Parenting education is a process of providing information to parents on the challenges of parenting, services available for families, and ideas on how to interact with children. The federal Even Start family literacy program, designed to increase the educational opportunities of parents and children, has a strong parenting education component. Parenting information is offered through formal classes, support groups, home visits and by involving parents in their child's classroom. Using the life course and family system's perspective, this study examined the impact of participation in the Even Start program on parents' knowledge of parenting and their parenting practices. The study employed a pretest-posttest design and utilized quantitative and qualitative methods of data collection. In all, 74 Even Start and 26 comparison group parents participated. Four hypotheses were tested: (a) Even Start parents would make greater gains in parenting knowledge and practices than would comparison group parents; (b) parents who made gains in parenting knowledge and practices would have different demographic characteristics than those who did not make gains; (c) parents with lower depression, higher self-esteem, and greater social support would make greater gains in parenting knowledge and practices; and (d) programs offering more hours of parenting education
would have parents making greater gains in parenting knowledge and practices.

Quantitative results indicate that there are demographic differences at pretest and posttest in parents' scores on parenting knowledge and practices although there is no significant difference in score gains as the result of program participation. More positive parenting practices were associated at pretest and posttest with lower levels of depression.

Qualitative results found increases in parenting knowledge, parenting practices, and self-esteem. No differences were found in programs who offered greater number of hours of parenting education than those that did not.
Family Literacy Programs: Can They Make a Difference in Parenting?

by

Sandra J. Bailey

A DISSERTATION

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the requirements for the
degree of

Doctor of Philosophy

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I understand that my dissertation will become part of the permanent collection of Oregon State University libraries. My signature below authorizes release of my dissertation to any reader upon request.

Sandra J. Bailey, Author
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CHAPTER 1

Introduction

Adult education has been of concern in the United States since the 1920s (Seckinger & Day, 1986). Early childhood and parent education can be traced even earlier to the late 1800s when public kindergartens were available for poor families (Landerholm, 1984). Until recently, these activities took place in separate spheres of education with little communication between educational domains. In the late 1970s, however, a new paradigm was developed that incorporated adult education, early childhood education, and parent education. This new model was called family literacy (U. S. Department of Education, 1995).

Family literacy programs take a holistic and systemic approach in serving families. The programs developed out of three basic premises: (a) historically, family members have learned from one another, with adults being responsible for teaching their children most skills, (b) adults want to teach their children out of love and desire for their children to be successful, and (c) a realization that education can help break the cycle of poverty and welfare dependence (Brizius & Foster, 1993).

Organized family literacy programs are relatively new. One of the first well-known programs was the Kentucky Parent and Child Education (PACE) program that was
implemented in 1985. During the late 1980s a hallmark program was funded by the William R. Kenan, Jr. Charitable Trust of Chapel Hill, North Carolina from interest in the Kentucky PACE program (Brizius & Foster, 1993). This program resulted in a family literacy model being named the Kenan model, after the funder.

According to Hibpshman (1989), family literacy is designed to improve the literacy of educationally disadvantaged children and their parents. It is based on the assumption that parents are a child's first and most influential teacher. Family literacy programs differ from other literacy programs in two ways. First, they focus on the entire family as a unit instead of focusing only on the parents or only on the children. Second, the programs must include four main components: parent education, early childhood education, parenting, and parent and child time together. The program activities need to apply to the families' everyday lives (Ponzetti & Bodine, 1993).

One federally funded family literacy program, Even Start, began in the late 1980s. The program serves families where at least one parent is eligible for adult education programs under the Adult Education Act, and there is a child under the age of eight years (U. S. Department of Education, 1995). This research project examined the parenting component of the federally funded Even Start family literacy programs in the state of Oregon to determine if, and for whom, parenting knowledge and practices are improved as the result of program participation. The state of Oregon has seven Even Start programs located in both urban and rural areas of the state serving approximately 140 families. Even Start parents participated in a statewide evaluation of the programs. Qualitative interviews
and quantitative measures were gathered to assess total Even Start program effectiveness. This research study, however, focused only on the parenting component of the program.

Even Start Family Literacy Programs

There is no single mode of service delivery for the Even Start program. Although Federal Regulations mandate that the four components identified by the Kenan family literacy model be included in any Even Start program, the model for the delivery of services is left to be determined by the local program (Goodling, 1994). The flexibility in the regulations allows programs to serve the local population most in need. Clearly, a program that focuses on teen parents will differ greatly in the delivery of services from a rural program serving undereducated parents who are working full-time. The first might offer a center setting where families come to the program during the day to receive services. The rural model might incorporate evening classes and more home visiting opportunities for individual tutoring due to participants' work schedules.

Federal Funding of Even Start

In 1988 the United States Congress passed Public Law 100-297 to authorize the Even Start Family Literacy Program to promote family literacy by improving educational opportunities for children and their parents. The model incorporates three interrelated goals: (a) to assist parents in becoming partners in their children's education, (b) to help children reach their full potential as learners, and (c) to provide adult education training for the parents (Brizius & Foster, 1993). Even Start is designed to accomplish these goals
through combining adult education and early childhood education opportunities for families with children birth through age 7 and providing comprehensive social services to support families in their efforts to improve literacy and job skills. Today, approximately 26,000 families are served by Even Start in 500 programs throughout the United States at a total cost of over $90 million (Goodling, 1994).

**Federal Even Start Regulations**

Federal Regulations mandate that each Even Start Program include the following:

(a) a method to recruit and identify families most in need, (b) a process for screening parents to enable them to fully participate in the program, (c) a method to accommodate the parents' work schedules and other responsibilities so that they can participate in the program, (d) high quality adult education and early childhood education programs, (e) specialized staff training for all Even Start staff, (f) services through home visits, (g) a year-round program offering some services during the summer, (h) coordination with other programs and agencies such as Head Start and programs under the Adult Education Act, (i) a program serving families most in need, and (j) provisions for an independent evaluation of the program (Federal Register, 1994).

Programs are funded in 4-year cycles with increasing local contributions from the community. Even Start programs must provide 10% matching funds the first year, 20% the second year, 30% the third year, and 40% the fourth year. Matching funds may be either in-kind or cash. Matching funds from the federally funded Head Start program and the Child and Adult Nutrition program are acceptable. Programs may reapply for funding
after the fourth year at which time the matching requirement becomes 50% of the project's budget. Minimum awards for each program are $75,000 as required by federal regulations (Federal Register, 1994).

Parenting

Parenting is a life-course event that a majority of individuals experience. Ninety-five percent of people who can, become parents sometime during their life (Miller & Myers-Walls, 1988). Although most people experience being a parent at some point in their life, there is little preparation in our society for taking on the role. Consequently, people often seek parent education programs (Fine, 1989). According to Fine, most people who seek parent education are being re-educated, rather than educated about parenting for the first time. This is because people often parent in the same way they were parented. Parenting attitudes and parenting practices are acquired over the life course.

Parenting is not an interaction that occurs in isolation, but rather it is woven into the daily lives and experiences of all family members. Family literacy programs are an example of how parenting is integrated into other aspects of family members' lives. Scholars who developed the model of family literacy programs found parenting to be an important element in breaking the cycle of illiteracy. Parents are viewed as the child's first teacher, therefore parent education became a requirement of comprehensive family literacy programs. According to Ponzetti and Bodine (1993), parent education is the component that makes family literacy programs family focused, however, it is also the component that is least understood by those implementing the programs. Parent education covers three
areas: (a) formal classroom parent education, (b) parenting involvement, and (c) parent support services.

Even Start participants have arrived at the program from a variety of backgrounds. Most have not experienced a traditional progression of life events. This variety of trajectories experienced by Even Start participants is best understood from a life-course perspective.

The Life-Course Perspective

A life-course perspective was utilized in this study as the major theoretical base. The life-course perspective provides a framework for studying individuals and families within a single generation, and over the course of time, incorporating the historical contexts of each generation (Elder, 1978). Utilizing a life-course perspective, attention is paid to the process, context, and changes in the lives of individuals as well as families. This allows the researcher to examine the changes that occur within an individual over time in context of the family and the larger society. The Even Start family literacy program works with individual members within the context of their daily lives. A premise of successful family literacy programs is that the material taught and manner in which it is taught relate to the participant's daily lives (Ponzetti & Bodine, 1993). The life-course perspective lends itself well in the evaluation of this program.

The life-course perspective according to Bengtson and Allen (1993) incorporates five themes of human development: (a) multiple temporal contexts, (b) multiple social
contexts, (c) diachronic perspectives, (d) heterogeneity in structures and processes and (e) the utilization of multidisciplinary perspectives.

Multiple time clocks occur in development including ontogenetic time and historical time (Bengtson & Allen, 1993). Ontogenetic time is usually measured by the age of an individual. Historical time focuses on the events occurring within the larger society. For Even Start families this may be the change in the work force to one where there are primarily service-oriented jobs that require one to have basic literacy skills.

Multiple social contexts of development refer to the understanding of social ecology of the individual. Included in this is the social structure of where the individual resides, the construction of social meanings about life events, the cultural context and the influences of the micro- and macrosocial levels on development. Family literacy programs recognize that the individual and the family do not live in isolation. The programs take a holistic approach to learning through becoming aware of the social, emotional and physical needs of the family as well as literacy needs.

Diachronic perspectives on development refer to taking a dynamic rather than static approach to studying individuals and the family. This involves the idea of feedback where change is reciprocal in nature. Both individual and family development is affected by micro- and macro-level influences. Even Start participants are faced with changing interactions within their family as well as changing how they function in the community such as becoming employable.

