested by program consultants and had some pilot testing with MSHS staff.

In the process of adapting the staff interviews, questions were considered from additional sources. This included a review of items used in prior and current MSHS, Early Head Start, Head Start (e.g., *A Descriptive Study of Children and Families Served by Head Start Migrant Program*; *The Descriptive Study of Migrant and Seasonal Farmworkers;; Early Head Start Family and Child Experiences Study (Baby FACES*); *Head Start Family and Child Experiences Survey (FACES*); the *Head Start Impact Study*; and Dr. Barrueco's ongoing studies with MSHS programs), as well as Federal agricultural studies (the *National Agricultural Worker Survey* [*NAWS*]).

The results of the review are presented in two tables. The first table includes the recommended domains and items for Classroom Teacher and Assistant Teacher interview forms. The rationale for the listed measures also is presented. The second table similarly details the domains and questions recommended for s Family Service Worker interview.

Classroom Teacher and Assistant Teacher Interview Protocols. These interviews are intended to provide information about the background of MSHS staff; their activities, goals, and priorities; and their roles in providing services to children and families. The interviews of Classroom Teachers and Assistant Teachers should address three primary areas of interest:

- Classroom practices, such as curriculum and classroom activities; frequency and type of contact with parents in and out of the classroom; perceived barriers to parent participation in program activities
- Teacher beliefs, such as philosophy of education and child development, appropriate program goals for families and program success in achieving those goals; understanding of DLL language development
- Background information

While interviews provide a description of the MSHS classroom staff, they also should inform MSHS policy and planning. For example, in recent years, the overall Head Start program has taken steps to improve the professional qualifications of the staff directly serving children. This resulted in additional funds being allocated to programs to increase salaries and benefits for staff and also significantly raised the education requirements for Classroom Teachers. Goals for Classroom Teacher qualifications in the 2007 reauthorization of the Head Start Act require that at least one-half of Classroom Teachers hold a bachelor degree by 2013 (ACF Information Memorandum, 08/19/2008). With data from the *MSHS Survey,* the MSHS Branch will be able to review national estimates of teacher qualifications and career plans. These interviews with MSHS classroom staff will provide a profile of how this transition is progressing within the MSHS Branch.

Beyond the Classroom Teachers typically considered in all Head Start studies, one of the key Head Start staff members typically bypassed in research activities has been Assistant Teachers. As discussed in Chapter 2, although many MSHS classes may espouse bilingual teaching models in which both languages are used interchangeably, research with MSHS classrooms suggests that many Teachers and Assistant Teachers employ a more varied approach in their everyday DLL practices than they report (Barrueco, 2006). For example, in some classrooms, the Assistant Teachers, who are more likely to be fluent in the non-English language, utilize it during transitions and free play while the Classroom Teacher uses English for more formal classroom instruction. With this bilingual emphasis on the Teacher/Assistant Teacher–child interactions, it may be even more important to understand the full dynamics of the MSHS classroom. Both individuals should be interviewed, although the Assistant Teacher interview would be expected to be shorter.

For Classroom Teachers and Assistant Teachers, key interview topics will include the following:

- Staff background & characteristics.
- Language
- Educational qualifications
- Classroom Instruction
- Classroom Environment
- Child Development
- Disability Services
- Migrant/seasonal responsiveness
- Parent Involvement
- Areas of potential program improvement
- Parenting

It is recommended that interviews be conducted in the centers and be approximately 45 minutes for Classroom Teachers and shorter for Assistant Teachers. Following the recommendations of the *MSHS Research Design Development Project* (2004), some background questions have been identified as causing discomfort for MSHS respondents and will be considered for elimination from the *MSHS Survey*. For example, staff reported concern when asked to provide salary and age. Therefore, it is recommended that staff participating in focus groups during the Program/Center-level data collection activities be asked to provide critical feedback regarding interview questions.

The following elements were taken into consideration in the development of the proposed staff interviews:

- Review of items used in prior and current MSHS, Early Head Start, Head Start, and agricultural studies (e.g., *A Descriptive Study of Children and Families Served by Head Start Migrant Program*; *The Descriptive Study of Migrant and Seasonal Farmworkers*; 2004 *MSHS Research Design Development Project*; *Early Head Start Family and Child Experiences Study (Baby FACES)*; *Head Start Family and Child Experiences Survey (FACES 1997-2006)*; the *Head Start Impact Study*; and Dr. Barrueco's work with MSHS families
- Identification of key domains relevant to MSHS stemming from expert consultants and discussions with MSHS Community Consultant Group (see Chapter 3)

Details of potential questions for Classroom Teachers and Assistant Teachers follow in Table 11.5. Questions are assumed to be used for both respondents, unless noted.

Table 11.5. Classroom Teacher and Assistant Teacher Interviews about the MSHS Program

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for the Classroom Teacher and Assistant Teacher Interviews
Teacher, Center, & Grantee Characteristics: Social Work or Case Manager Experience	*Rationale:* These questions on respondent characteristics were utilized in the *FACES* teacher interview, and no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* ▪ Before you started working with MSHS, did you have any work or volunteer experience teaching children who were preschool age or younger? ▪ How many years experience did you have with such programs before you joined MSHS? ▪ How many years experience do you have teaching in Head Start? ▪ How many years experience do you have teaching in MSHS? ▪ How many years experience do you have at current program? ▪ What is your previous work with migrant and seasonal families?
Teacher, Center, & Grantee Characteristics: Family HS Experience	*Rationale:* These questions on respondent characteristics were utilized in the *FACES* teacher interview, and no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* ▪ Do you have any children living in your household who attend MSHS now?

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for the Classroom Teacher and Assistant Teacher Interviews
	▪ Did any children who lived in your household in the past attend MSHS?
Teacher, Center, & Grantee Characteristics: Education	*Rationale:* These questions on respondent characteristics were used in the *FACES* teacher interview and the *1996 Descriptive Study*, and no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* ▪ What is the last or highest grade of school you have completed? ▪ Have you had any special training or experience prior to this position to: o Work with children birth to age 5 or their families; o Work with language-minority children (children whose native language is not English) or their families; o Work with migrant or seasonal children or their families? If so, please describe:
Teacher, Center, & Grantee Characteristics: Degrees and Certification	*Rationale:* These questions on respondent characteristics were used in the *FACES* teacher interview and the *1996 Descriptive Study*, and no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* ▪ What diplomas, certificates, or degrees do you have: o High school diploma, o GED certification, o Associate's degree, o CDA, o Nursing degree, o Bachelor's degree, o Graduate degree, o Other ▪ Do you have any job-related licenses or certificates? o CPR, o Social work, o Registered nurse, o Teaching certificate or license (other then CDA), o Other ▪ Are you currently working on a degree, certificate, or license?
Teacher, Center, & Grantee Characteristics: Gender	▪ (Interviewer identify) gender;
Teacher, Center, & Grantee Characteristics: Language - English	*Rationale:* With the high level of interest in the DLL; it is important to see how classrooms are managed in terms of primary language. In many cases this is dependent on the language skills of the classroom teacher and the assistant teacher. These questions are from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers. *Questions:* ▪ For the following questions, please use the following descriptors of your language proficiency in English: o Advanced (My language skills are like those of native speakers of the language; I can satisfy a broad variety of everyday, school, and work situa-

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for the Classroom Teacher and Assistant Teacher Interviews
	tions in this language without effort) o Fluent (I have strong language skills though they are not perfect; with some effort, I can satisfy the requirements of everyday situations and routine school and work requirements) o Intermediate (I am able to handle most uncomplicated, basic, and communication tasks and social situation) o Basic (I am able to handle some uncomplicated, basic, and communication tasks and social situations) o Limited (I have minimal understanding of vocabulary and conversation) ▪ Please rate your Listening Comprehension ability in English. ▪ Please rate your Speaking ability in English. ▪ Please rate your Reading ability in English. ▪ Please rate your *Writing* ability in English. ▪ How did you acquire the English language? o Native speaker; o Heard the language spoken at home; o Heard the language spoken in my community; o College/ University Coursework (Number of courses?); o Informal Coursework (Number of courses?); o Lived outside the United States and I studied English formally while I was there (Country? Months or Years?); o Other (SPECIFY)
Teacher, Center, & Grantee Characteristics: Language – Non-English	▪ Do you know a language(s) other than English? Which other languages do you know? o Advanced (My language skills are like those of native speakers of the language; I can satisfy a broad variety of everyday, school, and work situations in this language without effort) o Fluent (I have strong language skills though they are not perfect; With some effort, I can satisfy the requirements of everyday situations and routine school and work requirements) o Intermediate (I am able to handle most uncomplicated, basic, and communication tasks and social situation) o Basic (I am able to handle some uncomplicated, basic, and communication tasks and social situation) o Limited (I have minimal understanding of vocabulary and conversation) ▪ Please rate your Listening Comprehension ability in the language. ▪ Please rate your Speaking ability in the language. ▪ Please rate your Reading ability in the language. ▪ Please rate your Writing ability in the language. ▪ How did you acquire the language? o Native Speaker; o Heard the language spoken at home; o Heard the language spoken in my community; o College/ University Coursework (Number of courses?); o Informal Coursework (Number of courses?); o Lived outside the United States and I studied the language formally while I was there (Country? Months or Years?); o Other (SPECIFY)

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for the Classroom Teacher and Assistant Teacher Interviews
Teacher, Center, & Grantee Characteristics: Current Work	*Rationale:* These questions on respondent work history are adapted from those used in the *FACES* teacher interview; no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* ▪ How many hours per week are you paid to work for MSHS? ▪ How many hours per week do you actually work for MSHS? ▪ How many months per year are you paid to work for MSHS? ▪ About what percent of your time would you estimate is spent… o Directly providing services to MSHS families? o Contacting and working with community agencies? o Administrative tasks? ▪ How satisfied are you with teaching at MSHS? Would you say you are: o Very satisfied, b) Satisfied, c) Neither, d) Dissatisfied, e) Very Dissatisfied
Teacher, Center, & Grantee Characteristics: Past Work	▪ What other positions have you held in a MSHS program? o Teacher; o Instructor; o Component coordinator; o Outreach staff/recruiter; o Counselor; o Center director; o Other (SPECIFY); o None – no previous positions
Classroom and Center Environment	*Rationale*: These are new questions, designed to determine the role of Assistant Teachers in MSHS classrooms as well as their responsibilities in interacting with families. Previous questions will determine the language skills of the Assistant Teachers. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ What specific roles does the Assistant Teacher have in the classroom to assist the Teacher? ▪ What specific roles does the Assistant Teacher have in working with the families?
Classroom and Center Environment: Supervision & Training	*Rationale:* With the high level of interest in the DLL; it is important to see how classrooms are managed in terms of primary language. In many cases this is dependent on the language skills of the classroom teacher and the assistant teacher. These questions are adapted from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers. *Questions:* ▪ I receive feedback and support from supervisors to help me improve my work relationships, classroom quality, and teaching strategies: o Strongly Agree, Agree, Disagree, Strongly Disagree ▪ Who serves as your supervisor: (position title) ▪ How often do you meet with them to provide you feedback? ▪ I have completed professional development/trainings/workshops run by my program. ▪ Professional development/trainings/workshops provided by my program are

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for the Classroom Teacher and Assistant Teacher Interviews
	about topics appropriate for my work. ▪ I have used information from professional development/trainings/workshops provided by my programs to change my classroom teaching strategies. ▪ For example: Our professional development/trainings workshops typically use what formats: ▪ My program supports me pursuing additional trainings/workshops/conferences and professional development with paid time off/ funds for registration fees /and/or paying substitute teachers. ▪ Professional development/trainings/workshops and further education are important to my program's administration.
Classroom and Center Environment: Center Assessment	*Rationale:* These questions get individual perceptions of the strengths and weaknesses of the centers from the teaching staff who work there. These questions are adapted from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers. *Questions:* ▪ Using the scale below, please evaluate the following MSHS components at your center: 1 = Needs Much Development/ Improvement 2 = Needs Some Development/ Improvement 3 = Needs A Little Development/ Improvement 4 = Acceptable, Needs No Significant Development/ Improvement 5 = Perfect in its Impact for following year o Early Childhood Component: Building Language for Literacy; o Parent Training: Helping parents to learn ways to build their children's language and literacy; o Interactive Literacy: The amount, variety, and quality of language and literacy activities that parents and children are engaging in together; o Adult Education: ESL, Basic Education, Inglés Sin Barreras, GED, Computer…; o The MSHS Program in general being provided to families; o Your training activities; o Your training in Language and Literacy Development; o Your training in Bilingualism/ Biliteracy Development; o Communication between staff ▪ Please tell me the extent to which you agree or disagree with the following statements: Strongly Agree, Agree, Disagree, Strongly Disagree, NA, DK o Overall, our Center has high morale; o Our MSHS program allows teachers/ home visitors input into planning the curriculum; o Our MSHS program helps teachers/ home visitors to work effectively with children and families; o Our center works well with migrant and seasonal farmworker families
Classroom and Center Environment: Language & Literacy	*Rationale:* these questions get individual attitudes and perceptions of the use of language in classrooms from the staff who work there. These questions are adapted from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers during the Measurement Substudy. *Questions:* ▪ Please react to each of the following statements by indicating if you Strongly

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	Agree, Agree, Disagree, Strongly Disagree: o If children are not proficient in English, the schools should avoid the use of Spanish and provide primarily opportunities for the children to hear and speak English. o A high degree of proficiency in two languages provides a cognitive advantage for the bilingual individual. o All children, regardless of home language, should be exposed to a second language. o Development in the home language does not aid in English acquisition. o Non-English speaking parents of young children play a critical role in their children's learning and development. o Teacher knowledge of a second language is beneficial in the classroom. o When a child can begin to participate in school activities in English, there is no need to continue instruction in the home language. o Young children learn a second language more quickly, thoroughly, and easily than adults. o Games and songs in Spanish are important for language development in classrooms with Spanish-speaking children. o Play activities are more appropriate than language drills for young children learning a second language. o A second language can be learned without formal instruction if a nurturing language environment is provided. o Language development is best addressed through active, hands-on learning experiences and talk in the classroom. o Young non-English-speaking children benefit from close partnerships between their parents and the school. o Non-English-speaking parents should not be encouraged to go to school for meetings, volunteerism, and conferences. o Non-English-speaking parents should be encouraged to read to their children in the home language. o Parents who are not able to read or write are not able to encourage their children's interest in books and other printed material. o Non-English-speaking parents should be encouraged to speak only English to their children to facilitate the transition to English.
Curriculum, Activities, & Routines	▪ What languages are used for verbal instruction in this class? What languages are used for printed materials in this class? o a. English; B. Spanish; C. Kanjobal; D. Mixteco Alto or Bajo; E. Chinese; F. Japanese; G. Korean; H. Vietnamese; I. A Filipino language; J. Other indigenous language: e.g. Zapoteco; K. Tarasco, Triqui, Chu, (specify); L. American Indian language: e.g.,Kickapoo; (specify); M. Other language (specify)
Curriculum, Activities, & Routines	▪ What percentage of time do you speak English in the classroom? o 0%, 20%, 40%, 50%, 60%, 80%, 100% ▪ When do you use English in the classroom? o Reading Time; During Mealtime; During Transitions; General Discussion; while Teaching ▪ What percentage of time do you speak this language in the classroom? o 0%, 20%, 40%, 50%, 60%, 80%, 100% ▪ When do you use this language in the classroom? o Reading Time; During Mealtime; During Transitions; General Discussion;

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	While Teaching
Curriculum, Activities, & Routines	*Rationale:* These questions get information regarding the use of language activities in classrooms from the teachers. These questions are adapted from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers during the Measurement Substudy. *Questions:* ▪ How often do children in this class do each of the following reading and language activities? Would you say children (read item) never, about once a month or less, two or three times a month, once or twice a week, three or four times a week, or every day? o Work on learning the names of the letters; o Practice writing the letters of the alphabet; o Discuss new words; o Dictate stories to a teacher, aide, or volunteer; o Work on phonics; o Listen to you read stories where they see the print (e.g., Big Books); o Listen to you read stories but they don't see the print; h. Retell stories; o Learn about conventions of print (left to right orientation, book holding); o Work on writing own name; o Learn about rhyming words and word families; o Learn about common prepositions, such as over and under, up and down
Curriculum, Activities, & Routines: Classroom Schedule	▪ Is there a schedule of activities posted inside or outside of each classroom? ▪ On a nice day, about how many minutes do toddlers typically spend outdoors? ▪ On a nice day, about how many minutes do preschoolers typically spend outdoors?
Classroom and Center Environment; Curriculum, Activities, & Routines: Classroom Management	*Rationale:* These questions are designed to yield information regarding direction of activities in classrooms. These questions are adapted from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers. Pilot test follow-up discussion should include investigation of how these responses might vary during the year and with the ages of the children. *Questions:* ▪ How many children are there in your class right now? ▪ We would like you to tell us how a typical day is spent in your classroom. Not including breakfast, lunch, snack, or nap breaks, how much time do the children spend in the following kinds of activities? How about (READ ITEM)? Would you say the children spend no time, half an hour or less, about one hour, about two hours, or three hours or more? o Teacher-directed whole class activities o Teacher-directed small group activities o Teacher-directed individual activities o Child-selected activities
Curriculum, Activities, & Routines:	*Rationale:* These questions get information regarding the classroom environment from the teachers. Many of these questions may be linked to the suggested observations of classroom quality. These questions are from the 2004 *MSHS Research Design Development Project*.

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	Questions: ▪ We would like you to tell us how a *typical day* is spent in your infant/toddler room. How much time do the children spend in the following kinds of activities? How about (read item)? Would you say the children spend no time, half an hour or less, about one hour, about two hours, or three hours or more in? o Feeding, Meals/Snacks; o Diapering/Toileting; o Naps; o Indoor Play activities; o Outdoor Play activities ▪ Please think about the displays, pictures, photos, mobiles, etc., that you have in the room(s) where you care for the children and that the children can see or hear. Please indicate whether or not you have any of the following items: o Pictures or posters produced commercially; o Mobiles; o Toddler busy boards; o Children's records, CDs, or tapes; o Drawings or scribble pictures done by the children ▪ Thinking about toys that are available in the room(s) where you care for the children… o Do you have any toys that let the children work their large muscles, like for infants an outdoor pad or blanket, crib gym, or walker or for toddlers riding toys, push-pull wheel toys, or slides? (PROBE: Other examples are door swing, jump swing, play slide, rocking horse, sit and spin, trampoline, Tyco tree house); o Do you have any toys that have pieces that fit together, such as beads on a string or shape sorters? (PROBE: Other examples are ball stackers, busy boxes, grasping toys, egg crate, hammer and pegs, jack-in-a-box, rings on a stick, and simple (single piece) puzzles); o Do you have any art materials for older infants and toddlers (NA if all children in care are less than 12 months of age)? These can include crayons, finger paints, play dough. o Do you have any cuddly, soft toys like dolls or teddy bears? o Do you have any books suitable for infants and toddlers, such as vinyl or hardpage books? o Do you have any toys that let children make music, such as a drum, recorder or toy that plays a musical jingle?
Classroom and Center Environment	*Rationale:* These questions get information regarding the computer environment and use of technology by the teachers. These questions are from the *Baby FACES* project. *Questions:* ▪ Do you have access to a computer in class? ▪ Do you have access to a computer at work for planning? ▪ Does your MSHS center have Internet access? ▪ Does your MSHS program provide you with access to any of the following reports? o Enrollment lists;

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	o Reports on characteristics of MSHS program families; o Reports on services provided; o Reports on child's health/immunization status; o Reports on staff training/in-service; o Progress reports on individual children; o Something else? (SPECIFY)
Curriculum, Activities, & Routines: Class Activities	*Rationale:* These questions get information regarding the content of classroom activities from the teachers. These questions are adapted from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers during the Measurement Substudy. *Questions:* ▪ Does your classroom have the following interest areas or centers for activities? o Reading area; o Listening center; o Writing center or area; o Math area with manipulatives; o Computer area; o Science or nature area with manipulatives; o Dramatic play area or corner; o Art area; o Private area for one or two children to be alone ▪ What are some activities and class practices that are specifically aimed at encouraging children's social or emotional development? ▪ Who makes most of the decisions about the day-to-day instructional plans for children in your center, such as the typical daily schedule or sequence of activities? Is it… o Head Start program administrators, o Individual center directors and staff, o Individual teachers, or o Someone else? (SPECIFY)
Curriculum, Activities, & Routines:	*Rationale:* These questions get attitudes of teachers regarding classroom activities and beliefs on how MSHS classrooms should be managed. These questions are adapted from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers. *Questions:* ▪ I'm going to read some statements that some teachers have made about how children in Head Start should be taught and managed. Please tell me whether each statement agrees or disagrees with your personal beliefs about good teaching practice in Head Start. o Head Start classroom activities should be responsive to individual differences in development; o Each curriculum area should be taught as a separate subject at separate times; o Children should be allowed to select many of their own activities from a variety of learning areas that the teacher has prepared (writing, science center, etc.); o Children should be allowed to cut their own shapes, perform their own

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	steps in an experiment, and plan their own creative drama, art, and writing activities; o Students should work silently and alone on seatwork; o Children in Head Start classrooms should learn through active exploration; o Head Start teachers should use treats, stickers, or stars to encourage appropriate behavior; o Head Start teachers should use punishments or reprimands to encourage appropriate behavior; o Children should be involved in establishing rules for the classroom; o Children should be instructed in recognizing the single letters of the alphabet, isolated from words; o Children should learn to color within predefined lines; o Children in Head Start classrooms should learn to form letters correctly on a printed page; o Children should dictate stories to the teacher; o Children should know their letter sounds before they learn to read; o Children should form letters correctly before they are allowed to create a story.
Curriculum, Activities, & Routines: Curricula	*Rationale:* These questions get information regarding the teachers' use of a formal curriculum in the class. These questions are adapted from *FACES* and from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers. *Questions:* ▪ How much do you use a curriculum in developing and planning daily classroom activities? Would you say it is A great deal, Fairly much, or Not at all? ▪ What curriculum do you use? Any others? ▪ Do you have a daily written plan for your classroom activities? ▪ Do you have a specific curriculum or combination of curricula for preschool age children and/or infants and toddlers in your program? ▪ If your principal curriculum for preschoolers and/or infants and toddlers have a name, what is that name? If your additional curricula for Preschool children and/or infants and toddler have names, what are they? ▪ Regardless of who developed it, does the curriculum used by your program for preschool-aged children and/or infants and toddlers specify the following o Goals for children's learning and development o Specific activities for children o Suggested teaching strategies o Suggested teaching materials o Ways to involve parents in their child's learning activities o Bilingual language development o Transition to Spanish or English ▪ Did any of these factors make you choose this curriculum?
Classroom and Center Environment: Mentoring	*Rationale:* These questions get information regarding mentoring activities that are available in the centers and classrooms. The mentoring questions are adapted from Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers. *Questions:*

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	▪ Is there someone who mentors you in your classroom -- someone who observes your teaching on a regular basis and provides feedback, guidance, and training? ▪ How often does your mentor visit your classroom? Would you say it is o Once a week, Once a month, or For a concentrated period (such as an entire week or month)? ▪ Have you been to observe your mentor in her or his classroom or gone with your mentor to another classroom? ▪ Have you acted as a mentor for other Head Start teachers or teacher trainees?
Classroom and Center Environment: Parent Involvement	*Rationale:* These questions get information about and strategies directed towards parent involvement. These questions are adapted from the *2004 Research Design Development Project* and Dr. Barrueco's work with the ECMHSP and are recommended for pre-testing at centers. *Questions:* ▪ Do you do any of the following with the parents <u>of all</u> of the children in your classroom? Do you… o Keep a schedule of regular parent-teacher conferences? o Schedule parent-teacher conferences to follow your own review of the child's progress? (Only If Systematic Assessment Done) o Schedule parent-teacher conferences at least 2 times a year? o Conduct parent teacher conferences at least 1 time a year? o Schedule home visits twice a year? o Conduct home visits at least once a year? ▪ Not counting formal parent-teacher conferences, about how often do you typically speak with the parents of the children in your class? [PROBE: Most children's parents?] o Less than once a month; Once or twice a month; About once a week; Two or three times a week; Almost daily
Classroom and Center Environment: Parent Involvement	▪ What are some activities you encourage parents to do in order to be involved in their child's learning, health and development? o Read to child; o Tell child stories; o Talk to child about his/her heritage or Family background; o Talk to child about his/her experiences in MSHS; o Spend time with child doing arts and crafts; o Spend time with child working on a project; o Direct parent to child health services; o Discuss discipline issues (home versus escuelita) ▪ How do you encourage parents to be involved in MSHS?
Classroom and Center Environment: Parent Involvement	*Rationale:* These questions get information about and strategies directed towards parent involvement. These questions are adapted from the *2004 Research Design Development Project* and are recommended for pre-testing at centers. *Questions:* ▪ Not counting formal parent-teacher conferences, about how often do you typically speak with the parents of the children in your class? [Probe: Most child-

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	ren's parents?] o Less than once a month; once or twice a month; About once a week; Two or three times a week; Almost daily ▪ What are some activities you encourage parents to do in order to be involved in MSHS? o Attend a general school/escuelita meeting; o Go to regularly scheduled; Parent-teacher conferences; o Attend school/escuelita or class event, such as a play or sports event; o Act as a school volunteer or serve on a school or parent committee; o Participate in charitable activities for school; o Attend parent workshops; o Other (specify) o What are some of the main challenges you face in working with parents?
Classroom and Center Environment: Developmental Assessments	*Rationale:* These questions get information center processes related to conducting developmental assessments of children. These questions are adapted from the *2004 Research Design Development Project* and are recommended for pre-testing at centers. *Questions:* ▪ Do you currently assess Preschoolers' developmental progress over the course of their enrollment? What methods do you use for these assessments of Preschoolers? o Ratings based on observation or work sampling? o Testing with standardized tests or assessment or screening instruments (SPECIFY)? o Both observation-based ratings and direct assessments? o Something else? (SPECIFY). ▪ Over the course of the program session at this Center, how often is each preschooler's development assessed? o Weekly; o Two or three times a month; o Monthly; o Beginning and end of enrollment; o Other (SPECIFY)
Classroom and Center Environment: Developmental Assessments	▪ Do you currently assess Infants and Toddlers' developmental progress over the course of their enrollment Center's operation? ▪ What methods do you use for these assessments of Infants and Toddlers? Would you say… o Ratings based on observation or work sampling; o Testing with standardized tests or assessment or screening instruments (SPECIFY); o Both observation-based ratings and direct assessments? o Something else? (SPECIFY). ▪ How often is each Infant or Toddler's development assessed? o Weekly; Two or three times a month; Monthly; Beginning and end of enrollment; Other (SPECIFY)
Classroom and Center Environment: Assessments	*Rationale:* These questions get information about child assessments of infants and toddlers in the classrooms. These questions are adapted from *Baby FACES*.

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	Questions: ▪ If yes to previous questions: What are the most important child assessment tools that your program uses with children? o Does not use; o Agency-Created Screening Assessment; o Achenbach Child Behavior Checklist (CBCL); o Bayley Behavior Rating Scale (BRS); o Bayley Mental Development Index (MDI); o Creative Curriculum Tools; o High Scope COR; o Infant Toddler Developmental Assessment; o The Ounce Scale; o Infant Toddler Social Emotional Assessment and Brief Infant Toddler Social Emotional Assessment (ITSEA.BITSEA); o Leiter International Performance Scale Revised (Leiter-R); o Macarthur Communicative Development Inventories (CDI); o Mullen Scales of Early Learning; o Preschool Language Scale (PLS-3); o Receptive/ Expressive Emergent Language Test-2nd Ed (REEL-2); o Temperament and Atypical Behavior Scale (TABS); o Vineland Adaptive Behavior Scales (VABS); o Vineland Social-Emotional Early Childhood Scales (Vineland SEEC); o Woodcock Johnson; o Another assessment tool (SPECIFY)
Classroom and Center Environment: Assessments	▪ I use assessment tools to help me individualize my teaching with students? ▪ I use assessment tools to help me improve my classrooms and teaching strategies: o Strongly Agree, Agree, Disagree, Strongly Disagree
Classroom and Center Environment: Parent Involvement Kindergarten Transition	*Rationale:* These questions get information about how teachers facilitate the transition from Head Start to kindergarten. These questions are adapted from *FACES* and should be pretested and discussed with staff given the impact of mobility on school entrance. *Questions:* ▪ Does your staff work with parents to determine where their children will attend kindergarten? ▪ What does your Center do any of the following regarding transition to kindergarten? Do you? o Send letters home with children or mail letters to parents providing information on transition? o Invite parents to attend informational meetings or discussions with MSHS or school staff about kindergarten transition? o Provide parents with information on the school their child will attend? o Schedule parent and/or child visit(s) to the school the child will attend? o Accompany parents and/or children to visit the school? o Teach parents skills to effectively advocate for their school-age children? o Do anything else? (SPECIFY)

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Curriculum, Activities, & Routines: Kindergarten Transition	▪ Does your MSHS center work in any of the following ways with the schools your students will attend? o Conduct joint training of MSHS and school staffs? o Share curriculum information? o Share information about rules and program policies? o Share information on expectations of students and families? o Provide children's MSHS records to the school? o Meet with kindergarten teachers at the schools MSHS children will attend? o Do anything else?
Teacher, Center, & Grantee Characteristics: Perceptions of MSHS	*Rationale:* These questions get information about how teachers facilitate the transition from Head Start to kindergarten. These questions are adapted from *FACES* and should be pretested. *Questions:* ▪ What two things do you think your program does really well for children and their families? ▪ If you could change one thing (including staff, administration, classroom practices, and facilities) that you think would significantly improve the services you are providing, what would it be? ▪ What do you think are the things that make the MSHS program different from other Head Start programs? ▪ What do you think are the most unique and important features of the MSHS program? ▪ If it were just up to you, how likely would you be to continue working for MSHS through the next Head Start year? o Very likely, Fairly likely, Very unlikely? ▪ How satisfied are you with teaching migrant and seasonal farmworker children? Would you say you are: o Very satisfied, satisfied, Neither, Dissatisfied, Very Dissatisfied
Teacher, Center, & Grantee Characteristics: Job Satisfaction	*Rationale:* Staff job satisfaction and retention of staff are important factors for Directors to understand. These questions get teachers' attitudes and perceptions of their work environment. These questions are adapted from *FACES* staff interviews. *Questions:* ▪ Please tell me the extent to which you agree with each of the following statements on teaching. Tell me whether you mostly disagree, neither agree nor disagree, or mostly agree. o I really enjoy my present teaching job; o I am certain I am making a difference in the lives of the children I teach; o If I could start over, I would choose teaching again as my career.
Teacher, Center, & Grantee Characteristics: Obstacles and Barriers	▪ In your current Head Start position, what conditions or situations make it harder for you to do your job well? o Time constraints such as not enough time to do all that is required; o An undefined role unclear guidelines on job responsibilities; o Salary too low for job demands; o Lack of support staff; o Not enough training for secondary responsibilities; o Not enough support and communication from administration;

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	o Not enough funds for supplies and activities; o Inability to maintain sustained contact with families; o Too little time with families; o Language of families; o Other; o No problems; o Don't know
Teacher, Center, & Grantee Characteristics: Perceptions of MSHS	▪ What two things do you think your program does really well for children and their families? ▪ If you could change one thing (including staff, administration, classroom practices, and facilities) that you think would significantly improve the services you are providing, what would it be? ▪ What do you think are the things that make the MSHS program different from other Head Start programs? ▪ What do you think are the most unique and important features of the MSHS program?

11.6.4 Family Service Worker Interview Protocol

A critical link between the local programs and the families is the Family Service Worker, and this may even have greater truth within the MSHS Branch. A good family service worker is someone who is accessible to families, understands program requirements, and understands available resources within the program and the community. They are noted for their ability to respect and respond to culture, traditions, lifestyle, language, and values of each family and community, and to translate this into partnerships with professionals in the community (Head Start Bulletin, Issue No. 72, 2002).

In reviewing findings from *FACES 2000*, Family Service Workers indicated that, within regional Head Start, the top three activities on which they spent most of their time working with families were providing social service Information, assisting with basic needs, and providing informal counseling on relationships. Given the unique needs of migrant and seasonal farmworker families, the work of the Family Service Workers may be significantly different. Key interview topics will include the following:

- Staff background & characteristics
- Language
- Educational qualifications
- Recruitment & enrollment policies and procedures.
- Family mobility
- Impact of family migration
- Impact of immigration issues
- Transition planning activities
- Parent Involvement
- Barriers to Involvement
- Parent Education
- Parent Involvement
- Parent Advocacy
- Family Needs Assessments
- Parent Engagement
- Parenting

Family Service Worker interviews (Table 11.6) should be 45 minutes, and are subject to the same cautions and limitations that were mentioned above for the Teacher interviews. As noted earlier, the recommendations of the *MSHS Research Design Development Project* (2004) were to remove background questions that cause discomfort for staff respondents. For example, staff reported concern when asked their salary information and age. Staff participating in focus groups during the Program/Center-level data collection activities could provide critical feedback regarding which interview questions cause problems.