Heterogeneity involves the difference in both the structure and processes of development (Bengtson & Allen, 1993). Development must be examined in terms of
variation in addition to modal or average trends. Individuals become more diverse over
time due to aging and cohort experiences. This idea is consistent with Elder's (1978)
assertion that an individual life history is multiple life histories. For example, a woman may
have a life history of motherhood, career woman, and wife. This is certainly the case of
Even Start participants as they have not followed a traditional life-course pattern of
completing their education, going into the labor force, marrying, and having children.
Many had their education interrupted by the birth of a child when they were a teen. Others
have neared high school completion, but dropped out for other reasons.

The life-course perspective attempts to understand human development from a
multi-disciplinary approach allowing the researcher to be inclusive in the theoretical
framework (Bengtson & Allen, 1993). As a part of this inclusion a systems perspective
was also utilized in this study to complete the framework for understanding how the
family is affected by participation in the program.

**General Systems Theory**

General systems theory lends itself well in completing the theoretical framework
for the study of the parent education component of the Even Start Family Literacy
program. A systems perspective focuses on the family system as a whole rather than
examination of the parts (Galvin & Brommel, 1991; Whitchurch & Constantine, 1993).
According to systems theory, as one member of the system changes, the entire system is
affected. The Even Start program takes this into consideration through the philosophy of
serving the entire family. Parents are offered adult basic education, children are given
quality early childhood education, and the interactions within the family unit are addressed in the parent education component. Intergenerational activities with extended family members are offered by the program as well. This model sees the family operating as a unit.

Several of the basic components of systems theory are useful in explaining how the Even Start program works for families. These components include boundaries, mutual influence, and equifinality (Whitchurch & Constantine, 1993).

Families that have permeable boundaries may find it easier to adapt to the requirements of the Even Start program, as the intensity of participation requires a great deal of time and energy on the part of the parent. Participants commit to approximately 12 hours per week of program time. Families that have high levels of cohesion and low ability to adapt to the program's rigor may find it difficult to deal with the system's change that occurs due to program participation.

Members of a family system are interdependent and have mutual influence (Whitchurch & Constantine, 1993). As elements of the system, the family members are held together through their interdependence. Each family member's action then affects the rest of the system. In the Even Start program, changes in parenting knowledge and practices would hopefully lead to changes in parent-child interactions.

Equifinality is the concept of reaching a goal through a variety of means (Whitchurch & Constantine, 1993). The Even Start regulations encourage local programs to meet the individual needs of the program participants. The people who are served by Even Start are to be "most in need" according to federal regulations, therefore, allowing
programs to tailor services may be most beneficial. A single-mother on welfare may best be served by attending classes during the day with other families in similar circumstances. A married father with a full-time job may need to complete the program by attending night classes. Still another parent who lives in a rural area and is isolated due to transportation problems may benefit from the services of a home visitor. All three program participants could meet the goal of acquiring literacy skills and becoming self-sufficient in very different ways.

**Definition of Terms**

The following definitions of parenting knowledge and parenting practices were utilized in this study. Parenting knowledge refers to one’s knowledge of basic child development and parenting skills. Parenting practices refers to one’s reported behavior or interactions with a child in carrying out the role of a parent.

**Chapter Summary**

This study examined the parenting component of the Even Start family literacy program in the seven program sites located throughout Oregon. The study integrated the theoretical orientations of the life-course perspective and general systems theory as a framework to explain how and for whom parent education is beneficial. The life-course perspective allowed an opportunity to consider how time and social context play a role in the participant's development. The use of a family systems perspective in this study offered an understanding of family interactions.
CHAPTER 2

Review of the Literature

Even Start was funded by Congress in 1988, through an amendment to the 1965 Elementary and Secondary Education Act (U. S. Department of Education, 1995). The program is intended to improve educational opportunities for young children and their parents and increase self-sufficiency by providing an array of integrated services. The following literature review examines previous work on the family literacy model, findings from the national Even Start evaluation, and research in parent education.

The intensive Even Start program recognizes that changes in the family that will lead to economic self-sufficiency take time. Programs are required to plan to serve families for a minimum of three years (U. S. Department of Education, 1994). There are several characteristics of Even Start families that lend support to the idea that change will take time; these will also be explored in this literature review. Even Start participants tend to be poor, suffer from high rates of depression, lack social supports, and are likely to have been a teen parent.

Family Literacy: A Deficit Model?

The characteristics of Even Start families make them a difficult population to serve as they have so many needs. Some scholars have raised concerns that family literacy programs may take a deficit approach in working with families (Auerbach, 1989; Taylor,
Program operators and staff who implement family literacy programs have good intentions for the program and strive to help the families they serve to become literate and attain self-sufficiency. The problem, however, is that the design of family literacy programs is one of a deficit approach. It assumes that parents lack the necessary skills to promote school success in their children (Auerbach, 1989). Participants in family literacy programs are primarily low-income parents who lack literacy skills or do not have English as their first language. Programs need to acknowledge the participating family's social reality. Auerbach claims that if family literacy is narrowly defined to mean school type activities to be conducted in the family home, then social-contextual demands must be addressed before learning can take place. The demands of everyday life, from this perspective, are taking parents away from developing literacy skills for their children and themselves.

Auerbach (1989) asserts that the problem of literacy is placed on the family by society. He outlines several false assumptions about the population of families served by family literacy programs: (a) language-minority students come from homes where education is not valued or supported; (b) family literacy is unidirectional from parent to child; (c) only home factors determine who will succeed and who will not, since school practices are appropriate; (d) success is a result of extending school-like activities to the home; and (e) it is the parents' problems that are barriers to creating positive family literacy contexts. In fact, the problem of literacy is not a deficit of the family environment but one of imposing middle-class values as to how literacy should be acquired on all
families. School factors, according to Auerbach, account equally as home factors in the acquisition of literacy skills.

Auerbach (1989) concluded that families who were successful in promoting literacy in their homes provided a variety of contexts in which literacy was utilized rather than isolating it as a separate instructional activity. By broadening the definition of family literacy, the context in which families learn can be expanded to include the demands of their everyday lives. This change in perspective alters how family literacy programs are implemented. One example is the move to get parents involved in their child's school. Low-income families may not be able to get time off from work to help in the classroom. Language-minority parents may not be able to communicate easily with the child's teacher on how they might become involved.

Even Start is one family literacy program that attempts to broaden the definition of family literacy to incorporate the lives of the families it serves outside of the classroom setting. This is accomplished by providing home visits, sponsoring special family night activities, and tailoring the program to meet the individual needs of the families.

Even Start Evaluation

The Even Start program is less than 10 years old. The federal government understands that improving the literacy level and economic well-being of Even Start families takes time, therefore, the local programs are required to plan for serving families for a minimum of three years. As a result, little empirical research is available on the success of the Even Start program. The national evaluation that examined the program
impact for the first four years found little positive effect on families as the result of program participation versus families in a control group (U. S. Department of Education, 1995).

The national evaluation of Even Start found that the program did serve the intended population in that parents and children made gains overall in literacy as a result of participation. The gains were not, however, significantly greater than comparable families using other available services. The researchers concluded that for some areas such as increasing family income or obtaining better employment the effects may not be seen due to the short time covered by the study.

A measurable increase in parenting practices was not found in the national evaluation study participants. The researchers concluded that this may be due to a weakness in the ability to measure program effectiveness, ceiling effects on pretests, or a lack of effectiveness on the part of the program.

The national evaluation did find great variability from program to program in the study. Those families that had high intensive exposure to program services had the most significant overall gains. This finding would appear to support the need for the intensity of services.

Another study conducted on an intergenerational literacy project found support for integrated services. Compared to nationwide statistics on retention in Adult Basic Education (ABE) programs of 30 to 50%, the intergenerational program had a retention rate of 73.3% (Nickse, Speicher, & Buchek, 1988). Of those who left the program, one-half did so because they found new or better employment. Parents in the study also
reported progress in their children's work which they attributed to their involvement with their children.

Parent Education

Parent education has become increasingly popular in the last decade. A great proliferation of books and other written material has become available to the public. Parenting programs and classes have been developed. There are perhaps many reasons why parent education has become such a popular topic. The baby boomers, a very large cohort, began having children around the 1970s. Maternal employment has dramatically increased. More children are growing up in single-parent families. Medical advances have made options possible for infertile couples. Clarke-Stewart (1981) suggested five reasons for the national attention on parent education: (a) parents have been increasingly seen as the most important influence on children's development, (b) schools have not been seen as effective in changing children, (c) families are under greater societal stress, (d) there is evidence that many parents are not effective, and (e) new scientific knowledge on child rearing has become available.

Defining Parent Education

Parent education according to Fine (1989) is a process of changing attitudes about how to interact and raise children. Fine defines parent education as an education program typically led by a non-clinical person who can be from a variety of disciplines. The program is conducted over a certain number of sessions and addresses common problems
parents face in raising their children. Parent education programs avoid therapeutic type confrontation (Fine) focusing rather on one or more of the following tasks: information sharing, skill building, improving self-awareness, and problem solving (Fine & Brownstein, 1983).

Fine (1989) asserts that there is no one thing called parent education. How the information is delivered varies widely (Powell, 1986). Parent education can be based on many different philosophies. The three most common orientations to parent education are behavioral, Adlerian, and interpersonal communications (Henry, 1981). All three models have empirical support (Medway, 1989) although the effectiveness of the behavioral model has been more extensively tested as it is more conducive to traditional research paradigms (Henry). No one parenting program stands out as being superior to all others (Cooney, 1981; First & Way, 1995; Powell, 1986).