Table 11.6 Family Service Worker Interviews about the MSHS Program

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
Teacher, Center, & Grantee Characteristics: Social Work or Case Manager Experience	*Rationale:* These questions on respondent characteristics were utilized in the *FACES* Family Service Worker interview, and no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* *FACES* ▪ Before you started working with MSHS, did you have any work or volunteer experience as a social worker or case manager in a family support program? ▪ How many years experience did you have with such programs before you joined MSHS? ▪ How many years experience did you have working with migrant and seasonal farmworker families?
Teacher, Center, & Grantee Characteristics: Head Start Family Experience	*Rationale:* These questions on respondent characteristics were utilized in the *FACES* Family Service Worker interview, and no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* *FACES* ▪ Do you have any children living in your household who attend MSHS now? ▪ Did any children who lived in your household in the past attend MSHS?
Teacher, Center, & Grantee Characteristics: Education	*Rationale:* These questions on respondent characteristics were utilized in the *FACES* Family Service Worker interview and in the *Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996*; no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* ▪ What is the last or highest grade of school you have completed? ▪ Have you had any special training or experience prior to this position to: o Work with children birth to age 5 or their families; o Work with language-minority children (children whose native language is not English) or their families; o Work with migrant or seasonal children or their families?
Teacher, Center, & Grantee Characteristics: Certification	*Rationale:* These questions on respondent characteristics were utilized in the *FACES* Family Service Worker interview; no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* ▪ What diplomas, certificates, or degrees do you have: o High school diploma,

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	o GED certification, o Associate's degree, o CDA, o Nursing degree, o Bachelor's degree, o Graduate degree, o Other ▪ Do you have any job-related licenses or certificates? o CPR, o Social work, o Registered nurse, o Teaching certificate or license (other then CDA), o Other ▪ Are you currently working on a degree, certificate, or license?
Teacher, Center, & Grantee Characteristics: Respondent Characteristics	From *Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996*; ▪ (Interviewer identify) gender
Teacher, Center, & Grantee Characteristics: Language - English	*Rationale:* These questions on respondent characteristics were taken from Dr. Barrueco's work with the ECMHSP; no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* ▪ For the following questions, please use the following descriptors of your language proficiency: o Advanced (My language skills are like those of native speakers of the language; I can satisfy a broad variety of everyday, school, and work situations in this language without effort) o Fluent (I have strong language skills though they are not perfect; With some effort, I can satisfy the requirements of everyday situations and routine school and work requirements) o Intermediate (I am able to handle most uncomplicated, basic, and communication tasks and social situation) o Basic (I am able to handle some uncomplicated, basic, and communication tasks and social situation) o Limited (I have minimal understanding of vocabulary and conversation) ▪ Please rate your Listening Comprehension ability in English. ▪ Please rate your Speaking ability in English. ▪ Please rate your Reading ability in English. ▪ Please rate your *Writing* ability in English. ▪ How did you acquire the English language? o Native speaker; o Heard the language spoken at home; o Heard the language spoken in my community; o College/ University Coursework (Number of courses?); o Informal Coursework (Number of courses?); o Lived outside the United States and I studied English formally while I was there (Country? Months or Years?); o Other (specify)

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
Teacher, Center, & Grantee Characteristics: Language – Non-English	▪ Do you know a language(s) other than English? Which other languages do you know? o Advanced (My language skills are like those of native speakers of the language; I can satisfy a broad variety of everyday, school, and work situations in this language without effort) o Fluent (I have strong language skills though they are not perfect; With some effort, I can satisfy the requirements of everyday situations and routine school and work requirements) o Intermediate (I am able to handle most uncomplicated, basic, and communication tasks and social situation) o Basic (I am able to handle some uncomplicated, basic, and communication tasks and social situation) o Limited (I have minimal understanding of vocabulary and conversation) ▪ Please rate your Listening Comprehension ability in the language. ▪ Please rate your Speaking ability in the language. ▪ Please rate your Reading ability in the language. ▪ Please rate your *Writing* ability in the language. ▪ How did you acquire the language? o Native speaker; o Heard the language spoken at home; o Heard the language spoken in my community; o College/ University Coursework (Number of courses?); o Informal Coursework (Number of courses?); o Lived outside the United States and I studied English formally while I was there (Country? Months or Years?); o Other (specify)
Teacher, Center, & Grantee Characteristics: Current Work	*Rationale:* These questions on respondent work status were adapted from the *FACES* Family Service Worker interview; no concerns were reported regarding the effectiveness or wording of these questions. *Questions:* How many hours per week are you paid to work for MSHS? ▪ How many hours per week do you actually work for MSHS? ▪ How many months per year are you paid to work for MSHS? ▪ About what percent of your time would you estimate is spent… o Directly providing services to MSHS families, o Contacting and working with community agencies, o Administrative tasks? ▪ How satisfied are you with working in the field of family services? Would you say you are: o a) Very satisfied, b) satisfied, c) Neither, d) Dissatisfied, e) Very Dissatisfied
Teacher, Center, & Grantee Characteristics: Positions Held In MSHS	*Rationale:* These questions on respondent work history were adapted from the *FACES* Family Service Worker interview. *Questions:* ▪ What other positions have you held in a Migrant and Seasonal Head Start program? o Teacher; o Instructor;

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
	o Component coordinator; o Outreach staff/recruiter; o Counselor; o Center director; o Other (SPECIFY); o None – no previous positions
Classroom and Center Environment: Resources	*Rationale*: These questions on computer resources and the use of technology at the center were adapted from the *Baby FACES* staff interview. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ Do you have access to a computer in class? ▪ Do you have access to a computer at work for planning? ▪ Does your MSHS center have Internet access? ▪ Does your MSHS program provide you with access to any of the following reports? o Enrollment lists; o Reports on characteristics of MSHS program families; o Reports on services provided; o Reports on child's health/immunization status; o Reports on staff training/in-service; o Progress reports on individual children; o Reports on children migrating from other centers; o Something else (Specify)
Local Community; Teacher, Center, & Grantee Characteristics: Outreach and Enrollment	*Rationale*: Past work tells us that outreach and enrollment activities vary across sites and by staff. These questions were adapted from the *Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996* staff interview. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ How do you recruit families for your MSHS program? o The grantee does all of the outreach and recruiting; o Through other MSHS grantees, o Through community based programs, o Through social service providers, o Through religious organizations, o Through growers who employ migrants, o Staff go door to door where migrants live, o Through consolidated outreach with staff of other service providers, o Through "service fairs" or other unified outreach (MSHS and other service providers gather in one location to offer services), o Radio announcements, o Newspaper ads, o Flyers, o Through parents formerly or currently in program; o Parents come on their own, o Other. ▪ Please rank the three recruitment methods which have proven to be the most effective methods with "1" being most effective.

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
	▪ What percentage of applicants each year are turned down for enrollment in MSHS because they are ineligible for these services? ▪ What is the most common reason that these applicants are ineligible? o Income, Mobility, Work industry, Child's age, Other. ▪ Approximately what percentage of families return to the program from one year to the next? ▪ Are there children in this service area who are eligible for MSHS and are not served? ▪ Why are these children not served? o Lack of enrollment slots in the program, o Parents decline to participate, o Parents are not aware of the program, o Family lives in a remote area, o Transportation is a problem; o Other. ▪ What percentage of eligible children does your center serve? ▪ Are there seasonal farmworkers with children in your service area? ▪ Would you estimate the proportion to be (e.g., twice as many, one quarter as many)? ▪ Do you have separate waiting lists for different age groups? For example, one list for infants, one for toddlers, and one for preschoolers?
Local Community; Home and Family Environment: Parent Mobility	*Rationale*: It is critical for MSHS staff to understand all the ramifications of parent mobility in their particular programs. These questions on parent mobility were taken from the *Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996* staff interview. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ Do parents notify you when their children will no longer be attending your center? What percentage of parents notifies you when their children will no longer be attending your center? ▪ If parents do not notify you, how do you decide that a child is no longer attending the center?
Local Community; Home and Family Environment: Parent Mobility	*Rationale*: Additional questions were adapted from the *2004 MSHS Research Design Development Project* staff interview. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ Do you move with the families served by this Center or do you move from center to center to follow the schedule of when different programs are open?
State and National Policies and Agencies; Local Community; Home and Family Environment: Immigration Issues	*Rationale*: New questions to determine the impact of local and national immigration policies on families and what role Head Start can play in assisting families. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ What issues do you have to address with families because of the recent increase in enforcement of immigration rules in some communities? First

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
	hand issues versus anecdotal ▪ What are the immigration issues that concern families the most? How have these concerns changed their behavior? How has the Program addressed these concerns?
Family Characteristics; Teacher, Center, & Grantee Characteristics: Family Assessments	*Rationale*: These questions on family assessments were adapted from *FACES* staff interviews. *Questions:* ▪ What methods does your MSHS program use to identify <u>family needs</u>? Do you use… o Family self-reports; o A checklist; o Screenings; o Something else. SPECIFY ▪ Do you complete a Family Need Assessment or Family Partnership Agreement for all, most, some, or none of the families that are assigned to you? ▪ When you develop a family needs assessment or family partnership agreement, do you… o Discuss objectives and goals with families? o Prepare a written plan with families? o Ask the family to sign a copy of the plan? o Give the family a copy of the plan? o Other? o Don't know ▪ If a family had a new need for services arise during the Head Start session, how would you most likely learn about it? ▪ What parent or family assessments are most important for your program? ▪ Does your MSHS program create Individual Family Partnership Agreements (IFPA) for families? ▪ IF YES: What proportion of the families in your MSHS program has an IFPA? How many times a year are the Individual Family Partnership Agreements updated? ▪ IF NO: what are your reasons for not using Individual Family Partnership Agreements (IFPA)? o Lack of resources; o Assessment tool not available; o No staff qualified to develop the IFPA's; o IFPA process not useful; o Use alternative process (please specify); o Families leave before agreements can be implemented o Other. SPECIFY
Family Characteristics; Teacher, Center, & Grantee Characteristics: Home Visits	*Rationale*: All Head Start families are required to have home visits, but MSHS staff face many barriers in meeting this requirement. These questions were adapted from the *Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996*. *Questions:* *Descriptive Study of the Children and Families Served by Migrant Head*

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
	Start Programs, 1996 ▪ Which staff members conduct home visits? ▪ What issues are addressed at a home visit? Does your program have a set plan of activities to be completed with each family during home visits? ▪ What are the problems associated with arranging or conducting home visits?
Family Characteristics; Teacher, Center, & Grantee Characteristics: Parent Involvement	*Rationale*: These questions on parent involvement issues were adapted from the *2004 MSHS Research Design Development Project.* *Questions:* ▪ Do parent volunteers in your center commonly serve in any of the following capacities: o Classroom aides? o Consultants or workshop leaders? o Providers of guidance on ethnic customs, traditions and values? o Home visitors? o Interpreters for non-English speaking or limited English-speaking families? o Bus monitors or drivers? ▪ Have parent volunteers helped in the Center with: o Height and weight measurements? o Vision screenings? o Classroom cleanup? o Dental care/prevention? o Chores and maintenance? o Curriculum planning? ▪ Have parent volunteers in your Center: o Assisted other families with food shopping or home management activities? o Assisted classroom staff during meal times (e.g., serving, eating with children)? o Assisted in recruiting families? o Contacted parents to notify them of meetings and other Migrant and Seasonal Head Start activities? o Mentored or encouraged other families to participate? ▪ What does your Center do to involve members of extended families, especially grandparents and school-aged children? ▪ What percentage of parents of current students participate in the center (as volunteer, staff, visitor in classroom)?
Family Characteristics; Teacher, Center, & Grantee Characteristics: Parent Involvement	*Rationale*: These questions on parent involvement were from the *Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996*. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ Why do you think that not all parents participate? o They are too tired from work, o They don't have anyone to watch the children, o They aren't in the area long enough, o They don't want to participate, o Other.

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
Family Characteristics; Teacher, Center, & Grantee Characteristics: Parent Assessments	*Rationale*: These questions on parent assessments were originally used in the *2004 MSHS Research Design Development Project* and *FACES*. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ How do you determine the <u>education or training needs of the parents</u>? o Formal Family Needs Assessment; [Get Copy, If Available]; o Community needs assessments [Get Copy, If Available]; o Ask parents during intake/enrollment process what they feel their needs and interests are; o Discussion with other social service providers; o Based upon enrollment in previous year's courses; o Other; o Don't know ▪ Which of these are the three (3) most common education or training needs of the parents? o English language skills; General education; Literacy; Child development; Parenting; Health/nutrition issues; Job training; Other; Don't know
Local Community; Family Characteristics; Teacher, Center, & Grantee Characteristics: Family Services	*Rationale*: Accessing community services may be a very important issue for MSHS. These questions on parent services were from the *2004 MSHS Research Design Development Project* and from *FACES*. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ Does your MSHS program offer any of the following services to families? 1. Offered directly by MSHS staff? 2. Offered by a community partner but provided at the center. 3. Offered through a community partner and provided off-site o Child care; o Health care; o Prenatal care; o Transportation assistance; o Disability services; o Emergency assistance; o Employment assistance; o Education or job training; o Drug or alcohol abuse; o Legal assistance; o Housing assistance; o Financial counseling; o Family literacy; o Dual Language Learner (DLL) ▪ Does your MSHS program offer or make available any of the following DLL services for families? o Assessment of English language skills; o Assessment of basic reading and writing skills; o Activities and Workshops for parents of English Language Learners; o Assistance in applying for medical insurance;

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
	o Assistance in scheduling appointments for pre-kindergarten screening; o Information about: Head Start, Adult ESL or Education and Community
Local Community; Family Characteristics; Teacher, Center, & Grantee Characteristics: Community Collaborations	*Rationale*: Questions from the *Descriptive Study of the Children and Families Served by Migrant Head Start Programs, 1996; 2004 MSHS Research Design Development Project* and *FACES* were adapted to assess the types of community collaborations are used in MSHS. , to determine role of assistant teachers in MSHS classrooms. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* *:* ▪ What organizations or service providers does your MSHS center collaborate with or coordinate with? ▪ For each organization mentioned: What does this organization bring to the collaboration with your MSHS center? o Direct service, o Money, o Materials, o Presentations, o Training, o Serve on committees, o Organize events, o Other ▪ What do you and your center bring to the collaboration with this organization? o Direct service, o Money, o Materials, o Presentations, o Training, o Serve on committees, o Organize events, o Other ▪ Do you or staff of your center refer MSHS families to this organization or service? ▪ How are parents informed of the availability of this service? ▪ Does this organization refer families to your MSHS center? ▪ Is information on MSHS families shared between MSHS and social service agencies? ▪ How would you rate the responsiveness of this agency to migrant farmworkers. ▪ How frequently do you meet with staff from collaboration agencies for the following activities: o Joint membership on an advisory panel or community board, o Meetings to discuss general services for MSHS families, o Meetings to discuss services for specific MSHS families'.

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
	▪ How often have the following been barriers to collaboration with other community service providers (Never, rarely, sometimes, frequently): o Limited number of openings for families at collaborating agency, o Content of focus of agency does not match families' needs, o Lack of bilingual staff, o Services inaccessible or too far away, o Availability of child care during class or meeting time, o Schedule does not meet family needs, o Lack of cooperation from staff at collaborating agency, o Cost of service is prohibitive, o Other
Local Community; Family Characteristics; Teacher, Center, & Grantee Characteristics: Community Collaborations	▪ When you refer families to community service providers, what proportion of your referrals are handles in the following ways? (Total must add to 100%): o Specific information about services is given to families (e.g., location, time of classes, contact person) and the families arrange for their own services, o Individual slots or services are arranged with direct service providers by MSHS staff, o MSHS staff arranges services and accompany family to service for orientation or first meeting. ▪ How frequently do you meet with staff from collaborating agencies for the following activities: o Joint membership on an advisory panel or community board, o Meetings to discuss general services for MSHS families, o Meetings to discuss services for specific MSHS families'. ▪ How often have the following been barriers to collaboration with other community service providers (Never, rarely, sometimes, frequently): o Limited number of openings for families at collaborating agency, o Content of focus of agency does not match families' needs, o Lack of bilingual staff, o Services inaccessible or too far away, o Availability of child care during class or meeting time, o Schedule does not meet family needs, o Lack of cooperation from staff at collaborating agency, o Cost, o Lack of support for migrant and seasonal farmworker families
Local Community; Family Characteristics; Teacher, Center, & Grantee Characteristics: Community Collaborations	▪ What percentage of your time would you estimate is spent directly providing services to Head Start families, what percent is spent contacting and working with community agencies, and what percent is spent on administrative tasks? ▪ Upon entering MSHS, would you say "most, some, a few, or none" of the parents who are new to MSHS o Don't know what services are available in the community, o Know what's available in the community but don't use the resources, o Are aware of the services that are available in the community and use them pretty well. ▪ Upon entering MSHS, would you say "most, some, a few, or none" of the parents new to MSHS o Require extensive help from MSHS staff to contact and use community

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
	services, o Are pretty good about contacting and using community services when staff work closely with them, o Take the initiative on their own to contact and use community services with little staff effort. ▪ When you refer families to community service providers, what proportion of your referrals are handled in the following ways? (Total must add to 100%): o Specific information about services is given to families (e.g., location, time of classes, contact person) and the families arrange for their own services, o Individual slots or services are arranged with direct service providers by MSHS staff, o MSHS staff arranges services and accompany family to service for orientation or first meeting.
Local Community; Family Characteristics; Teacher, Center, & Grantee Characteristics: Health Services	*Rationale*: New questions and adaptations from Baby FACES are designed to learn about how well parents understand health issues, particularly in the stressful environment in which they live. It is recommended that these questions be pilot tested and staff feedback be collected prior to use. *Questions:* ▪ Many MSHS families have health or developmental concerns that require some level of assessment and intervention. We would like to better understand what MSHS programs do to obtain services for such families and children. What role do you play in conducting health assessments and securing health services for children and families? ▪ What role do you play in educating families about health issues, such as proper nutrition, proper care for children under age 5, and the dangers of pesticides?
Family Characteristics; Teacher, Center, & Grantee Characteristics: Caseloads and Procedures	*Rationale*: Questions from *FACES* and the *2004 MSHS Research Design Development Project* to assess FSW perceptions regarding their work and their assigned caseloads in serving MSHS families. *Questions:* ▪ What was your average case load of families this year? How many families so you serve? ▪ Do you think your caseload is: a) too high, b) too low, c) about right. ▪ What are the three most commonly used methods to encourage the families to use the services of collaborating agencies? ▪ What are the three factors that prevent the families from using the services? ▪ What are the three biggest problems your program has encountered in providing or accessing social services for MSHS families? ▪ In general, when do you first have contact with a family in your caseload? o During recruitment, o Upon enrollment, o Shortly after the child begins class, o Only upon referral from staff, o Upon direct request from parents, o Other.

Domain Listed in Conceptual Pathway	Rationale and Questions for Consideration for Family Service Worker Interview
	▪ During the past month, what type(s) of contact did you have with MSHS families that you work with? For all families, some families, or no families, did you have contact through: o Individual meetings at MSHS center, o Individual meetings at families home, o Group meetings at MSHS center, o Telephone calls, o Notes, postcards, o Other ▪ What is the minimum number of home visits you make to families that you work with during the MSHS year? ▪ Do you meet at least monthly either individually or in a group with any of the following MSHS staff to discuss the progress and goals of individual families: o Program director, o Center director, o Parent involvement staff, o Teachers/assistant teachers, o Health staff, o Other.
Family Characteristics; Teacher, Center, & Grantee Characteristics: Family Descriptors	*Rationale*: Questions from *FACES* and the *2004 MSHS Research Design Development Project* to assess staff perceptions regarding the families they serve *Questions:* ▪ What are the most common needs of the families of your center that the FSW handle? ▪ Since the start of this MSHS session, how many of the families that you have worked with have been reported to an agency for… Child abuse? Child neglect? Other family violence? ▪ Referred for Alcoholism? Drug use? ▪ Are these rates typical to what you have seen in previous MSHS sessions?

11.7 Administrative Record Reviews

An important aspect of data collection activities could be a review of data available in the program records. However, there often are significant differences across programs in what information is maintained, how well it is maintained, where it is maintained, and how it can be accessed. If the Program/Center site development efforts are implemented, Program Directors would be asked about access to and the reliability of selected records about the program operations. Individual child records would not be collected at that time, because child participants would not be recruited until the start of Classroom/Family/Child Component research activities. Informed parental consent is required before individual records can be accessed.

Three examples can be found in previous work regarding administrative data collection. The *Descriptive Study of Head Start Health Services* (1997) collected individual child health information from centers, but the quality of these data were found to be suspect, as often they were incom-

plete and not kept updated throughout the year. Similarly, during the *Feasibility Study of Head Start Recruitment and Enrollment (2000),* programs' applications to OHS were reviewed. While these applications were responsive to Head Start guidance to be descriptive of the local community needs, the resulting information was varied in formats, styles, and quality. Greater success in finding high quality administrative information was found by the national Head Start studies that collected attendance data directly from local centers for the child participants.

Based on the relative success of collecting attendance data, and the relevance to increasing understanding of the ebb and flow of MSHS children through centers, it is suggested that attendance records be collected for participating children by the On-Site Coordinator. These data could provide an indication of the level of exposure each participating child has to MSHS services at the program of entry to the Survey. In addition, opportunities across both Survey components should be taken to document how records are kept and accessed at both centers and program offices.

In addition, particular attention should be given to investigating one set of records that are not necessarily unique to MSHS, but certainly familiar to many of these programs. These are records of specific information shared across MSHS programs (or center) as the families migrate. This information is sent with departing families or directly to receiving MSHS programs. Conversations with the MSHS Community Consultant Group (2008) suggested that there are a number of obstacles to consistent record transitions; this inconsistency is in turn an obstacle to family participation. Gathering cross-site information regarding methods and barriers could lead to greater understanding and improvement of these efforts. Relevant information might be obtainable at the program or center administrative level, or with the Family Service Worker. Given the concerns over consistent record continuity efforts, gathering information at each level could provide important and validating data.

11.8 Framework Community Level Data Collection

The conceptual models presented in Chapter 2 emphasize the importance of the community context influences on the MSHS programs, centers, and families. To better understand the resources and possible barriers, it might be useful to consider broader sources of information about the local community surrounding each program and center. Information on the community context helps explain the unique ways MSHS programs adapt and function within the requirements of the Head Start Program Performance Standards. As a means of highlighting the importance of community linkages, each Head Start and Early Head Start program (including MSHS programs) is required to do a community assessment every 3 years. This helps local programs understand their fit within a particular community, and ensures that local staff are current in their understanding the needs of and resources available for MSHS families.

The effects of the community context already were assessed as part of *FACES 1997 and 2000* because of findings showing that neighborhood poverty was associated with less favorable cognitive and behavioral outcomes for children (Brooks-Gunn, Duncan, & Aber, 1997). In contrast, residing in a more affluent neighborhood appeared to predict more favorable scores on children's cognitive abilities, above and beyond the influence of family characteristics. The early *FACES* work linked Head Start families with neighborhood-level data from Census 2000 to assess the impact of neighborhood factors on child cognitive and behavioral outcomes. The find-

ing that neighborhood factors had significant direct effects on children's cognitive and behavioral outcomes (Vaden-Kiernan & D'Elio, 2005) suggests that furthering this line of study may be promising. U.S. Census data and other relevant data sets such as the *NAWS* (used at a regional level) can be easily linked to Head Start families and program service areas by their addresses, which are collected at the time of consent. ACF will be able to consider the potentially low cost benefits that can come from building secondary data on broader community characteristics into the analysis plan.

As noted in Section II, key data elements could be abstracted from programs' community assessments during Program/Center Component activities, providing details of the unique local context for each program. These could be drawn from copies of community assessments that programs provide, as was done in the *Feasibility Study of Head Start Outreach and Enrollment*.

Community Providers Survey. Feedback from MSHS stakeholders suggested that particular care would need to be taken in establishing data collection efforts with community partners. Current climate in some local communities has led to fragile partnerships, so care should be taken to establish a protocol sensitive to local conditions. During proposed site visits at the centers, additional information could be collected directly from local community providers. The Design Team suggests following a general model used in *FACES 1997*, in which local Head Start center staff from the participating programs helped identify community providers in selected service areas. These areas would usefully represent a range of services, including housing, income assistance, food assistance, drug and alcohol treatment, family violence, child care, education, job training, employment, and medical, dental, and mental health services. Local Migrant Health and Migrant Education offices also could be surveyed. Conducting focus groups as part of the Program/Center Component could verify the types of agencies to be contacted.

Whenever possible, representatives from these community services would report on the following:

- Description of the agency, including its auspice, goals or mission, and services provided;
- Perceptions of Head Start;
- Type of collaboration with Head Start;
- Referral patterns between Head Start and the agency;
- Perceived relationship with Head Start; and
- Outreach strategies aimed at migrant families.

With respect to the research questions, key areas of interest are as listed in Table 11.7.

Table 11.7 Suggested Content for Community Provider Interview Questions

Domain Listed in Conceptual Pathway	Content Considerations for Community Provider Interview
Local Community; Community Resources	▪ To what extent do MSHS programs utilize community resources to meet the needs of children and their families (e.g., well-baby health services provided for infants, medical and dental appointments, WIC, housing and utilities, employment, migrant education, other applicable social services, additional child care services?
Local Community; Community Resources	▪ How are effective are each of the community partnerships for the local MSHS families? Why? Why not? (e.g., barriers such as availability, waiting lists, relationship with MSHS, application processing time)
Local Community; Community Partnerships	▪ (Questions for Community Partner interviews): How long has there been an established partnership in place? ▪ How many MSHS children and families do you serve? In what capacity? ▪ What makes it a good partnership? ▪ What can MSHS do to improve it?
Local Community; Barriers	▪ How do parents link with other community supports? ▪ To what degree are there barriers to accessing such resources (e.g. transportation, business hours, language, cost, legal) ▪ What are facilitators/signs and features of successful programs and partnerships?
Local Community; Community Perceptions of MSHS	▪ What are the perceptions of the communities at large, in general and with respect to their reception to migrant/seasonal population?
Local Community; Social Support	▪ How often MSHS families engage with friends and other families in the community?
Local Community; Community Partnerships	▪ How does the program utilize community partnership plans? How about community assessments? ▪ What would improve their use?

Additional community information also may be elicited from parent respondents. Interviewers could ask parents to indicate the presence or absence of items in the families' immediate neighborhood. Items included neighborhood resources, such as parks, libraries, schools and grocery stores as well as physical and social neighborhood quality indices, such as abandoned or boarded up buildings, vandalism, graffiti, or loitering. Parents could also rate the overall safety of their neighborhoods. It is understood that these questions may yield limited data about the context of the local community given the mobile nature of the families and the limited time they may spend in some locations, but the families' perceptions may be key to their acceptance and utilization of services. In addition, similar questions could be asked of the local Family Service Workers, who should have good knowledge of the area in this context.

Consideration was given to including a 'neighborhood observation checklist' to be completed by the field staff while on location. Ideally, this scale would be used to validate parent perceptions of the local community, as noted in the previous paragraph. Unfortunately, while there are several scales in use that facilitate objective observations of neighborhoods, these are more appropriate for urban and suburban communities than for rural communities. It is recommended that consideration be given to developing and pilot testing an appropriate observational tool during a Measurement Substudy.

Summary

Across the interview suggestions that are offered in this chapter for parents, teachers, assistant teachers, family service staff, and community providers, we acknowledge that what is presented does not represent finalized sets of questions. The site visits associated with the Measurement Substudy during the Program/Center Component provides a perfect opportunity for focus groups to evaluate the wording of selected items and to further develop 'response sets' that could simplify the interview response burden on the part of the respondents.

As noted in Chapter 4, the measures suggested in this chapter cover a broad range of topics. It is likely that when a *MSHS Survey* is implemented, there will be at least one topic area of significant interest to ACF. At that time, the research team will be able to target questions to that topic.

CHAPTER 12

RECRUITMENT, OUTREACH, AND DATA COLLECTION FOR THE CLASSROOM/FAMILY/CHILD COMPONENT

This chapter presents suggestions for conducting the recruitment, outreach, and data collection methods necessary for the center, family, and child options of the *MSHS Survey*. ACF may choose to implement this component in its entirety or a portion of the activities. It should be noted that some details are presented in both Chapter 7 and Chapter 12 to ensure factors critical to both the Program/Center and Classroom level data collections are presented in both places.

12.1 Classroom, Family and Child Data Collection Overview

To ease description of appropriate methodology for data collection activities, this section describes details for the Classroom/Family and Child data collection activities in their entirety. Each activity was designed using the Design team's expertise and experience and input from the consultants. Although it is possible that ACF may choose to pursue only some of these options, they will have methodological information readily available for each possibility.

The Design Team recommends the Classroom/Family/Child Component timeframe span 12 months, beginning with some programs in April and ending the following April, in order to accommodate an entire years worth of variation in program's operational periods. The first wave of data collection at each sampled center would begin 6-8 weeks after the center's opening, with a goal of getting a snapshot of the sampled children. Based on multiple discussions with MSHS Branch Administrators, MSHS Community Consultants, and past and current leaders of the NMSHSA, the Design Team believes this to be the optimal time for data collection at the centers. A core group of families enrolling at centers arrive by this time and have familiarized themselves with center services. If data collection began earlier, enrollment might not be fully established and all slots filled. Those children who had already started would still be settling into their new environment. Prior Head Start research experience suggests that children and their teachers appreciate a chance to become familiar with one another and settled into a routine prior to participating in research efforts. While this start time (6-8 weeks after a center's opening) appears to be the optimal schedule, there will be cases where programs (or centers) operate for periods shorter than 8 weeks, and adaptations to this schedule would need to be made in collaboration with the Program Directors.

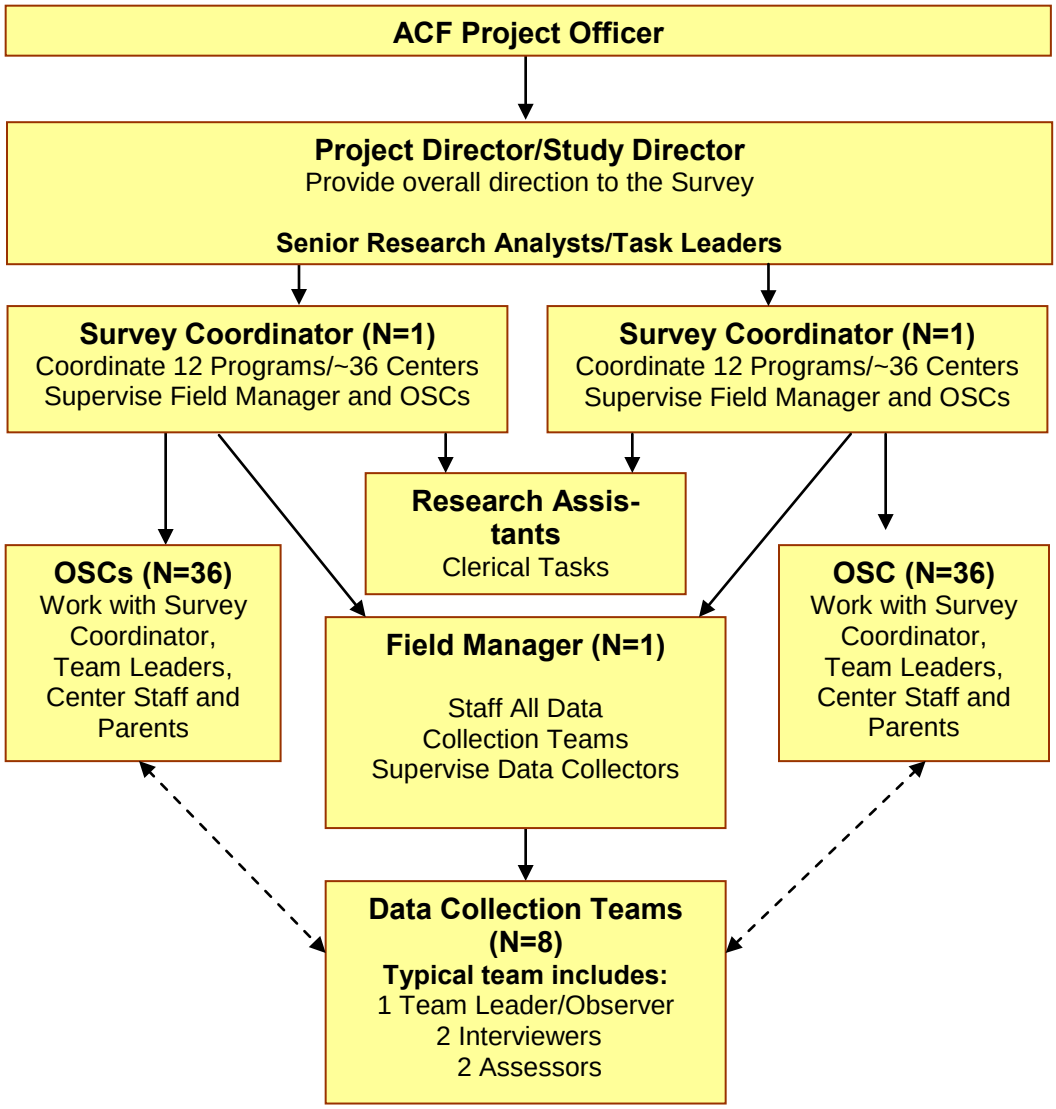
For centers that expect to have additional waves of families arrive at a later date to harvest specialized crops (sometimes referred to as short-term families), a second, smaller data collection visit could be conducted with a proportional sample of these families to accurately represent the range of MSHS families that actually enroll in these centers. This would also be planned in collaboration with the Program Directors.

12.2 Responsibilities of Classroom/Family/Child Component Data Collection Staff

For any study of MSHS, project staff working directly with the programs should be bilingual and knowledgeable about the agricultural farmworker community, as well as about the MSHS program. They must be able to communicate well with MSHS staff, not only by presenting a pleasant and professional demeanor, but also by demonstrating an understanding of the culture of MSHS communities, including respect, warmth, and inherent interest in others' well-being. Given this range of needed knowledge, it is recommended that all Survey staff be trained extensively along these dimensions.

Exhibit 12.1 presents the overall staffing structure and on-site data collection responsibilities recommended for the Classroom/Family/Child Component data collection. Responsibilities and qualifications for Survey staff are presented in the following sections.

Exhibit 12.1 Recommended Staffing Positions for Classroom/Family/Child Component Data Collection



Senior Research Analysts: Responsible for overseeing the scientific integrity and conduct of the study, Senior Research Analysts would participate in the development of the training curriculum for field staff, serve as part of the training faculty, and conduct quality control monitoring (if bilingual) for site visits. These activities are discussed in detail below.

Survey Coordinators. If full data collection activities will be implemented, the Design Team recommends two Survey Coordinators to share the overall coordination of the year-long data collection. Each Survey Coordinator would serve as the primary contact with the Program Directors and On-Site Coordinators (OSCs) at their subset of MSHS programs and centers. Each would be assigned 12 programs (and approximately 36 centers) to manage. Survey Coordinators would:

- Work closely with the *MSHS Survey* Senior Analysts and OSCs to set an overall data collection schedule of all site visits at each of 73 centers over the 12 month period.
- Develop, coordinate, and train the OSCs at a one-day, in-person, group training session.
- Design and coordinate the daily one-week center site visit schedule covering interviews, assessments, and observations, in collaboration with the OSCs at each center site.
- Work with the Field Manager to identify and assign bilingual data collectors to each site visit team.
- Assist in the development of training materials and coordinate the logistics of the training session.
- Serve as a member of the training faculty.
- Provide materials to the OSC to prepare for the data collection visit (consent forms for parents and staff, promotional materials, scheduling guidelines, etc.).
- Acquire (via Web, electronic, or hard copy) the list of classes and students required for the second and third stage sampling.
- Coordinate the center and classroom sampling with the sampling statistician and notify the MSHS sites when selections have been made.
- Oversee the entry of contact information into a Web-based Field Management System (FMS) for each selected classroom (start and end times, teacher and teacher assistant names, number of students, class type (infant, toddler, preschool) class schedule including lunch and nap times) and for each sampled family (mother, father, child names, address, phone numbers, child DOB).
- Prepare a "Scheduling Packet" of information for OSC with scheduling guidelines and templates for interviewing.
- Supervise the collection of informed consent and recruitment of the families and staff by the OSC -- verify all consent has been received prior to the visit.
- Supervise the preparation of data collection materials for site visit team (instruments, schedules, log sheets) and coordinate shipment of materials to the team on site.
- Brief the Quality Control Visitors (described below) on logistics of their site visits.
- Work closely with the Field Manager to ensure that all data collection is completed on time for each program, including makeup visits, as needed.
- Ensure the overall quality of data collection.
- Receive and log incoming data from the field.
- Coordinate the entry of monthly attendance data by OSCs.
- Conduct interviews with Community Service Providers via CATI.