The three approaches to parent education differ in the material presented and desired outcomes. The behavioral approach teaches parents how to change the behavior of their children (Henry, 1981). The model is limited as it focuses only on the observable behavior of the children. Adlerian parenting programs are based on the philosophy that children's behavior is purposive and goal oriented in relation to their position in the family as a unit (Henry). Parents are taught how to understand their child's behavior. The interpersonal communications approach to parent education focuses on teaching parents how to improve communication with their children (Henry). Parents learn how to be active listeners. Henry suggests that this approach may be best for parents of adolescents.
Most parents who are interested in parent education are being re-educated about the topic (Fine, 1989). The parents already have attitudes and values that they hold about parenting and families as well as skills to perform the parenting role. These skills, attitudes, and values are acquired throughout life from the person's family-of-origin and the community.

**Historical Perspective of Parent Education**

Parent education has come into the limelight in recent years for a variety of reasons, however, its origins date back many years. Landerholm (1984) traced parent education in the United States to the late 1800s and early 1900s where children were taught in kindergartens in the mornings and social workers worked with the child's family in the afternoons. In the 1920s the first magazine to address parenting issues, *Children: The Magazine for Parents*, was published (Seckinger & Day, 1986).

The 1960s brought many issues of social reform to the forefront including the War on Poverty. Programs such as Head Start were implemented during this era to help low-income children be successful when they reached public school age. At that time it was thought that the home environment might be the cause of school failure, such as lack of toys in the home or lack of exposure to formal language (Landerholm, 1984). The programs found that it was important to work with the parents as well as the children, therefore, the Head Start programs included a home visit component as well as a parent participation requirement.
The link between adult education and parent education also is not new. According to Seckinger & Day (1986), as early as the 1920s, educators recognized that parent education was an important part of adult education. During this time the new education movement of John Dewey was being linked to both adult education and parent education (Seckinger & Day). The new education philosophy was one that was more humane and democratic than previous views on education. Parent education became a logical link to adult education because the parental role is highly significant to most adults (Ponzetti & Bodine, 1993). Adult education, according to Ponzetti and Bodine needs to be connected to daily life, and being a parent is a continual role for those with children.

Recently there has been an increased interest in family support programs. Family support programs have been linked to parent education. Powell (1986) describes family support programs as community based programs that focus on developing support systems for families. According to Powell, family support programs take a broad approach to parent education by focusing on the entire family.

This increase in family support and parent education programs appears to be in response to concern today about the pressures families face (Powell, 1986). Thompson and Hupp (1992) listed illiteracy, inadequate home learning environment, lack of job skills, and ineffective parenting as four of the eight key risk areas that threaten the integrity of children and families. The other risk areas include poor health care, malnutrition, and abusive family situations. Ineffective parenting was cited by Swick & Graves (1993) as the most serious risk facing families in the early childhood years.
Parent education continues to be important to families. Parents try to retain the family as a place to shelter and protect family members from the pressures of today's world. They have become aware of the influence of mass media on their children that can often contain permissive and irresponsible messages. Parents are trying to juggle multiple tasks of career, self-fulfillment, and obligations to their children (Seckinger & Day, 1986).

**Effects of Poverty on Families**

Low literacy skills and poverty have been found to be related. Improving the level of education of poor families can assist in breaking the cycle of poverty (Brizius & Foster, 1993). According to the Children's Defense Fund, in 1992 one in five children in the United States lived in poverty. Minority children are more likely to experience poverty than white children (Children's Defense Fund, 1994). Research has revealed that poverty affects both the child's development and the parent-child interaction (Duncan, Brooks-Gunn, & Klebanov, 1994; McLeod & Shanahan, 1993).

Duncan et al. (1994) found that persistent poverty is more harmful to a child's cognitive development and behavior than transitory poverty. Therefore, the effects of poverty may be cumulative and become increasingly more severe over time. In a review of previous research, McLeod and Shanahan (1993) found similar results. Poor children had more conduct disorders, behavior problems, depression, and low levels of self-confidence and social adaptation. McLeod and Shanahan's study revealed that poor children experience greater psychological distress than their nonpoor counterparts. In addition, as
the duration of poverty increased so did the children's feelings of unhappiness, anxiety, and dependence. These behaviors and feelings did not vary by race or ethnicity.

Poverty also affects how parents interact with their children. McLeod and Shanahan (1993) found in their review of past research that parents experiencing poverty were more rejecting of their children. Their study of poverty revealed that currently poor mothers spank their children more than nonpoor children. This in turn had an effect on the child's mental health. The persistence of poverty, however, did not increase either spanking behavior on the part of the mother or a decrease in her responsiveness to her children.

The demographics of single-parent families makes them particularly susceptible to poverty. Educational attainment and single-parent status are inversely related (Norton & Glick, 1986). Single parents are more likely to have less than a high school education whereas married couples were more likely to have a college education. In addition, single fathers are more likely to be in the work force than single mothers. All of these factors contribute to the earning capability of single-parent families.

**Effects of Parental Depression on Parenting**

Depression is linked to poverty and stress, two factors that are persistent in Even Start families. Research on parental depression has focused primarily on maternal depression. The majority of Even Start participants are female, therefore, drawing upon the maternal depression research is appropriate. In a review of past research Rutter (1990) concluded that several factors related to maternal depression may impair parenting
behavior such as reduced problem solving and coping skills, diminished sensitivity to a child's needs, or inappropriately relying on the child for comfort.

Several studies have identified depression as having an influence on parenting. Depressed mothers were more likely to respond with control when their children were distressed and lacked skills in responding to their children's cues (Cox, Puckering, Pound, & Mills, 1987). Mothers who experienced depression were less positive with their new babies (Cohn, Campbell, & Matias, 1990). Depressed mothers have also been found to be more disorganized, unhappy, and inconsistent in their interactions with their children (Davenport, Zahn-Waxler, Adland, & Mayfield, 1984).

The influence of depression on parental behavior can affect children in several ways (Rutter, 1990). The child may experience high levels of conflict, distress, or emotional withdrawal. The parent may target the child for scapegoating or to seek comfort in a manner that places too much responsibility on a child. Children of depressed mothers have been found to experience unusual levels of guilt (Zahn-Waxler, Kochanska, Krupnick & McKnew, 1990).

Although previous research on maternal depression has varied greatly with respect to samples, methodology, and findings, the implications indicate a need to consider maternal depression when assessing parenting practices. Depression appears to impair a mother's ability to parent in ways that may be detrimental to her children (Rutter, 1990).
Social Support Systems

Using a systems perspective, the subsystem of parent-child relationships occurs within a larger suprasystem (Whitchurch & Constantine, 1993). A parent's social network would be one such suprasystem. Jennings, Stagg, and Connors (1991) in their study of mothers' interactions with their preschool children, conceptualize social networks as those that involve both personal and maternal networks. Personal networks are those people the mother considers important in her life, whereas maternal networks are those who are important to her in her role as a mother (Jennings, et al.). Belle (1982) defines social support as emotional and instrumental assistance from others and discusses its importance as a buffer from stress for women.

Jennings et al. (1991) reported that mothers with more close, cohesive, and smaller personal networks were less satisfied with those networks. Mothers who had larger maternal networks had more satisfying personal networks. The authors suggest this may demonstrate a need for mothers to have a support for their maternal role in their personal network. A relationship was found between high satisfaction with a personal network, less cohesion in the personal network, size of the maternal network and parent-child interactions. These mothers had a warmer, less intrusive, and less controlling style of interaction with their children. They also praised their children more. In examining parenting practices this study suggested there is importance in considering the social support networks of the parents.

Belle's (1982) study of low-income women found that women who had more day-to-day assistance and someone to confide in had greater self-esteem, control over their
lives, and less depression and anxiety. Social support was strongly related to emotional well-being and self-efficacy.

The average size of the social network of the women in Belle's (1982) study was between seven and eight persons. Over half of the network members named by the women were relatives. All of the women who had husbands or boyfriends listed them as part of their network. In addition, most members of a network knew each other.

Although Belle (1982) found the social network to be important to emotional well-being in women, she also found that social networks come with a price. Many respondents in her study reported providing more support to others than they received in return. Belle's work indicates the importance of social networks, the prevalence of family members in the network, and the costs and rewards women experience in being part of a social network.

Koeske and Koeske (1990) also found social support to be related to emotional well-being. Mothers with lower levels of social support had higher levels of parental stress and lower maternal self-esteem. They also found that education was related to parental stress. Mothers with higher levels of education had lower levels of parental stress. Both social support and education were found to buffer parental stress.

The research of Koeske and Koeske (1990), Belle (1982), and Jennings et al. (1991) illustrate how social support systems can help adults in their roles as parents. Having a network of friends and relatives can act as a buffer to parental stress.
Teen Parents

Since the mid-1980s, the teen pregnancy rate that had been on the decline since the 1950s, again began increasing (Children's Defense Fund, 1994). Approximately two-thirds of pregnant teens today are unmarried mothers. Unmarried teen mothers are at a greater risk of not attaining a high school diploma, having less earning capacity in the labor force, and are more likely to live in poverty. Neuman and Gallagher (1994) suggest that factors surrounding unplanned parenthood may be associated with lower cognitive achievement in the child, perpetuating a cycle of poverty and low educational achievement. In addition, they conclude that parents who have little need for literacy skills in their workplace or social settings may not realize the importance of the transmission of literacy skills to their children.

Hubbs-Tait, Osofsky, Hann, and Culp's (1994) longitudinal study of adolescent mothers found that outcomes of children of teens are associated with parent-child attachment, maternal depression, and maternal self-esteem. High self-esteem predicted children's social competence with peers. High parental self-esteem was found to be related to stable, higher quality parenting. The authors suggested that improving the lives of mothers through support services addressing issues of parenting, depression and self-esteem would lead to better child outcomes.

In an assessment of a literacy intervention program for teen parents, Neuman and Gallagher (1994) found that individually coaching parents on how to promote literacy with their children was effective in increasing early learning experiences for the children. The researchers suggested that longer interventions were needed in order for the mothers to
fully adopt the practices they were taught. This finding would support the Even Start mandate for home visiting as program staff work one-on-one with the parents during these visits. The findings also support the mandate that programs plan to serve families for at least three years.