On-Site Coordinators. OSCs serve as the liaison between the Survey Team and the MSHS programs where they work. One OSC should be identified for each selected center. Although this could be the same person who served as the OSC during any Program/Center Component program-level activities, most likely it would be a different person who is associated more directly with the selected center. The OSC would work closely with the Survey Coordinator to:

- Provide lists of classrooms and rosters of children for sampling via the Web-based data entry system.
- Provide list of local community resources and agencies with which the center collaborates.
- Recruit sampled families to be in the study.
- Serve as a resource for parents who might have questions about the study.
- Collect completed and signed consent forms from sampled parents.
- Schedule parent interviews.
- Make reminder calls to parents the night before their scheduled interviews.
- Schedule staff interviews at each of the centers in the study.
- Secure space for interviews and child assessments at the Head Start centers.
- Identify interpreters for families that speak indigenous languages, if needed.
- Meet with *MSHS Survey* Team when it arrives and submit completed consent forms describe scheduling and space arrangements to them.
- Keep local MSHS staff involved and aware of any schedule changes at their centers.
- Be available during the site visit to assist interviewing and assessment teams when needed.
- Collect monthly attendance on all children in the sample and submit these data each month to the Survey Coordinator via a Web-based data entry system, or electronically by email, or by fax if Internet connections are not available.

Field Manager. As standard practice for any large national data collection effort, it is recommended that an experienced Field Manager with strong supervisory skills be responsible for the data collection effort across the country, including recruiting bilingual field staff, constituting and assigning data collection teams to each site, and directing and supervising their daily work. This person should be experienced in coordinating field work on large, multisite studies. The Field Manager would work in cooperation with team members, in a fast paced, goal oriented environment. His/her responsibilities include the following:

- Check in daily with the data collection team leader on site visit response rate and production performance.
- Guide the Team Leader in formulating an alternate work plan for completing site visit work if problems arise.
- Discuss tactics for completing specific cases and strategies for completing the total remaining workload most efficiently.
- Distribute field memorandums to disseminate changes to information on survey specifications or procedures to field staff.
- Participate in weekly telephone conferences with the data collection team leader and provide a channel for raising questions and providing responses on a direct, personal level.

- Report weekly to the Survey Coordinator on broader issues of cost and production, including the strengths and weaknesses of any individual field staff not performing acceptably.

Data Collection Field Staff. Unique to the proposed Classroom/Family/Child Component activities are the direct assessment of preschool children *and* toddlers (the recommendation for infant assessment is via parent report) and observations of classrooms. The Design Team suggests that field data collection staff be trained and certified in both the preschool and toddler assessment batteries so that they are available to work with both age groups at the centers.

The recommendation is the use of experienced, professional, locally hired bilingual (English and Spanish) field staff, preferably with prior experience conducting interviews and child assessments. Experience conducting child assessments at Head Start, preschool, or child care programs would also be strongly desired. Tapping into the large group of bilingual field staff who worked on previous national studies of Head Start and Even Start and who are familiar with the recommended child assessment battery would be most useful. The primary characteristics and qualifications of data collectors can be found in Chapter 7.

12.3. Types of Data Collection

Table 12.1 presents the types of data collection and respondents, length of time for each activity, and mode of interviewing suggested, for all components of the Classroom/Family/Child Component. The plans include data collected from multiple sources using varied data collection approaches, depending on what components of the study plans are implemented by ACF. Activities include in-person interviews with mothers, fathers, teachers, assistant teachers, and family service workers; child assessments and classroom observations; classroom teacher reports of children's behavior; ongoing record reviews of children's attendance; telephone interviews with community providers; and focus groups with MSHS parents. Detailed descriptions of the approaches for each data collection activity are provided in subsequent sections.

Table 12.1. Survey Center and Classroom, Teacher, Family and Child Data Collection Options[18]

Data Collection Activity	N	Estimated Length of time (in minutes)	Mode of Data Collection
Parent Interviews			
• Mother (or primary caregiver) Interviews	1,500	60	In-Person Interview
• Father (or secondary caregiver) Interviews	1,500	30	In-Person Interview
MSHS Staff Interviews			
• Lead Teachers	219	60	In-Person Interview
• Assistant Teachers	219	45	In-Person Interview
• Family Service Workers	73	45	In-Person Interview
Community Service Provider Interviews	1,100	30	Telephone Interview
Child Assessments			

[18] The details of the data collection plan discussed in this chapter are based on Option 1 described in Chapter 9: 24 programs, 73 centers, 219 classrooms, and 1400 children and their families.

Data Collection Activity	N	Estimated Length of time (in minutes)	Mode of Data Collection
• Toddlers/Preschoolers • Infants	1,000 500	30-40 20	Direct Assessment Parent Report
Classroom Observations	219	All day	Direct Observation
Teacher Child Reports	1,400	5 (infant) 5-10 (toddler) 15-20 (preschool)	Web-based
Record Reviews • Monthly Attendance	1,400	10	Web-based
Focus Groups (12 parents/group at selected centers)	12	60	Focus Groups

12.4 Training the Data Collection Team

Comprehensive and high quality training of all data collection staff is a key requirement for collecting quality data during the *MSHS Survey*.

12.4.1 Training On-Site Coordinators

Before the beginning of data collection, the Design Team suggests a national training for all OSCs. All OSCs could attend a one-day training (preferably in Washington, D.C., so MSHS Branch staff and other ACF staff can attend) led by the Survey Coordinators. Group training is very important, not only to assure that protocols are followed, but also to stress the importance of the Survey and generate enthusiasm and buy-in from the OSCs. This training should cover basic administrative issues, a detailed discussion of study objectives and requirements, and the specific responsibilities and duties of the OSCs before, during, and after the data collection visits.

Although costly, similar OSC trainings for other large national studies of Head Start have previously been very well received by attendees and their Program Directors (ACF 1998, 2001, 2004), and the camaraderie and sense of ownership developed during these training sessions could be crucial for promoting the success of the *MSHS Survey*. In lieu of in-person training, consideration could be given to webinar training to reduce costs. However, what may be lost is the ability to establish more positive collaborative research partnerships within MSHS by using the more culturally-anchored approach of interpersonal communication that in-person training provides.

12.4.2 Training Field Data Collection Staff

To ensure consistent interpretation and data reliability across field data collectors, guidelines for training must go beyond learning how to administer the instruments correctly or how to "behave" appropriately in a MSHS center. Field staff must share a common understanding of the instruments and procedures used in this study, as well as how the cultural considerations and unique characteristics of MSHS programs and MSHS families impact the data collection. Therefore, the training should also address the following topics and activities:

- MSHS program background, objectives and characteristics.
- Lives and experiences of migrant and seasonal families and children.
- Bilingual child development and assessment.
- Agricultural farm worker community, as well as working with Latino, immigrant, and rural communities.
- Background and purpose of the study.
- Interview techniques, such as probing while avoiding bias or handling refusals or reluctance to answer questions.
- Purpose of each instrument, related constructs, and item-by-item (or question-by question) review.
- Procedures related to implementation of instruments.
- Challenges unique to this study overall and the data collection efforts specifically.
- Issues related to confidentiality in conducting interviews and focus groups, and managing and storing data.

Considerable emphasis must be placed on developing a well-organized and comprehensive training program that provides field staff with the necessary skill levels to perform successfully. This could include lectures, videos, group and individual exercises, as well as discussion. The development of cross-cultural knowledge, skills, and appropriate application through a multi-method approach of active training, reflection, and discussion is suggested.

Because of the complexity of the required training due to the number and variety of instruments, the Design Team recommends that training consist of approximately 12 days of in-person training (or less, depending on the nature of the Classroom/Family/Center Component options pursued). Field data collectors should be grouped in teams, with specialized training provided for some of the field staff. Team Leaders should receive training in the classroom observation measures (3 days) and in the staff interviews (1 day), in addition to both the parent interviews (1 day) and the child assessments (4 days). They should also receive training in managing the team on site and reporting to the Field Manager (1 day). Interviewers/Assessors would be trained in both the parent interviews and the direct child assessments; the dual training allows for both flexibility and efficiency in the field.

All staff would also receive at least one day of training on the unique characteristics of MSHS programs and MSHS families, but these would be highlighted and emphasized throughout all training. This training on the characteristics of MSHS programs and MSHS families should be developed in collaboration with the MSHS Branch, NMSHSA, and the MSHS Technical Assistance Center.

12.4.3 Staffing for Training

Generally, the in-person training should be conducted by teams consisting of the following:

- **Lead Trainers**. The lead trainer should be an experienced MS Survey Team member who is familiar not only with the study-specific material but also with training in general. This person would lead the group through the scripts or exercises conducted during training.
- **Monitors**. The monitors should be people who are familiar with the *MSHS Survey* instruments and are able to identify and resolve problems quickly. The monitors should

be stationed around the room. If a trainee is having problems during practice sessions the monitor should provide help.

12.4.4 Training Materials

Development of the following training materials and support materials are recommended.

- **Training Guides –** A compendium of all materials required for training should be developed. This includes a detailed agenda, goals for each session, scripts for all lectures, practice role plays, and exercises and answer keys for written exercises.
- **Team Leader/Observer Manual –** A manual containing administrative and field procedures for the Team Leader to follow, as well as the question-by-question specifications for the observation measures.
- **Interviewer/Assessor Manual-** A manual containing the administrative and field procedures the interviewers would follow and the question-by-question specifications for the parent interviews and child assessments.
- **Training Videos Demonstrating Child Assessments –** Videotaped presentations to provide a standardized way of demonstrating correctly administered child assessments to the trainees.
- **Training Videos of Classroom Observations–** Videotaped presentations to provide a standardized way of demonstrating correctly administered classroom observations to the trainees.

Prior to the training, field data collection staff should be provided with the following:

- **Study Introduction** – A brief introduction to the study.
- **General Interviewing Techniques Self-Study Guide** – A guide containing chapters covering key interviewing techniques and exercises to be completed and returned to supervisors before the start of in-person training.

12.4.5 Approach to Parent and Staff Interviewer Training

Interviewer training recommendations are:

- Senior Survey staff, highly experienced with the program, the community, the project, and with data collection trainings, should develop the training materials in collaboration with substantive experts.
- During the initial stages of training materials development, the training staff should create an outline of all the concepts to be presented to trainees for each wave of data collection and determine which training mode is best suited for the presentation of each concept. Training modes that are particularly effective for the presentation of field procedures, general interviewing techniques, child assessments and classroom observations should be used (i.e., home study packages, audiovisual presentations, interactive lectures, role plays, exercises, and roundtable discussions).
- All aspects of training should be documented in a training guide.
- Whenever possible, training techniques that require the active participation of all trainees should be used.
- Role plays: Trainees should be placed in situations where they must use the procedures and questionnaires as they would in the field. This approach (versus a lecture-style

presentation of material) leads to much higher retention of the training materials. This can be accomplished through a scripted role-play technique, in which the trainer acts the role of the respondent while the trainee adopts the role of interviewer. Each script includes variations on possible respondent's answers, gives specific instructions to the trainer to reinforce certain interview techniques, indicates and reinforces the need to probe for responses, and refers to appropriate sections of the interviewer's manual.

12.4.6 Approach to Direct Child Assessment Training

Several features of child assessment training are particularly important:

- Lectures and demonstrations should be used.
- Role plays: Where lecture and demonstrations are part of the training, the core of training would be practice. Familiarity with the script and use of the varied accompanying materials (easels, paper and pencils, computer, story books) is essential. Quickly and smoothly transitioning from one section of the assessment to another is important for maintaining the child's attention and keeping administration times to a minimum.
- Practice with toddlers and preschoolers: After developing familiarity with the script and the coordination needed to use various materials, the next step would be to practice with children. Among the challenges of conducting child assessments are engaging and maintaining the child's attention and pleasantly and successfully coping with various typical distracting behaviors.
- Observation of assessments: During training and during the subsequent data collection, observations of live assessments by senior staff could be used to provide trainees with feedback.

12.4.7 Approach to Classroom Observation Training

Important features of classroom observation training include the following:

- Lectures and demonstrations should be used to understand the scoring system thoroughly
- The use of training videos and item by item overview is important.
- The abilities to pay attention to detail, remain objective, and guard against generalizations are key.
- Observation practice in infant, toddler, and preschool classrooms: Trainees should observe and code in real classrooms parallel with their trainers.
- Small group discussion and feedback: Observation scores of trainees and trainers are compared and discussed. Feedback is provided.
- Certification: Reliability across two or more coders and trainer must be achieved for trainees to be certified to conduct observations.

12.5 Quality Control

It is essential that the field staff collecting *MSHS Survey* data do so in a manner that is reliable, valid, and consistent with the standardization of and training on the measures. Three specific approaches for maintaining data collection quality are recommended below.

First, high quality staff training is a priority and appropriate characteristics and skills are discussed throughout this chapter. Trainings should not only include a comprehensive view of the study and guidelines for working professionally and sensitively with staff, parents, and children, but provide actual hands-on experience in the administration of all instruments. Each field staff trainee is observed by Senior Survey staff throughout the training, and trainees who cannot master the required skills should be dropped from the team.

Second, after receipt at the home research office, all questionnaires should be reviewed for accuracy and completeness before sending on to coding or data entry. Feedback can then be given immediately to the interviewers in the field so mistakes can be corrected quickly.

Finally, on-site quality control (QC) visits should be made over the course of the project to ensure the highest quality, standardized data collection possible. The assessments, observations, and interviews would be observed 'live' in the field. All QC visits should be conducted by Senior Survey staff who trained the field data collectors. QC monitors would shadow each assessor/interviewer and each Team Leader conducting observations to undertake validity checks. If a team member is not performing satisfactorily (recommended reliability is 85% between team member and QC monitor), the QC monitor should work with the individual data collector until the required level of consistency is achieved.
The use of senior staff as QC visitors serves a secondary purpose: to ensure good working relationships between the field staff and the local program staff, in addition to monitoring all data collection staff and procedures. Each team should be visited on their first or second data collection visit. A second QC visit after three to six months should be conducted to guard against observer/assessor/interviewer drift.

The Field Manager is responsible for providing a comfortable and supportive environment where the field staff can hold daily debriefings in which they can engage in honest discussions about any assessment difficulties that arise and promote problem-solving as a team.

The following goals are recommended for the QC visit:

- **Observe child assessors and determine consistency/accuracy of procedures**. At least two assessments should be observed for each assessor. The QC monitor should score own assessment booklet and check with the assessor's scoring afterwards. As soon as possible after the observed assessment, the monitor should review their notes with the assessor. If a given assessor is varying from (or makes mistakes in administrating) the standardized assessment procedure, the monitor should provide the assessor with detailed corrections and suggestions. If there are a significant number of problems, a third observation of the assessor is recommended to determine whether the problems have been corrected.
- **Observe classrooms observations and determine reliability of the observers.** Parallel observations are conducted at least once with each observer. QC monitor should complete their own Observation Booklet along with the assessor following the same procedures used during certification at training. Specific feedback then should be provided.
- **Observe teacher or MSHS staff interviews and determine consistency of administration**. The QC monitor observes at least one staff interview per interviewer and provides feedback on following the protocol and avoiding bias.

- **Observe parent interviews and determine consistency of administration.** The QC monitor observes at least one mother interview and one father interview per interviewer and provides feedback on following protocol and avoiding bias.
- **Provide additional instruction and training to data collectors as required.**
- **Complete certification and reliability forms as required and provide a brief report at conclusion of the visit.**

12.6 Data Collection Schedule

Planning a data collection schedule for the *MSHS Survey* will be different from previous national Head Start data collections and presents special challenges. Typically, in a national study of Head Start, the overall schedule is driven by the assessment of the children and fits within a school-year schedule. However, consideration must be given to the flexible and varied schedules MSHS programs engage in over the course of the year. While many downstream centers operate on a similar schedule to regional Head Start programs (8-9 months between the fall and spring), the remainder often serve children and families for much shorter periods, sometimes as little as three to four weeks. This is confounded with varying periods of participation for children *within* centers as waves of migrant workers specializing in particular crops move through the centers. Devising an efficient and effective data collection schedule was one of the main challenges faced by the Design Team.

Our overall framework for considering the most efficient schedule and staffing was based on the most recent and reliable data available (i.e., 2006-2007 Head Start PIR; OHS Migrant and Seasonal Branch administrators; and 2007 AED Center Directory). By calculating the proportion of centers that report their opening dates by month, and estimating the optimal time for data collection to begin as 4 to 8 weeks after opening day, the Design Team estimates that all data collection activities for the Classroom/Family/Child Component in its entirety could be completed with eight core data collection teams (4 data collectors per team) over the course of the year (see Table 12.2). Visits would being in the last week of April, and the heaviest data collection would occur during the first several months—May through July. The data collection from August forward could be completed with three core teams.

In addition to the field teams, the Design Team recommends hiring nine additional reserve data collectors (3 observers, 3 assessors, 3 interviewers) to serve as alternates for the data collection teams. They would substitute for data collection team members when scheduling conflicts occur and help conduct the additional visits to centers with "second wave" families, as well as conducting make-up visits to centers with children who were absent during the regularly scheduled visit.

Once the overall framework for building a data collection schedule of all programs is set, consideration must be given to setting schedules at individual centers. As presented above, a typical data collection site visit (based on a sample of 24 families and 3 classrooms at a center) involving parent and staff interviews, child assessments, and classroom observations, could be completed in approximately 5 days at a given center (including weekend time). However, circumstances behind planned schedules WILL change at times, particularly as MSHS center operations are influenced by changes in migration patterns and weather. The data collection teams must always be flexible and understanding of the needs of the centers.

Table 12.2 Illustrative National Data Collection Schedule and Staffing Requirements

Month Data Collection Estimated to Begin	Estimated % of Sampled Centers to be surveyed*	Estimated Number of Center Visits to Be Conducted During Month*	Estimated Monthly Schedule for the Data Collection Teams (Team 1 (T1) through Team 8 (T8)
April	4%	3	3 teams • Wk 4: T1, T2, T3
May	15%	11	8 teams • Wk 1: T4, T5, T6 • Wk 2: T7, T8, T1 • Wk 3: T2, T3, T4 • Wk 4: T5, T6
June	19%	14	8 teams • Wk 1: T1, T2, T3 • Wk 2: T1, T2, T3, T4 • Wk 3: T4, T5, T6, T7 • Wk 4: T8, T5, T6
July	25%	18	8 teams • Wk 1: T1, T2, T3, T4 • Wk 2: T1, T2, T3, T4, T5 • Wk 3: T5, T6, T7, T8 • Wk 4: T1, T2, T3, T4, T7
August	8%	6	3 teams • Wk 1: No visits • Wk 2: T1, T2, T3 • Wk 3: T1, T2, T3 • Wk 4: No visits
September	9%	6	3 teams • Wk 1: No visits • Wk 2: T1, T2, T3 • Wk 3: T1, T2, T3 • Wk 4: No visits
October/ November	1%	1	1 team • Week 2: T1
December	10%	7	3 teams • Wk 1: T1, • Wk 2: T2, T3 • Wk 3: T1, T2 • Wk 4: T3, T1
January/ February	6%	5	3 teams • Wk 1: No visits • Wk 2: T1, T2 • Wk 3: T3, T1, T2 • Wk 4: No visits
March	2%	2	2 teams • Wk 1: No visits • Wk 2: T1, T2,

*Start dates begin +/- 6 weeks after center opening

The weekly schedule should be designed to accommodate the work schedules of those parents who need to be interviewed. MSHS parents confirmed that the optimal time for interviews is in the evenings after work, in the early mornings when there is dew on the plants and harvesting is not optimal, or on Saturday afternoons and evenings (Saturday mornings are often spent in the fields). Parents are generally less willing to complete the interview on Sundays, which they value as a family day.

Currently, recommendations are to host two evening sessions at the MSHS center to conduct parent interviews. This strategy is based on discussions with MSHS parents and staff, and our research and program consultants who have pursued similar (smaller scale) efforts with MSHS programs. Having the opportunity to complete interviews at the center appears to be preferred by many parents, which may stem from an interest to gather with other parents, desire to be interviewed with fewer interruptions, and/or desire not to have visitors at their home. Center-based parent interviews would also provide a concentrated time to conduct the interviews without the interviewers having to travel from appointment to appointment. If possible, food should be provided for the families, as well as babysitting services (again as recommended by consultants). All four members of the Survey Team would be available to conduct interviews simultaneously. Families who are unable to make either of the two evening center sessions would be interviewed in their homes or at alternate locations.

12.6.1 Pre-Site Visit Activities

As previously discussed, the Survey Coordinator and Field Manager would work closely with the OSC to coordinate the logistics for the site visit. The OSC's primary responsibility prior to the arrival of the Survey Team would be to recruit parents to the study, secure their informed consent, and schedule their interviewing appointments. Immediately after parents have signed consent forms, their parent interview can be scheduled.

The distribution of the consent forms and letters (Appendix G) should be a collaborative effort on the part of the OSC and classroom teachers. Teachers often have strategies they employ when they need to have parents respond to a letter that has been sent home. Strategies might include having a single, consistent day during the week on which they send papers home to parents, printing important information on a special colored paper, and/or sending important papers home in a special folder or envelope. Since many MSHS children return home on buses, programs often utilize bus monitors to transfer important papers to families. The Survey Coordinator should work closely with the center's OSC so that the distribution of the letters and consent forms follow the center's accepted, tested, and preferred method, if one is in place. However it is mandatory that informed consent be secured. This can only be achieved by the OSC (or surrogate – sometimes a teacher, for example) meeting face-to-face with the parent to assure they understand the consent form and what is being asked of them.

Incentives. Providing incentives to programs and families is respectful of the time they contribute and improves long-term relations with families and with programs. The MSHS Design Team therefore suggests that incentives be part of the recruitment of families to the study. The majority of MSHS parents would have to be interviewed in the evenings or weekends due to working long hours in the fields. Providing dinner at the centers in the evenings to encourage parents to come for evening interview appointments has been successful in previous studies of MSHS families (Barrueco, 2007). This strategy has also been used successfully in many MSHS

centers to increase participation in parent meetings and activities. However, care must be taken to ensure that all incentive activities conform with HHS regulations (i.e., seeking contracting office approval prior to accruing food costs).

The following is a list of suggested incentives for the activities described for the Classroom/Family/Child options of the Survey Design:

- $25 cash for primary care provider interview (generally mother)
- $25 cash for secondary care provider interview (generally father)
- $2 to $3 cloth books or sturdy cardboard books that are appropriate for infants, toddlers, and preschoolers for each assessed child as well as stickers for toddlers and preschoolers
- $25 gift card or educational materials for classroom participation
- $5 per child to teachers for completing behavior ratings of participating children in their classrooms
- $5 canvas tote bags with *MSHS Survey* logo for staff
- $50-100 per center for preparing dinner during evening interview sessions (dependent on numbers of families selected for interviews), if allowable under the contract
- Portable DVD player for each center.

12.7 Site Visit Activities

Well-planned site visits help elicit high rates of cooperation and a smooth and efficient data collection. The following section introduces the activities that the *MSHS Survey* Design team suggest take place if classroom site visits are incorporated into the *MSHS Survey*.

12.7.1 Overview of the Classroom Visits

Each classroom to be visited should be initially notified and then reminded about the visit by the OSC. On the evening prior to the first day of data collection, the Team Leader should meet with the OSC to obtain the latest information about the visit, which may include schedule changes, key issues for the program, or preliminary review of the space. The team should arrive together at the center early in the morning before the children get there, providing an opportunity to meet the teachers and other center personnel, and also view the selected areas for the direct child assessments. Early arrival is important because observational protocols often specify observing the arrival of children. The teacher should introduce the Field Data Collectors to the class after the children have arrived. When children are engaged in free play or other informal activity, assessors may begin working with the children (preschoolers and toddlers).

12.8 Conducting Child Assessments

The goal of any assessment is for all children to do the best they can on the assessment battery. A suitable physical setting and a friendly relationship between the assessor and the child help the data collection team toward this goal. Children are asked for verbal assent and can discontinue participation at any time. Further, breaks should be allowed if the child becomes restless or fatigued. Assessments should take between 30 to 40 minutes to conduct, on average. All of the following would be detailed, practiced and discussed throughout assessment training activities.

12.8.1 Scheduling Assessments

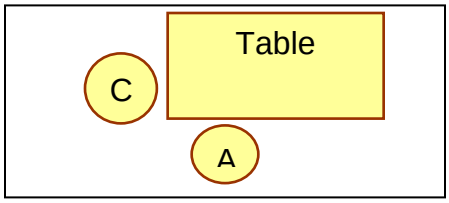
The schedule needs to be flexible and built around group activities, meals, toileting, and nap times. Just before meals and naps are not be good times to conduct an assessment, because the child may be hungry or tired. The best time to conduct the assessment is when the child is alert, rested, and comfortable. Prior to any child being assessed, the examiner should confirm that they have the parents' signed informed consent paperwork.

12.8.2 Physical Setting for Assessment

Prior to the arrival of the team, the Survey Coordinator should discuss space requirements for the assessments with the OSC. However, assessors may have to be flexible if a designated space is not immediately available when they arrive at the center, and should work with the OSC to set up an adequate assessment space.

A suitable assessment space is one that is quiet, free from distractions, and moderately private. The assessment space should include a table (or other flat working space of adequate size) and two chairs. Furniture should be arranged to facilitate the best positioning for the assessment, with the assessor and the child seated diagonally across from each other at the corner of the table, and the child on the assessor's left hand side (as shown in Exhibit 12.2).

Exhibit 12.2 Placement of Child (C) and Assessor (A)



When necessary, children can be seated at an adult-size table using a booster seat. Use the floor when it is the only available flat working space or if it is preferred by the child. The assessor should make sure the room is properly arranged before bringing the child to the space.

It is important to note that many centers may not have the "ideal" assessment space available. However, it is important to select a space that protects the integrity of the assessment and ensures that the child is safe and the assessor is protected from any perceived impropriety. Although it is desirable to use a separate room with a door or partition, it is preferable that the room have a window, so adults outside the room can see in, and that the door always be left at least partially open. The assessor should never be behind closed doors with a child. If an assessment must take place in an open classroom, portable chalkboards, storage lockers or easels can serve as temporary partitions. To avoid interruption, place a "Testing in Progress" sign on the door or in some other prominent area.

12.8.3 Preparing Children for the Assessment

The Teacher should explain to the children what will be happening during the visit and introduce the assessors. The assessor should review the list of selected children and check with the Teacher about issues such as the following:

- Are any children sick or out of sorts?

- Which children are shy, withdrawn, or reluctant to talk? The assessor should try and schedule these children later so they can see that other children have enjoyed the assessment and have some time to become more comfortable with the assessor.

Finally, it is important that the assessor try to make the administration an enjoyable experience. They should talk slowly and clearly and keep the questions fresh by using natural emphasis and avoiding a repetitive monotone. Developing a good rapport with the child will ensure that he or she performs optimally on the assessment.

12.8.4 Assessment Materials

Before the beginning of the assessment, the assessor should have all materials out and ready to use, but placed beyond the reach of the child. Depending on the final assessment battery chosen, the types of materials most likely needed are:

- Pens and pencils
- Spiral-bound book of picture plates
- Picture cards
- Story book
- Stopwatch
- Assortment of stickers
- "Testing in Progress" signs (in Spanish and English)

12.8.5 Assessor's Demeanor and Safety Guidelines

A professional demeanor when conducting assessments can have a positive influence on capturing an accurate assessment of the performance of the child and will reflect well on the *MSHS Survey* Team. Consistency in enthusiasm and tone are keys to encouragement and help avoid "accidental messages." The assessor should:

- Smile, look at the child, and use the child's name. If a child is uncomfortable with eye contact, the assessor should keep the child engaged with his or her voice. However, care must be taken not to overwhelm the child with too many vocalizations, particularly with DLL children who may become taxed quickly with language. High fives, smiles, pointing, and other nonverbal cures are particularly effective for transitioning between items for DLL children, particularly when working on language and literacy assessments in their non-dominant language. Therefore, continued iterations such as "ok!" and "great work" between items as fillers (and not as feedback to a response) should be presented with consideration of the language load being presented.
- Respect the child's stage of development and remember that children think differently from adults. The assessor should give children time to shift between topics and question. This is a difficult job for young children.
- Be sensitive when a child does not know the answer. If a child answers incorrectly, accept the answer without comment. Also, the observer should not allow verbal, facial expressions or body language to indicate to the child that he or she has just given a right or wrong answer.
- While some touch is fine between the assessor or the child, such as holding his/her hand on the way to the assessment room, the assessor should take care not to initiate hugs and other close contact.

- Never leave the child alone, even for a minute. The assessor should always keep the child in view.

12.8.6 Managing Child Behavior

Recognizing and responding quickly to behavior issues can be the difference between a successful and an unsuccessful assessment. Some children need time to warm-up. If a child is holding back, the assessor should slow down and present things more gradually. It is often helpful to start assessments with nonverbal tasks first with DLL children. Common signs of stress may be fidgeting, yawning, or poor eye contact. The assessor may need to adapt the extent of language fillers s/he is using and increase the amount of nonverbal cues (high fives, etc). In addition, the pace of the assessment may need to be adapted. Children often begin to become disengaged if the pace is too slow, which may happen if the assessor is not completely proficient in the battery. As such, the assessor training must emphasize the importance of memorizing a good portion of the items.

Also, the assessor should pay attention to body language and see if additional praise or a break or reward system is needed. Attention and enthusiasm should be offered for on-task behavior, and minimal, structured responses be given to off-task behaviors. Discipline should be dealt with in a firm but positive manner, using accepted developmental strategies (appropriate to the MSHS centers' policies). Assessors should acknowledge what the child is doing, tell him or her which behaviors are expected, then redirect the child's behavior back to the assessment. Again, attention and enthusiasm should be offered for appropriate and on-task behavior. Be explicit and encouraging about what is allowed.

12.9 Conducting Classroom Observations

Classroom observations are an important component of many early childhood studies. They can provide an objective, direct measure of the quality and extent to which the classrooms are providing an appropriate range of learning experiences. Much has been learned about classroom observations through previous ACF Head Start studies, and it will be particularly relevant for MSHS classrooms to be observed in various fashions, including multilingual language and literacy instructional practices.

For the *MSHS Survey*, the recommended observational tools include the ECERS-R and ITERS (Harms, Clifford, & Cryer 1998) and the Instructional Climate Scale of the CLASS; (Pianta, La Paro, & Hamre 2006), which are reviewed in detail in Chapter 11.

12.9.1 Before Observers Arrive at the Center

The evening before the observation, the Observer should organize all of the materials that he or she will need for the following work day, including their observational booklets, erasable pens and ID badges. In addition to organizing materials, they should fill out or verify the information on the observational booklets to match to the classroom being observed.

There are two benefits to completing this information before arriving at the center: (1) it saves time and (2) it ensures that all booklets are properly labeled so booklets from different classrooms are not mixed up.

12.9.2 The Observational Process

The specific procedures used will depend on the observational measures being implemented by ACF. The observations suggested for the *MSHS Survey* consider the classroom equipment, layout and materials as well as the interactions between staff and children, and between children.

12.9.3 Guidelines for Classroom Observers

Being respectful of the center's needs to continue to operate effectively, as well as the rights of the children and adults in the program must be followed. The following guidelines make the observational experience in the classroom a pleasant one for everyone.

- Bring only what is needed into the classroom because it is difficult to keep track of personal belongings (e.g., purses or briefcases) while observing.
- Upon arrival, introduce the team to all the staff as well as confirm which teacher is the Lead Teacher.
- Try to be as unobtrusive as possible and stay at the perimeter of the room. Check out the room ahead of time to have an idea of a safe vantage point from which to observe and try to sit down as much as possible, rather than "looming" over the children.
- Avoid breaking classroom rules. Never sit on tables and shelves. Move out of the way of any of the teachers or children.
- Ask the teachers' permission before looking through drawers, cabinets, or other closed spaces.
- Refrain from talking to children, teachers, or other observers while in the classroom. If discussion is necessary with another field staff member, leave the room.
- Never ask a teacher a question when s/he is in the middle of working with the children.
- To children, be friendly but distant. Acknowledge children if they approach, but do not otherwise take part in classroom activities. Tell them you are watching them play today and, if necessary, redirect them to the teacher. Being 'busy' with forms and note-taking will help children understand.
- Try to keep a neutral facial expression so that children and/or staff are neither drawn to you nor concerned about your response to them.
- Everything seen and heard is confidential. Never discuss observations with other survey staff in any public or semi-public place. Never discuss observations with other program staff.
- Never leave the observation booklet lying around unattended, even if it is only for a minute.
- If other observers are present, stay indoors or outdoors as a group in order to improve chances of good reliability.
- Remember to thank the staff and director for allowing the team to observe in their classroom(s).

12.10 Conducting Parent Interviews

Parent interviews offer the MSHS programs an opportunity to hear directly from the families they are serving. This section describes the methodology for parent interviews if they are included in the *MSHS Survey*.

The Design Team is recommending the primary caregiver interviews (most likely mother) average no more than one hour in length and the secondary caregiver interviews (most likely the father) average no more than one half hour in length. In addition, the recommendation is to begin the interview process, with the parents together, if possible. While acknowledging there are analytic concerns with data gathered from multiple reporters together, there also are cultural considerations that must be taken into account in order to establish trusting relationships with the parents. Consultations with current MSHS parents revealed that they would feel more comfortable participating in individual interviews if they could complete at least part of the interview as a couple.