Chapter Summary

The review of literature outlines the development of parent education and how it became a natural link to adult education and family literacy. Other factors that may be associated with high-risk parenting such as maternal depression, teen parenting, family support, and poverty were also discussed. This information provides a basis to assess the parenting component of the federal Even Start program. The problems addressed in the study were: Which parents benefit from the parent education component of the Even Start program and what types of programs appear most effective? Answering these questions can assist the local programs in improving their service delivery to the families they serve.

As with other family support model programs, Even Start has little empirical data to demonstrate the importance of the parenting component of the program and the differences that it makes in the lives of the families. This study examined the parenting component of the Even Start programs in Oregon guided by the following research questions: (a) What are the characteristics of Even Start parents who make significant gains in parenting knowledge and behavior scores compared to those who do not?, (b) What are the characteristics of the Even Start programs in Oregon that have participants who make significant gains in parenting knowledge and practices? and, (c) Are the number
hours of parent education provided by a program related to increased parenting knowledge and practices? The research questions were addressed through the use of qualitative and quantitative research methods, outlined in Chapter 3.
CHAPTER 3

Methods and Procedures

In February, 1995, the Department of Human Development and Family Studies at Oregon State University, under the direction of Dr. Leslie Richards, received the contract to conduct a statewide evaluation of Oregon's Even Start programs. During the first year, a process evaluation was conducted that examined how the programs were meeting their goals and objectives, if they were in compliance with federal requirements, and provided a description of the populations being served. The first year contract also included the development of an outcome evaluation to be utilized in subsequent years to determine if the program was effective in changing the lives of the families it served. In the fall of 1995, the second year evaluation project was launched in the seven Oregon Even Start sites serving a total of approximately 140 families.

The Even Start family literacy program is holistic in nature to serve the needs of the entire family. As a result it is difficult to distinguish which part of the program is the most helpful in assisting families in reaching self-sufficiency. Even when one of the program components is found to be successful, the researcher must be cautious in interpretation due to multiple program effects. This is especially true in documenting progress in the parenting component of the program. Documenting progress in literacy and other academic skills is relatively easy to measure through standardized testing. Parenting knowledge and practices are not as easily measured, however, the Even Start
program places a great deal of emphasis on these areas. Consequently, this study employed the method of triangulation (Berg, 1995) to examine how the various components of Even Start interact with progress made in parenting knowledge and practices. Triangulation is a method whereby the researcher uses more than one method to obtain data. This practice strengthens the validity of the data gathered. The Even Start evaluation gathered data from quantitative measures, qualitative interviews, and focus groups. This study utilized data from the qualitative and quantitative measures that relate to change in parent knowledge and practices.

Research Design

Jacobs (1988) developed a five-tiered system of program evaluation to assess program processes and outcomes. At each tier the evaluation process becomes more extensive. Tiers 1, 2, and 3 are designed for new programs looking at program processes. The last two tiers focus on program outcomes and are appropriate for more established programs. Tier 1 focuses on program planning strategies for implementation. Tier 2 is the accountability tier designed to be a program monitoring stage. Tier 3 is known as the program-clarification tier that helps staff determine how they can better serve program participants. The fourth tier is the called the progress-toward-objectives tier that looks at whether or not the program is effective for participants. The last tier, the program-impact tier, examines the long-term impact of programs.

The 1996 Even Start evaluation utilized tiers 3 and 4 of the Five-Tiered Approach to evaluation (Jacobs, 1988). Tiers 3 and 4 are most appropriate for clarifying program
process and examining outcomes. Tier 3 is the program-clarification level that draws upon what has been learned about the program to improve the delivery of services (Jacobs). During the 1995 evaluation, the Even Start evaluators gathered tier-3 information through staff interviews and questionnaires to obtain perceptions of the strengths and weaknesses of the programs. The 1996 evaluation again gathered this information through staff interviews, focus groups with Even Start community partners, and through qualitative interviews with program participants. The evaluation team also reviewed program records and distributed a questionnaire to all staff members. Tier 4 is the outcome level where the researcher is looking for the change that has occurred in program participants as result of being in the program (Jacobs). The program outcomes were assessed quantitatively through a variety of written measures addressing social support, depression, parenting knowledge and behavior, and self-esteem. Data collected from the qualitative interviews were also be used to assess participant change that can be better captured using qualitative research methods such as individual success stories.

The evaluation employed the non-equivalent control group pretest-posttest design (Fitz-Gibbon & Morris, 1987). A comparison group was sought from participants who were in short-term life skills or work skills programs such as the Job Opportunity and Basic Skills (JOBS) program. This group was selected because of their similarity to the sample in demographic characteristics. JOBS participants are low-income, welfare recipients who are participating in a job training program. They are primarily single-mothers with limited education. The comparison group differs from the sample in that the former is a quick fix model designed to move participants into the work force within a
short time period. These participants may or may not be working on a General Equivalency Diploma (GED), be working on ESL skills, or attend parenting education. Their children are in a variety of early childhood care and education settings. The JOBS program does not have a goal of integrating these components.

A pretest was given to Even Start participants in the fall, the families received services from September 1995 to June 1996 and posttests were given in the late spring. Qualitative interviews were conducted with the families during the winter and spring of 1996.

Sample

All Oregon Even Start parents were asked to participate in the study. Of the 111 parents who participated in Even Start during the fall of 1995, 74 completed both pretest and posttest measures.

Demographic data were gathered from program files of Even Start participants during site visits to programs. A summary of demographic variables is found in Table 1. Oregon Even Start participants are similar in age to those of the national Even Start Evaluation (U. S. Department of Education, 1995) where 46% of the participants were between the ages of 22 and 29 years. In the national sample, 85% of the participants were female compared to 97% of the Oregon sample. The Oregon sample was similar to the national sample in percentage of Caucasian participants (Oregon, 45.8%; national sample, 39.8%), however other ethnic groups were not equal to what was found in the national sample (U. S. Department of Education, 1995). The Oregon sample consisted of 47.2%
Hispanic persons compared to 21.9% of the national sample and African Americans only made up 4.2% of the Oregon sample compared to 25.6% nationally. The differences are most likely due to the region of the country and the fact that some of the Oregon programs emphasize English as a second language, focusing on the Hispanic population. In the state of Oregon only 4% of the population is Hispanic and 1.6% are African American (Murphy & Seidel, 1993).

The national sample did not collect data on marital status, however, data on family type was collected. A comparison of family type found more two-parent families in the Oregon sample (64.4% in Oregon compared to 49.5% in the national evaluation) and fewer single-parent families (13.7% in Oregon compared to 37.2% in the national evaluation). This discrepancy may be due to the large number of participants in the Oregon sample who are two-parent Hispanic families.

Nearly 40% of the Oregon Even Start participants became a first-time parent as a teenager. No comparative data were available from the national sample.

The standard deviation for income was quite large in this sample (SD=$5,842). This was due to how income data are collected by the programs. Income is recorded in many programs in $3,000 increments (i.e. $3,000 - $5,999). For this study the midpoint of the income range was used for those programs who recorded income categorically.
Table 1. Demographics of Oregon Even Start Families

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean age of parent</td>
<td>27.6 (SD 5.99)</td>
</tr>
<tr>
<td>Mean age of oldest child</td>
<td>6.72 (SD 3.72)</td>
</tr>
<tr>
<td>Mean number of children in family</td>
<td>2.26 (SD 1.14)</td>
</tr>
<tr>
<td>Mean parent's highest education level upon entry into the program</td>
<td>8.7 years (SD 3.11)</td>
</tr>
<tr>
<td>Mean annual income for family</td>
<td>$10,864 (SD $5,842)</td>
</tr>
<tr>
<td>Sex of adult participant</td>
<td>97% female, 3% male</td>
</tr>
<tr>
<td>Marital statue</td>
<td>20.5% single-parent, 63.0% married, 16.4% cohabitating</td>
</tr>
<tr>
<td>Family type</td>
<td>64.4% two-parent family (including cohabitating), 13.7% single-parent family, 16.4% extended family, 5.5% residing with other adults</td>
</tr>
<tr>
<td>Teen parent at the time of birth of oldest child</td>
<td>39.7% yes, 60.3% no</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>4.2% African American, 45.8% Caucasian, 47.2% Hispanic, 2.8% Other</td>
</tr>
</tbody>
</table>
Comparison group participants were all female and all on Aid to Families with Dependent Children (AFDC). One comparison group (n=10) was from a teen parent program that teaches life skills and provides job assessments. The program runs in two-week cycles and is located on the same community college site as one of the Even Start programs. The other comparison group (n=19) consisted of parents who are participating in the federally mandated JOBS program. JOBS is designed to be a short-term program that helps parents on public assistance obtain job skills and return to the work force. The comparison group JOBS program was located at the same community college site that formerly had an Even Start program.

Ethical Treatment of Participants

All Even Start programs are mandated by Federal Regulations to allow an evaluation of their program, therefore, evaluation of program implementation and records are exempt according to the Oregon State University Institutional Review Board (IRB). Permission was sought and obtained from the IRB, to interview and administer quantitative and qualitative measures to program participants (see Appendix A for a copy of the cover letter and Appendix B for a copy of the informed consent form). All program participants were informed that their participation in the evaluation was voluntary and confidential. Program staff asked participants if they would be willing to be interviewed by the research team. Because the participants frequently have difficulty adhering to schedules and appointments, individuals for the interviews were selected during evaluation team site visits. Five participants from each of the six sites that have been in operation for
at least one year were interviewed. All written materials were available in Spanish for Hispanic participants who would prefer to respond in their first language. A Spanish-speaking interviewer was available to conduct qualitative interviews when appropriate.