The Team is suggesting the questions for the combined interview portion be limited in number (~ 5 minutes) and demographic in nature (e.g., how many children do you have, where do you live, etc.) to minimize analytic concerns yet remain culturally sensitive to the wishes of the parents. During recruitment, the OSC should discuss this procedure with the parents by explaining the interviews will begin together, and then explain why it would be important to interview the parents separately, too. The OSC should highlight the difference in the two sets of interview questions (mother versus father) and the importance of gathering both perspectives on child-rearing as well as the MSHS program. Acknowledging that mothers and fathers play somewhat different, but very important roles in the lives of children and their families will help migrant parents better understand the request to conduct separate interviews. Where possible, the separate interviews should be conducted concurrently.

As discussed above, two evening interview sessions could be provided at the centers and two evening and one weekend day (Saturday) should be available for interviews at home or alternate locations suggested by parents. For some parents, the most convenient location is the family home, and interviewers must be prepared to travel to the homes for the interviews. It should be noted that homes are not all conveniently located and the conditions of roads and homes themselves will vary. Residence camps may be visited; however, some MSHS parents might be wary to conduct interviews there since the conditions may not be optimal (e.g., space, presence of other children and adults, concern about visitors' comfort level). Alternative community sites (perhaps suggested by OSC or the parents) could include community centers or public libraries or in some cases, a local fast-food restaurant.

12.10.1 Guidelines for Conducting the Interview

Upon meeting the parents, the interviewer should spend a few minutes chatting with parents to build rapport. Explain the purpose of the interview and the voluntary and confidential nature of the survey. While this information should have been explained to the family by the OSC during recruitment, and should also be provided in the parent consent form and the parent cover letter, it is important that parents are reminded by the interviewer so they are fully aware of their rights and their confidentiality so they can feel comfortable participating.

The interviewers should be prepared to deal with questions as soon as they arise. It is important to be sensitive to each concern raised and deal with it directly and sincerely, no matter how insignificant it may seem. By doing so, the interviewer communicates a professional attitude and acknowledges that the questions raised are important.

There are several ways that interviewers should prepare themselves. All of these would be emphasized and practiced within the formal training process.

- First, become totally familiar with the assessment materials. This familiarity will make them comfortable enough to be flexible and also help keep a professional agenda in mind as they accommodate any unique circumstances they may face.
- Second, be familiar with the family. Learn the families' names, as well as any other pertinent information, before conducting the interview.
- Third, dress the part – wear casual, yet professional clothes (no suits, no jeans). For cultural reasons, long skirts and dresses may be most appropriate for the parent interviews conducted by female interviewers and slacks may be most appropriate for male interviewers. Do not wear perfume or cologne of any kind as some participants may have allergic reactions or be distracted. In addition, jewelry should be kept to a minimum. Do not eat, drink, or chew gum during the interviews. Remember to wear an *MSHS Survey* ID badge at all times.
- Fourth, thanking the parents for their time would display respect, an important feature when working with this population. In addition, the use of the formal tense in Spanish and their last names is important as well, though this may be adapted as the interview proceeds. Briefly discussing their family and their work and sharing information about oneself (for about 5-8 minutes) establishes "*personalismo*" with the parent. It is also important to match the parents' expressiveness in smiles, eye contact, and physical stance as these can vary within the MSHS community.
- Finally, the utilization of concrete verbal examples would be helpful for the interviews (MSHS Community Consultant Group, 2008) and should be created with the measures. Previous work with MSHS parents (ACF, 2004) indicates that the often-utilized approach of presenting closed-ended questions or sentences and asking participants to respond using Likert-scale responses can be problematic for migrant and seasonal families. Three primary factors contributed to this difficulty: (1) researchers noted that the families wanted to be all inclusive of the range and variety of behaviors they and their children use, not simply reporting on the most likely or 'average' behaviors, (2) seasonal and migrant workers are not experienced in responding to multiple choice response sets as many individuals were not born and educated in the United States, and (3) the response cards utilized to aid participants in answering often include written reminders, which is not as helpful for this population due to the low literacy rates.

The parent questionnaires for the *MSHS Survey* could incorporate qualitative and open-ended questions; however, given the scope the Survey, it would not be cost efficient to conduct interviews with 1,400 MSHS families (3,000 total interviews of mothers and fathers) that require coding of open-ended responses. However, pictorial strategies for maximizing the families' abilities to fully respond to Likert-scale questions have been successful in allowing them to fully share their experiences and beliefs using the full range of Likert-style responses (Barrueco, Cumba, Sena, & Alvarado, 2008). This approach was successful and well-received by the MSHS parents as they were able to respond to questions confidently and quickly. Pictorial response cards should be used to collect consistent, quantifiable data using the same methodologies across families.

In cases where the parent has more than one child participating in the *MSHS Survey*, the parents should complete one full primary interview and one secondary interview, followed by an abbreviated version that asks only child-specific questions about the second child (or for any additional children).

Each primary and secondary caregiver who agrees to participate in the *MSHS Survey* and completes a parent interview should receive $25 after the interview has been completed. The incentives are designed both to encourage cooperation and to thank the parents for the time spent completing the interview.

12.10.2 Interviews Conducted in the Home and at Camps

It is likely that home interviews will be conducted in mobile or trailer homes, as housing on the farms themselves are becoming less prevalent. Some of the farm housing may only be a one-room dwelling in a building. As such, the interview may be conducted in this room, outside, in or near separate kitchen facilities, or another place of preference to the family.

In terms of safety on home visits, interviewers should always travel in pairs, have clear notes indicating their destination and appointment time, make sure their gas tank is full, leave the house before nightfall since there are often no streetlights or signs in rural areas, and carry cell phones (though they may not always have reception). Before and after visits, they should check in with their team leader to verify their safe departure and arrival. Finally, they should always wear bug spray and sunscreen (if interviewing during the day). They should travel with a water and food package in their car since they would be traveling long distances and may get lost. A detailed map of the area is imperative. Finally, if they feel uncomfortable entering a home, they should not do so.

12.11 Conducting Staff Interviews

ACF may decide to include a range of staff interviews during the Classroom/Family/Child Component, including teacher, assistant teacher, and family service workers. Interviews with staff should be completed at their convenience. At a time appropriate to the teacher (often during lunch or other breaks), the Team Leader should conduct the teacher and assistant teacher interviews and ask the teacher to complete a teacher-child behavior ratings report for each sampled child (described below). Previous experience in Head Start studies suggests that prearranging interview times for teachers and teacher assistants is often difficult given the fluidity of their days. However, pre-scheduling interview appointment times should be attempted to the best extent possible since some center directors may want to schedule a "floater" or substitute teacher to oversee a class while the teacher is being interviewed. Once on-site, it would be important to confirm that the scheduled appointment time still works for the Center Director and teacher. Interviews for family service workers can be prearranged by the OSC and often can be done before or after the program day, or during breaks. Guidelines for staff interviews should include ensuring confidentiality and private space, allowing staff to feel comfortable and able to respond honestly to interview questions.

In addition, the interviewer should engage the teacher or teacher assistant in the language they prefer. They may need to conduct the interview bilingually as some information (e.g., curriculum, teaching strategies, and personal information) may be more easily discussed in one lan-

guage versus the other. Demonstrating respect and friendliness will be essential for the interviewers to establish rapport with the staff. Some teachers and teacher assistants may be nervous about sharing information about the program or themselves; thus, time spent establishing trust and respect will be essential. Project staff must be professional at all times, making it clear that they will not discuss confidential information. This begins from their first moment entering the center.

As with the families, pictorial response cards should be used for Likert-like scales for ease of administration. It is suggested that teachers and teacher assistants could receive project tote bags as thanks for their participation.

12.12 Teacher-Child Reports

Once the children have been selected and have given their consent to the Survey, teachers should be provided with instructions for accessing the Web-based data entry system or completing the ratings electronically into a spreadsheet sent via email if Web-access is not available. Once in the system, the teacher would provide ratings for each sampled child in his or her classroom. As discussed in Chapter 11, the ratings would take from 5-20 minutes per child (depending on the child's age). As suggested by the MSHS Design team, teachers could be reimbursed $5 for each child rated, with a check delivered by the Team Leader during the data collection visit.

12.13 Conducting Community Service Provider Interviews

Forging new partnerships within the community, as required by the Program Performance Standards (45 CFR 1304.41), is critical for the successful delivery of comprehensive services, particularly for MSHS families. A better understanding of the nature and quality of these partnerships is needed, both from the community service provider's perspective as well as the perspective of MSHS programs and families. Findings from previous studies of regional Head Start suggested that most successful collaborations appeared to be influenced by organizational and community factors. In particular, community partners who had sufficient staff available and showed a commitment to networking, usually in the form of serving on task forces and community-wide advisory panels were more willing to collaborate. The MSHS Community Consultants thought that similar MSHS program features would be associated with strong community partnerships. These finding were supported in discussions with MSHS Community Consultants.

The network of agencies devoted to providing services for low-income children and families in any given MSHS community may vary on a number of important dimensions. Some may be large or small; weighted towards one particular type of service (e.g., family counseling) or diverse in services; closely knit, diffuse, or even contentious and competitive. Much can be learned through a description of the linkages among agencies and organizations. Knowledge of the provider universe is important in determining whether, for example, MSHS limited referrals of families to a particular service is a function of poor relations with the appropriate provider or whether such a service simply does not exist in the community.

The Community Service Provider interviews would systematically investigate the partnerships between MSHS and other service providers in their community to understand and improve services for MSHS families. The Design Team recommends that professional telephone interviewers, via the use of computer assisted telephone interview (CATI) software, conduct the interviews targeting the administrators most responsible for supervising the direct delivery of services. The Design Team estimates two part-time, daytime telephone interviewer could complete this effort across the expected 16-20 weeks of interviewing. A Survey Coordinator could occasionally assist and serve as the back-up if conflicts in scheduling arise.

The semi-structured telephone interview, described in detail in Chapter 11, would be developed to gather information about the agencies in the following areas:

- Description of the agency, including its auspice, goals or mission, and services provided.
- Type of collaboration with MSHS.
- Referral patterns between MSHS and the agency.
- Perceived relationship with MSHS.
- Attitudes toward MSHS families.
- Outreach strategies aimed at MSHS families.

12.14 Parent Focus Groups

It is recommended that a limited number of focus groups (12) be conducted with MSHS parents during the Classroom/Family/Child Component data collection to expand upon the topic areas discussed with the MSHS Community Consultants (including parents) during the design of this study and to supplement the information gathered during the Program/Center Component.

Conducted in Spanish, discussion topics for the focus groups might address the following issues:

- Current stressors and resources for MSHS families.
- Barriers/obstacles to engaging in MSHS, as well as primary reasons to engage.
- Immigration and its affect on families and programs.
- Priorities for their children in the program.

Focus group discussion guides should be semi-structured, open-ended, and organized around topic headings, sub-headings, and specific probes intended on eliciting relevant information and discussion of the key research questions. These guides should be driven by the same research questions used in key informant interviews to clarify and expand upon themes in the Classroom/Family/Child Component. For example, what do MSHS parents learn from MSHS participation? What are areas that they wish they addressed more?

As indicated in Section II, the parent focus groups likely could be conducted at the MSHS center. If such a space is not available, the OSC would help identify another local site (e.g., church, community center, library) that could be used. The space selected should provide a sense of privacy for the group, so participants feel comfortable expressing honest responses to the questions. Each focus group should last approximately 60 minutes and be audiotaped as a complete and permanent record of the discussion for use in analysis.

It is suggested that it is appropriate to provide an incentive to parents for their participation; the *MSHS Survey* Design team suggests $25.00. In addition, the provision of a meal and babysitting services are essential for supporting parents' full participation.

12.15 Computer-Assisted Interviewing Technology

The advantages of using computer-assisted personal interviewing (CAPI) over traditional pen-and-paper methods in the *MSHS Survey* should be considered. CAPI allows for fully computerized skip pattern logic in question branching; validity checks of response codes for closed-ended questions are performed during the interview so that invalid codes cannot be entered into the data files; ranges for open-ended questions are checked during the interview; consistency checking between related items is performed on line; and questionnaires can be designed to use special question series. *FACES 2006* is using this technology to collect types of data similar to those proposed for the *MSHS Survey*. However, researchers considering the use of this technology must consider the overriding context of the primary language and culture of the MSHS programs and families. Currently, no major study of migrant farmworkers (e.g., *NAWS*, etc.) has used this technology. Discussions with the parent members of the Community Consultant Group suggest that migrant farmworkers are interested in developing computer literacy for themselves and their children and thus may be intrigued by the use of a computer during the interview. However, it is possible that its use may affect the interaction between the parent and interviewer, particularly as it relates to the establishment of respect for the parent (since the computer increases the perceived "power" of the interviewer) and personal connection (with having a computer presented between the individuals). The Design Team recommends exploring this further during focus groups in the Program/Center Component before a final decision is made on whether or not to use this technology as part of the Classroom/Family/Child Component.

12.16 Assessing Response Rates and Related Attrition

After data collection, the completed instruments should be received in the home survey office as soon as possible in order to monitor the data collection progress in a timely manner. This would allow for quick identification of areas of the country, types of families, or research staff that may be having greater difficulty engaging fully in the study. Any adjustments needed to remove or address barriers to participation could then be addressed. These barriers may relate to transportation, assessor sensitivity, understanding about the study, or helping MSHS center staff and teachers understand more goals/benefits of program.

As noted throughout this chapter, the Design Team has identified a number of ways that a Web-based Field Management System (FMS) could contribute to the efficiency of the data collection efforts. It also is recommended that a Web-based FMS be developed for tracking the progress of the study and generating reports for ACF on response rates and attrition rates, if the study is longitudinal (or some families may leave before data collection is complete). This database, which should be created in a software program such as Microsoft Access, can serve multiple purposes including:

- Tracking attendance
- Documenting recruitment of programs
- Tracking selection of centers, classes, student,
- Maintaining lists and contact information of centers, classes, parents, and children
- Maintaining data collection schedules
- Tracking parental consent
- Tracking disbursement of incentives
- Monitoring daily progress and field monitoring during data collection.

This system would generate useful daily field progress reports (summaries of interim and final status codes for each instrument at the program, class, and child/family levels). The field progress reports should clearly show the rates at which work is being completed in different areas of the country.

12.17 Pre-Data Collection Plan

Finally, prior to initiating *any* of the data collection activities recommended above, OMB and IRB approval procedures must be completed. The following sections discuss the recommended timeline and procedures for gaining these approvals, as well as a suggested timeline for pre-testing data collection instruments.

12.17.1 OMB Approval Procedures

Under the Federal Paperwork Reduction Act, the Office of Management and Budget (OMB) requires that any collection of information from more than nine persons or organizations using identical questions—regardless of whether responses are voluntary or mandatory—requires prior OMB approval. An OMB information-gathering clearance package for all *MSHS Survey* evaluation instruments must be submitted. This package must include both proposed data collection instruments and any necessary clearance documents, the OMB Form 83-I and other required forms, and a detailed justification statement.

An optional task under the current Design Project was to prepare and submit the OMB package for the *MSHS Survey*. However, until ACF has reviewed the design plan and identified which of the suggested options will be implemented, it may be difficult to identify appropriate boundaries to this task. If the OMB submission is not completed under the current contract, the selected contractor should assist ACF by preparing a high-quality clearance package immediately after the contract award, so data collection can proceed in a timely manner. The approved Design Project Final Report provides extensive content information that increases the likelihood of quickly submit the package.

Guidelines for completing OMB submissions are clear and include the following:

- A description of the survey population and the sampling plan
- Procedures for data collection
- Data collection instruments
- Methods to maximize response rates and deal with non-response
- Planned training activities

- Recruitment procedures
- An estimate of the participant burden
- Procedures for maintaining the confidentiality of data

12.17.2 IRB Approval Procedures

The selected contractor for the survey must comply with the Federal policy for the Protection of Human Subjects and regulations enforced by the Federal Office for Human Research Protections (OHRP). Procedures for obtaining informed consent from participants must be developed and approved. Plans for the secure management of all data must be detailed and enforced. An Institutional Review Board (IRB) has responsibility to ensure that the data collection and research are conducted in complete compliance with HHS regulations, the Privacy Act of 1974, and other laws protecting human subjects and the confidentiality of data. For many Federally-funded studies, research staff is required to complete an on-line tutorial for researchers on the protection of human subjects. While this has not been required in previous national Head Start studies, the Design Team recommends that ACF have a requirement for, at a minimum, senior research staff complete and pass the tutorial.

CHAPTER 13

ANALYSIS PLAN FOR THE CLASSROOM/FAMILY/CHILD COMPONENT

The analysis approach includes a discussion of the goals of the analyses, the analytic approaches to addressing the study's research questions, and challenges relevant to the design of the analytic plan. This chapter was informed by the Design Team's knowledge of the analytical methodology used in previous national studies of Head Start, as well as our past and ongoing work with MSHS families. This expertise provides the ability to engage in advanced analytic methodology that specializes in interpreting results within the context of Head Start and, more specifically, of MSHS. Below, the potential analysis plan for the center, family, and child activities are presented with an initial presentation of the goals, followed by key considerations for the analysis plan, and concluding with descriptions and examples of statistical analyses.

13.1 Goals of the Analyses

The analysis approaches described below for the *MSHS Survey* can be utilized to address the potential research questions for the study developed by the Design Team and Consultants that are presented in Appendix C. These fall within the following overarching questions:

- Describing the MSHS programs and communities, program types and services, including program quality and identify gaps in services, barriers and facilitators to service.
- Describing the MSHS centers, classrooms, and staff, including quality of classrooms, curricula used, and the types of activities that take place in the centers and classrooms.
- Describing MSHS parents and families in terms of background characteristics, present family life, involvement in MSHS program activities, and how these factors may relate to children's skills or abilities.
- Describing the variation in abilities of MSHS children in language, learning, and socio-emotional domains.
- Exploring the associations between program, classroom, family and child characteristics.

The steps involved in reaching these goals are further discussed in this chapter. Depending on the question at hand, not all steps will need to be completed.

13.2 Analytic Approach

- Data Collection Design Refined (Power Analyses, Differential response rate considerations for subgroups)
- Database Preparation (Multiple sources of ID information included; careful labeling; Missing Data Treatment; Weights calculated; recordkeeping of all data consolidation decisions established)
- Psychometrics (Reliability examinations including factor analyses, DIF, IRT)

- Descriptive and National Estimations using Weights
- Bivariate Analyses (such as t-tests, ANOVAS, chi-squares)
- Basic Regression Analyses
- Multilevel Analyses

13.3 Analytic Team

Attention should be paid to the composition of the analytic team as both statistical and substantive expertise is necessary for a study such as this. The team should include lead statisticians, principal investigators, the Federal Project Officer, and individuals experienced in the MSHS program and young DLL children. Doctoral degrees in relevant fields are prerequisites for the statisticians and principal investigators. Across these individuals, experience analyzing complex data (e.g., national; multilevel; multilingual assessments) are required.

The analytic team may meet regularly throughout data preparation and analyses to document progress. In addition, it is recommended that the analytic team meet regularly with appropriate research, program, and Federal consultants and the Federal Project Officer to report on progress

13.4 Considerations Relevant to the Design of the MSHS Analytic Plan

This section reviews the considerations made by the Design Team when formulating the data analysis plan for MSHS children, families, and programs. These include challenges to data organization, effects of the design on data analyses approach, approach to language of assessment, and variations in interpretation of research questions.

13.4.1 Challenge to Data Organization

Many MSHS families will use the traditional Latino conventions for their own names and that of their children. This often results in four or five given names, rather than the two or three in mainstream American society. For example, a child may be named María Sofía Barrueco López, rather than Sofía María López, where there is only one last name and the child's first name is consistently reported as the commonly used name. It is important that the database have enough columns to accommodate multiple entries for names. Beyond the creation of the database, the use of traditional names might make it difficult to avoid duplicating families at different centers over time. In order to ensure minimum data error, all names should be collected, and child's birthdate and mother's names should be used to ensure data is accurately entered by child.

13.4.2 Multiple Levels of Analysis

As is apparent from the Survey research questions (Appendix C) and the sampling plan (Chapter 10), the design of the *MSHS Survey* is inherently multilevel. The analytic plan will address this issue in a number of ways. Descriptive statistics may be conducted at multiple levels of analysis to provide a clear picture of the sample in terms of program, classroom, family and child characteristics. At several levels of analysis (i.e., programs, classrooms, and families/children) data will need weights proportional to sampling probabilities that allow the Survey to generate nationally representative descriptions. Next, planned relational analyses could occur within particular levels of analyses (e.g., how child language scores are associated with child age) as well as across levels of analyses (e.g., how parent attitudes are associated with

classroom quality). Finally, multivariate regression analyses would require multilevel modeling techniques to account for the variation within and between levels of analysis and to provide more accurate estimates of associations between key components of the MSHS system. Taken together, there is a critical need to analyze and present the data from the *MSHS Survey*, taking into account the variation across MSHS programs, classrooms, and children.

13.4.3 Subgroup Analyses

In addition to pursuing analyses within and across the hierarchical levels of the MSHS program, there is the related consideration of assessing the data by predetermined subgroups, to better understand and interpret the variation in MSHS programs and families. Specific subgroups to analyze will depend on the portions of the *MSHS Survey* that are implemented by ACF. Note that sampling was carefully planned to allow analyses of all primary subgroups that are potentially critical in explaining the variation in key variables of interest in the study. These could include: 1) age of children or age-groups of children (i.e., infant, toddler, preschooler), 2) type and length of the program to address the varied program schedules, 3) region of the country to address potential variation in key outcomes among program and families' experiences, and 4) variation of family mobility (including categorization by migrant and seasonal). It is hypothesized that pursuing and attaining an appropriate sample size with these predetermined subgroups would increase explained variation among key outcomes of interest.

The Design Team suggests that all proposed subgroup analyses be supported in advance, to the extent possible, by statistical power analyses demonstrating sufficient power to detect differences among subgroups taking into account the anticipated response rates for the study. However, additional key subgroups may be identified as the project progresses, as certain options of the plan are selected, and particularly as the sampling plan begins to identify critical areas of variation among the sample that may need to be accounted for in the analyses. As these cases arise, power and the affect of response rates should be reassessed.

13.4.4 Examining Children's Abilities within and across Languages

As discussed in Chapter 11, the examination of MSHS children's developmental skills necessitates careful decision-making concerning the language of assessment. Because few extant measures were carefully developed to be appropriate for bilingual children, the suggested plan for the *MSHS Survey* includes a variety of methods to assess children's abilities in two languages: using measurement in one language; measuring separately in both languages; or using measures that provide a total ability score across languages. As such, analyses will need to be adapted to each of these approaches, depending on the research question and measure being examined.

When measurement involves assessment of a domain in both English and the home language (a dual language administration approach), careful analysis of the children's intra-language performance in both their home language and English may be conducted first, followed by analysis of development in the relevant skills across the languages. The latter likely involves the creation of new variables to reflect children's total abilities across languages. These combined or inter-language scores can be created in a variety of ways (e.g., aggregating English and home language score, identifying unique items across the measures so as not to "double count" abilities). The *MSHS Survey* may first carefully consider the theoretical underpinning of these potential aggregate approaches for each ability and measure, as well as psychometrically test the ap-

proaches. For example, consider Letter naming. It seems that both inter- and intra-language scores would be informative regarding bilingual children's abilities.

Among the measures slated for dual-language administration (such as the following among preschoolers: preLAS; Letter naming; *ECLS-B* Math) comparative psychometric assessment of the separate methods must be evaluated first. This will be particularly necessary as there is very little current research that provides clear guidance on how to either analyze and/or interpret the separately obtained information on children's English language versus home language abilities. This will not be necessary for the ROWPVT-SBE since this measure was created and published using this approach, as presented in Chapter 11. As the ROWPVT-SBE is a fairly new measure to national studies, it was selected for an analytic example later in this chapter.

13.5 Data Preparation and Analytic Approaches

This section describes the general approach to the analysis of the *MSHS Survey* data. It begins with data preparation and is followed by specific analytic approaches and examples.

13.5.1 Data Preparation Procedures

Prior to beginning analyses, preparation of the data must occur. These standard procedures are described below. Although these steps may seem obvious, it is important that these major basic elements of the process be maintained and completed with care.

- Label variables and values.
- Code missing data.
- Create new aggregate and composite variables.
- Create analysis files.
- Weighting.

Label Variables and Values. Every variable in every data set, original and newly created, would be labeled. This will involve attaching a meaningful description of each variable, so that each is readily identifiable. In addition, each value for a given variable would be labeled.

Code Missing Data. There are two types of missing data that can arise in a survey, even after repeated attempts to collect data. Unit non-response occurs when an entire data instrument is not received. Item non-response is the situation where an instrument is completed but one or more items on the instrument are left blank or missing. Unit non-response and missing data could be given important consideration for the *MSHS Survey* due to families' mobility. Unit non-response can be accounted for by adjusting the sampling weights at each stage for non-response.

Item non-response missing data could be handled in a variety of ways depending on the issue. In many cases, missing item values can be replaced by answers obtained from other data collected in a given program or site as well as based on other data from a given child or family. This imputation approach is superior to simply deleting cases based on missing data as the latter approach has been demonstrated to result in biased and/or inefficient estimates, larger estimated standard errors, and greater likelihood of indefinite sample covariance matrices (e.g.,

Brown; 1994; Little and Rubin, 1987), though listwise deletion is preferable to other conventional approaches such as pairwise deletion, dummy variable adjustment, or basic imputation (Allison, in press). Advanced techniques providing closer to optimal estimates for missing data that can be considered for the *MSHS Survey* are maximum likelihood, multiple imputation, and inverse probability weighting. Of these, maximum likelihood and multiple imputation have relative advantages and disadvantages, which relate to the specific type of analysis and statistical programs being used (see Allison, in press for more including relative robustness to assumptions of missing at random data).

Given these considerations, it is possible that a mix of imputation methods may be utilized. During these procedures, imputations should be made cautiously, logically, and documented in the data set so they can be easily identified. However, in some cases, there will be no obvious way to impute a response for a missing value. The following steps may be used to approach missing data analysis:

- If there is more than 2% of missing data for a particular item, "missing" should be treated as a category response.
- If there are fewer than 2% of missing items, assume they are distributed randomly. The presentation of results in such cases should indicate that "no item was missing for more than 2% of the respondents."
- For relational analyses, the presentation of results should note the amount of missing data on the outcome variable.
- Attempts to impute response variables in regression analysis are not suggested unless there is a clearly obvious way to conduct a logical imputation. If there is, then consideration of the various procedures described above may be utilized and documented.

Create Analysis Files. Once the individual variables are cleaned, and new variables are created, smaller and more manageable analysis files should be created. This will involve extracting only those variables that will be needed for the analysis. It is likely that multiple analysis files will be created, in order to address each set of research questions at the appropriate level of analysis.

Documentation. Data preparation and analysis can lead to a myriad of decisions based on a combination of carefully constructed data. Of primary importance in these analyses activities is careful technical documentation of all scale and subscale score development activities, identifying and recording all data decisions that are made prior to formulating key variables for further analyses. This ensures long-term understanding of the resultant variables and accurate interpretation of the results.

13.5.2 Weighting

The use of sample weights in the analysis of data is indicated so that variations in the probability of selection of various units and for nonresponse bias adjustments are properly accounted for in the analyses. Survey estimates can be seriously biased when these adjustments are not done. The nonresponse should be minimal once buy-in to the study by programs and families has been achieved. Nonetheless, including nonresponse adjustment factors at the program, center, and classroom level would be important.

The development of three sets of weights could be used to produce representative statistics at three critical levels of the analysis plan: 1) program weights, 2) classroom weights, and 3) child and family weights. Given the complex sample design, the analyses of weighted data require statistical analysis software that can estimate standard errors accurately, such as SUDAAN. SUDAAN has various procedures for comparing means, percentages, as well as multivariate regression that yield the appropriate design-based estimates of the standard errors, confidence interval, and design effects associated with the survey values or model parameter estimates (e.g., RTI International, 2009a; RTI International, 2009b).

13.5.3. Psychometric Analysis of Measures

A series of psychometric analyses may be completed on measures that build on the Measurement Substudy, if pursued. These data analyses should consist of:

1) Identification of psychometric properties of measures by examining internal consistency, inter-rater reliability (i.e., Cronbach's alpha, Kappa statistics), convergent and divergent validity, factor analyses, Item Response Theory (IRT) analyses, and differential item functioning (DIF) of instrument items for different subgroups of children.

   - **Factor analyses**- Given the population of interest, factor analyses will be a valuable analytic approach, particularly with continuous data, to confirm the consistency of expected subscales and to identify new constructs or latent variables. These efforts will enhance the parsimony and internal validity of the analyses but also will be critical in the sound development of any new variables to be analyzed.
   - **IRT**- The IRT approach to factor analysis is a statistical technique applied (often to dichotomous data) to determine the association between an individual's response to survey questions or items (in probabilistic terms) and any underlying latent trait that is measured by the items. The results of IRT analysis can help determine whether scale items are appropriate for measuring a particular trait, how well items in the scale cluster or "hang together". IRT methods can lead to short reliable indices tailored to the population of interest and are especially appropriate for addressing the increasing need for psychometrically-sound measures in the DLL field.
   - **DIF-** The DIF analyses will plot item difficulty curves for subgroups, and statistical tests will identify whether these curves differ significantly for any particular subgroup of children.

2) Calculation of standard scores/modified standard scores (if items performing differently for different subgroups)/and newly identified subscale scores based on the analyses from step 1. Use feedback from data collectors about the measures performance in the field and discussion with the Survey team to refine calculation plan.

When consolidating data, reviewing item functions and creating scale scores, it is important to record all decisions diligently, in order to inform the research field about differential performances of these measures across subgroups and to be able to accurately explain score calculations. Taken together these approaches could provide useful and important information about the psychometric properties of the MSHS measures, and provide an important foundation before moving to additional analyses (i.e., descriptive, relational, regressions).

13.5.4. Analytic Approaches

The analytic approaches discussed below need to take into account these factors in addressing the research questions of the study:

- Types of inferences to address the research questions (descriptive, relational , and multilevel regression analyses);
- Units of analysis and sampling approach (program, center, classroom, staff, families, and child); and
- Critical sub-groups (e.g., infants, toddlers, and preschoolers; upstream and downstream; migrant and seasonal).

Practically every combination of these three factors will come into play in the course of addressing all the research questions of the study. Given these complexities, a clear analytic process and timeline are critical. In terms of the timeline, analyses could be completed intermittently between each major round of data collection implemented by ACF. . The results are anticipated to motivate re-visiting some of the research questions, particularly about relationships among variables that may have not been studied before within Head Start or even MSHS (such as, the relationship between mobility and child and parent functioning).

Descriptive, Relational, and Multilevel Regression Analyses. As described above, the analytic plan for the Survey must begin with a great range of psychometric analyses, confirming validity and reliability of the data and consolidating variables. After psychometrics are complete, descriptive analyses will be used to provide a general picture of the levels of abilities of MSHS children, along with the characteristics of their families, teachers, classrooms, programs, and communities. This would entail organized descriptive calculations (i.e., mean, s.d., frequency). Next, adding sampling weights would allow for the generation of nationally representative estimates of the variables of interest.

The next step will move on to include relational analyses to assess the associations between important variables. The analytic plan also involves multilevel modeling of relationships among independent and dependent variables while controlling for the nested sampling levels of the study. The design for this study will be hierarchical – children are nested within Head Start centers, which in turn, are nested within programs within communities. If all these levels of data collection are pursued by ACF, relationships could be examined between parent features and children's skills, and program, classroom, and community characteristics. One approach for analyzing the data for this study would involve multilevel modeling techniques, sometimes referred to as Hierarchical Linear Modeling (HLM). This allows for the accurate modeling (and thus, deeper understanding) of children's skills while taking into account the interrelatedness of their experiences and thus of the data that is produced in the *MSHS Survey*.

Although multi-level modeling is the analytic technique "de jour", the Design Team, the analytic consultants, and ACF should consider integrating other cross-sectional analytic approaches into the analysis plan, including correlational methods, logistic regression approaches, and structural equation modeling, as well as other alternative model specification procedures, where appropriate. Additionally, the relational analyses will examine bivariate relationships through analyses such as correlations and cross-tabulations. When appropriate, tests of association (i.e., chi-square, t-test, F-test) to examine differences among the variables of interest in the

study. As data collection will be occurring throughout the year across the country, these analyses should be re-examined after each wave.

13.6. Examples of Analyses for *MSHS Survey*

Three examples across the child, family, and program levels are presented below. As the following elucidate, the approach for the analyses start with the most simple leading to the most complex in a step by step process to provide a comprehensive and thorough approach to addressing each question. Multilevel modeling analyses are probably the most complex analyses that will be conducted given the proposed options for the *MSHS Survey*.

Example 1. Parent Level: Demographics of Primary Caregiver

Research Question: What are the characteristics of those served by MSHS programs? *(see Appendix C)*

As an example of a simple descriptive approach to the analyses, Table 13.1 indicates the type of data available and how data may be presented on the characteristics of primary caregivers across child age subgroups. These descriptive statistics would also be further analyzed to assess whether differences across subgroups were statistically significant using appropriate tests of association (i.e., chi-square, t-test). .

When including weighting, the results would be representative of the national MSHS program. Policymakers could identify parent education needs, and programs could consider how the age of the parents' differs from the national MSHS average. Further, researchers interested in pursuing research with bilingual families could identify the variability with which languages are spoken in the home. If the *MSHS Survey* is pursued on a consistent basis (e.g., every three years) then it would be possible to identify trends in caregiver demographics for the MSHS programs.

Table 13.1: Demographic Characteristics of the MSHS Primary Caregivers, by Age of Child.

	Age of Child (Weighted Percentages)			
Demographic Characteristics	**Infants (n=)**	**Toddlers (n=)**	**Preschoolers (n=)**	**Total (n=)**
Age				
Less than 20 years old				
21-29 years old				
30-39 years old 40 and older				
Mean Age				
Median Age				
Marital Status				
Married or living with partner				
Single, never married				

	Age of Child (Weighted Percentages)			
Demographic Characteristics	**Infants (n=)**	**Toddlers (n=)**	**Preschoolers (n=)**	**Total (n=)**
Divorced or widowed				
Married, but separated				
Language				
Speaks only English				
Speaks only Spanish				
Speaks only a language other than English or Spanish				
Speaks predominately English with some Spanish				
Speaks predominately English with some language other than Spanish				
Speaks an equal amount of English and Spanish				
Speaks an equal amount of English and a language other than Spanish				
Speaks predominately Spanish with some English				
Speaks predominately a language other than Spanish with some English				
Country of Origin				
United States				
Mexico				
Puerto Rico				
Other?				
Years in US (among immigrants)				
1-2				
3-5				
6-10				
11-15				
16-20				
21+				
Mean Years in US				
Median Years in US				

Example 2. Child-Level: Language Abilities among Preschoolers

Research Question: *What are the variations in MSHS children's overall communication development? (see Appendix C)*

Another set of analyses could address a research question at the child-level, such as one about linguistic abilities. As described in Chapter 12 and above in this chapter, MSHS children's lan-

guage skills will be examined in multiple ways across English and/or the home language. An important consideration to include is what children's abilities are *across* the two languages, rather than only *within* one language. As such, some measures will need to be administered in both languages and then both statistically and conceptually combined. One of the suggested measures for the *MSHS Survey* (the Receptive One-Word Picture Vocabulary Test, Spanish-Bilingual Edition; ROWPVT-SBE) has incorporated the conceptual scoring approach into its development. As it is fairly new in use in national studies, it will be utilized here as an analytic example.

The ROWPVT-SBE is a measure of receptive vocabulary across English and Spanish[19]. It assesses children's total ability to understand words using the following approach. Each question is presented at first to the children in their dominant language (either English or Spanish); if the child misses the item, it is then presented to them in their non-dominant language). Why this measure differs from others is that it was standardized for conceptual scoring using this approach. That is, all the children involved in the development of the ROWPVT-SBE were presented the items bilingually and thus, the norm tables reflect this. Thus, the standard score computed from the raw scores using the national norms provide an estimate of bilingual children's receptive vocabulary skills across the two languages.[20]

For analyses, children's standard score on the ROWPVT-SBE will be calculated that yield their relative functioning in receptive vocabulary across English and Spanish. Analyses can then progress to examine the variation among MSHS children in this skill set. For example, these steps would likely include the following:

- Calculation of unweighted standard scores using simple univariate descriptive statistics (i.e., frequencies, mean, S.D., range) to assess whether the data is within the expected ranges for the ROWPVT-SBE.
- These data would then be weighted at the child-level to provide descriptive information at a national level on the ROWPVT-SBE.
- Additional bivariate descriptive analyses (i.e., correlations, tests of mean differences, such as t-tests or F-tests) would be conducted to test the associations between children's performance on the ROWPVT-SBE. Where possible, these analyses will incorporate weighted data to provide tests of association using nationally representative data.
- Finally, multilevel modeling would allow accurate modeling (and thus, deeper understanding) of children's skills while taking into account the interrelatedness of their experiences and thus of the data that is produced in the *MSHS Survey*.

Table 13.2 presents an example of hierarchical linear modeling analyses of a two-level model (classroom- and child-level). Specifically the model assesses the relationship between classroom and child/family characteristics to children's developmental status on the Receptive One-Word Picture Vocabulary Test-Bilingual Edition. The particular variables for this model would be chosen using input from the analytic team and technical consultants. *Those selected here are just for demonstration purposes.* Further, it is important that the fitting of these models is preceded by simple univariate (i.e., frequencies) and bivariate descriptive statistics (i.e., correlations) to as-

[19] There is also a purely English version for English-only speakers.
[20] A resulting issue then is that their skills *within* a language can not be examined using normed data. To balance these issues, measures that could provide both within and across language understanding were selected.

sess each of the independent and dependent variables distributions and relationships to each other. Where possible, these descriptive and multilevel modeling analyses would be conducted with both unweighted and weighted data to provide sample statistics as well as nationally representative estimates.

Table 13.2 Two-Level Regression Models of Total Receptive Language Skills across English and Spanish of MSHS Children

Variables	Receptive One-Word Picture Vocabulary Test-Bilingual Edition ρ =
Classroom Factors:	
Peers' language abilities	
Turnover of Class Census/ Classroom-level Mobility	
Instructional Support and Language Interaction with Teacher	
Family and Child Factors:	
Child's age (in months)	
Child gender	
Extent of Bilingualism in Home	
Caregiver formal education level	
Caregiver literacy level	
Caregiver parenting approach	
Extent of Mobility in past 12 months	
N of children (n of programs)	
% Level-2 variance explained	
% Level-1 variance explained	

Note: ρ = Intraclass correlation

This data would be associations between estimates of the national MSHS program. For example, the analysis would reveal the correlation between families' bilingualism and children's total vocabulary, when controlling for classroom and family characteristics. In addition, program staff could consider the associations between recent mobility and children's vocabulary skills, while policymakers could examine parental literacy levels as a potential skill to target through programming.

Example 3: Program Level: Outreach for Parent Involvement

Research Question*: How does MSHS provide parents with a range of different opportunities for meaningful participation in the program, if volunteering is difficult for MSHS parents?*
(see Appendix C)

Both qualitative and quantitative approaches could be used for this research question. For example, both open-ended and response-set questions about parent involvement outreach can be incorporated into the staff interviews. In terms of examining open-ended data, the Survey Team could employ content coding of the open-ended responses into distinct categories. This could be accomplished with the use of qualitative software (e.g., ATLAS or NVIVO) using multiple trained coders with established inter-rater reliabilities More descriptions about qualitative method approaches can be found in other Sections of this report and can be utilized similarly here. Additionally, fixed response set questions can be posed, which would yield analyzable data. Both the qualitatively-coded and quantitative data would then be analyzed descriptively, first using unweighted data to assess the range and frequencies of the responses. Then program sampling weights would be used to generate nationally representative descriptive statistics.

These analyses could be of interest across various constituencies. For example, program staff could consider the national variability of location of volunteer experience for a population that may experience significant transportation, time, and distance barriers. In turn, policymakers may examine the need for additional resources to support intensive approaches.

Table 13.3 Outreach for Parent Involvement by Migrant/Seasonal Categorization of Families

Characteristics	Total (n=)
Transportation	
Bus pick up parents in camps or neighborhoods	
Staff use personal cars to pick up parents	
Carpooling among parents	
Parents drive selves	
Food	
Meal provided at event by center	
Meal provided at event, by other parents	
Translation	
Translation provided by staff	
Translation provided by professional translator	
Translation provided by other parents	
Location	
Volunteer activities provided that can be conducted at center (e.g., assisting in classroom)	
Volunteer activities provided that can be conducted at home (e.g., cutting out shapes from provided paper to be later displayed in classroom)	
Volunteer activities provided that can be conducted in community (e.g., distribute flyers about center in market)	

13.7 Conclusion

This combination of analytic approaches would yield results that are new, particularly at the child-level, which have been lacking in previous national MSHS research efforts. The information could improve program practices, encourage effective future field research, and effectively fill many of the gaps in data that may be barriers for policymakers' understanding and support

of the programs. The *MSHS Survey* analyses would present a nationwide perspective of MSHS child and family functioning, particularly as they relate to key features such as bilingualism and mobility.

CHAPTER 14

SUPPLEMENTAL SURVEY MODULES

While the proposed survey design is expected to yield a comprehensive picture of MSHS for ACF, the Design Team recognizes that the *MSHS Survey* ultimately put forth by ACF, regardless of what the plan looks like, will encounter critical limitations regarding the depth with which it can study any particular topic area. As a result, a mechanism should be built into the overall plan, giving ACF the option to identify certain topic areas that it would put forth as a survey module supporting additional in-depth study. In the proposed plan, these modules would be supplements to the standard *MSHS Survey* implementation.

For designing the survey, the primary limitation was the need to minimize the time burden imposed on individual Survey respondents. Given the long hours they spend working and away from their families, MSHS staff and parents have little time to contribute to survey participation. Respecting that situation, the Design Team has deferred to time limitations in discussing administration of the various surveys in the previous sections on the Program/Center Component and the Classroom/Family/Child Component. However, there is the potential for ACF to consider adding a supplemental survey module on topics of particular interest. This essentially gives ACF a range of options, from the addition of survey items on a specific topic or the addition of a targeted substudy to the overall *MSHS Survey*. ACF could select one or more of the topical modules for implementation of differing cohorts of the *MSHS Survey*.

The Design Team proposes the use of these optional survey modules that could:

- Expand the depth and intensity of data collection on a specific topic of interest,
- Increase the cost-efficiency of topically-focused data collection by using embedded subsamples, and/or
- Provide timely, policy-relevant data to examine emerging trends and inform policy and programmatic responses.

While one goal for ACF would be to have the *MSHS Survey* become an ongoing fixture within the Head Start research portfolio, modules represent pieces that are not necessarily repeated during each data collection.

The following is a list of supplemental survey modules suggested by the Design Team. These suggestions are based on the collaborative discussions held with the MSHS Staff and Parent Consultants and Academic Consultants as part of this project. All of these topics are touched on relatively lightly in the based *MSHS Survey* Options. If these in-depth supplements are pursued, however, these topic areas would yield additional important information to MSHS.

- Migrant Family Life and MSHS Involvement Substudy

- Health and Mental Health Substudy
- Communities Serving MSHS Families Substudy

- Indigenous Families Substudy
- Curriculum & Instructional Practices Substudy

ACF could choose to implement each of the modules as a broad, complete substudy or simply expand examination of the topic via an additional set of interview questions, depending on its need. Overview details regarding potential supplemental survey modules for the *MSHS Survey* are provided below.

14.1 Case Studies of Migrant Family Life and MSHS Involvement

A Migrant Family Life and MSHS Involvement Case Study would provide ACF with an opportunity to gather more in-depth information on a smaller sample of migrant children and their families over time. Using a mixed methods approach, the Survey Team could develop more complete profiles of migrant and seasonal families and children, their homes, their neighborhoods and communities, and their interactions with MSHS. These could be based on the collection of additional quantitative and qualitative data (including in-depth parent interviews, home visits, neighborhood and community observations, and brief monthly telephone contacts) that supplement the base data already collected on a smaller, representative sample of the *MSHS Survey* families over a period of one year. Particularly unique to this module are the home visits and community observations for all families in the subsample. The richness of parents' stories of migration, MSHS participation, and community interactions would offer insight to programs and expand national understanding of agricultural worker families.

Telephone interviews would provide monthly updates on changes in the families' household composition, child care or MSHS arrangements, employment status, health status and health care use, service use, and child development. In addition, measures of social support, psychological well-being, and family resources could be rotated into the interviews (one measure each month) over the year. Follow-up questions or probes on selected responses will help yield targeted qualitative data to supplement and provide context to quantitative findings. These interviews would be used to examine and understand changes over time and better understand the amount of change these families experience regarding the key questions of interest. Data from each of the families' home visit interviews and observations; parent interviews; child assessments; teacher ratings from the Classroom/Family/Child Component—as well as monthly telephone interviews—would be used to create family narratives on a subset of families. The narratives (beyond being richly descriptive) could help identify or confirm important emergent themes both within and across families in the study.

Additional information about this optional module is presented in Section IV, including suggestions about assessing the feasibility of tracking and continuing data collection with participating families.

14.2 Health and Safety Substudy

One of the important roles that MSHS has in the lives of migrant and seasonal families is to improve their safety and health status. These efforts include improving families' knowledge about pesticide exposure, safety within the home and at work, encourage compliance with immunization schedules, improving children's access to medical and dental care, and more. In addition, program concerns apply to the behavioral and mental health of the families, and the increasing stressors related to the economy, housing, and immigration. These are concerns also shared with the MSHS staff, who are very invested in the families they serve.

A Health and Safety Substudy could improve understanding of the general level of stress and strengths among the families, while also informing program methods supporting families. Key features of the supplement might include a deeper range of qualitative and quantitative questions regarding health and safety with a subset of families and staff in the *MSHS Survey*. It may also involve interviews with health care providers in the MSHS communities and further study of how parents and programs deal with the issue of medical costs, particularly those related to family mobility and the need for accessing Medicaid-funded services in different States over the year.

14.3 Community Substudy

When local programs forge new partnerships within the community, as required by the Head Start Program Performance Standards (45 CFR 1304.41) they take a a critical step towards the successful delivery of comprehensive services for MSHS families. A better understanding of the nature and quality of these partnerships, from the perspective of community service providers, programs, and families could highlight successful methods and the range of obstacles. Findings from previous studies of regional Head Start suggested that most successful collaborations were influenced by organizational and community factors. Namely, community partners who had sufficient staff available with an organizational commitment to networking, usually in the form of serving on task forces and community-wide advisory panels, were part of more effective collaborations. The network of agencies devoted to providing services for low-income children and families in any given MSHS community may also vary on a number of important dimensions. These may prove to be the size of the provider organization (large or small); the type of service(s) (e.g., family counseling); or whether providers in a particular community are closely knit, diffuse, or even contentious and competitive.

Improving the background understanding of these factors could inform future *MSHS Survey*s. Key factors associated with successful and with limited community partnerships will be more fully understood and thus more concisely measured in future surveys. Further, full descriptions of varied successful programs could bring new strategies to the table for programs' developing or adapting their community partnerships. Organizational, community and program features would all be considered. Adjustments and attitudes of community partners towards short-term services could be key signs of functional connections. Much might be learned through a description of the linkages among agencies and organizations. The Design Team suggests that indepth interviews be conducted with community services providers, MSHS program staff, and MSHS families to yield much of this information for ACF. In-depth record reviews may also inform this question.

14.4 Indigenous Families Substudy

A growing consideration within the MSHS program is the participation and engagement of families from indigenous cultures emigrating from Mexico and South America. In addition to a rich variety of languages other than Spanish or English, these families may have diverse parenting practices and other social norms that necessitate attention for culturally appropriate responsiveness from MSHS. A substudy with these families would largely be qualitative with interviews and focus groups with parents, extended family, and MSHS staff centered on questions of culture and language, as standardized quantitative measures are not available in these languages. Further, greater information is needed for MSHS regarding migration history and patterns (and contributing factors to it) within the U.S. as shifts within MSHS have been reported by the MSHS Community Consultants (2008). Understanding these new migrants travel patterns and decision-making could improve program supports. For example, programs serving the eastern part of the United States reportedly are serving more families from indigenous communities; while programs in the California and Southern regions have been doing so for a while. Discussions with the MSHS Community Consultants (2008) noted that these families can be very different from the migrant families centers are used to serving and that more information is needed regarding individual cultures to help these parents navigate through the migration process while maintaining young families.

14.5 Curriculum & Instructional Practices Substudy

Given that the population served by the MSHS programs is predominately comprised of culturally and linguistically diverse children and families, more needs to be known about the availability, use appropriateness, and quality of different curricula, as well as specific instructional practices. As proposed, the already described Center options of the *MSHS Survey* (Section III) would yield data regarding teacher's qualifications, experiences, beliefs, and practices, as well as actual observations of the quality of their classroom interactions and practices. These data would be collected via teacher interviews and classroom observations with the full study sample.

This supplemental module would expand upon these core data collection activities for a subsample of classrooms. This would provide an in-depth examination of the complexities and linguistic "match" of multilingual language and literacy instructional practices and other teacher-child interactions used within MSHS classrooms.

The core set of classroom observations and teacher interviews used across the classrooms for different aged children would be supplemented with additional, more extensive observations of the quality and extent to which the programs are providing an appropriate range of learning experiences for this linguistically diverse population. This would include additional data collected from a subsample on the multilingual language and literacy instructional practices such as:

- A detailed inventory of the range, quality and match of classroom literacy resources.
- Ratings of the use of high quality instructional practices in different areas of language and literacy instruction and practices with DLL children, separately by the lead teacher and the assistant teacher/aide.

DESIGN FOR MIGRANT AND SEASONAL HEAD START SURVEY

FINAL DESIGN REPORT

SECTION IV:

LONGITUDINAL SURVEY OPTIONS

CHAPTER 15

INTRODUCTION TO LONGITUDINAL SURVEY OPTIONS

The proposed Program/Center component and Classroom/Family/Child component, described in Sections II and III respectively, were designed to yield a range of descriptive information, based on unbiased national estimates of the MSHS programs and the children and families they serve. As shown in many of the national Head Start research studies of the past decade, a data collection that assesses children and interviews parents and staff at a single point in time provides useful insights into the programs and the population served. We anticipate that this also would be true for MSHS programs and families, particularly given the very limited research data currently available on MSHS programs. Given these data limitations, MSHS programs are neither easily defined nor fully understood by the early childhood field or by policymakers. Clear, current information from a targeted descriptive study could serve to fill this gap.

However, cross-time data collection has been a key component of other national examinations of Head Start, such as *FACES, Baby FACES,* and the *Head Start Impact Study*. Further, local MSHS staff have shared their curiosity about the progress MSHS children achieve over time, and whether that development is bolstered by participation in MSHS. One of the elements incorporated into the conceptual model for the *MSHS Survey* (Chapter 3) and, indeed, in any model involving an intervention, is the impact of time. Time, however, is a particularly complicated factor within the context of MSHS. With time comes regular exposure to new experiences that may mediate the intervention; for MSHS children this may include relatively short exposures to multiple MSHS programs, as well as to other preschool/child care settings. As a local organization, the MSHS Branch itself must internalize change over the course of a year, responding to family mobility and the endless variations across service locations, schedules, and staffing that are necessary to support the ongoing movement and needs of the MSHS population. The entire MSHS system (families, children, and programs) may be considered in flux over time and, while this makes it a very tempting target for study over time, this same characteristic easily could confound what may appear to be scientifically sound attempts to examine it over time.

This chapter has two goals. First, it presents the challenges that MSHS presents to traditional longitudinal methodology. Some of the key issues are highlighted with a brief review of the related design features of national Head Start research efforts. A number of the methodological concerns for an MSHS longitudinal study are of substantial significance and may not be surmountable; prior to any implementation of such an effort, it is recommended that there be limited testing of the feasibility of the longitudinal methods with respect to a MSHS program evaluation. If forced to fit to the standard research molds, it is likely that the resulting data not only would have restricted generalizability, but they actually could misrepresent the MSHS

programs, families, and children. Extreme caution and careful decision making must be used in approaching cross-time questions for MSHS.

This chapter concludes with a discussion of potential strategies for exploring cross-time information that might be obtainable about MSHS programs and the families they support. Procedures are suggested for sample selection, measures, contacting and tracking families, gathering longitudinal data, and data analysis.

15.1 MSHS Longitudinal Research: Challenges Identified

This discussion of the key longitudinal research issues begins with a look at previous Federal, national research efforts. These include research design elements and cross-time methods that would be typical of such studies, as a means of addressing the challenges of assessing diverse programs, staff, children, and families over time. The challenges, however extensive for these studies, do not approach the issues that arise when attempting to measure the complexity and variability of the MSHS programs over time. Section 15.1 concludes with more detailed discussion of each of the MSHS features that reduce the effectiveness of longitudinal methodology.

15.1.1 Longitudinal method features in the context of national research methodologies.

The Head Start Family and Child Experiences Survey. Beginning in 1997, *FACES* has established itself as a periodic longitudinal data collection with a nationally representative sample of children and families drawn from a stratified random sample of Head Start programs. *FACES* provides descriptions of the characteristics, experiences, and outcomes for children and families served by Head Start and observes the relationships among family and program characteristics and these outcomes. While a few Head Start programs serve families year-round, most tend to follow a schedule that is similar to local school schedules (fall to spring). Families typically register in the spring or summer for fall enrollment and remain enrolled in the same program for the entire academic program year that ends before summer. Unlike what occurs in MSHS, many of these children remain in the same program over the academic year and have a relatively similar length of program exposure; therefore, pre-post data are more easily interpretable when children are exposed for similar periods of time. Longitudinal data collection also is easier, as the large majority of participating families usually return to the same local program, making them easier to follow over greater periods of time. This allows the *FACES* researchers to collect consistent and comparable data and to develop a more comprehensive picture of centers and classrooms, and of gains made by children on standardized tests over any set study period. What is not available from the *FACES* longitudinal data is a clear picture of the impact of Head Start exposure on the children and families; for an examination of impact, it would be necessary to have comparison groups built into the *FACES* design. A review of the FACES design reveals three areas that may be particularly challenging for MSHS: the (relative) ease of tracking children, the consistency of the classroom exposure, and the availability of standardized assessment measures. Addressing these issues was not easy within the FACES HS design, but would be even more difficult with MSHS.

The Early Head Start Family and Child Experiences Study (Baby FACES). *Baby Faces* is a recently established Head Start examination, extending the series of ongoing descriptive studies to include EHS. Building on the earlier findings from the *Survey of Early Head Start Programs*, *Baby FACES* uses a similar design to the one described for *Head Start FACES*. Among its main goals are the provision of descriptive information about EHS services; the identification of key

characteristics of families served in EHS; understanding how programs individualize services to meet family needs and how these services are related to child and family well-being; and learning how Early Head Start children and families grow over time. The study uses a longitudinal cohort design that identifies a representative sample of EHS programs and selects two cohorts of families within each program: 1) a perinatal group, and 2) a group with infants about 12 months old. Annual data collections are conducted each spring, until the sample children reach 3 years of age. A supplemental interview about activities related to the transition out of EHS will be conducted with parents when the children are 3.5 years old. This design requires carefully following the infants and children over a set period of time. Within MSHS, the timing of assessments, the variations in exposure to the program services, and the availability of appropriate assessment measures are critical factors in considering a similar cross-time examination. In terms of looking at the impact of the program intervention on families over time, *Baby FACES* has the same limitation as the *FACES* longitudinal data: there is no comparison (non-Head Start) group to match against the EHS children.

Head Start Impact Study (HSIS). The *HSIS*, a Congressionally-mandated study to assess the effect of Head Start services on children's development, was conducted with a nationally representative sample of Head Start programs. Newly enrolled 3- and 4-year old children applying for Head Start were randomly assigned to either a Head Start group (access to Head Start program services) or a non-Head Start comparison group (parents could enroll their children in any non-Head Start services). Data collection followed children through the spring of their 1st grade year. As with *FACES* and *Baby FACES, HSIS* measured children's development over time in the cognitive, social-emotional, and health domains. This information was collected from children, families, and classrooms in the spring of each program year. Again, careful tracking and standardized assessments that were sensitive to development were factors of the design.

The *HSIS* study design did contain a comparison group, allowing for examination and identification of the specific impact of Head Start on families and children The comparison group consisted of Head Start-eligible children who did not receive Head Start services. Given the health and safety concerns for children of agricultural workers, it likely would be even more difficult to limit services for a similar comparison group of eligible children. Additionally, tracking families, finding appropriate assessments, and interpreting the 'impact' of the wide variation in program exposure for MSHS children and families may undermine the functionality of an *HSIS* style research design if applied to an MSHS examination.

15.1.2 Further Examination of MSHS Characteristics and Their Consequences for Longitudinal Methodologies

Key characteristics of MSHS families and programs differ from those of the regional Head Start families that are targeted in these other studies. We believe that these characteristics go beyond 'tracking' factors that impact the ability to follow MSHS families over even short periods of time. It is critical to examine these challenges thoroughly, as they likely could undermine the validity of any cross-time data, and potentially misrepresent program descriptors and effects. In turn, this may lead to inaccurate conclusions and inappropriate policy decisions regarding the MSHS programs themselves. Key issues are defined below in terms of the family and program characteristics that are not easily captured within a standard cross-time methodology.

- **Family Mobility**. A primary population characteristic encountered in MSHS programs but not in regional Head Start is that a majority of the families (about 90%) (Personal Communication, Chief MSHS Branch, February 2007) move several times over the course of a year[1]. Families often need to follow an erratic work and travel schedule as a means of maximizing potential employment opportunities. As a result, arrival at and departure from programs may be abrupt; plans for moving to the next location may change without notice; and communication resources (i.e., cell phones, email) may have limited effectiveness. Tracking these families over time to assess how the child and family progress and their level of participation in other MSHS or HS services runs the risk of being costly and potentially unsuccessful. Migration patterns are not the same for all families within any single center, and are likely to vary from year to year for any particular family. This is compounded by language and other communication issues that result in difficulties in tracking migrant farmworker families over time and across varied work sites.

- **Dosage/Exposure to MSHS**. To assess the potential effects of interventions on children and families, it is necessary for the research team to identify the amount, quality, and intensity of any programmatic experience to which each child is exposed. MSHS programs vary in many key factors, such as their daily schedules, their use of bilingual supports, and their available resources. Therefore, each MSHS program will offer a unique intervention 'dosage,' reflecting the intensity, length, and quality of service children receive. Without accurate dosage information, any longitudinal findings regarding the role that MSHS had in supporting children and families become problematic.

  Partly as a result of the high and sometimes erratic mobility of many farmworker families, there are 1) marked variations in the length of children's enrollment in any given MSHS program, 2) potential exposure to multiple MSHS programs over time, and 3) a lack of standardized (or at least comparable) recording of the frequency and length of services received within and across programs by individuals. As a result of their unique migration patterns, MSHS families not only may enroll in multiple MSHS programs across a single 12-month period, but they also may have multiple periods of up to a month or more during that year when their children are not enrolled in any MSHS or child care program. Efforts to be responsive to families' have resulted in local MSHS program using operational calendars that vary greatly from site to site. Programs' starting and closing dates typically are linked to the timing of local crop harvests and anticipated family migration patterns rather than local academic school calendars. MSHS program operational periods range from a minimum of about 6 weeks to 12 months, with the later being more common for programs serving the more stable population of seasonal farmworker families. The variations in program scheduling were difficult to incorporate into the plan for a one-time measurement study; ensuring the timeliness of a second visit within a program schedule certainly adds an additional level of complexity to the final planning and implementation of the *MSHS Survey*. It also easily could un-

[1] As noted in Chapter 1, the Head Start Act specifically defines MSHS eligibility as those families engaged in agricultural labor who also either changed residences from one location to another during the previous [2] years (migrant farmworkers) or those who have not changed geographical location of their residences during the preceding two years (seasonal farm worker families).

dermine a researchers' ability to interpret any cross-time data collected on MSHS programs.

- **Impact of Being Followed Over Time on Families' Behaviors.** It is suggested that, for migrant farmworker families in particular, frequent, regular contacts would be necessary to successfully track families over time. However, there is some concern that the efforts needed for maintaining regular contact to monitor MSHS family movements may alter certain family behaviors of interest to the study. For example, as they travel, families participating (and receiving incentives) in a longitudinal MSHS study may feel a greater obligation to pursue MSHS services as they relocate, than if they were not in the study. Such influencing of behavior would undermine the study's ability to accurately present data regarding families' natural tendencies and outcomes.

  A different concern that potentially may impact families' behaviors is how the current political climate seems to be fostering a crackdown on immigrants living and working in certain areas of the United States. Because migrant families are likely to be suspicious of the intentions behind the research team's request to follow their movements for a year, the final pool of families that agree to participate may be reduced, and therefore subsequently jeopardize the representativeness of the longitudinal sample.

- **Incentives.** Family incentives are common within previous and ongoing HS and EHS longitudinal work, as it is appropriate to provide families with some compensation for the time and effort that make their participation possible. When the research team meets with MSHS families, we anticipate that participants will again receive appropriate compensation. However, with the high mobility and limited connectedness of migrant families to their short-term communities, it will be difficult to identify appropriate and timely incentives and an efficient means of delivery that will keep families engaged over time in long distance data collection activities, such as telephone interviews.

- **A Comparison Group.** Assessing change 'caused' by MSHS requires a comparison group created through random selection and assignment or other comparably rigorous research design approaches. As noted above, this was done for the *HSIS,* but is not a component of *FACES* or *Baby FACES*. For MSHS, a proper comparison group could be migrant agricultural workers with children under 5 years of age, who are interested in attending and eligible for MSHS, but rather are assigned randomly to a "no-MSHS" comparison group. In this scenario, any differences between the comparison group (those not attending MSHS) and the intervention group (those attending MSHS) could be attributed to the intervention. For the *HSIS*, families (whether for the comparison group or the Head Start treatment group) were only selected from programs that did not have open slots (i.e., there were families that would have been wait-listed). Further, it was expected that the comparison group families for HSIS would identify other childcare and preschool options to attend in their communities. However, preschool education options for agricultural worker families are very limited and the extended supports of the MSHS programs are essential for the ongoing well-being of some families, making it ethically difficult to present families with any additional barrier to MSHS services. Further, even if possible at time one, given the program challenges with maintaining continuity data between centers on families' names and enrollment, it may not be possi-

ble or practical to keep families out of multiple MSHS programs over the course of a year long cross-time study. Therefore, it is neither practical nor appropriate to assign a subsample of MSHS families to a 'non-MSHS' comparison group.

- **Measurement.** *FACES* methodology assesses the gains children make during their time attending specific Head Start programs by measuring the children's skills at the beginning and end of the typical school year. The *FACES* analyses examine whether children make gains towards the standardized average on those skills (as derived from a normative comparison group). However, the validity of such a finding is only as good as the assessments that are used. Unfortunately, at this time, there is a shortage of measures that would a) allow comparisons of MSHS children to an appropriate normative population; b) be valid and evidenced as sensitive to development and varying amounts of MSHS program exposure; c) be appropriate across the MSHS age groups being followed (infants, toddlers and preschoolers), and d) be culturally and linguistically appropriate for the DLL children typically found in MSHS programs.

- **Study Costs**. As with any longitudinal study, there are significant costs associated with tracking and data collection activities. However, longitudinal studies conducted within regional Head Start benefit from program enrollments that are relatively stable and from family mobility that typically occurs within a limited geographic area. Following MSHS families and completing any parent surveys or longitudinal assessments of the children's skills would require much greater use of labor for tracking as well as additional travel to many different areas of the country (and possibly out of country) in order to follow individual families as they relocate from one location to the next in order to engage in farm work. This is in addition to the added cost of bilingual personnel and study materials already required for any study of MSHS.

15.2 MSHS-Specific Longitudinal Research Questions and Approaches

This chapter has emphasized a number of potential obstacles to examining MSHS program evaluation within a longitudinal framework. The desired longitudinal information is potentially costly and, without proper steps, risks the dissemination of questionable data that may misrepresent MSHS programs, children, and families. Given the costly and difficult challenges noted above, why might ACF consider longitudinal data collection for a study of MSHS programs and the families served? After considering a set of relevant research questions, Section IV offers an outline for two potential MSHS-specific longitudinal designs that might yield meaningful cross-time information about programs, families, and children's assessment outcomes.

15.2.1 Investigating MSHS across Time

Gathering information at multiple points regarding child progress towards school readiness as well as the decision-making processes and the resulting mobility patterns of MSHS families over time could provide vital, policy-related information for ACF and OHS that are not available from any other source. This requires methodological advances and measurement development efforts that effectively address the design concerns noted above, such as by developing sustainable methods for maintaining regular contact. In this case, a set of very specific research questions could be targeted within a narrowly-focused longitudinal research design. For MSHS, there are several specific areas where pertinent questions might help justify a longitudinal design:

- **Early childhood development.** *How are MSHS infants, toddlers, and preschoolers developing in domains such as language, early literacy, and socio-emotional behavior?*

    - **Bilingual children.** Longitudinal language assessments could offer: a) needed insights into the reliability, validity, and sensitivity of selected child assessments over time, and b) novel information regarding language features and how those features change over time.

- **Family developmental domains.** *Within the whole-child model of MSHS, how are MSHS families progressing across multiple developmental domains, including family health and well-being, stressors and resources, and parenting and parent-child relationships?*

- **Family mobility**. *How often do MSHS families move? How do they make migration choices? How do parents report being influenced by shifting weather patterns? How do parents report being impacted by their migration?*

  As an example of investigating family mobility, two specific areas of interest that could be addressed are: 1) obstacles and barriers families face in accessing services as they migrate, and 2) surveying family stressors related to mobility, including housing and child care issues at new locations.

  Although it would be expected that most families in a MSHS longitudinal sample would be migrants (based on their high percentage within the MSHS population), these questions raise issues that also are applicable to the seasonal families enrolled in MSHS. Child care, housing needs, and obstacles to services are critical issues that apply to this subpopulation as well, and to date have been the focus of very limited research.

- **Program Continuity**. *How do MSHS programs follow the movements of families? What information is shared across programs? What types of formal and informal networks are established to follow families? How are programs influenced by migration and shifting weather patterns?*

  Within the context of this proposed effort, the project could examine the continuity of MSHS service delivery efforts across local programs, and how child and family-level information, such as health records and family needs assessments, is best shared across programs as families move.

Prior to addressing any of these research questions with a full-scale data collection effort, ACF should consider feasibility work relative to tracking families, completing multiple in-person data collection visits, and the selection of appropriate assessment tools. Tracking methods (not linked to further assessment) were tested on a very small sample in the 2004 MSHS Research Design Development Study (ACF, 2004). Using a smaller sample to provide evidence for the feasibility of long-term data collection with MSHS programs and families could justify future consideration by ACF of targeted, large scale longitudinal studies.

15.3 MSHS-Specific Longitudinal Survey Options

The following is overview information about two longitudinal options, including summary timelines (Table 15.1) and brief descriptions. These options could provide insights into the required methodology for future, large-scale longitudinal studies as well as answers to some or all of the questions listed in the previous section. However, neither of these options would be able to identify the effects of the MSHS program on children's development and family well-being. The two chapters that follow contain the further design details of the two activities presented for consideration by ACF. These include plans that could be integrated into an existing, cross-sectional *MSHS Survey* or implemented independently of the S*urvey*.

Sampling. If integrated with the *MSHS Survey*, a longitudinal option could recruit families from the representative sample of children and families previously drawn for the Classroom /Family/Child Component of the *Survey*. Longitudinal data would be collected from a subsample of the families who completed parent surveys and child assessments (which would potentially serve as baseline data). This makes it possible to link the longitudinal subsample data to the larger set of *Survey* data collected on children, families, and programs. If both the *Survey* and a longitudinal study are pursued together, then it is anticipated that overall study costs could be reduced (when compared to recruiting an independent sample).

Table 15.1 Timeline and Data Collection Activities for Two Longitudinal Options

Longitudinal Option A: A Year in the Life of MSHS Families		Longitudinal Option B: Child and Family Time 2 Feasibility
Month 1	**Months 2 thru 11**	**Month 12**
In- Person Baseline Data* • Child Assessment • Parent Interview • Teacher/Provider Ratings		**In-Person Follow-up Data Collection** • Child Assessment • Parent Interview • Teacher/Provider Ratings • Family Qualitative Interview
	Monthly Telephone Calls • Core Questions: (5-10 minutes) Mobility; Housing; MSHS attendance; Child Care attendance; Health (access to care, status); Service needs; -Child accomplishments • Rotating Questions: (10-15 minutes) Social support; safety; mental health; stressors; nutrition	
Contact with Original Center • Collect Daily Attendance at Center	**Telephone Contact with new MSHS or Child Care Placements** • Gather center level data = proxy measure of quality (30 minutes) • Collect Daily Attendance	**Contact with Final Center or Child Care Placement** • Collect Daily Attendance

*From Classroom/Family/Child Component data collection, if embedded Substudy.