Measures

When conducting program evaluation research it is difficult to compartmentalize interrelated program components. Change in program participants may be due to multiple program effects. Although this study is examining parenting knowledge and practices, comparisons were made with other program outcome measures.

As part of the 1996 Even Start evaluation conducted by Oregon State University, several quantitative measures were reviewed to assess parenting abilities, social support, depression, and self-concept. The measures were distributed in the fall of 1995 to the seven Even Start sites to be given to parents during their first month of program participation. Copies of all quantitative measures are located in Appendices C-G. The measures were designed to be given to participants as a component of their regular course work. For example, the parenting knowledge measure was designed to be given during a lesson on parenting to assess what information the parents already knew, and on what topics they needed more information. Quantitative data were mailed to the programs by the evaluation team and either collected by mail or collected from the sites during visits in December 1995 and January 1996. Specific data collection tools are described below.

This study was exploratory in nature. Measures were selected and/or developed to address the research questions while keeping in mind two elements of quality evaluations,
utility and feasibility. Therefore, two measures were developed to examine the constructs of parenting knowledge and practices that the evaluation team and program staff determined would be feasible to administer and useful in assessing program success. The two outcome measures were constructed specifically for this evaluation, therefore reliability coefficients were computed on the constructed measures.

**About Children**

"About Children" is a measure that tests basic child development knowledge. Items are measured on a 3-point scale asking the respondent if they agree, are unsure, or disagree with the statement. For example, one of the statements parents respond to is: "Most two-year-olds know the difference between make-believe and true stories". The 20-item measure was constructed after a review of other parenting measures assessing indicators of parenting knowledge (see Appendix C). The evaluation team then met with staff of the Oregon State University Family Policy program who were also developing a parenting knowledge and skills measure, for a review of the measure from other experts in the field.

A test of internal consistency found an alpha level of .71 with four items (item numbers 4, 6, 9, and 18) having little correlation with the total. Due to their lack of contribution to internal consistency of the measure they were deleted from the measure. The alpha after deletion of items 4, 6, 9, and 18 was .77. The final measure of parenting knowledge used in this study contained 16 items.
About Parenting

Parenting practices were measured through a 12-item self-report administered to the program participants titled "About Parenting". This measure was adapted from the "Parenting Scale" developed by Arnold, O'Leary, Wolff and Acker (1993) that assesses parenting discipline styles (see Appendix D). The original measure was tested on a sample of mothers that included those who had extreme difficulty with their children, mothers of children who attended a university preschool, and volunteers and had an overall alpha for internal consistency of .84. The measure asks parents to respond to statements such as “When I’m upset or under stress, I am picky and on my child’s back”. Response choices are: (a) never, (b) once in a while, (c) sometimes, (d) usually, or (e) always. Some items on the measure are reversed scored.

Internal consistency for the "About Parenting" measure was .55. Four items had low correlation with the others in the test of internal consistency. These items (2, 6, 7, and 10) were omitted from the final measure. The alpha coefficient for the revised measure was .69. Seven of the eight remaining items were adapted from the instrument developed by Arnold et al. (1993)

Depression

The Center for Epidemiology Studies Depression Scale (CES-D) is designed to measure depressive symptomatology in the general population (Radloff, 1977). It has been successfully tested for reliability and validity in populations with a variety of demographic characteristics (Radloff). The scale, a self-report measure, was selected because of its
reliability, length, and ease in administration (see Appendix E). Reliability of the measure is .85 in the general population and .90 in clinical patient populations. The measure has also been used in the national Even Start evaluation. In order to make the measure user friendly to program participants, it was retitled as "Feelings About How Things Are Going". Parents were asked to respond how often they had experienced the situation or feeling in the past week. For example one item states, “I felt that everything was an effort”. Respondents had the following choices: (a) rarely or none of the time, (b) a little of the time, (c) a moderate amount of time, or (d) most or all of the time. The measure was used by many programs in a class setting that focused on life skills.

**Self-esteem**

Self-esteem was measured by a self-report instrument. "Feelings About Yourself" is a self-esteem/self-efficacy measure developed by combining the Rosenberg (1965) self-esteem scale and Popkin's (1990) self-efficacy scale (see Appendix F). Both measures have been tested for reliability. Reliability is .50 for the Popkin self-efficacy measure and .92 for the Rosenberg self-esteem measure. Due to the low reliability of the self-efficacy measure only self-esteem was measured in this study using the 10 items on the scale from Rosenberg's self-esteem measure. An example of an item from the Rosenberg scale asks the parent to respond to the statement: “I wish I could have more respect for myself”. The responses include: (a) strongly agree, (b) somewhat agree, (c) somewhat disagree, and (d) strongly disagree.
Social Support

The measure entitled "Support from Others" is a self-report instrument measuring perceived level of social support from three sources: (a) family, (b) friends, and (c) significant others (see Appendix G). Parents were asked to respond to such statements as: “My family really tries to help me”. Responses are on a 4-point Likert type scale from “strongly agree” to “strongly disagree”. This measure was developed by Zimet, Dahlem, Zimet, and Farley (1988) and has good internal and test-retest reliability. Reliability for the Zimet et al. measure is .88.

Demographic Data

The Oregon Even Start programs are required to keep data on the demographic characteristics of the families they serve. Some of the information currently being collected is not being used by the state or the federal program, therefore, the evaluation team designed a new form to collect the data that is being utilized. This study collected information on participant age, sex, marital status, ethnicity, family type, number of children, age of oldest child, becoming a parent as a teen, and years of formal education the parent had upon entering the program.

Qualitative Interview Protocol

Qualitative data were gathered through face-to-face interviews conducted by the research team. An interview protocol was developed and was piloted on two former Even Start participants. Modifications to the interview questions were made based on these pilot
interviews. The interview is divided into six sections to include information on the four components of the Even Start program as well as information on support services and summary information on the participant's perspective of the program's effectiveness. In the section of the interview related to parenting, participants were asked questions about their challenges and strengths in parenting. The summary section included questions on how the program has helped the participants as individuals and their families. A copy of the protocol is located in Appendix H.

Approximately five current participants in each of the six Even Start programs that have been providing services for more than one year were selected to be interviewed. These semi-structured interviews were audio taped and transcribed verbatim. Selection of participants to be interviewed was done by asking for volunteers on the day the evaluation team conducted a site visit. This sample of convenience method was selected due to the high absenteeism rate of participants. The evaluation team had to travel from one to seven hours to reach the program sites, therefore, rescheduling interviews for absent participants was not feasible. The Nudist qualitative software program was used to analyze the data.

Research Questions

This study was guided by several research questions: (a) What are the characteristics of Even Start parents who make significant gains in parenting knowledge and practices scores compared to those who do not?, (b) What are the characteristics of the Even Start programs in Oregon that have participants who make significant gains in
parenting knowledge and practices?, and (c) Are the number of hours of parent education provided by a program related to increased parenting knowledge and practices?

**Quantitative Hypotheses**

Descriptive statistics were utilized to assess the characteristics of the participants in the Even Start programs. In addition, the following hypotheses were tested using inferential statistics. An alpha of .05 has been selected as the level of significance as it is the conventional level used in social science research. It also provides a balance between the control for Type I and Type II errors. A Type I error is the probability of rejecting a true null hypothesis. Alpha symbolizes the probability of committing a Type I error and to control for a Type I error the researcher selects a low alpha (Ferguson & Takane, 1989). Type II error is the probability of retaining a true null hypothesis and control is greater with a larger sample size.

This study looked at the dependent variables parenting knowledge and parenting practices. These variables were summed scores of the instruments used to measure the variable. Parenting knowledge was measured using the "About Children" instrument. Parenting practices were measured using the instrument "About Parenting".

Several independent variables were explored including depression, hours of parenting instruction provided, social support, and demographic characteristics. Analysis of variance, correlations, and multiple regression statistical procedures were used. Depression was a continuous variable created from a summed score of the measure "Feelings About How Things Are Going". Scores of 16 or higher are considered to be at
risk for clinical depression. The maximum possible score on the measure is 60. Social support is a continuous variable. Hours of parent instruction provided monthly by the program is a continuous variable obtained from program staff. The demographic variables were obtained from participant files. Age, income, education, and age of child are treated as continuous variables. Sex and ethnicity are categorical variables.

The goal of family support programs is to improve the lives of families, therefore it would be expected that individuals in the Even Start program would show improvement in their parenting knowledge and practices as the result of participating in the program. Hypothesis 1 examined this change:

**Hypothesis 1.** Parents participating in Even Start will show a
significantly greater increase in parenting knowledge and parenting practices from pretest to posttest than parents in the comparison group.

An analysis of variance repeated measure design was used to test this hypothesis.

It would be inappropriate to assume correlations between parents with low literacy skills and low income and poor parenting practices. Distinguishing between characteristics of parents who are in need of improved parenting practices from those who are parenting in a positive manner would be helpful to program staff as they tailor needs to individual families. Nearly one-half of the Even Start participants in the 1994-1995 program year were women who became parents as a teen. The stresses of becoming a parent at a young age and having low literacy skills may set the stage for higher risk parenting behaviors. Other characteristics such as income level, ethnicity, geographic location, and age may
also be factors in levels of parenting knowledge and practices. Hypothesis 2 sought to
distinguish between parents who need more parent education and those who do not:

**Hypothesis 2.** Parents who make greater gains from pretest to posttest
on the parenting knowledge and parenting practices measures will
differ in demographic characteristics from those who do not. On
average, participants who are younger in age, have lower incomes, less
formal education, and younger children will have the greatest
improvement from pretest to posttest.

A multiple regression was utilized to test this hypothesis.