15.3.1 Longitudinal Option A: A Year in the Life of MSHS Families

This longitudinal option would use monthly telephone survey of participating parents that asks about agricultural family life and preschool/child care involvement (MSHS programs and others). Each call would include a small core set of questions about family mobility and then the interview would be completed with a rotating set of quantitative and qualitative questions about other relevant tissues. Conducted over a 12-month period, it is suggested that data collection include telephone interviews with the MSHS programs (or relevant child care settings) that are used by the participating families during the course of that year. Resulting findings could help develop a unique, comprehensive picture of a year in the life of MSHS families that may be useful to both local programs and Federal policy makers.

One primary goal of this longitudinal option would be to assess directly strategies to address the methodological challenges faced in following migrant families. Examination of family mobility and tracking, program variations in scheduling and location, identification and multiple exposures to preschool/childcare/Head Start settings, and reliability and sensitivity of interview instruments would be the primary targets of this approach.

15.3.2 Longitudinal Option B: Child and Family Outcomes

An additional option would be to add direct assessments of child and family 12 months after the *MSHS Survey* baseline data collection. Working with families that were tracked throughout the year, a repeat of the baseline data collection could be conducted, including in-person child assessments and parent interviews (along with staff interviews and classroom observations, if the child is enrolled in MSHS at the time). This could be combined with Option A (ongoing monthly interviews) or it could be pursued without additional data collection across the intervening months.

The primary goal of this longitudinal option would be to examine directly the sensitivity of selected assessment tools to development over time with a bilingual population, and to assess the reliability and validity of those measures. It also allows an assessment of change in parent responses over time to the questions contained in the baseline survey.

The next two chapters expand on these initial thoughts regarding the potential for longitudinal data collection with the MSHS programs and families.

CHAPTER 16

LONGITUDINAL OPTION A: A YEAR IN THE LIFE OF MSHS FAMILIES

All previous Federal studies involving MSHS employed cross-sectional study designs. Given the anticipated challenges and complexities, as well as the unknown factors involved in following migrant and seasonal families over time (discussed in Chapter 15), it is prudent to consider testing the viability of conducting a longitudinal study. However, in conjunction with simply checking the methodology, such a test also is an opportunity to use regular contacts with migrant families to get a picture of what happens to those families over a year.

A subsample of families and children needed for such a study could be selected using the same multi-stage sampling design that was used to select the larger sample of *MSHS Survey* families. However, it could be easier (and less expensive) to select families for the longitudinal study from within the main *MSHS Survey* sample. In addition to the cost savings, if the general survey and the longitudinal studies run concurrently, built in linkages from baseline survey data to the longitudinal sample would provide greater depth to the data.

16.1 Sampling

16.1.1 Sampling Design

The goal of the sampling plan presented for ACF's consideration is to provide a representative subsample of families who reflect the six major migrant strata (i.e., families from upstream vs. downstream programs and from the three major migratory streams) as well as families with children from each of the three age groups served within MSHS (infants, toddlers, and preschoolers). Despite the exploratory aspects of this longitudinal option, given the known variations in the characteristics of the farmworker population and program operations across geographic locations, as well as the age range of children served, it is important to have adequate representation of this variability to fully understand the viability and challenges of undertaking a longitudinal study.

In order to achieve this goal, it is suggested that two families would be selected randomly from each of the 219 classes selected through the same method described for the Classroom /Family/Child Component of the *MSHS Survey* (Chapter 10). Using random selection and drawing from all participating classrooms will help ensure that seasonal families will be included in the longitudinal sample. Given the six geographical strata, the three age groups, and the unknown variable of how many families will be successfully tracked or lost to follow-up through a 12 month period, a sample of 438 is suggested (24 per strata/age group at baseline). It is anticipated that this number will help account for the unknown (but assumed high) attrition within the group over the 12 months and allow the inclusion of seasonal families into the substudy.

A brief summary of the first four sampling stages is below.

Stage 1: Select a nationally representative, random sample of programs

- A stratified, random sample of 24 programs would be selected from the total universe of 62 programs.

Stage 2: Select a sample of centers from each selected program in the sample

- A total of 73 centers from the 24 programs would be selected and allocated proportionate to the number of centers in each program.

Stage 3: Select a sample of classrooms from each selected center

- Three classrooms (one classroom for infants, toddlers and preschoolers, respectively) within each selected center would be selected, resulting in a sample of 219 classrooms.

Stage 4: Select a sample of children (and their families) from each selected classroom

- Two students would be selected from each of the 219 classrooms. (If the longitudinal study is embedded within the *MSHS Survey* methodology, the 2 students would be randomly selected from the 8 students identified for the *Survey* data collection.) If a selected family does not wish to participate in the longitudinal options, a replacement family would be randomly selected from the remaining families in the same class of children.

The likely distribution of the 438 randomly selected families across the six geographic strata is displayed in Table 16.1.

Table 16.1 Estimated Distribution of Families across the Six Sampling Strata

Stratum	Centers	Families
Northeast	1	6
North-Central	4	24
Northwest	17	102
Southeast	8	48
South-Central	28	168
Southwest	15	90
Total	**73**	**438**

16.2 Measures

The primary data collection strategies for this option would consist of monthly telephone interviews with parents and interviews with child care providers. The interviews could be designed to gather information regarding:

- Key factors related to family mobility, such as timing and location;

- The feasibility of maintaining contact with MSHS families over time, as they move to different locations;
- Ongoing reports of health care, child care, housing, and family well-being in different communities; and
- Barriers and facilitators to establishing child care, including continued participation in MSHS.

Each of these interviews could serve a dual purpose by 1) providing meaningful details to ACF and OHS about what families encounter over a year, while 2) informing the study design for future MSHS longitudinal follow-up study efforts. Particular care could be taken to gather information about local efforts to promote continuity across MSHS programs when families migrate to a different MSHS service area.

16.2.1 Monthly Telephone Interviews with Parents

We suggest that monthly telephone interviews of approximately 5-10 minutes in length be conducted with the MSHS parents. The interview length that would seem most comfortable and non-demanding for families while yielding useful information could be decided in start-up focus group discussions with parents. For each monthly call, there could be a core set of questions related to the family's employment and housing status, child's health and developmental status, and current child care setting (MSHS or otherwise). For migrant families, questions also may include asking about how MSHS programs may have facilitated finding and enrolling in subsequent MSHS programs, as well as potential barriers or obstacles to finding child care in a new location.

Every three months, the regular monthly parent interview call could be lengthened to include an additional set of questions on a topic of particular or timely interest to ACF. These additional topical questions could provide the possibility of examining factors related to MSHS families' well-being, relevant decision-making, and (for migrant families) mobility over the course of the year. For example, when considering mobility factors, additional questions may be asked about the role that extended family and/or other social support networks play in relation to the timing, location, and other factors associated with their decisions regarding when and where to relocate. Similarly, additional questions may focus on extending knowledge regarding health and mental health factors that are salient to migrant farmworker families, including migratory stress, acculturation, depression, substance abuse, and community safety, among other factors.

The same data collection measures and schedule should be used with the seasonal families that are in the longitudinal option, to ensure the data they provide are comparable to that provided by the migrant families.

16.2.2 Telephone Interviews with Teachers/Providers

The longitudinal design also could include telephone interviews with the teachers, family service workers, or other child care providers that are currently providing services. While center-level information may be available from the initial *MSHS Survey*, these provider telephone interviews would yield additional information on the background of the teachers/providers, the quality of the classrooms, and key information on specific children's attendance, experiences, and functioning. This approach would test the feasibility of gathering such information consistently across child care settings. The goal would be to capture enough basic information on the

type, amount, and quality of any additional care experiences that children receive during the longitudinal follow-up period to effectively consider 'dosage' questions in future cross-time studies. It is suggested that such telephone interviews be approximately 15-20 minutes in length, ensuring enough time to gather valid information about program quality. If multiple children in the longitudinal option move and enroll in the same classroom or center, then teachers would likely have to answer many of the questions only one time.

The teacher/provider telephone interviews could address the following primary areas of interest:

- Teacher/provider's education, background characteristics and qualifications;
- Teacher beliefs, such as philosophy of education and child development, appropriate program goals for families and program success in achieving those goals;
- Classroom practices, such as curriculum, classroom instructional approaches, and language(s) of instruction;
- Any efforts to provide continuity of care and instructional experiences for the children across different programs or care settings.

16.3 Recruitment and Data Collection

16.3.1 Recruitment

Following the selection of families under an approved sampling plan, families need to be recruited into the longitudinal study. For an independent longitudinal study, we suggest using strategies similar to those outlined in Chapter 12 to recruit families into the *MSHS Survey*. An On-Site Coordinator (OSC) could recruit the families selected for the longitudinal option by providing a *full, appropriate* explanation (including use of a video) of the additional requirements and presenting them with an informed consent form, if they agree. If for some reason the family was not available for their baseline assessment during the data collection visit, a replacement family could be recruited on site.

If the longitudinal Substudy is linked to the main *MSHS Survey*, the OSC will be responsible for ensuring the differences between the two components are clear. Families declining to participate in the longitudinal Substudy will still have an opportunity to participate in the main survey.

16.3.2 Data Collection

As noted in Table 15.1, this option was designed so that the *Survey* could have up to three primary data sources that inform MSHS about what happens during a year in the lives of the families they serve.

1) **Baseline Data Collection**. Based on ACF's decision, the baseline dataset could include parent and center-based staff interviews, child assessments, classroom observations, and/or teacher-child reports. For an independent longitudinal study, a similar, but abbreviated set of baseline measures would be recommended, based on the data collection strategies described for the Classroom/Family/Child Component (see Chapter 11 for procedures).

2) **Monthly Telephone Interviews**. The suggested strategy is for families to be contacted monthly for a very brief telephone interview to gather ongoing information on the families' location and other key issues. The use of computer assisted telephone interview (CATI) software would reduce the cost of data collection and data entry. As discussed in Chapter 7, CATI surveys have three main benefits: (1) they can be customized to provide prompts based on previous answers and to use complicated skip patterns, (2) the potential for missing data is reduced, and (3) additional data entry is not required later. In addition, when qualitative questions are asked, the interviewer can enter the responses directly into the data file, which subsequently can be uploaded into qualitative data analysis software for content coding and analysis.

   Consultation with the MSHS Community Consultant Group and MSHS parents confirmed that most MSHS families have cell phones. However, the majority of the calls to parents should be brief (no more than 5-10 minutes in length) with primarily close-ended questions. Care must be taken to frame the questions simply while limiting questions that require Likert-like scale responses. As noted, a slightly longer interview could be conducted every three months to gather more in depth information via the addition of some qualitative questions.

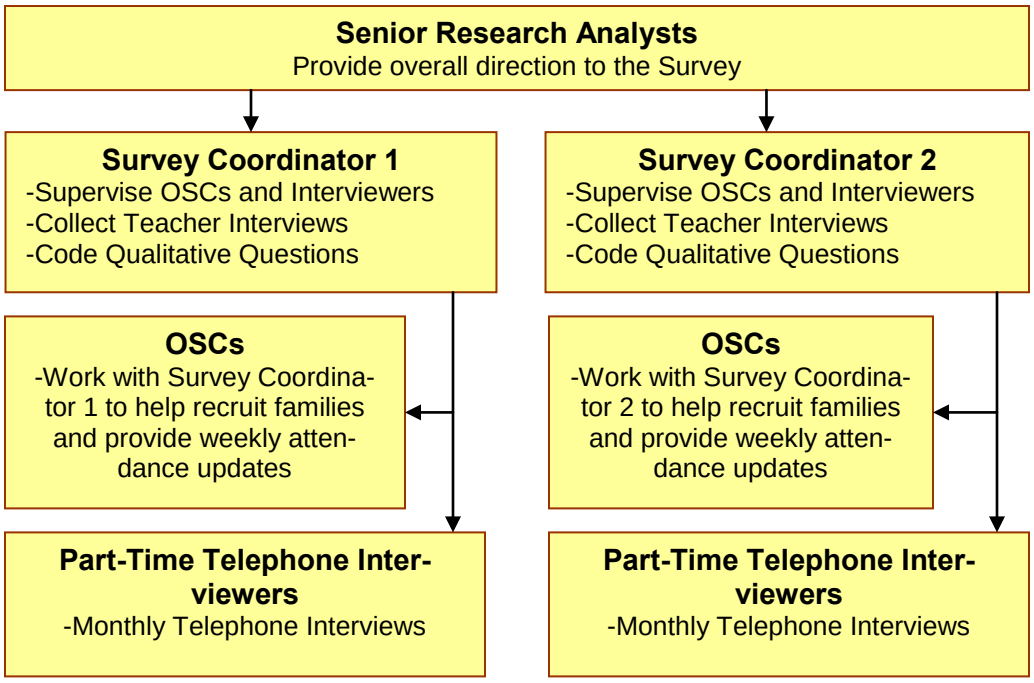
3) **Teacher or Child Care Provider Interviews.** During the year, the MSHS migrant families most likely will move to another region to harvest crops and attend another MSHS center or other child care provider. Once such a transfer has been identified during the monthly interviews, a call could be placed to the new care provider to gather teacher- or provider-reported quality indicator information, as well as request that weekly attendance be provided on the target children to estimate the 'dosage' of care or early childhood education the child is receiving during his or her stay at this facility. These interviews, covered under the longitudinal study informed consent already provided by parents, also could be conducted by the Survey Coordinators using CATI and would last no more than 20 minutes.

16.3.3 Qualifications and Responsibilities of Staff for *MSHS Survey* Longitudinal Option A

For any study of MSHS, any project staff working directly with the families must be bilingual as well as knowledgeable about not only the agricultural farmworker community, but also about the MSHS program. They must be able to communicate well with MSHS families and staff, not only by presenting a pleasant and professional demeanor, but also by demonstrating an understanding of the culture of MSHS communities, including respect, warmth, and inherent interest in others' well-being. Given this range of needed knowledge, all *Survey* staff must be trained extensively along these dimensions (as described in Chapter 12).

Exhibit 16.1 presents the overall staffing structure and data collection responsibilities for the family mobility (Option A) data collection. A brief description of additional responsibilities specific to the longitudinal activities follows the exhibit.

Exhibit 16.1 Recommended Staffing Positions for Longitudinal Option A



Senior Research Analysts. Senior Research Analysts would continue to be responsible for overseeing the scientific integrity and conduct of the study.

Survey Coordinators. Survey Coordinators would coordinate the overall day-to-day activities of the longitudinal work. Each would be assigned 12 programs (and approximately 36 centers) and 219 families to manage. Coordinators' additional responsibilities for Longitudinal Option A would be to:

- Supervise the recruitment of the families and staff with collection of informed consent by the OSC -- verify all consent forms have been received prior to the visit
- Ensure the overall quality of data collection
- Develop a schedule for the monthly telephone calls
- Supervise the part-time telephone interviews
- Coordinate the payment of monthly incentives
- Coordinate the receipt of monthly attendance data by OSC(s)
- Conduct interviews with MSHS and/or child care facility staff via CATI as each family moves to a new placement
- Content code the qualitative questions on the monthly interviews

On-Site Coordinators. OSCs are MSHS staff members who could serve as liaisons between the Survey Team and the MSHS programs and families where they work. For this family mobility work, the OSC could work closely with the Survey Coordinator to:

- Recruit sampled families into the longitudinal study
- Serve as a resource for parents who might have questions about the study

- Collect completed and signed informed consent forms from sampled parents/ guardians
- Collect monthly attendance on all children in the sample and submit these data each month to the Survey Coordinator via a web-based data entry system, electronically (email), or by fax if an internet connection is not available

Telephone Interviewers. Telephone interviewers must be fluently bilingual and able to work in the evenings and on weekends. Whenever possible, interviewers should be consistently assigned to a family to establish and maintain ongoing rapport with the family. Recruiting a stable, part-time interviewing staff would be important. It is estimated that twenty-four part-time labor hours per week would be needed to complete on average eight interviews weekly over the course of a 12 month data collection

16.3.4 Incentives

Providing participating families a monthly incentive is a must for longitudinal studies that require ongoing consistent efforts from busy families. However, the mobility of MSHS migrant families requires an innovative system for delivering incentives to the participants in a timely manner so it may have the intended effect. Families do not have consistent addresses to which a check could be safely sent, and even if that could be arranged (for example a post office box in a neighboring town or a relative's address), cashing checks is often difficult for a low-income family who may not have a bank account. Gift cards, although useful, require that the family is located near the store from which it is obtained. Given the remote locations of some of the farming communities this may not be feasible. Therefore, the *MSHS Survey* team suggests providing the family with a prepaid credit card that can be used anywhere that credit cards are accepted and to which money can be periodically added by the contractor via the internet. A suggested monetary incentive structure could be:

- $10 for each regular 5-10 minute monthly telephone interview completed (7 = $70)
- $15 for each enhanced 15 minute monthly telephone interview completed (3 = $45)
- $10 per week to a center OSC (when child is attending a center or facility) for collecting and submitting weekly attendance data.
- $5 project tote bag given to staff that completes the center-level interview at new centers.

16.4 Data Analyses

This section addresses the approach and analysis of *MSHS Survey* data for Longitudinal Option A: A Year in the Life of MSHS Families. This includes a discussion of the goals of the longitudinal analyses, challenges relevant to the design of this analytic plan, and the specific analytic approaches.

16.4.1 Goals of the Analyses for Longitudinal Option A

The goals are two-fold: 1) provide the results related to the feasibility and success of engaging in follow-up studies with MSHS children and families via monthly telephone calls and 2) provide the results of the substantive family information being gathered over the 12 months via telephone calls.

16.4.2 Considerations Relevant to the Design of the Analytic Plan for Longitudinal Option A

This section reviews the considerations for approaching data analysis from the first longitudinal option. Some of these considerations are specific to working with the MSHS population and this study, while others are typical for research designs such as this. In each case, we have provided detail regarding solutions or options to consider in addressing these challenges.

Repeated Data vs. Unique Data. A mix of data could be yielded from undertaking Option A. As described in the measures section, some questions could recur from month to month (thus providing multiple data points) while others could be unique and only asked in a particular month to provide a snapshot perspective on an issue. Thus, the analyses utilized could be largely descriptive but also will involve repeated measures for the quantitative items. Because qualitative data also are being collected, suggested approaches for these sets of data include identifying recurring themes across the qualitative responses.

Missing Data. Over the course of a year, two main types of missing data may appear in the dataset. The first relates to participants being "lost to follow-up" over time. Here, contact with some families may become permanently discontinued regardless of the efforts incurred (e.g., cell phone, loss of relative contact or program contact). Further, cases in the dataset may have varying "last point of contact" data; for some it could be the end of the study, while for others this may occur 2, 4, or 8 months into the year.

A second likely type of missing data in Option A relates to inconsistent completion of monthly calls. In these cases, the dataset probably would be comprised of some families who engage in all of the calls, while some may miss the calls once or twice (or more). Further, for some families, this missing data would exhibit a pattern (e.g., missing every other one; missing the calls made in the winter when the daily work schedule is shorter), while no pattern may be apparent for other families.

From one perspective, the missing data actually provide useful information for the first overarching goal regarding the feasibility and success of engaging in longitudinal studies with the MSHS community. However, when examining the data from a substantive perspective (Goal 2), such missing data can present a barrier. There are two primary approaches that may be utilized: 1) Imputation and 2) Varying the response periods. First, there may be opportunities to conduct logical imputations of missing data given that some of the basic questions may not change over time for families. However, imputation can not be conducted in all circumstances and attention will need to be paid to the percentage and type of missing data, particularly given the high mobility within this population. Second, an alternative approach that was used in the FACES Case Study (ACF, 2001) is to create samples with sufficient data to report over specific "windows" of time. For instance, the FACES Case Study monthly telephone contact data was analyzed with three separate windows– those that had 3 or more contacts within a 5 month window, those that had 5 or more contacts in a 7 month window, and those that had 8 or more contacts in a one year window. This approach allows the analyses to address research questions with reasonable degree of stability in terms of missing data within an established frame or window of time.

16.4.3 Data Preparation and Analytic Approaches

This section describes our general approach to the analysis of Option A. As in previous analytic chapters, we first describe data preparation and then specific analytic approaches.

Data Preparation Procedures. Prior to beginning analyses, preparation of the data must include these standard procedures described below, with the first two steps being similar to steps presented in prior analytic chapters (Chapters 8 and 13).

- Label variables and values
- Code missing data
- Create composite variables

Label Variables and Values. Every variable in every data set, original and newly created, should be labeled. This will involve attaching a meaningful description of each variable, so that each variable is readily identifiable. In addition, each value for a given variable should be labeled.

Code Missing Data. We anticipate two types of missing data to arise, even after repeated attempts to collect the data. Unit non-response occurs when an entire data instrument is not received (in this case, participants skipping a monthly call in its entirety). Item non-response results from the situation where an instrument is completed but one or more items on the instrument is missing (in this case, participants responded to some questions but not all of them). It is suggested that unit non-response be given important consideration for the *MSHS Survey*, as such missing data may be significant within the MSHS population, given their high rate of mobility.

Create Composite Variables. Composite variables that come from the substantive portions of the data will need to be created. This would include items such as the total number of reported moves per year, as reported across all the monthly calls. Further, composite variables could indicate patterns of successful tracking. For example, determining the proportion of completed calls or the number of attempts per call will yield important findings for future studies.

16.4.4 Analytic Approaches

Below, example research questions that might be addressed by Longitudinal Option A and the corresponding analytic approaches are reviewed:

Example Question 1: *What percentage of the participants discontinue from the study (e.g., are lost to follow-up)? At what time and geographic point over the course of the year are they most likely to drop-out?*

A variety of analyses may be utilized to provide answers to this question. For example, descriptive statistics may be utilized to provide the overall mean and standard deviation from month to month. T-tests and other analytic statistics can be then used to test for differences that may occur among all the participants as related to time of the year or season, as well as test for differences between participants to examine whether there are characteristics of families or programs relating to successful follow-up (e.g., age of children, area of the country). Further, if retention in the study yields adequate numbers of families, advanced statistics such as survival

analysis may be utilized to determine whether there are significant patterns or profiles associated with those families that drop out of the study relative to those that remain.

Example Question 2: *To what extent do families keep and use their cell phones over the course of the year? For those that do not, what other communications methods are used?*

Example Question 3: *Where do families move over the course of the year?*

Both of these questions could best be addressed using basic descriptive approaches. For example, both means and frequencies can be used to provide overall pictures of the families in these domains.

Example Question 4: *What patterns could be identified in where and why MSHS families migrate?*

Example Question 5: *What lessons can be learned about MSHS families' responses to questions about health, safety, housing, child care, and others over time?*

To address these example questions, three analytic approaches can be utilized. In the first, basic descriptive statistics present the general results in the data. Tables may be used to list the reasons reported by parents for their moves or for their health and housing experiences, as well as the relative frequency of their endorsements. Second, analyses such as T-tests and ANOVAs can be used to examine whether key covariates such as children's age and others relate to the findings. Further, discriminate function analyses and logistic regression approaches could determine significant predictors or patterns of variables predictive of whether and when a family moves and if they enroll their child in MSHS again over the course of the year, among other predictions. Finally, approaches such as person-centered analyses in M-PLUS can be utilized to examine whether there are specific profiles of families (e.g., unique *combination* of predicting variables) that differentiate mobility, engagement in MSHS or child care, and other substantive experiences.

Further contributing to this question is the qualitative data analysis of responses provided by families to the questions presented in the longer calls occurring every three months. Patterns in MSHS parents' rich descriptions about their experiences over the course of a year could be identified using the team-analysis approach and specialized software, both of which were described in the analysis plan for the Classroom/Family/Child Component (Chapter 8).

CHAPTER 17

LONGITUDINAL OPTION B: CHILD & FAMILY OUTCOMES FEASIBILITY STUDY

The suggested plan for Longitudinal Option B is a feasibility study to assess child and family outcomes, and consists of in-person assessments of children and families at two points in time, once at their baseline MSHS program and once 12 months later (wherever the family is located). As proposed, Option B could be pursued independently of other survey activities, it could be embedded within the main *MSHS Survey*, or it could be completed in conjunction with Option A (Chapter 16).

With this option, child and family assessments would be collected at baseline from families identified within their original MSHS programs. If not pursuing Option A, the families could be called consistently over 12 months solely to maintain contact information (no additional survey questions). The second round of in-person, follow-up child assessments and parent interviews then could be completed with those families that the research team successfully maintained contact over the 12 month period. Data collected at baseline and 12 month follow-up could include direct child assessments, parent and staff interviews, teacher-child reports and classroom observations (if the child is enrolled in a child care setting, be it MSHS or other).

Clearly, Option B easily could be embedded within the overall *Survey* and/or the Longitudinal Option A activities described in the previous chapters. If conducted in coordination with these activities, it would be relatively simple to integrate the management, staffing, and overall cost of this longitudinal assessment module with the other ongoing work, as opposed to implementing this project independent of the other *MSHS Survey* activities.

The goals of the Child and Family Outcomes Feasibility Study are linked primarily to measures of child development and their ability to assess development within the MSHS target population. These goals include the following:

- Assess the sensitivity of the selected measures in assessing child development
- Assess the reliability and validity of the selected measures over time
- Assess strategies for considering children's bilingual language development over time
- Assess growth in parents' abilities to locate and access services for their families and advocate for their children
- Assess the effectiveness of attempting to maintain contact with families over time

17.1 Sampling

17.1.1 Sampling Design

Similar to the sampling plan presented for Longitudinal Option A, a subsample of families should be drawn from the major six strata (families from upstream/downstream programs and

from the three major migratory streams) as well as representing children from the three age groups represented at MSHS (infants, toddlers, and preschoolers). As noted before, despite the exploratory nature of this longitudinal option, given the known variations in the characteristics of the farmworker population and program operations across geographic locations, as well as the distinct age range of children served, it would be important to have adequate representation of this variability to fully test the viability of conducting a larger longitudinal study in the future.

Similar to the approach suggested for Option A, two families would be selected randomly from each of the 219 classes selected through the method described in the Classroom/Family/Child Component (Chapter 10) to participate in the longitudinal modules. Given the six strata, three age groups, and the unknown variable of how many families continue to be tracked at the end of a 12 month period, the same sample size of 438 is suggested (24 per strata/age group). Should the research team be successful in maintaining contact with these families, this sample will allow the data collected during the follow-up to be used for making scientifically-sound judgments' about the sensitivity, reliability, and validity of the measures that are used. However, it is anticipated that a significant number of families will be lost to follow-up. A sufficiently sound sample size should yield sufficient information on both successes and failures in the tracking activities.

If the data collection is conducted independently of the Classroom/Family/Child Component data collection and Option A, all five steps documented in Chapter 16 could be implemented to yield the suggested sample. However, if the study is to be embedded within the Classroom /Family/Child Component sample, then only the Stage 4 would need to be implemented. Finally, if Option B is conducted in conjunction *with* Option A, the sample drawn for the latter would be sufficient to serve both options.

17.2 Measurement

17.2.1 Child Assessments

At baseline and 12 months, a similar set of direct and/or indirect infant and child assessments could be administered in both English and the child's home language, as appropriate. The measures recommended for the *MSHS Survey* for children and families would generally be considered appropriate for Option B, drawing from the work on child assessments presented in Chapter 11. In order to ensure the greatest possible degree of continuity and comparability of the data, individual children should be administered the same instruments at follow-up that were used with them during the baseline data collection.

A set of recommended child measures is summarized below in Table 17.1 for infants and toddlers and in Table 17.2 for preschool age children. They represent possible measures for each of the five key domains of school readiness as recommended by the National Educational Goals Panel (Goal One Technical Planning Group 1991 and 1993):

1) Cognitive development and general knowledge;
2) Language development and emergent literacy;
3) Social and emotional development;
4) Physical well-being and motor development; and

5) Approaches to learning.

Each domain includes a mix of direct and/or indirect measures for the respective group of infants, toddlers, and preschool-aged children. These measures are prepared in both English and/or Spanish, including information collected from rating scales completed by parents and teachers. Although it may be best in a full scale longitudinal study to recommend an even broader set of assessments, the exploratory nature of this longitudinal Substudy (Option B) makes it possible for ACF to consider employing a shorter, more streamlined set of measures.

Table 17.1 List of Suggested Infant & Toddler Child Assessment Measures

Infants & Toddlers (0-3 years)			
Measure	**Topics/Areas covered**	**R***	**Time in minutes**
Parent-report			
Report of language(s) used at home	Primary/dominant language, home language and literacy activities, etc.	P	5
Ages & Stages (ASQ-3)	Developmental screening: communication, gross/fine motor, problem-solving, personal-social functioning	P	10
MacArthur-Bates CDI/IDHC - short forms (for children > 12 months)	Receptive & expressive language and communication skills (in Spanish & English, as appropriate)	P	10
BITSEA (only for children > 12 months)	Social-emotional and behavioral problems and/or delays, or deficits in social-emotional competence	P	10
Observer Rating			
Toddler Attachment Sort-45 - TAS-45	Assesses children's attachment/relationship to parent (e.g., security, dependency, and sociability) on the basis of observations	O	10
Teacher ratings			
Ages & Stages (ASQ-3)	Developmental screening: communication, gross/fine motor, problem-solving, personal-social functioning	T	10
MacArthur-Bates CDI/IDHC - short form (for children > 12 months)	Receptive & expressive language and communication skills	T	10

Note: * R = respondent for each of the respective measures listed (e.g., C=direct child assessment; P=parent report; T=teacher report; O=observation).

Table 17.2 List of Suggested Preschooler Child Assessment Measures

Preschoolers (3-5 years)			
Measure	**Topics/Areas covered**	**R***	**Time in minutes**
Assessment			
Report of language(s) used at home	Primary/dominant language, home language and literacy activities, etc.	P	5
2 Pre-LAS subtests	English & Spanish screeners - to help determine primary language/language dominance	C	8
Speed Dial developmental screener (*primary language*)	Developmental screener: Language, concepts, motor, social & self-help	C	15
PLS-4 -Auditory Comprehension (primary language)	Assesses the ability to understand receptive vocabulary, morphology, syntax, investigative language skills, phonological awareness, and a variety of additional concepts.	C	15
Letter naming (conceptually scored)	Pre-literacy development, letter identification	C	5
ROWPVT-SBE (conceptually scored) (for 4-5 yr olds only)	Receptive language across both English & Spanish	C	15
ECLS-B Math (conceptually scored)	Cognitive Development: Math concepts	C	6
WJ-III - Picture Vocabulary (English)	Expressive language development & lexical knowledge	C	5
Observer Rating			
Leiter-R Examiner Rating Scales	Cognitive Development: Assessor rating of children's attention, activity level, and sociability	O	5
Parent-report			
MacArthur-Bates CDI/IDHC - short forms (for 3 yr olds only)	Receptive & expressive language & communication skills (English & Spanish)	P	10
Preschool Kindergarten Behavior Scales–2 (PKBS-2) - *adapted*	Rating positive social skills	P	5
Social Skills Rating System (SSRS)	Rating problem behaviors (shortened 10-item version from F5LA UPCOS study)	T	5
Teacher ratings			
MacArthur-Bates CDI - short forms (for 3 yr olds only)	Receptive & expressive language & communication skills (English & Spanish)	P	10
Preschool Kindergarten Behavior Scales–2 (PKBS-2)	Rating positive social skills	T	5
Social Skills Rating System (SSRS)	Rating problem behaviors (shortened 10-item version from F5LA UPCOS study)	T	5
Preschool Learning Behaviors Scale	Learning behaviors across 3 factors: competence motivation, attention/persistence & attitudes toward learning	T	5

Note: * R = respondent for each of the respective measures listed (e.g., C=direct child assessment; P=parent report; T=teacher report; O=observation).

17.2.2 Parent Interviews

Under implementation of Option B, parent interviews could be administered at both baseline and 12 months to the primary caregivers of the MSHS children who are in the follow-up sample. Similar to the baseline interview suggested for the *Survey* in Chapter 11, parents could retrospectively report on their participation in language, literacy, and other learning activities in the home and MSHS program(s) over the past 12 months, their communication with the teacher(s) and MSHS staff in the various programs, their perceptions of the program's understanding of their home language and culture, and their perception of the responsiveness of the MSHS program to their needs, among other areas. Parents also could report about whether and how the MSHS program might have helped facilitate finding and enrolling in another MSHS program, as well as potential barriers or obstacles to finding a new care setting. Similarly, parents could be asked about the continuity and receipt of other relevant services in their new location and whether MSHS played a role in the transfer of records or other information to the new service providers.

17.2.3 Teacher/Provider Interviews and Ratings

Teachers (or other care providers for MSHS study children enrolled in other types of care settings at the time of the follow-up assessments) could be administered the *MSHS Survey* teacher interview and asked to complete ratings on the study children. The teacher interview and ratings could address the following areas of interest:

- Teacher/provider's education, background characteristics and qualifications;
- Teacher beliefs, such as philosophy of education and child development, appropriate program goals for families and program success in achieving those goals;
- Classroom practices, such as curriculum, classroom instructional approaches, and language(s) of instruction;
- Efforts to provide continuity of care and instructional experiences for the children across different programs or care settings;
- Teacher's/provider's efforts to facilitate children's transitions both from prior programs or settings, as well as to new programs when their families relocate (e.g., contacting prior program that the child was enrolled in or program where the family is moving, recordkeeping, etc.).
- Teacher's/provider's reports on children's attendance; and
- Teacher's/provider's ratings of children's behavior and functioning.

17.2.4 Classroom Observations

Observational methods could assess both the structure and processes of the classroom, such as the type and range of instructional learning opportunities (in both English and Spanish, or other languages, as appropriate) and teacher-child interactions. Comparable observational measures to those used at baseline helps allow for comparisons of the similarities and/or differences in classroom quality across the different programs that the children attend over a year's time.

17.3 Recruitment and Data Collection

17.3.1 Recruitment

If ACF chooses to implement the Child and Family Outcomes Feasibility Substudy, the recruitment strategy applied would vary depending on what other *MSHS Survey* options are pursued by ACF. Families already recruited and consented to participate in the *MSHS Survey* and/or Longitudinal Option A would only need to have the Onsite Coordinator (OSC) collect additional informed consent relative to the data collection activities of this Option. If the Option is managed independently of the other data collection options, the OSC would need to recruit families from scratch and collect signed, informed consent from parents prior to the baseline data collection, using strategies detailed in Chapter 12.

17.3.2 Data Collection

This option requires data collection conducted at a minimum of two time points: baseline and follow-up (12 months later). Both data collections would be in-person assessments of the children and families successfully maintained in the sample. The types of information collected and the methods used could mirror the data collected for the general *MSHS Survey*: parent and staff interviews, child assessments, classroom observations and teacher-child reports (See Chapters 11 and 12 for details of suggested methods). In addition, a 20 minute qualitative interview could be conducted with the family to gather family perspectives regarding changes the families experienced from baseline to follow-up.

17.3.3 Additional Staffing for Longitudinal Option B

In addition to the staff positions and responsibilities presented in Chapter 16, a field staff of child assessors and parent interviewers would be hired for this data collection component if ACF decides to implement this option. As discussed in Chapter 12, experienced, professional, locally hired bilingual field staff with prior experience conducting these assessments would be rehired (ideally data collection staff already trained and used in the Classroom/Family/Child Component would be hired), trained, and certified to conduct the final direct assessment of preschool children *and* toddlers (the recommendation for infant assessment is via parent report) and observations of classrooms. The primary characteristics considered should be previous experience, language skills and cultural competence, location, and available work time.

Table 17.3 offers an estimate of the number of families that could be assessed each month. It is suggested that two or three person data collection teams be used to conduct these final assessments. What is unknown is the retention rate of the families in the Substudy after one year. Depending on the number of families successfully tracked over the year and their final locations, ACF would have the option of assessing all or assessing a subsample to test the feasibility of this method.

Table 17.3 Estimated Percentage of Sampled Families to be Assessed per Month

Month Follow-up Data Collection Estimated to Begin	Estimated Percent of Sampled Families to be Assessed at 12 Month Follow-up	Estimated Number of Sampled Families to be Assessed During Month at 12 Month Follow-up
April	4%	18
May	15%	66
June	19%	84
July	25%	108
August	8%	18
September	9%	36
October/November	1%	6
December	10%	42
January/February	6%	30
March	2%	12

16.3.4 Incentives

Incentives for the final assessment should mirror those given at baseline, with an additional incentive provided if parents complete a 20 minute qualitative interview. Incentives should be similar to those described previously:

- $25 cash for primary care provider interview (generally mother).
- $10 cash for secondary care provider interview (generally father);
- $2 to $3 cloth books or sturdy cardboard books (age-appropriate) for each assessed child;
- $25 gift card or educational materials for the classroom or care setting of the participating child (if child is in a MSHS center or other non-Head Start child care facility);
- $5 per child to teachers for completing behavior ratings of participating children in their classrooms (if applicable);
- $5 canvas tote bags with *MSHS Survey* logo for staff; and
- $50-100 per center for preparing dinner during evening interview sessions (dependent on numbers of families selected for interviews), if allowable under the contract.

17.4 Data Analyses

The final point of discussion is the approach and analysis of the Child and Family Outcomes data for Option B. This includes a discussion of the goals of the longitudinal analyses, challenges relevant to the design of these analytic plans, and specific analytic approaches.

17.4.1 Goals of Analyses for Longitudinal Option B

As noted above in Option A, the goals are two-fold: 1) provide the results related to the feasibility and success of engaging in year-end follow-up studies with MSHS children and families for in-person data collection activities, and 2) provide the results of the substantive information gathered about MSHS children and family development over the course of a year with interviews and assessments.

17.4.2 Considerations Relevant to the Design of the Analytic Plan for Longitudinal Option B

As in Option A, some considerations are specific to the MSHS and this study, while others are typical for research designs such as this. In each case, we have provided detail regarding solutions or options to consider in addressing these challenges.

Names. Many MSHS families use the traditional Latino conventions for their own names and those of their children. This often results in individuals having four or five given names, rather than the two or three in mainstream American society. For example, a child may be named María Sofía Barrueco López, rather than Sofía María López, where there is only one last name and the child's common name is used as a first name. It is important that the database have enough columns to accommodate multiple entries for names. This is essential in the baseline database as well as the longitudinal database. Beyond the creation of the database, the use of traditional names can make tracking and matching children and families at different centers across the country over time difficult. Because many MSHS electronic systems may use typical enrollment systems for Head Start which have more limited entries for names, a Family Service Worker at one center may enter a child with their formal saint name and last name as "María López" while another may go by the child's everyday name that matches mom's last name because she may be the one enrolling the child ("Sofía Barrueco"). As such, the same child may have two different first names and last names listed in the Head Start enrollment paperwork, making the tracking and matching task difficult. Further, the same issues may occur for the parents' names. Another consideration is that children with similar names likely will be enrolled across the country, particularly if one only looks at first and last names (e.g., José López). Because of these concerns it is important for the *MSHS Survey* to create matches using birthdates of the children and their parents, while checking names against one another.

Varying Program-level Data. The fact that the non-seasonal families have a high probability of being in multiple programs, centers, or classrooms over the course of the study (i.e., dosage variations) presents an analytic challenge. Although the goal of this proposed longitudinal option is not to examine the influence those contexts may play; they will need to be incorporated into the models in order to accurately partial out child development and measurement considerations. There is an emerging literature addressing these sorts of analytic problems using multilevel cross-classification random effects modeling approaches (Goldstein, 1995). Such approaches allow multilevel analyses, within certain limits, to incorporate natural shifts or cross-classifications between higher units of analysis (e.g., children shifting classrooms, centers, or programs) which can be somewhat common in repeated measures situations. This promising area of analytic expertise would have to be approached well in advance with experts in the field to determine the feasibility and limitations of such an approach with these data as well as their recommendations that ultimately may impact the data collection activities.

Varying Time Intervals. As is typical in any longitudinal study, follow-up interviews and assessments could be completed with some participants as scheduled and others may take longer to set up and complete. As such, the time interval between pre- and post- is expected to vary widely in this population. In many studies, families that complete the second time point are often those that are less stressed and more resourced than families that may necessitate more persistence in completing the follow-up. In addition to these differences, the varying time intervals are important to consider as developmental changes may be occurring during this period that may confound the data. To address this analytically, potential differences or con-

founds should be examined by running correlations between key demographic characteristics, performance of measures from the first time point, and a variable indicating the time interval.

Data Preparation. The general approach to the analysis of Option B data begins with the steps for data preparation (as described in Chapter 16), followed by application of the specific analytic approaches (discussed below).

Analytic Approaches. What follows are examples of research questions relative to Option B with a review of the corresponding approaches.

Example 1: *What percentage of families engaged in the follow-up interviews and assessments? What characteristics/factors about the child, parent, and program predicted engagement from the first data point?*

What baseline characteristics predicted later withdrawal or loss of contact with families over the course of the study? To what extent did those families completing the follow-up activities differ in representativeness from the larger group of families selected to be in Longitudinal Option B?

A variety of analyses may be applied to provide answers to these questions. For example, descriptive statistics would provide the overall means, standard deviations, and frequencies of variables describing families that complete some or all of the follow-up study. T-tests and other analytic statistics can be used to test for differences that may occur among all the participants as related to time of the year or season of testing, as well as to test for differences between participants to examine characteristics of families or programs that relate to successful follow-up (e.g., age of children, area of the country). Further, discriminate function analyses and logistic regression approaches could be used to determine significant predictors or patterns of variables predictive of whether a family completes the second round of interviews and assessments.

Example 2: *What were the cross-sectional results at the 2nd wave point?*

To address this question, generally the same analyses would be conducted with the follow-up data from Option B, as were engaged in the Classroom/Family/Child Component. This would provide a cross-sectional perspective of the participants at Time 2. Please see Chapter 13 for a review of these analyses.

However, an additional qualitative interview with the parents about their experiences over the past year may be conducted. The qualitative data may be examined using a team-analysis approach and specialized software, both of which were described in the analysis plan for the Classroom/Family/Child Component.

Example 3: *On what measures and to what extent did children improve from Time 1 to Time 2?*

If longitudinal data are collected, gain-score and/or growth curve analyses could be used to describe change in child outcomes over time. As in FACES, we recommend the use of W-ability scores instead of standard scores in these analyses, since standard scores make adjustments for age whereas the focus of longitudinal analysis is to look at individual changes in abilities, controlling for age as an independent factor, rather than confounding changes in ability with matu-

rational effects. For example, you could fit two- or three-level growth curve models in order to assess whether there were significant differences in children's growth trajectories over time in key outcomes related to child, family, program, or community factors. In this type of analysis, effects can be modeled at each of these levels. Models for all multilevel analyses would be built first by fitting basic longitudinal growth curve models to children's outcomes over time, for each outcome. Next, for example, key child, family, and community predictor variables could be added to the models separately or in combined form to assess for whom and under which conditions there were significant differences in developmental outcomes for children over time. All predictor variables should be tested for main effects on the outcomes and as an interaction term with the time variable (i.e., age of child) to assess their effect on the growth or slope of the outcomes.

Table 17.4 presents an example of a two-level model (classroom- and child-level) assessing the relationship between classroom and child/family characteristics to children's outcomes (both cross-sectionally and in terms of gains over the year) on a cognitive test (Woodcock Johnson Letter Identification).

Table 17.4 Two-Level Regression Models of Assessment Scale Scores of MSHS Children at Two Time Points and Gain Scores

Variables	Expressive One-Word Picture Vocabulary Test-Bilingual Edition		
	Time 1; ρ =	Time 2; ρ =	Time 1 to Time 2 Gain; ρ =
Classroom Factors:	*Unstandardized Regression Coefficients*		
Full-Day Class			
CLASS Instructional Support for Learning Score			
Average Child-Adult Ratio			
Teacher Education (AA/ BA)			
Years Teaching Experience			
Family and Child Factors:			
Child's age (in months)			
Child is male			
Extent of Bilingualism in Home			
Caregiver formal education level			
Caregiver literacy level			
Caregiver parenting approach			
Female-headed single-parent			
Household size			
Household income			
Extent of Mobility in past 12 months			
N of children (n of programs)			
% Level-2 variance explained			
% Level-1 variance explained			

ρ = Intraclass correlation

- More detailed description of integration of language and literacy in various classroom activities throughout the day.
- Description of teacher (and/or assistant teacher) interactions and behaviors when reading aloud.
- Expanded descriptions of instructional methods used in literacy activities (including pre-literacy activities for the younger children).

14.6 Additional Supplemental Survey Modules

The modules listed above represent suggestions for study areas where ACF may find it wants additional information. Other areas, such as transitioning from MSHS to kindergarten, transitioning across MSHS or service areas, documenting risk and resilience among MSHS families, or surveys of MSHS transportation options for families, bilingual language development, and additional measurement feasibility/development efforts, represent the broad range of possibilities these modules may take.

DESIGN FOR MIGRANT AND SEASONAL HEAD START SURVEY
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REFERENCE LIST

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APPENDICES

LIST OF APPENDICES

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APPENDIX A

PRELIMINARY ACTIVITIES: CONSULTANT CALL MINUTES
MSHS PARENT CALLS SUMMARY

(SEE APPENDIX D FOR STAFF CONSULTANT CALLS SUMMARY)

Parents from the MSHS Community Consultant Group
Parent Conference Call Highlights[1]

Background about Calls with Parents

In order to increase the accuracy in the development of the MSHS Survey, a group of program staff and parent consultants was established. Potential individuals were initially identified for the group with the assistance of the Office of Head Start, the National Migrant and Seasonal Head Start Association, and a consultant to the Survey with extensive MSHS experience. Letters and emails were emailed to them, inviting their participation. Ultimately, 27 individuals representing 22 agencies were available to participate. Many members of this group first convened at the NMSHSA conference in February where the design approaches for the Survey were reviewed.

In May, discussions were conducted with the staff representatives and the summary of these calls are presented in another exhibit. Due to the difficulty convening the parent representatives, individual calls were made with parents that had been originally identified to participate. Since only two of the four could be located, an additional effort was conducted with the MSHS community to convene group calls with MSHS parents from across the country. These resulted in six calls, which are described below.

Prior to implementation of the actual MSHS Survey, it is recommended that a series of inclusive and comprehensive focus groups will be completed with a representative group of MSHS staff and MSHS families in order to gather the more in- depth and detailed information we will be able to collect at that time.

List of Topics and Dates

Below, are the topics and dates of each of the calls, which were mostly conducted in the late evening Eastern Standard Time. The Call Highlights are at the end of this memo.

Calls 1 & 2. Individual Parent Calls: June 16th and June 20th. 2008
Calls 3 & 4. Parent Interests for MSHS Study: July 12th and 13th. 2008
Call 5. Engaging with Children and Families in the Study: July 20th 2008
Call 6: Parenting and Mom/Dad interviews: October 11th 2008

Calls 1 & 2. Individual Parent Calls
June 16th and 20th 2008

Individualized calls lasting 30 minutes each were conducted with two of the original MSHS parents recommended for the MSHS Community Consultant Group. The parents reported key concerns among families about the availability of housing, the weakened economy which has

[1] Consistent with OMB Guidelines, each call involved less then 9 people and each call involved a different set of 9 or less questions.

led to decreases in jobs, and the effect that the increased immigration raids were having on a number of factors, including employers becoming less likely to provide housing, increased stress and anxiety among parents. Another major concern among MSHS parents according to the two MSHS parent consultants is the enrollment process for MSHS and in our service areas. Both said that the paperwork can be long and if any of their documentation is missing, it can be difficult to enroll their child quickly. A strength of MSHS is the help that families receive in applying for other social services once in an area; one parent mentioned that families will move onto another location if they can not get services set up quickly enough as they do not have enough financial resources to remain in an area waiting to enter MSHS or another program. The longer that they do not work while they wait for entry in MSHS or other services, the less finances they have to pay for food and housing. As such, quick enrollment is critical to their families' well-being.

When asked about specific facets of MSHS which could be examined in the Survey, both parents mentioned that the work that MSHS does directly with parents as an important feature of the program. Parent training about the role of education and literacy were mentioned as impacting their child development perspectives. One parent also mentioned that examining the children's language development, particularly in English, as crucial. Another parent responded that teachers' passion and interest in working with agricultural families is a defining feature for them, even less so perhaps than their ability to speak Spanish. Finally, both parents mentioned the need to examine other community resources that families may be engaged in. For example, one parent mentioned often using the Migrant Education hotline for identifying local resources when she first moves to an area. Other services they access are Motivation Education & Training, and Project SMART—Math PLUS.

One of the parents stated that many MSHS parents would be open to engaging in monthly calls as part of a longitudinal study. She reported that some parents may not participate fully as they become worried about knowing an "answer" completely or may not represent their group the best so it is important to explain the calls' purposes well. Also, some families are private and would not want to participate. She thought it would be helpful if the interviewer was familiar with the community, such as a migrant parent.

Calls 3 & 4. Parent Interests for MSHS Study: Saturday and Sunday July 12 & 13, 2008; 9pm EST

Parental concerns about their children, family, and life:

Respondents shared various areas of impact, interest or concern that could be examined in the study. Some parents on the call reported being pleased their child's development in the following areas as a function of attending MSHS: nutrition, play, physical development, school adjustment, bilingual development, and active teaching of school readiness skills, including reading, writing, and drawing. They generally felt that the health and education of the children are critical elements to include in the study. Two parents suggested increased focusing on early literacy and computer skills may be needed in MSHS.

A critical concern at the present time is immigration and the subsequent changes in driver license laws. Many parents in MSHS are reportedly stressed and are worried each day about

their family's safety. As such, some parents have decided not to enroll their children in MSHS to preclude the chance of becoming separated during the day if a raid occurred. Ultimately, more children are potentially brought to the fields.

Another stressor on families is insurance portability. One mother reported finding it difficult to re-apply for Medicaid with each move, and indicated that many families discontinue due to the process. In addition, she reported that knowing the location of MSHS centers across the country would be helpful. She would like a list of centers, like the one AED has started to disseminate.

Finally, parents are becoming more stressed by their experiences in diminished work availability in the past seasons.

Program Focus and Teacher Characteristics:
Parents participating on the calls reported experiencing strong trust in the centers. They are concerned though about MSHS program funding levels, transportation to the center and to health care appointments, long waiting lists, and lower availability of slots for seasonal families. A few parents were also concerned that the program seemed to end earlier in the day and the season than they preferred. One parent reported that there are potentially negative perceptions about MSHS with community partners, which should be examined. When asked if there were a segment of MSHS they think is critical to include in the national study, the parents on the call said that each component was critical: the classrooms, the health services, and nutrition, Many emphasized how important the family service component piece in their lives, including family literacy development.

When asked which teacher characteristics appear to contribute most positively to the development of their children, parents reported that the best teachers appeared to possess high levels of warmth and love, good caretaking skills, strong interest in children, solid training, and knowledge about migrant families and their family in particular.

Parent Interview Scheduling:
Parents reported that they generally preferred to schedule interviews later in the day as they work in the fields during the day, about 7 or 8 pm. In terms of days, Saturday afternoons or evenings were generally preferred, but not Sundays. Sundays are often reserved for family tasks and events.

Call 5. Engaging with Children and Families in the Study
July 20th 2008

Time and Location of Parent Interviews:
Parents reported that they suggested providing a choice for either interviews at home or in the centers. They recommended providing two "open houses" at the center earlier in the week where parents can come, have dinner, and complete interviews while their children are being watched. Field staff can then spend the rest of the week conducting home visits to complete the parent interviews. The parents noted that those living in migrant camps may be more comfortable conducting the interviews in the centers.

Characteristics of Interviewer:
Parents participating in the call recommended that interviewers have experience speaking the migrant population. It is critical that they speak Spanish and understand their culture. They also suggested that interviewers use examples when asking questions that may be difficult to understand.

Monthly Calls and Electronic Access:
Monthly calls for those families engaged in a long-term study would be well received by MSHS parents, according to the call participants. They indicated that they vast majority (>90%) have access to cell phones. They also said that there is often a family member or friend in their home base (if they have one) who knows how to contact them. The families that do have internet or email access would be able to log on to a central database or to respond to monthly questions in that way. However, they were unsure about how many families have email addresses, computer access, or the literacy levels in engage in monthly check-ins in this way.

Call 6: Parenting and Mom/Dad interviews: October 11th 2008

Role of Mothers and Fathers in Family and in Children's Lives:
Within the family, mothers often focus on their well-being though overseeing household activities, meal preparation, education, and health. Fathers were reported to be in charge of everything financial, including making enough money to provide for food, clothing, and housing for the family. Fathers are often the ones to look for work and decide where to move (if migrant). Mothers then work to establish the family in their new communities and homes while the fathers start working.

Mothers often take care of the children by bathing, feeding them, taking them to doctors' appointments, and discussing what they have done or learned at school. They are warm and loving toward them, providing them with lots of kisses. They may play less with their children outside (or even inside) than fathers since they are busy cooking and cleaning for the families.

Individual Parent Interviews:
Parents thought that the first draft to the interview introduction[2] was clear to them and were interested in the mother and father interviews. They identified two potential concerns for some parents: 1) whether they may be asked a question that they don't know the answer to (e.g., fathers being asked a question about the children's routine, which mothers may be more know-

[2] "Moms and dads are both important to families and to the development of children. But they are often not the same with their kids! Many times we hear that moms do things in a certain way with their children, while dads provide much to their children in other important ways. We want to make sure we understand the special ways that you both, as a mother and father, each work to make your family stronger. We will use the information that we learn to help MSHS create programs that continue to support parents in general, as well as mothers and fathers in their important roles. Talking with you separately about your opinions as mothers and fathers will help us do that. Also, this will let us complete the interviews faster since each of you can speak with your own interviewer at the same time. Would this be ok with you?

ledgeable about), and 2) that they will be asked about immigration status. Stemming from this conversation, it will important to assure the parents that they are being asked for their opinions on questions rather than "correct" answers and that immigration status will not be discussed. Also, parents liked the idea of being asked questions about the family together with their spouse and then dividing up to discuss maternal and parental perspectives.

APPENDIX B

MSHS PROGRAMS SORTED BY MSHS START DATE
(FALL 2009 DATA)

MSHS Programs Sorted by MSHS Start Date

State	Number of Centers Operated	Months Open	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.
OR	26	12																					
WA	6	11																					
CO	9	12																					
GA	3	12																					
NY	12	12																					
FL	32	12																					
PA	5	12																					
FL	4	12																					
FL	7	12																					
AR	2	12																					
LA	2	12																					
AR	1	11																					
CA	1	12																					
CA	17	12																					
WA	21	8																					
CA	13	6																					
NC	4	8																					
KY	9	9																					
CA	9	9																					
CA	9	7																					
PA	1	9																					
NC	5	6																					
ID	14	6																					
AR	3	7																					
NJ	3	7																					
CA	6	9																					
CA	6	6																					
VA	4	7																					
AL	1	7																					
CA	5	8																					
IL	1	7																					

State	Number of Centers Operated	Months Open	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.
TN	5	7																					
SC	2	7																					
MI	14	8																					
IL	1	5																					
SC	2	5																					
MN	18	5																					
WI	8	5																					
WI	4	5																					
UT	4	9																					
SC	1	4																					
IL	1	4																					
NC	1	5																					
IL	1	5																					
CO	5	5																					
IL	1	5																					
DE	1	4																					
IL	1	4																					
MI	1	3																					
MI	1	3																					
MD	1	3																					
IL	3	4																					
TX	56	12																					
AZ	9	12																					
CA	4	12																					
WY	3	12																					
CA	4	10																					
CA	23	8																					
MA	1	4																					
NE	2	3																					
SC	1	2																					
VA	0	0																					
IL	0	0																					

APPENDIX C

Proposed Design Project Research Questions

APPENDIX E

DRAFT LETTER TO PARENTS AND CONSENT FORM

Dear MSHS Parent:

Congratulations, your center has been selected as one of [number to be determined] MSHS centers across the United States to participate in the Migrant and Seasonal Head Start Survey (MSHS Survey). The MSHS Survey is the largest study of Migrant and Seasonal Head Start (MSHS) families and children ever. It collects information about families and programs to help MSHS improve services to families and their children across the nation. We are asking you and your family to help us with the MSHS Survey.

Your contribution*:*

- Parents: We will ask you about to your child's development, your family, and the program in which you participate. These interviews may take place at the center or another location of your choice and will last about an hour.
- Children: We will meet twice with your children for approximately 30 minutes while they are in the center. Your child will be asked by a member of our study staff to do some activities that young children enjoy, such as playing with toys, drawing, looking at pictures, and sharing words they are learning in English and Spanish. This will help find out how children learn and grow in Migrant and Seasonal Head Start.
- Teacher Questions and Head Start Records: We will also learn about your child's development by asking his or her teacher, and looking at the records at the center.

Additional Information:

- You will receive $25 for your participation in the study. Your child will receive a book and stickers, and his or her classroom teacher will also receive new educational materials.
- Your participation is voluntary; it does not influence your participation in MSHS.
- You or your child may stop at any time.
- Your family's information will be kept confidential (private).

I will be calling you to ask you to sign a consent form and to set up an interview time that is convenient for you. If you have any questions, or would like to call me to arrange an interview time, my number is _____. We value the participation of each family and look forward to working with you and your family during the MSHS Survey.

Sincerely,

MSHS Survey On-Site Coordinator

Example Consent Form

We are asking you to agree to take part in the Migrant and Seasonal Head Start Survey (MSHS Survey). The MSHS Survey is sponsored by the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services and is being conducted by [insert contractor name].

The purpose of the MSHS Survey is to gather information that will help the Head Start program improve services to children and their families. It is the largest study of Migrant and Seasonal Head Start families and children ever. This entails visiting [insert #] centers and learning about [insert#] MSHS children and families across the country.

Your child and family are invited to be part of this important study!

If you agree to be a part of the study, you will be interviewed [insert date range(s)]. It can be scheduled at the center or in your home, at your convenience. During the interview, you will be asked about your child, your family, and the MSHS program in which you participate. The interview will take about an hour and you will receive $25 for your time. Your participation is voluntary and you can skip any question you do not want to answer or stop at any time.

Your child will also be involved in several ways so we can find out how children learn and grow in MSHS. If your child is a toddler or preschooler, he or she will be asked to do some activities with a study staff member, such as look at pictures, copy drawings, write, listen to a story, and answer a few questions. If your child is an infant, he or she will be asked to play with toys such as balls and blocks or look at pictures. This should take about 30-40 minutes. Breaks will be taken whenever necessary and your child may return to their class at any time.

The study staff member will learn more about your child by watching him or her in the classroom. We also will ask the teacher how your child is progressing in different areas such as language and movement. We will also look at your child's records at the center.

You can choose whether you and your child will be part of the study. Whether or not you take part in the study will not affect the way you or your child is treated by your Migrant and Seasonal Head Start program or affect any of the services you receive. All of the information we collect from you and about your child is kept confidential (private). We will not ask about your immigration status. We will not share your private information with your MSHS program. We will not pass this information on to any schools or any other agency in a way that can be connected with your family or child. We have a Certificate of Confidentiality, which means we are protected from being forced to provide information about you to anyone. However, if we learn that a child has been abused or endangered, we are required by law to report to the appropriate authorities.

If you agree to be a part of the MSHS Study which involves parent interviews and learning about your child's development by spending time with them, talking with the teacher, and reading the records at the center, please sign the following statement:

> **I have read this consent form or have had it read it to me. I agree to take part in this study and to allow my child to take part in this study.**

Signature _____ **Date** ___/___/ ___

Name (Print) _____

Child's Name (Print) _____ **Child Birthdate** ___/___/ ____

APPENDIX F

Q&A FOR STAFF AND PARENTS CONSIDERING PARTICIPATION IN MSHS SURVEY

Migrant & Seasonal Head Start Survey
Design Project

Questions & Answers

Questions you may be asked about the MSHS Survey—and some suggested answers

Q. Why are we conducting a study of Migrant and Seasonal (MSHS) Head Start families?

A. The Office of Head Start would like to continue to learn more about the children and families who participate in MSHS as well as the programs themselves in order to identify ways to better serve them. We want to have a more complete picture of the development of MSHS children and families, as well as the variations in MSHS program services. By working directly with children and families, we can gather a more comprehensive picture of MSHS. What we learn from families and staff will help MSHS improve the program to serve families better.

Q. How are families selected to be in the study?

A. All MSHS programs are participating in the first part of the study. [X #] MSHS programs were chosen randomly from the list of all programs. Centers and classrooms were then chosen randomly from those programs to represent all of MSHS. [XX#] children in the chosen classrooms, and their families, will be asked to participate.

Q. Does a family have to participate?

A. No, but we hope the families who are selected will decide to be part of the study. Families who are selected to be part of the study can chose whether or not to take part in it. If a family does refuse to be part of the study, it will not affect the child's or family's participation in Migrant and Seasonal Head Start.

Q. What will the child be asked to do?

The child will be asked to do some activities that are interesting for him or her. If the child is a preschooler or toddler, these activities would include looking at pictures, copying drawings, writing, listening to a story, answering a few questions, and sharing words they are learning in English and Spanish. If the child is an infant, these activities would include working with toys such as balls and blocks and looking at pictures. The child will meet twice with a bilingual adult trained in child assessment for about 20-30 minutes. In addition, the child will be observed in the classroom and their teacher will be asked about the child's development in different areas such as language, literacy, and physical development. Their Migrant and Seasonal Head Start records also will be reviewed.

Q. What will the parent be asked to do?

A. (1) Sign a consent form agreeing to be at part of the study and to have their child participate in the study.

(2) Participate in a one-hour interview at a time and location that works for them.

Q. Can only the child's biological parents be interviewed?

A. No. If someone else is the child's legal guardian and primary caregiver, we will want to interview that person.

Q. What will they ask about in the parent interview?

A. The parent interview includes questions about the parent, the family, their home and neighborhood, and their experience in Migrant and Seasonal Head Start. The interview is voluntary and the parent can stop at any time. It will not ask any questions about immigration status.

Q. How long does the interview take?

A. The in-person parent interview takes approximately one hour.

Q. Can the interview be done over the phone?

A. No. The interview is designed to be done in person. Certain parts require the respondent to follow along with pictures on a separate card. However, the interviewers will try to help with any situation that makes participation difficult (for example, setting the meeting at a convenient time or place such as in the home or at a migrant camp).

Q. Will interview responses be shared with Head Start staff?

A. No. The interviews are confidential and are not shown to Head Start teaching or administrative staff. The interviewers are not employees of Head Start; they work for an outside research company. Each family is assigned an I.D. number, so that their name is not attached to their interview directly.

Q. Will interview responses be shared with any other agencies or ever connected with a name?

A. No. Answers on the interviews are not connected with an individual's name and will not be shared with any other agencies, including INS. Family immigration status will not be questioned. If we learn about child abuse or endangerment, then we are required by law to report such information to the appropriate agencies.

Q. If parents say: "I'd like to participate but I can't because of…"

A. We can help with almost any practical situation that makes participation difficult, such as lack of transportation, having other children at home, or a work schedule that interferes with the center hours. We will work with parents to help find solutions to these problems such as having evening and weekend hours at the centers and providing dinner and child care for those who come in the evening after work to complete interviews.

Q. If parents say: "I'd like to participate but I do not feel comfortable speaking in English."

A. Our interview staff is bilingual in English and Spanish. If an interview has to be done in a different, indigenous language, we will arrange for an interpreter to be present. The interpreter may be a family member or friend, someone from the community, or a professional interpreter. It will not be someone from Head Start.

Q. What will the parent receive for participation in the MSHS study?

A. The parent/or caregiver will receive $25. If a secondary caregiver sits in on the interview then they will receive [gift/money].

Migrant & Seasonal Head Start Survey
Design Project

Parent Questions
(& Some Answers)

Q. What is the Migrant and Seasonal Head Start Survey?

The MSHS Survey is a survey to learn about families and children in Migrant and Seasonal Head Start programs. The Office of Head Start wants to know more about the development of children as well as the goals and needs of families so the program can serve them better. By talking directly to families and staff, and by observing children, the MSHS Survey can give Migrant and Seasonal Head Start a better and more complete picture of how the program works.

Q. How are families selected to be in MSHS Survey?

MSHS centers and classrooms are chosen randomly by chance (like drawing numbers out of a hat) from the list of all participating MSHS centers and classrooms. Some of the children who are in those classes are being asked to participate.

Q. Do I have to be in the MSHS Survey?

We hope you will agree to help. Families who are selected to be part of the MSHS Survey can choose whether or not to take part in it. If a family prefers not to be part of the study, it will not affect its participation in Migrant and Seasonal Head Start.

Q. What will my child and I receive for being in the MSHS Survey?

Once the interview is completed, you will receive $25. Your child's classroom will receive some new materials and your child will receive a small book and stickers.

Q. Can only a child's biological parents be in the MSHS Survey?

No. If you are the child's legal guardian and primary caregiver, that is, you take care of the child day-to-day and have primary responsibility for the child, you are the person we want to interview.

Q. What will I have to do in the MSHS Survey?

(1) Sign a consent form agreeing to have you and your child included in the MSHS Survey.

(2) Be interviewed one time in the [insert season].

Q. What will my child have to do in the MSHS Survey?

Your child will be asked to do some classroom activities that are interesting for him or her. If your child is a preschooler or toddler, these activities would include looking at pictures, copying drawings, writing, and listening to a story and answering a few questions about it. If your child is an infant, these activities would include working with toys such as balls and blocks and looking at pictures. A well-trained survey staff person will spend about 20-30 minutes with your child on two separate days. The time together will be split between English and Spanish. The survey staff also will look at your child's Migrant and Seasonal Head Start records.

Q. What will they ask me about in the parent interview?

You will be asked questions about your family, your home and community, and your experience in Migrant and Seasonal Head Start. The survey is completely voluntary. You do not have to answer any question you do not want to and you may stop if you like at any time.

Q. How long will the interview take?

The in-person interview takes about one hour.

Q What if it's hard for me to get to or to schedule an interview?

We will work with you to help you solve problems such as transportation, other children are at home, or your work schedule. We will have people available to meet with you at a time and location that is convenient for you.

Q. Can I be interviewed in Spanish or another language?

Yes. Our interview staff is bilingual in English and Spanish or we can arrange for an interpreter in another language.

Q. Will my answers and information on my child be kept private?

Yes. What you tell us and the information on your child and family will not be shown to Head Start staff or any other school or agency, including INS. Each family will be assigned an I.D. number known only to the researchers and their names will never be used. However, if we learn that a child is being abused or they are being endangered, we are required by law to make a report to the appropriate State agency.

If you have any other questions or concerns, please talk to your Migrant and Seasonal Head Start teacher or the On-site Coordinator for your program, or, you may call [contractor] toll free at 1-800-xxx-xxxx. We look forward to working with you.

APPENDIX G

WELCOME LETTERS FOR PROGRAMS

Notification Letter for Programs Selected for Study Component 1 Only

May, 2009

[Program Director's Name]
Program Director
[Program Name]
[Program Address]
[Program City, State, Zipcode]

Dear Ms. [insert name]:

The Administration for Children and Families (ACF) is conducting the Migrant and Seasonal Head Start (MSHS) Survey beginning this August, 2009. The MSHS Survey is designed to deepen understanding of the development, characteristics, and experiences of children and families served by MSHS and to observe the relationships among child, family, and program functioning. The study is an important step in accurately and completely describing program operations and services across all MSHS programs, identifying the strengths and needs in MSHS services for future programmatic planning and improvement, and learning about child development as it relates to the families, programs, and communities of MSHS.

Your program will provide a tremendous service to the children and families of MSHS through its participation in the study. All grantees and delegate agencies that serve children will participate in the first component of the study (Survey Component 1) in order to put together a complete picture of MSHS services across the country. This will include a 2-3 day site visit to your program sometime between August and November. During the visit, the study team will:

- Conduct Program Director interviews,
- Conduct interviews with the Child Development & Education Manager; the Health Services Manager; the Family & Community Partnerships Manager; and the Disability Services Manager;
- Gather information from community needs assessments and the recruitment and enrollment policies and procedures,
- Conduct telephone interviews with all center directors, and
- Conduct focus groups with MSHS parents and possibly program staff at a number of MSHS locations across the country.

While all programs will participate in the above activities, some programs also were selected for a second round of activities comprised of child, family, and community interviews. Programs for the second round were randomly selected (like pulling names out of a hat). Your program's name was not selected, so your participation will be focused on the activities listed above in the bullets.

The Survey will be conducted through the coordinated efforts of [insert contractors] on behalf of ACF and the Office of Head Start. Study staff from [insert contractor name] will be contacting you soon to provide further details and make arrangements for visiting your program during late summer or fall.

On behalf of the Office of Head Start and the Migrant and Seasonal Head Start Branch, we would like to thank you for your cooperation in carrying out this extremely important study of our families and programs. If you have any questions about this study, please contact our Federal Project Officer for this effort, XXX.