Parents who lack social support systems and experience depression may have more
difficulty in interacting with their children due to the preoccupation with their own needs.
Swick and Graves (1993) discuss four elements of successful parenting. Among these is a
sense of self-image and locus of control. The life course events for many Even Start
parents have been stressful and difficult. Many have come from abusive and alcoholic
family backgrounds either in their family of origin or a marriage/partner relationship and/or
have experienced drug or alcohol problems themselves. Hypotheses 3 assessed the issues
of social support, self-esteem, and depression:

**Hypothesis 3.** Greater parenting knowledge and positive parenting
practices will be negatively associated with depression and positively
associated with high self-esteem and perception of high social support.

A multiple regression was used to test this hypothesis.
The Even Start programs in Oregon have struggled to develop a set of standards to guide all programs in the state. Each program is unique, making it a challenge for the seven sites to agree on such issues as the number of program hours a participant should receive. The recently adopted state standards recommend a minimum of one hour of parent education per week and one hour of parent and child time together (PACT) per week with a combined total of at least nine hours per month. To assess whether or not the hours of program participation make a difference in gains in parenting knowledge and practices, hypothesis 4 was tested:

**Hypothesis 4.** Even Start programs that have more hours of parenting and PACT per month will have parents making greater gains from pretest to posttest on the parenting knowledge and parenting practices measures than programs that have fewer hours of parenting activities per month.

An analysis of variance was used to test this hypothesis.

**Data Reduction and Transformation**

The data collected through the quantitative measures was entered and stored on a computer disk using a word processing package. A code book was developed. The SAS statistical software program (Cody & Smith, 1991) was used in the data analysis of the quantitative measures.
Missing Data

Several variables of interest including the two outcome variables of parenting knowledge and parenting practices were summed scores of individual measures. To handle missing data in these scales, a mean substitution was used when a participant answered at least 80% of the measure items. If less than 80% of the items on a measure were answered, the case was deleted for the analyses.

Hypothesis 2 involved a regression of demographic characteristics of the Even Start participants. Demographic data were gathered from participant files. Although, demographic data were available for almost all of the participants, there were some missing data. It was not practical in this situation to use imputation for missing demographic data, therefore, the two cases missing demographic data were deleted from the analysis of hypothesis 2.

Qualitative Procedures

The qualitative interview protocol is designed to obtain rich anecdotal data that cannot be obtained through quantitative measures. As a part of the triangulation method, these data provided the research team with detailed information to compare to the quantitative measures. Best practices of qualitative research were utilized according to Lofland and Lofland (1995) in gathering and analyzing the data. An open coding scheme was first used to determine the themes that emerge from the data. A code list was developed with explanations of each code. Interviews were then coded according to the list. Reliability of coding was obtained through comparisons of five randomly selected
interviews that were coded by an independent coder using the code list. The researcher first reviewed the explanations of the codes with the independent coder. The coded interviews were then compared to see if segments were perceived as falling into the same categories as those coded by the researcher. After the codes were discussed again with the independent coder, there were no disagreements in coding.

The qualitative questions address all aspects of the Even Start program. Of primary concern in the qualitative interviews for this study, was an assessment of how parent education has been of benefit to participants. According to Ponzetti & Bodine (1993), parent education includes information on how to parent, ideas for parent involvement, and information on family support services. The qualitative data provided specific information on how the parent education portion of the Even Start program was offering each of these types of information and how participants perceived the benefits of the program.

Chapter Summary

Using a pretest-intervention-posttest design, this study evaluated the change in parenting knowledge and behavior of Even Start parents. Quantitative and qualitative methods were utilized in a triangulation model to strengthen the validity and reliability of each method. Multiple regression, analysis of variance, and chi square statistics were employed to analyze the quantitative measures. Descriptive statistics summarized the results of the qualitative method along with anecdotal information.
CHAPTER 4

Quantitative Results

This chapter examines the results of the quantitative analyses conducted for the study. Three research questions and four hypotheses guided the study of parenting practices and knowledge of Even Start families in Oregon. This study was part of a statewide evaluation of Even Start programs in Oregon.

Six of the seven Even Start programs in the state of Oregon participated in the statewide evaluation. One program was very resistant to the evaluation even though the research team attempted to create an evaluation process that was useful to program staff as well as feasible and ethical for administration to program participants. Numerous attempts were made by the research team to address concerns on the part of the program that did not participate, without a positive resolution. It was therefore necessary to drop that program from the data analysis.

The 1995-1996 Even Start evaluation consisted of 140 participants; 111 of who were Even Start participants and 29 who were comparison group participants. Seventy-four of the 111 Even Start participants completed both pretest and posttest data for a response rate of 67%. Those participants who did not complete both the pretest and posttest measures were dropped from these analyses. Three comparison group members did not complete the posttest, and were dropped from the sample as well. The response rate for completion of both the pretest and posttest for the comparison group was 90%.
Although Gay (1987) states that a response rate of 70% is necessary to draw conclusions, other authors allow less stringent requirements. Babbie (1986) offers the recommendations of response rates as 50% being adequate, 60% being good, and a 70% response rate as being very good. Dillman (1978) states that response rate is only one indicator of a sample's representativeness. In addition to response rate the researcher needs to consider sampling process, selection criteria, substitution procedures, and ability for respondents to be located.

In the case of Even Start participants, response rate is affected by the transient nature of their lives due to marginal employment, substance abuse, and other family problems. Some are migrant farm workers who may not stay in one area for a long period of time. Others are on public welfare due to divorce or separation and experience changes in residences or have too many personal problems to continuously attend the Even Start program. Some simply stop attending the program and cannot be located by the program staff.

T-tests and chi squares comparing participants completing both the pretest and posttest with those who did not complete the posttest data were conducted. The groups were compared on ethnicity, age, parents' highest grade level completed, family type, age of oldest child, and becoming a first-time parent as a teen. There were no statistically significant differences found between those participants who completed both waves of data and those who only completed the pretests.
Analysis of Quantitative Data

Four hypotheses were used to study the parenting knowledge and practices of the Oregon Even Start families. The statistical procedures of analysis of variance, multiple regression, and correlations were used to test these hypotheses.

Hypothesis 1

The first hypothesis examined whether or not the Even Start program provided parenting education that increased participants knowledge and practices in parenting their children. An analysis of variance repeated measure design was used to test this hypothesis.

**Hypothesis 1:** Parents participating in Even Start will show a significantly greater increase in parenting knowledge and practices from pretest to posttest than parents in the comparison group.

No significant difference was found between the Even Start group and the comparison group on gains in parent knowledge or practices between pretest and posttest. There were also no significant gains for either group in parenting knowledge or reported practices. No support for Hypothesis 1 was found. This information is illustrated in Table 2.
<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>Type III SS</th>
<th>MS</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Between Subject Effects</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group</td>
<td>1</td>
<td>1.77</td>
<td>1.77</td>
<td>11.08*</td>
</tr>
<tr>
<td>$S$ within-group error</td>
<td>94</td>
<td>(15.05)</td>
<td>(0.16)</td>
<td></td>
</tr>
<tr>
<td><strong>Within Subject Effects</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>1</td>
<td>0.43</td>
<td>0.04</td>
<td>1.88</td>
</tr>
<tr>
<td>Time*Group</td>
<td>1</td>
<td>0.00</td>
<td>0.00</td>
<td>0.08</td>
</tr>
<tr>
<td>Time*S within-group error</td>
<td>94</td>
<td>(2.15)</td>
<td>(0.02)</td>
<td></td>
</tr>
</tbody>
</table>

$p<.05^*$. $p<.01^{**}$.

There were, however, significant differences between the Even Start and the comparison group on parent knowledge at both pretest and posttest. The mean scores of the Even Start participants were significantly lower than the comparison group as can be seen in Table 3. There was no significant difference between the groups at pretest and posttest on parenting practices.
### Table 3: Group Means on Parenting Knowledge and Parenting Practices Measures

<table>
<thead>
<tr>
<th>Group</th>
<th>Parenting Knowledge</th>
<th>Parenting Practices</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>Even Start</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pretest</td>
<td>2.53</td>
<td>(0.35)</td>
</tr>
<tr>
<td>Posttest</td>
<td>2.57</td>
<td>(0.33)</td>
</tr>
<tr>
<td>Comparison Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pretest</td>
<td>2.76</td>
<td>(0.18)</td>
</tr>
<tr>
<td>Posttest</td>
<td>2.78</td>
<td>(0.15)</td>
</tr>
</tbody>
</table>

**Hypothesis 2**

Hypothesis 2 was developed to see if there were demographic differences between parents who made gains in parent knowledge and parent practices scores compared with those who did not. Multiple regressions were used to test this hypothesis.

**Hypothesis 2:** Parents who make significant gains from pretest to posttest on parenting knowledge and practices measures will differ in demographic characteristics from those who do not. On average, participants who are younger in age, have lower incomes, less formal education, and younger children will have the greatest improvement from pretest to posttest scores.
There were no significant differences between pretest and posttest parenting knowledge and parenting practices scores of Even Start parents based on demographic characteristics. Specifically, family income, parent's education, and age of the oldest child were not associated with improvements from pretest to posttest. Demographic differences did, however, have an effect on pretest and posttest scores for the measures of parent knowledge and parenting practices. The results of this analysis are found in Table 4.

As can be seen in Table 4, pretest scores of parent knowledge found a significant difference between parents based on demographic characteristics using the regression predictors of income, parent's education, age of participating parent and age of the oldest child \( (p=0.0001, \text{ adjusted } R^2=.31) \). Within the model, income was not significantly associated with parent knowledge. The predictors of parent's education level \( (p=0.0001) \), age of parent \( (p=0.0016) \) and age of the oldest child \( (p=0.0027) \) were significant. Parents with more education and older children scored higher on the parenting knowledge measure. Parent's age was negatively associated with parent knowledge with older parents scoring lower on the measure of parent knowledge.