Sincerely,

XXX
Director
Office of Head Start

XXX
Chief
Migrant and Seasonal Head Start Branch

Notification Letter for Programs Selected for Both Study Component 1 and 2

May, 2009

[Program Director's Name]
Program Director
[Program Name]
[Program Address]
[Program City, State, Zipcode]

Dear Ms. [insert name]:

The Administration for Children and Families (ACF) is conducting the Migrant and Seasonal Head Start (MSHS) Survey beginning this August, 2009. The MSHS Survey is designed to deepen understanding of the development, characteristics, and experiences of children and families served by MSHS and to observe the relationships among child, family, and program functioning. The study is an important step in accurately and completely describing program operations and services across all MSHS programs, identifying strengths and strengths and needs in MSHS services for future programmatic planning and improvement, and learning about child development as it relates to the families, programs, and communities of MSHS.

Your program will provide a tremendous service to the children and families of MSHS through its participation in the study. All grantees and delegate agencies that serve children will participate in the first component of the study (Survey Component 1) in order to put together a complete picture of MSHS services across the country. This will include a 2-3 day site visit to your program sometime between August and November. During the visit, the study team will:

- Conduct Program Director interviews,
- Conduct interviews with the Child Development & Education Manager; the Health Services Manager; the Family & Community Partnerships Manager; and the Disability Services Manager;
- Gather information from community needs assessments and the recruitment and enrollment policies and procedures,
- Conduct telephone interviews with all center directors
- Finally, conduct focus groups with MSHS parents and possibly program staff at a number of MSHS locations across the country.
- When possible, attend Parent Policy Council meeting(s) to share information about the study and begin a collaborative partnership to support future study activities.

[Name of program} is also one of 18 MSHS programs across the nation that has been randomly selected for participation in both components of this study. The second phase of the study will take place over the course of the next year with a nationally representative sample of 1440 children and families enrolled in approximately 90 randomly selected centers. During a second site visit to your program, a team of 3-5 data collectors will visit [insert number] of your centers for 4-5 days to conduct the following activities.

- Work directly with children to capture their development in multiple areas, including development within and across English and Spanish (as appropriate), learning, and social/emotional development.
- Interview parents about their children's and family's development
- Observe children in classrooms.
- Collect teacher ratings of each participating child's functioning.
- Interview teachers and assistant teachers from participating classrooms
- Interview all Family Service Workers at each participating center
- Interview community service providers.
- In some programs, focus groups with MSHS parents will also be conducted.

The Survey will be conducted through the coordinated efforts of [insert contractors] on behalf of ACF and the Office of Head Start. Research staff from [insert contractor name] will be contacting you soon to provide further details and make arrangements for our first visits to your program during late summer or fall.

On behalf of the Office of Head Start and the Migrant and Seasonal Head Start Branch, we would like to thank you for your cooperation in carrying out this extremely important study of our families and programs. If you have any questions about this study, please contact our Federal Project Officer for this effort, XXX.

Sincerely yours,

XXX
Director
Office of Head Start

XXX
Chief
Migrant and Seasonal Head Start Branch

APPENDIX H

VARIABLES FOR WEB-BASED ENTRY SYSTEM

APPENDIX I

OSC JOB DESCRIPTION

MSHS Survey On-Site Coordinator -- Job Description

Job Qualifications:

- Minimum of 3 years of experience working in or with MSHS programs and families
- Bilingual – English and Spanish

Tasks for Survey Component 1 Site Visit:

- Attend OSC trainings in Washington, D.C. with lead MSHS Survey Team
- Communicate frequently with MSHS Survey Coordinator via telephone and email
- Promote MSHS staff interest and engagement in MSHS Survey
- Serve as a liaison between local MSHS Staff and MSHS Survey Team
- Answer questions about the study from staff
- Distribute study brochures, information packets, and gifts to participating MSHS Staff
- Show introductory DVD to staff, as necessary
- Secure space at the program office for staff interviews
- Schedule interviews with the designated staff
- Provide directions and hotel recommendations for the Survey Team
- Upon arrival, meet with Survey Team and introduce them to appropriate staff
- Help Survey Team access needed records such as community needs assessments and recruitment and eligibility guidelines
- [in some programs] Help recruit and schedule 8-10 parents for a focus group, if asked

Additional Tasks for Survey Component 2 Site Visit (if selected):

- Provide lists of classrooms and rosters of children for sampling via the web-based data entry system
- Provide list of local community resources and agencies with which the center collaborates
- Recruit sampled families to be in the study
- Serve as a resource for parents who might have questions about the study
- Collect completed and signed consent forms from sampled parents/ guardians
- Schedule parent interviews
- Make reminder calls to parents the night before their scheduled interviews
- Schedule staff interviews at each of the centers in the study (if requested to do so)
- Secure space for interviews and child assessments at the Head Start centers
- Identify interpreters for families that speak indigenous languages, if needed
- Meet with MSHS Survey Team when they arrive and submit completed consent forms describe scheduling and space arrangements to them
- Keep local MSHS staff involved and aware of any schedule changes at their centers
- Be available during the site visit to assist interviewing and assessment teams when needed
- Collect monthly attendance on all children in the sample and send that information each month to the Survey Coordinator

APPENDIX J

PLEDGE OF CONFIDENTIALITY

Confidentiality Pledge

As a member of the Migrant and Seasonal Head Start Survey Team, I recognize the importance of maintaining the confidentiality of data collected and of assuring the right of privacy of persons cooperating in this research study. To establish safeguards for all involved in this research study, I agree to abide by the following principle of conduct:

All information that is collected by me (or other survey team members) from study participants is confidential. All participants must be informed that their responses to interviews and survey questions will be kept confidential and are for statistical purposes only. All information reported by a family as part of this project is confidential and will not be reported in any form to anyone except to the Survey Team. All data (and all copies) are property of the study and are not to be shared with anyone. I will not permit any unauthorized person, including members of my own family, to see any completed documents or forms. I will only discuss information obtained about a respondent with authorized Survey staff.

I will keep all completed interview materials in a safe enclosure until transfer to the Home Office. If a potential participant is known to me personally, I will refer the case back to the field supervisor for reassignment to another interviewer.

Project Title: The Migrant and Seasonal Head Start Survey
Project Director: [Insert Name]

Staff Name: _____
(PLEASE PRINT)

Staff Signature: _____

Date _____

At the beginning of the Design Project, the Team consulted with multiple experts in the research field and with MSHS program staff and parents, and from these conversations a very comprehensive list of questions were developed. This 'universe' of descriptive questions are about multiple stakeholders in the systems, about multiple process and learning domains, and emphasize in particular those areas in which the MSHS programs are a model of flexibility and variations in serving a at-risk and challenging mobile population. This list of questions may serve as a beginning resource for identifying the key questions of importance to OHS and ACF when starting the actual MSHS Survey.

Learning about MSHS Infants, Toddlers, and Preschoolers ▪ **How are MSHS infants, toddlers, and preschoolers developing in domains such as language, early literacy, and socio-emotional?**
Characteristics, Growth, and Development
What is the current status and the variations in MSHS children's:
• Overall communication? And English, Spanish, and/or other languages?
• Motor skills?
• Attachment?
• Emotion/behavioral regulation?
• Social behavior?
• Cognitive abilities?
• Early literacy, biliteracy, and math skills?
• Approaches to learning?
• Sleep?
• Feeding/ Nutrition?
• Physical and dental health? Safety?
• Physical, emotional, and social adaptation to migration (if applicable), including adaptation to starting in most recent MSHS program and potential observed silent period?
How do children develop in these areas over time?
How do the above developmental areas relate to parent, program, or other child characteristics?
Other Child Characteristics
What are the variations in MSHS children's age, gender, race/ethnicity, region and country of origin, indigenous-heritage communities, etc.?
For infants: What are the variations in pregnancy and birth complications, as well as access, utilization, and *continuity* of prenatal care? How does these relate to skills and abilities?
For children with identified disability: What is the child's disability?

Learning about MSHS Parents and Families ▪ **What are the characteristics of those served by MSHS programs?** ▪ **What is the relationship of family and parental characteristics to MSHS children's development?**
Family Characteristics/Cultural Experiences and Processes
What are the medical, dental, and mental needs, concerns, access, and strengths of MSHS parents, children, and families?
What are MSHS parents' utilization patterns of legal, insurance, and employment resources?
What is the variation in parents' skills, work experience, education, language, and literacy skills?
What languages are spoken by the parents? In the home? To what degree?
To what extent can parents understand, speak, read, and write English and their home languages?
What is the variation in recency of immigration? (e.g., years since immigration (if applicable), generation status)
What is (are) the country/region of origin? To what degree are families from indigenous- heritage communities?
What is the range in acculturative processes for the parents and the children? What is the range of experiences of acculturative stress? Migratory stress, if applicable? Discrimination? Coping skills?
What types of work do the families usually do?
Home and Family Environment/ Time, Weather, and Migration
How often do MSHS families move? What is their pattern of migration? How do they make migration choices?
How do parents report being influenced by migration and shifting weather patterns?
Who lives with the MSHS child? Are there other close family or friends in the area (or in the country), or that they keep in touch with often? Who migrates with them (if applicable)?
What are the sources of social support for MSHS families (the extended family/friend/co-worker network)? How are they involved in the life of the MSHS child and program? For each social connection, how much are they a help or a hindrance in reducing stress?
What are the financial, transportation, & nutritional needs, concerns, access, and strengths of MSHS parents, children, and families? (including, housing, working water, washing machine, shower, toilet)
What are the sources of strength and resiliency that MSHS parents report as contributing to the well-being of their child and family?
What are MSHS parents' experiences with exposure to violence, pesticides, homelessness, fear, etc?
Culturally-Related Activities and Routines
What is the type and range of verbal and nonverbal communication, developmental learning activities, nurturance, warmth, discipline, and play that parents/families engage in with their children? How do parents provide learning experiences for their children outside of MSHS?
What is the variation in past and present child care utilization, including utilization of MSHS services, or other center- and family-based care? What is the length of these services over the course of a day, a season, etc? What are the child care resources and needs? Does this differ among families of infants, toddlers and preschoolers?
If children were not enrolled in MSHS, where would they be during the day? (e.g., in the fields, with a friend or family member, in another center)? Does this differ among families of infants, toddlers and preschoolers?
How do the above relate to MSHS children's development and MSHS program participation?

Learning about MSHS Parents and Families ▪ **What are the characteristics of those served by MSHS programs?** ▪ **What is the relationship of family and parental characteristics to MSHS children's development?**
How do the above relate to MSHS children's development and MSHS program participation?

Learning about MSHS Staff ▪ **Who works at MSHS?**
What are the variations in background characteristics, qualifications, and skills of classroom teachers, assistant teachers, home visitors, FSWs, health specialists, all coordinators, etc.?
What degrees and what type of degrees do MSHS staff members have? What number of staff members have degrees from other countries?
How much education, training, experience, beliefs, and knowledge has the MSHS teaching staff received in • Migrant and seasonal family development? • Multicultural approaches to teaching? • ELL development and instruction? • Typical child development? • General teaching approaches?
Does the training provided through formal education and MSHS trainings match the needs/demands of the position? What are the gaps?
How attuned/sensitive is the staff to migrant and seasonal child development issues?
What is the ability that MSHS staff has in understanding, speaking, reading, and writing English and other languages?
What are the advantages of working for MSHS? Disadvantages? How do teachers shape the MSHS program for which they work?
How do teachers receive training and feedback on their work?
How do the above relate to MSHS children's development? How do teachers of infant/toddlers vary from teachers of preschoolers on these questions?

Learning about MSHS Programs ▪ **What is the variation in MSHS program operations and how do these relate to child and family characteristics?**
General Program-level Questions
What is the ratio of migrant/seasonal slots within each program?
What is the management and communication climate within the centers and programs? Between the program and centers?
What are the ranges of center-based and family-based program options & services?
What is the rate of staff turnover during the program year?
What is the range and average staff: child ratio for the different age groups?
What is the program's philosophy toward ELL instruction? How does it match the teachers' philosophy and behavior?
What are the reported effects of migration and shifting weather patterns on program operation? How do programs respond to these?
What are the perceived effects of current US immigration laws/ initiatives on program operations &/or family enrollment and participation?
What are the variations in characteristics of MSHS programs in regards to service delivery day and season? (e.g. hours of operation, # of hours a day dedicated to instruction)
What are the procedures used by MSHS programs to identify, recruit and enroll children and families?
What is the program policy on behavioral concerns and to what degree are teachers trained and aware of them?
When families leave to move to the next MSHS program, what information is communicated between programs? How is this done?
What is the rate of migrant family turnover within the program while it is open? How do they know when families are leaving?
What particular programmatic areas does MSHS staff report as most difficult to implement? Why?
Which programmatic areas does MSHS staff suggest augmenting/adding?
What is the *range* of staff salaries and seasonal contracts?
How do the above relate to MSHS children's and families' development?
Family-level Programming Questions
How does MSHS contribute to parents carrying out their roles as the primary nurturers and educators of their children?
What are the programs' philosophies, strategies, and approaches for engaging and supporting MSHS parents *and families*, especially with respect to cultural & linguistic considerations?
How does MSHS provide parents with a range of different opportunities for meaningful participation in the program, if volunteering is difficult for them?
What are barriers faced by programs in achieving full family participation in MSHS?
How and how often are opportunities for development/learning in the following areas provided: parents' own basic skills, language and literacy (including English), employment, computer skills, parenting and child development skills, health, legal?
In what ways are parents' advocacy skills enhanced through parent involvement?
How do parents influence the direction and service content of the MSHS program?
How do MSHS parents participate in family assessments and goal setting?

Learning about MSHS Programs ▪ **What is the variation in MSHS program operations and how do these relate to child and family characteristics?**
What is the variation in family/ home visitations?
What MSHS program areas are particularly effective in engaging and supporting parents and families?
How many staff were formally (or currently) MSHS parents?
How do the above relate to MSHS children's and families' development?
Child-level Programming Questions
What is the classroom composition? How does it vary during the season and across centers? What causes such variations?
What is the rate of attendance by children within a given time period (separating migrant and seasonal children)? Average turnover rate within a given operational period? Does this differ among families of infants, toddlers and preschoolers?
What is the range and intensity of the instructional practices used in MSHS classrooms and in homes with children? …with parents? o How do these vary across the full-day? By age group? By length of season?
What is the variation in MSHS program developmentally appropriate environments and effective curricula?
To what extent do programs engage culturally- and linguistically- appropriate curricula and practices?
What is the global classroom-level quality of MSHS programs, as well as the quality of ELL (English Language Learner)-instruction-specific interactions?
What is the range in the proportion, degree and type of language utilization (English vs. child's home language) in the classroom and other activities (e.g., time per day, person speaking it, goal for speaking it, utilization during instruction vs. directives)? Does this differ among families of infants, toddlers and preschoolers?
How attuned are the teachers with the children when the children are speaking one language with them versus another?
How are MSHS programs providing opportunities for children to develop • Language skills (including bilingual development)? • Early literacy skills like letter recognition and phonemic awareness? • Math and problem-solving skills? • Social skills? • Emotional and behavioral regulation? • Health and hygiene skills? Safety skills? • Nutrition?
What barriers are present in the identification and service provision for children with disabilities? How does MSHS provide appropriate services for children with disabilities and support the efforts of parents of these children to work with and assist their children?
MSHS Participation (as reported by Parents)
What has been the most important benefit of the program on their children? (e.g., health, safety, development) Does this differ among families of infants, toddlers and preschoolers?
What has been the most important benefit of the program on their families? (e.g., employment, education, family literacy, support, services) Does this differ among families of infants, toddlers and preschoolers?
What are parental expectations for MSHS participation and impact?
What is the level of parental satisfaction with MSHS? If there were more funds available, what would they suggest changing or adding? What parts aren't helpful? What parts are most important for the

Learning about MSHS Programs ▪ **What is the variation in MSHS program operations and how do these relate to child and family characteristics?**
family?
What types of family involvement activities have the parents' experienced with MSHS? Are there available in MSHS programs?
What do MSHS parents learn from MSHS participation? What would they like to learn more about?
What are barriers to full parent participation in MSHS? What are the barriers to going to MSHS in the next local community where they work (migrants only)?
How many times have they arrived at an area and were not able to enroll their child in MSHS because of full enrollment?
How do the above relate to MSHS children's and families' development?

Learning about MSHS Communities & Neighborhoods ▪ **What is the relationship of community and neighborhood characteristics to child, parent, family, and MSHS?**
To what extent do MSHS programs utilize community resources to meet the needs of children and their families (e.g., well-baby health services provided for infants, medical and dental appointments, WIC, housing and utilities, employment, migrant education, other applicable social services, additional child care services?
How are effective are each of the community partnerships for the local MSHS families? Why? Why not? (e.g., barriers such as availability, waiting lists, relationship with MSHS, application processing time)
(Questions for community partner interviews): How long has there been an established partnership in place? How many MSHS children and families do you serve? In what capacity? What makes it a good partnership? What can MSHS do to improve it?
How do parents link with other community supports? To what degree are there barriers to accessing such resources (e.g. transportation, business hours, language, cost, legal)
What are the perceptions of the communities at large, in general and with respect to their reception to migrant/seasonal population?
How often MSHS families engage with friends and other families in the community?
How does the program utilize community partnership plans? How about community assessments? What would improve their use?
How do the above relate to MSHS child and family development?

APPENDIX D

MSHS COMMUNITY CONSULTANT CALL SUMMARIES

(SEE APPENDIX A FOR PARENT CALLS SUMMARIES)

Staff from the MSHS Community Consultant Group
Staff Conference Call Highlights[3]

Overview

The following section provides a summary of the highlights of the discussions from the MSHS Community consultant calls, including important and useful information that helped support the design of the MSHS Survey and improved the understanding of the researchers involved.

List of Topics and Dates

Below, are the topics and dates of each of the calls, which were mostly conducted in the late evening Eastern Standard Time. The Call Highlights are at the end of this memo.

Call 1. General Background Information: Wednesday, May 7th 2008
Call 2. Recruitment Issues: Thursday, May 8th 2008
Call 3. Interviewing and Working with Children and Families: Thursday, May 8th
Call 4. Longitudinal Issues and Tracking: Friday, May 9th 2008
Call 5. Community Relationships: Friday, May 16th 2008
Call 6. Language Development and Instructional Practices: Tuesday, May 20th 2008
Call 7. Health and Mental Health: Friday, May 23rd 2008

Call 1. General MSHS Background Information
Wednesday, May 7th 2008

General background information including stability of children in the centers and timing to enter the centers for data collection purposes –
Respondents shared that start dates can vary, but past history can be used to estimate these dates. Regardless of the size of the program, most programs have a season with operational periods resembling bell curves and that each program can give the research team an estimate of "peak" operation which would provide the largest sample. Based on enrollment, most respondents reported that they are fully enrolled within 2-3 weeks of the opening date. The researchers should consider the differences in programs in terms of length of service. There are short impact programs less than 6 weeks vs. longer program 3-4 months. Further, issues that can potentially affect enrollment are weather, housing availability and immigration issues.

Providing estimates of the proportion of families that enter and remain for the season was difficult given variation within the programs and across centers. While some centers or programs operate with a stable and consistent number of children and families, there are other programs that see "waves" of families come in and out of the program based on the various crop harvests. There is also a difference in the home-base and upstream programs. Other issues that affect the dates of migration include families returning when school starts in the fall and families coming back later after the later harvests have finished up north.

Delegate agencies and their similarity to their grantee --

[3] Following OMB Guidelines, each call involved less than nine consultants and each call involved a different set of 9 or less questions.

Based on the response from the delegate agencies and grantee representatives on the call, they agreed that the delegates have a degree of independence in terms of local decision making but have similar policies as the grantee. Respondents agreed that it would be best for both the grantee and the delegate agency be notified of their participation in the study.

Call 2. Recruitment Issues
Thursday, May 8th 2008

Engaging parents in the process --
Program staff felt that both interview and focus group formats would work well for the families. It is helpful to spend the first 10-15 minutes to build trust with the parents. It was also suggested that interviews run from 1-1.5 hours in length at the most. If husbands and wives are interviewed together, the balance of responses may depend on how long families have been living in the United States or if they were born/raised here. Those families that have been in the U.S. for a few years may be more balanced in their contribution to the interview while fathers from more recently immigrated families are more likely to present responses on behalf of the family. In terms of fathers contributing to the survey, respondents felt that fathers would be very participatory. Finally, if focus groups are conducted, attention to the gender mix may be needed. Different responses may be provided with all males and all women in one group as opposed to combined groups of men and women.

Those participating on the call also recommended that parents will be more open if they have a sense beforehand about the types of questions that would be asked. Establishing trust is essential as many families are fearful and extremely cautious of outsiders due to their immigration status. Respondents suggested that center staff could assist with the surveys since they have established relationships with the families. However, given the time constraints on the staff, they also supported the idea of an on-site coordinator who would serve as a liaison between the program and research staff.

Compensation for families and staff --
The respondents felt that a stipend for the on-site coordinator staff who would assist in the interviews and coordination of the on site survey process will be important. Providing incentives for families and classrooms staff would also be very helpful. The idea of presenting gift cards was well received as well as giving staff and parents a choice of 3 gifts and letting them choose which one they wanted (all being of equal value).

Sharing information --
In terms of getting information out about the study, it was suggested that someone attend parent orientations, "open houses," or parent meetings. Since it may not be possible to make "pre-visits" to all the centers, the creation and dissemination of an informational DVD that programs could share with parents was suggested.

Program notification of their selection into the study --
Respondents agreed that if the information about being selected for the study came from the Office of Head Start, it would demonstrate its importance. Following up with a phone call after the letter was mailed would be appropriate. For delegate agencies, all agreed that the initial contact should be sent to both the grantee and delegate agency directors (letter and follow up phone call) to make sure they have the same information.

Call 3. Interviewing and Working with Children and Families
Thursday, May 8th

Conducting a study at the national level --
Most of the sites have classrooms that are broken into 3 age categories:

- infants 0-12 months
- toddler which are 1-3's
- 3-4 year old preschool classroom

In a large grantee from California it was noted that over 51% of their classrooms are infant and toddler classrooms. They also have a large number of family child care homes, where MSHS services are provided in the homes of licensed child care providers.

The programs collect children's heights and weights. They also make observations of how the child is functioning for an age level, conduct visual screenings, and assist in securing a physical exam, if not already conducted. It was noted that the direct assessments are often done in the classrooms with the permission of the parents. Another means of collecting "Ages and stages" data is during the intake process in which the family advocates complete an assessment form to get the parents input on the child's development. Most of the MSHS direct assessments are conducted in the classrooms by or with the assistance of teachers and teacher aides.

Best place to get information --
Respondents agreed that the center may be the most appropriate place to complete the child assessments – due to the complexity of the job schedule – a lot of families work 10 hours in the fields but commute 2 hours to get there. They noted that the surveyor will need to come into the classroom and engage in the classroom prior to assessing the children. They agreed that, in order to get good responses from the children, assessors must have the children's trust first. They believed that the teaching staff can help introduce the survey staff or come up with some innovative ways to help the researcher build relationships. The key will be to engage in upfront communication with the teachers, including letting them know specific dates of the survey project. If parts of the assessment will be conducted away from the classroom (in order to minimize distractions), the respondents said that the classroom staff can provide assistance, if needed.

Challenges to the implementation --
Language considerations are key so the researchers would need to be bilingual or translators will need to be present.

Interviewing parents --
It was agreed that parent interviews could be conducted in the evenings or on Saturdays. Centers often have huge participation rates in parent meetings during these times– almost 100% participation. They stated that parents want to participate and want to learn as much as they can. It was also noted that they felt like parent participation in the migrant programs is a way for parents to gather together, which they enjoy .

In terms of where to interview parents (at home or at the center) it just depended on the program. For some it would be easier to do it at the home but for others who live in poor housing facilities, it might be better to conduct the interviews at the center to avoid putting parents in a difficult situation.

Strategies for working on new initiatives with a teacher --
Upfront open communication about what the survey plans are is recommended. Most teachers have email so sending them emails would also be helpful. In addition, staff can hear more about the study at their trainings.

Respondents agreed that the creation of informational DVDs would be a good way to disseminate information to staff and parents.

Data Sharing --
Each program is different in how they approach data sharing but most try and contact the previous program where the family has been to get medical records, transition files etc. In some programs where families return each year, they have data on file.

Call 4. Longitudinal Issues and Tracking
Friday, May 9th 2008

Tracking and locating families over time --
Many families tell programs that they are migrating and the programs try to provide them information about other programs. Programs also communicate with staff in those areas to provide them with information about the families that are projected to arrive in their program. There is also a resource directory that has been printed up by the Training and Technical Assistance provider (Academy for Educational Development or AED) that has a map of all the programs in the country and that is shared with parents.

In one program they have a "Christmas card address" of their parents and they try to keep track of them in the winter months by sending them a Christmas card. If the card is returned, they know the family is somewhere else. Another program also sends its families a monthly newsletter so that also helps them in knowing if their addresses are current.

It was noted by all respondents that cell phones help in keeping in contact with families, particularly as their numbers stay the same. It was noted that a very high percentage of parents have cell phone numbers (>90%). For others, their crew leader may have their number.

Respondents noted that if families were provided with cell phones or compensation for their cell phone usage, they would be very likely to participate in a longitudinal study. It was also noted that, for locating families over time, it would be helpful to have a contact name and number of a family member who has a permanent residence and who the family is likely to touch base with throughout the year. This is usually a grandmother, grandfather or an extended family member.

In terms of engaging families in monthly calls over the course of a year, the respondents agreed that it may be difficult since parents are nervous about immigration issues. Stressing the importance of this study for children and other MSHS families would help parents be more inclined to participate.

If the project had a liaison between the research team who helped coordinate the visit and worked with families while on site, it would be very helpful for creating trust. They also could be part of the monthly calls. The individual who conducts the calls should be the same person from month to month and preferably an individual they have met in person.

Percentage of families returning year after year –
Most of the respondents noted that a high percentage of children (around half) return to the program each year in part because the families have worked for the same grower each year and they know they will have child care.

The biggest challenge and trend that programs are seeing is the role that immigration reform is having on programs. For example, the state of Arizona recently passed legislation that they believe will greatly impact the number of families that return to work there next year.

Other factors affecting the families --
While many families return to the same area each year, migrancy is affected by the weather. If it is bad, the families will move since they can no longer afford to stay and wait for work. In past years, some were able to get local assistance with food and housing until the harvest started. However, many local and state laws regarding aid eligibility have changed, which forces families to move on to a harvest that has started elsewhere.

There is also at least one new group of families who are having a harder time adjusting. They are indigenous groups from different parts of Mexico, including from more rural mountainous and southern parts of Mexico, and who speak either Mixteco bajo or Mixteco alto. Cultural differences have been observed including polygamy and a more male-dominated structure. Also, more restrained nonverbal communication patterns are present. It was noted that these families are in many different parts of the country and some are more culturally assimilated than others.

Call 5. Community Relationships
Friday, May 16th 2008

Partnerships/relationships that would be useful to have more information about --
Participants expressed the need to gather national information through the study about partnerships with the WIC program, as well as with Migrant Health Clinics. One program representative reported increasing communication difficultieswith some types of WIC programs, although not all, because of reported regulations on data sharing. This representative said that the barriers may be HIPAA-related. The barriers to data sharing between WIC and MSHS appear to be challenging even when MOUs were in place. Finally, it was noted that it was unclear if families access WIC when they migrate or only use the service in the homebase. There is a concern that there are barriers for migrating families to access the program.

Strengths and barriers to collaboration --
Some States have Migrant Coalitions that form Community Outreach Groups meetings or community forums. These types of groups help give a migrant perspective to the community and are especially helpful in emerging Latino communities. The consultants talked about collaboration with other migrant programs and how they serve families. One program reported bringing community services to the families at MSHS(For example, bringing dental services on site, providing ESL classes at the center, etc). They felt that, because families have existing positive relationships with MSHS, providing the services at MSHS helps builds community relationships in a safe way for families.

Relationships with pre-k and Migrant Ed, migrant clinics and other agencies --
Pre-K and Migrant Ed --One program pointed out that they do not collaborate with these other programs because MSHS runs through the summer and the schools are not open. Most programs have relationships with LEAs, but they found that communication is sometimes challenging (i.e., culture and language differences).

One homebase program reported collaborating with Migrant Ed. Even though MSHS and Migrant Ed have different definitions of what a migrant farmworker is, they still share information about families that is useful for recruiting. They collaborate before the summer season, prior to Migrant Ed's close dates.

Migrant Health – When asked what they would like to know from or about Migrant Health, one consultant stated "Are they going to get more money?" The program in Oklahoma reported a good relationship with Migrant Health and said that the MH Clinics were often in good places, i.e., rural areas that were close to the families. While they do better than regular doctors, the hours are sometimes limited because they do not have much money. The consensus was that the survey should ask about service hours, and migrant health clinics disappearing or reducing migrant services.

Other agencies that should be surveyed
The following were mentioned: schools, clinics and mental health clinics, pediatric dentists, WIC, food banks, community colleges or providers of ESL classes, housing authorities, OT, speech and language.

Housing and Communities --
Participants reported a wide range of housing conditions. Some reported that the housing in their community is good and located in a comfortable, close-knit community with a strong, Latino presence. Others reported seeing a shift in where families live due to immigration problems. Families were more dispersed in communities to avoid the raid of camps or the perception of concentrated groups of people.

Neighborhoods affect on centers --
There was a consensus among the group that neighborhoods impact the centers. Some centers are located in unsafe areas. Many families in some programs are living in urban areas and commuting to the fields because it was easier to find housing. However, families were reporting that immigration officials have been stopping vans and they no longer felt comfortable traveling.

In discussing immigration problems with families, consultants reported bringing in immigration attorneys and speakers to the centers to talk with the families so they could learn about their rights.

The Community's Influences on Families --
The following replies were given:
- Safe water
- Health (immunizations)
- Housing
- Stores (inexpensive)
- Food and access to safe food
- Transportation was less of an issue. Consultants reported that most migrant families had good personal transportation, although in some cases they shared it with other families.

Consultants reported that families are often viewed as outsiders in their communities, although some communities were more welcoming. It was suggested that a topic of interest nationally would be to determine the sectors that give the families the most resistance or support.

Call 6. Language Development and Instructional Practices
Tuesday, May 20th 2008

If you could ask 2-3 questions about child and family language/literacy development in this study, what would they be?
Participants had a number of recommendations for the questions that should be asked in this area including:
- What is the primary language of the children and families?
- How are their English skills developing? How about their home language?

- What are parents' values, beliefs, and desires regarding home language and English language development?
- How can parental involvement in family literacy activities be improved given the range of pragmatic barriers?
- What is the level and range of family literacy activities in the home? Subquestions included:
  - What parents are reading to their children and for how long?
  - What are the parents' education levels?
  - What kind of support do parents give to their children to learn at home?
  - How much emphasis is there at home on acquiring language in general?
  - How much conversation exists at home, i.e., day to day conversation?
  - To what degree are parents concerned about their children doing well in school?
  - How much of a connection do parents have with their child's classroom teacher?

Areas of ELL/bilingual instructional practices for which it would be useful to have more national information --
The participants were interested in learning about ELL/bilingual instructional practices being utilized across the country. There are many different approaches and materials that are being used with the MSHS children. This relates to the increased availability of such materials as well as the variability seen in the population. There is interest in learning how to identify best practices, as well as prioritizing policies or plans, particularly for teachers who need to implement them.

Participants also discussed several literacy programs that they currently partner with to help get books to children and families. These should be asked about in the survey. They included:

- The RIF program (3 books given to each family each year).
- Spark Literacy,
- Cradle,
- Help Project
- First Book
- Mexican Consulate's Offices

Call 7. Health and Mental Health
Friday, May 23rd 2008

Areas of Child Health and Mental Most Concerning --
Participants agreed that there are a range of issues in both health and mental heath that concern them. Most participants agreed that child health services were good and many health providers were focused on working with migrant workers. However, they reported a limited number of bilingual mental health providers and the few who are available are overbooked serving children (and their families). It was also noted that while there were no language barriers for health care, there were language barriers for mental health care.

Most of the participants agreed that MSHS families are experiencing increased anxiety and other mental health problems related to the increase in immigration raids across the country. There was also discussion about how stigmas impeded families from receiving mental health and behavioral services.

Of the medical/health issues that concerned those on the calls, asthma was among the most common response as well as the possible connection to exposure to pesticides. In addition, program staff also reported an increase in the number of children being diagnosed with autism, although they felt the rates were fairly similar to the national rates of 1 out of 150 children. Other concerns included anemia, lead

levels and childhood obesity. There was some discussion that migrant children did not seem to have the obesity issues that other Latino children did.

Family Health and Mental Health Most Concerning --
Among parents, type II diabetes was mentioned as the largest health concern. There was also a big concern about mental health issues particularly among single moms and the increase in domestic violence that may contribute to an increasing number of mothers separating from their partners. Pesticide exposure was also mentioned as a health concern.

There was also discussion about the stigma that is associated with mental health issues and how gambling and drinking in the community are not seen as mental health issues. A number of program staff felt that it might be important to focus on breaking down "Latino barriers" to mental health. However, one program found that once parents were successfully approached about these issues, there was a rapid increase in referrals and need for appropriate community resources.

As documented in other calls, identified stressors for families included living conditions and lack of housing, including what children were exposed to or what they witnessed when they lived in small quarters with little privacy. It was also noted that the issue of immigration also filters into the stress of parents and children because of immigration concerns. Children have been seen playing games that acted out the stress of immigration raids.

Health Areas of Strength for Families --
Participants all agreed that the family unit was a major strength. One program consultant reported seeing fewer behavior problems in the MSHS classrooms, compared to classrooms in regional Head Start. She further emphasized that most children come from two-parent families, are cordial, polite, well adjusted, proud of who they are, and proud of working in the fields. She believed this was because of the strong family unit.

When asked by the moderator if consultants were aware of a "quiet period" for children when they first enrolled in programs, none reported seeing that.

What types of national or even local programmatic initiatives are in place and should be asked about in the Survey?
One participant reported a statewide initiative focusing on screenings for families at the entry point to any service provider.

Other initiatives noted were:

- Little Voices for Healthy Choices – nation wide H.S., a special course in D.C.
- Oral Health Initiative – The participants also felt it would be important to have the survey examine families' understanding of oral disease, what their own concerns are, and what are their family practices.

Barriers to health that should be explored –

- time factors,
- transportation issues in rural areas,
- lack of Medicaid providers and lack of rural dentists.