This model held at posttest with an overall level of significance of \( p=0.0013 \) and adjusted \( R^2=.23 \). Within the model, income remained nonsignificant while parent's education level, age of parent, and age of the oldest child were significant.
Table 4: Regression of Demographics on Parenting Knowledge Scores

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Pretest</th>
<th></th>
<th></th>
<th>Posttest</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Standard</td>
<td>β</td>
<td>B</td>
<td>Standard</td>
<td>β</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Error</td>
<td></td>
<td></td>
<td>Error</td>
<td></td>
</tr>
<tr>
<td>Income</td>
<td>0.01</td>
<td>0.01</td>
<td>0.10</td>
<td>0.01</td>
<td>0.14</td>
<td></td>
</tr>
<tr>
<td>Parent’s Education Level</td>
<td>0.06</td>
<td>0.01</td>
<td>0.54***</td>
<td>0.05</td>
<td>0.48***</td>
<td></td>
</tr>
<tr>
<td>Parent’s Age</td>
<td>-0.03</td>
<td>0.01</td>
<td>-0.54***</td>
<td>-0.03</td>
<td>-0.44**</td>
<td></td>
</tr>
<tr>
<td>Age of Oldest Child</td>
<td>0.05</td>
<td>0.02</td>
<td>0.52**</td>
<td>0.04</td>
<td>0.39*</td>
<td></td>
</tr>
</tbody>
</table>

Adjusted R² Pretest = .31***  
Adjusted R² Posttest = .23**

There was no significant association between parenting practices and demographics at pretest, using the predictors of income, parent's education, age of parent, and age of the oldest child. This analysis is illustrated in Table 5. Within the model, income was significantly related to parenting practices (p=0.036). Families with higher incomes scored higher on the parenting practices measure. Posttest scores were also found to be significant with p=0.047 and an adjusted R² of .18. Within the model income remained the significant predictor with p=0.002.
The frequencies run on demographic variables found a much higher than expected proportion of Hispanic parents as seen in Table 1. In a further analysis of impact of demographics on parent knowledge and parent practices, ethnicity was dichotomized into a variable of Hispanic versus other ethnic groups. This decision was made because nearly one-half (47%) of the sample were Hispanic, 46% were Caucasian, 4.2% were African American, and 3% were Native American or Alaskan Native. Those parents who were African American or Native American/Alaskan Native were not recently settled migrants or English as a second language (ESL) students and were therefore put into the dichotomized variable with Caucasians. It was hypothesized that the differences that could be determined with these data would be due to the factors of recent immigration and

Table 5: Regression of Demographics on Parenting Practices Scores

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Pretest</th>
<th></th>
<th></th>
<th>Posttest</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Standard Error</td>
<td>β</td>
<td>B</td>
<td>Standard Error</td>
<td>β</td>
</tr>
<tr>
<td>Income</td>
<td>0.02</td>
<td>0.01</td>
<td>0.28*</td>
<td>0.03</td>
<td>0.01</td>
<td>0.40**</td>
</tr>
<tr>
<td>Parent’s Education Level</td>
<td>-0.02</td>
<td>0.02</td>
<td>-0.09</td>
<td>-0.002</td>
<td>0.01</td>
<td>-0.02</td>
</tr>
<tr>
<td>Parent’s Age</td>
<td>0.01</td>
<td>0.02</td>
<td>0.20</td>
<td>-0.002</td>
<td>0.02</td>
<td>-0.02</td>
</tr>
<tr>
<td>Age of Oldest Child</td>
<td>-0.05</td>
<td>0.03</td>
<td>-0.33</td>
<td>-0.05</td>
<td>0.03</td>
<td>-0.30</td>
</tr>
</tbody>
</table>

Pretest Model Nonsignificant Adjusted $R^2$ Posttest = .18**
p < .05*. p < .01**. p < .001***.
language barriers. In addition, the small number of parents who were not Hispanic or Caucasian (n=5), would be too few to include as a separate group in the analysis.

Including ethnicity in the model of demographic predictors in changes of parenting knowledge and practices scores found no significant association between ethnicity and improvements in parenting knowledge or practices. There was however, a significant difference found in the posttest model of parent practices as seen in Table 6. The overall pretest model with the addition of ethnicity was not significant, however, within the model the predictor of income was significant upon control for ethnicity, parent's education level, parent's age and age of the oldest child. Parents with higher family incomes scored higher on the parenting practices measure. This finding was consistent with the model prior to the addition of ethnicity. The adjusted $R^2$ did not increase with the addition of ethnicity.

At posttest both ethnicity and income were significant as seen in Table 6. Hispanic parents and parents with greater incomes scored higher on parenting practices measures. The addition of ethnicity increased the adjusted $R^2$ from .18 to .23.
### Table 6: Regression of Demographics Including Ethnicity on Parenting Practices Scores

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Pretest</th>
<th>Posttest</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Standard Error</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>0.24</td>
<td>0.16</td>
</tr>
<tr>
<td>Income</td>
<td>0.02</td>
<td>0.01</td>
</tr>
<tr>
<td>Parent's Education Level</td>
<td>-0.004</td>
<td>0.03</td>
</tr>
<tr>
<td>Parent's Age</td>
<td>0.01</td>
<td>0.19</td>
</tr>
<tr>
<td>Age of Oldest Child</td>
<td>-0.04</td>
<td>0.03</td>
</tr>
</tbody>
</table>

Pretest Model Nonsignificant  
Adjusted $R^2$ Posttest = .23**

A different situation was found for parent knowledge as seen in Table 7. The addition of ethnicity to the model found a significant association at pretest ($p=0.001$, adjusted $R^2=.42$) and at posttest ($p=0.0001$, adjusted $R^2=.38$). Within the model Hispanic parents were significantly more likely to score lower on parent knowledge (pretest $p=0.0014$; posttest $p=0.0003$) upon control for income, age of parent, age of oldest child, and parent's education. For the pretest, lower levels of parental education, parent's age, and age of the oldest child were significantly associated with lower parent knowledge scores. At posttest only ethnicity and parents' level of education remained significant.
### Table 7: Regression of Demographics Including Ethnicity on Parenting Knowledge Scores

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Pretest</th>
<th>Posttest</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Standard Error</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>-0.26</td>
<td>0.08</td>
</tr>
<tr>
<td>Income</td>
<td>0.01</td>
<td>0.01</td>
</tr>
<tr>
<td>Parent's Education Level</td>
<td>0.04</td>
<td>0.01</td>
</tr>
<tr>
<td>Parent's Age</td>
<td>-0.02</td>
<td>0.01</td>
</tr>
<tr>
<td>Age of Oldest Child</td>
<td>0.03</td>
<td>0.01</td>
</tr>
</tbody>
</table>

Adjusted $R^2$ Pretest = .42***  
Adjusted $R^2$ Posttest = .38**

$p < .05^*$. $p < .01^{**}$. $p < .001^{***}$.

Hypothesis 2 was not supported in that parents who were younger, had less education, lower incomes, and younger children did not make greater gains in parent knowledge and parenting practices scores than other parents. Demographic differences were found however for both pretest and posttest scores. Upon categorizing ethnicity into Hispanic versus other ethnic groups, parents' education, ethnicity, parent's age and age of oldest child were associated with parent knowledge scores at pretest. Only ethnicity remained significant at posttest. Income was significantly associated with parenting practices at pretest and posttest although the total model was not significant at pretest.
Hypothesis 3

Hypothesis 3 examined the relationship of social support and emotional well-being to the outcome variables of parenting knowledge and practices. A multiple regression was used to examine the predictors of self-esteem, depression, and social support on the outcome variables.

**Hypothesis 3: Greater parenting knowledge and positive parenting practices will be negatively associated with depression and positively associated with self-esteem and social support.**

There was no significant relationship between parent knowledge and self-esteem, depression, and social support at pretest for Even Start parents. There was a significant relationship between parenting practices and self-esteem, depression and social support at pretest ($p=0.036$, adjusted $R^2=.10$). No predictors within the model were individually significant. Because self-esteem was highly correlated with depression and social support and was the weakest predictor, it was dropped from the model and the regression was rerun.

The second model without self-esteem found a significant relationship between parenting practices and depression and global support at pretest ($p=0.04$) and posttest ($p=0.0003$). Within the model, depression was significantly associated with parenting practices. Specifically, parents who were more depressed according to the depression scale scored lower on the parenting practices measure. Table 8 summarizes the results of these analyses. Parenting knowledge was not significantly related to depression or global social support at either pretest or posttest.
Table 8: Regression of Social Support and Depression on Parenting Practices

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Pretest</th>
<th>Posttest</th>
</tr>
</thead>
<tbody>
<tr>
<td>CES-D</td>
<td>-0.26</td>
<td>-0.32*</td>
</tr>
<tr>
<td></td>
<td>0.10</td>
<td>-0.38</td>
</tr>
<tr>
<td>Social Support</td>
<td>-0.15</td>
<td>0.06</td>
</tr>
<tr>
<td></td>
<td>0.12</td>
<td>0.09</td>
</tr>
</tbody>
</table>

Adjusted R^2 Pretest = 0.08  
Adjusted R^2 Posttest = 0.20***

Hypothesis 4

Hypothesis 4 was designed to assess whether or not hours of parenting education provided were associated with increases in parenting knowledge and parenting practices.

A simple regression was used to test this hypothesis.

**Hypothesis 4: Even Start programs that have more hours of parenting and PACT per month will have parents making greater gains from pretest to posttest on the parenting knowledge and parenting practices scales than programs who have fewer hours of parenting activities per month.**

There was no support for Hypothesis 4. The number of hours of parenting instruction provided was not associated with the changes in parent knowledge or parenting practices scores.
Chapter Summary

The data did not support the hypotheses indicating an improvement of parenting knowledge and parenting practices from pretest to posttest as a result of participating in the Even Start program. Statistically significant differences were, however, found among participants at pretest and again at posttest. Parents with less education, who were older, had younger children, and who were Hispanic scored significantly lower on the parenting knowledge measure at pretest. At posttest ethnicity was the only predictor that remained significant for parenting knowledge with Hispanic parents scoring lower on parenting knowledge than other parents.

Parents with lower incomes scored significantly lower at pretest and posttest on parenting practices. Hispanic parents scored significantly higher at posttest on the parenting practices measure. Programs offering more hours of parenting education were not found to be more successful in improving parenting knowledge and parenting practices among participants.
CHAPTER 5

Qualitative Analysis

The growth that takes place in Even Start families is often very subtle and may not be easily captured using quantitative research methods. The richness that comes from conversations with program staff and participants gave the research team a deeper insight into Even Start and its effects on families. Therefore, qualitative research methods were also used in this study. In addition, this exploratory study utilized qualitative data to triangulate findings. The research questions addressing the characteristics of successful Even Start programs and participants were examined using qualitative methods.

Thirty face-to-face interviews of current Even Start participants were conducted for this study. During evaluation team site visits, participants were asked if they were willing to be interviewed. All but one agreed. All interviews were conducted at the Even Start sites with the exception of two that were conducted in the participants’ homes. The interviews were taped and transcribed verbatim. A tape malfunction prevented one of the interviews from being transcribed, therefore, 29 interviews were used in the analysis.

An open coding scheme where themes emerge from the interview was utilized. Berg (1995) describes the purpose of open coding as widely opening the inquiry. Interviews were examined with a specific set of questions in mind of how parenting education was provided, what information was provided, and how parenting was improved as a result of program participation. This technique for examining the data is
suggested by (Strauss, 1987) as a guideline in open coding. Berg claims this is helpful to the researcher as it keeps one focused on the intent of the study while still allowing an opportunity to see other themes that may emerge unexpectedly.

After reading the interviews, several broad themes emerged that were used in the analysis of the qualitative data. They included: (a) why people started coming to Even Start and their goal for participation, (b) how parenting education was provided, (c) the content of the parenting education classes, and (d) how Even Start helped parents improve their parenting skills. Berg (1995) discusses how coding is like a funnel starting with broad areas and then narrowing down the information. The broad themes in the interviews were then further analyzed.

Parents’ Goals for Attending Even Start

Parents reported two main reasons for starting to attend their Even Start program: (a) to obtain an educational goal such as getting their GED and, (b) because child care was offered. Many parents reported the combination of education and child care was their reason for starting the program. One parent shared the following comment about how having child care available made it possible for her to attend the program:

I want to get my GED and I don’t have a way to pay for day care for my kids. I found that with this program they will help you with the day care and also with transportation and that’s one of the reasons that I come.

Another parent, when asked why she started to attend the program shared a similar response:
Because I would be able to bring my daughter with me. Because I was in another class, I don’t remember the name of it, and I had to find my own child care which was really a big problem for me... And she (the daughter) really enjoys it.

Four parents reported starting the program because of the parenting component. One person started attending the program because she was required by the welfare department to either to get a job or attend Even Start.

The parents' goals for attending the Even Start program were primarily to further their education. Twenty-one of the 29 parents interviewed reported this was their goal. Four of the parents reporting education as their goal also stated they had a goal of enhancing their parenting skills. Learning English was the goal for three parents. Two parents wanted to obtain specific job skills such as a food handler’s license or computer skills. Mechanical problems with the tape recorder prevented analysis of this item for three interviews.

**How Parenting Education was Provided**

Parenting education is divided into three parts: (a) information on the challenges of parenting, (b) ideas about things to do with children, and (c) information about services available in the community for parents. The Even Start programs in this study provided all three elements of parenting education although the modes of delivery varied.

Parenting education was provided to Even Start participants through formal classes, home visits, parent support groups, short-term packaged programs, and Head Start parent meetings. No single mode of delivery emerged as the dominant or preferred
type. The following parent discusses how her parenting classes are offered through a
support group format:

...we do things as all of us put together in a group and talk about what our
parenting problems are and they (the staff) go, “Well have you thought of
this?”, and I go “Oh!” Like I’m having problems with my older daughter
right now, and they go, “Well, why don’t you try mental health for awhile
to see why she’s doing her problems”.

Another parent shared how parenting education topics are determined. This parent
also participated in an Even Start program that used support groups for parenting
education:

Well everyday is like something new. We just learn it as we go. We like,
there’s examples that the kids give us everyday. Like a kid will throw a fit
and we’ll try to figure out why is this kid throwing a tantrum and what
should you do about it and what shouldn’t you do about it.

PACT was also provided in a variety of ways. The center based programs were
more likely to have PACT offered at a scheduled time each week such as during lunch or
the end of the day with a closing circle for parents and children. Other programs
incorporated PACT into home visits where the home visitor might help the parent make
homemade play dough for the children. Still others gave the parents packets of ideas on
activities to do with their children and asked the parents to keep track of the activities they
did and the time spent doing PACT. PACT activities were generally parent or child
initiated. Some programs would plan a variety of activities and the parent or child would
choose one. In other programs PACT was entirely parent or child initiated.

Services for parents were provided primarily through written materials for
participants. All programs appeared to have distributed booklets or lists of community
services. Some had speakers come in and do a presentation on their agency. One program took participants on field trips to learn about services such as to the subsidized housing office. When asked about services provided one parent shared the following:

There is a file box that’s always full of whatever. She (the staff member) usually tries to keep several different kinds of brochures and pamphlets that are available within our community or within our county available for us. But she’s also, we’ve had a lot of them come out and introduce themselves to us during out parenting time. Who they are, what they’re about, and what they can and can’t do. And she’s turned that information into part of our education classes for communication skills and just to be a little more forward where she has us get out there and do things to network, to practice networking. And she does all of those things with us through these information services. We learn more and then we have to come back and share and give oral reports.

Nearly all Even Start participants reported receiving information on how to access the services they needed.

**Content of Parent Education**

The parents interviewed in this study reported a variety of parenting education topics that were included in their program. Most parents reported that the program staff asked the parents what type of information they would like to receive and parenting education was built around those needs. Discipline was the most frequently mentioned parenting problem. Other frequently mentioned topics were toilet training and nutrition. One Even Start program offered prepackaged parenting programs such as “How to Talk so Kids will Listen and Listen so Kids will Talk”. A group facilitator, study guide, and often videos are used in these programs that are generally six to eight weeks in length.
Information Gained from PACT

The parents interviewed for this study discussed how the Even Start staff had given them ideas on activities to do with their children. PACT activities included reading, drawing, helping their children learn to recognize colors and letters, playing basketball, and cooking with children. Several parents commented on the fact that they were given low- or no-cost ideas that can be especially helpful for low-income families. One parent remarked:

They really provide you with a lot of low-cost ways to create things at home to make crafts. So that was really helpful to me.

Another parent also expressed her appreciation for learning about low-cost activities to do with her children:

They teach us different activities, it doesn’t have to be a really expensive toy. It could be a toilet paper roll, rubber bands, glitter. It doesn’t have to be all that expensive stuff. And that’s what I liked about it.

Parents also discussed how the PACT activities helped them learn to interact on a regular basis with their children. The parents expressed how they now take time to talk to their children. Two parents expressed the following comments:

I take the time when I never did in the past, take the time even if it’s 15 minutes. And sit down and say, you guys want to do something? So we sit down and we come up with weird ideas, but we do something.

Now once a month we go out even if it’s for an ice cream cone and we talk about what’s going on, if I’m doing something that’s not right.

Clearly, the PACT activities that parents did with their children varied with the interests and ages of the children. Most parents indicated that they had gained new ideas of doing things with their children. Only one parent reported that she did not gain anything
Identified Challenges of Parenting

Parents in the study were asked to identify their greatest challenges in parenting. Eleven of the 29 parents interviewed expressed that discipline or discipline related problems were the most difficult part of parenting. One parent stated

Learning how to discipline correctly. What things to say and what things not to say. I guess thinking before you act. Or talk, cause you don’t want to say something that’s gonna damage your child or stifle your child. So it’s hard, because everything that your parents said to you just naturally wants to come right out and so relearning that thinking process it’s hard but it’s worth it. Big time!

Several other challenges were also mentioned including money, raising a child alone, having enough time, listening to their children, and overall knowing how to be a good parent and make the right choices. One parent shared how money and discipline have been two challenges she faces:

So financial is a big part, because if I didn’t have him then I could have a job without having child care and I could pay my rent and have $300 extra. Even at $4.35 an hour, without having to do all of that, then maybe I could progress from the bottom to the top of a job. But it’s just not possible with a child because have to have somewhere to put him, someone to take care of him. And then the other part of it is, because of his age, and because I have a lot of stress in my life, is discipline. Because at this point in his life he’s really testing me.

These identified challenges often formed the basis of the parenting education content. A parent discussing information she learned from the program shared the following
We learned how to plan meals that will be healthy for the child and what to give the child instead of, like a reward like candy give them nutritious things like an apple or an orange. We learned how to cope with the problems of our children or other people’s children, like don’t spank, you can send them to time out but you need to make them realize what they’re doing wrong first. There’s just a lot of things that we learn from everyday things here.

The parenting education provided by these Even Start programs appears to be related to the specific parenting problems identified by the parents in the program. The information is primarily shared though support groups, written materials, and formal parenting classes.

How Parenting has Improved as a Result of Program Participation

Gains in positive parenting practices were noted in the qualitative interviews. The changes came primarily in the form of discipline practices although parents also reported spending more time with their children and communicating better with their children. One parent discussed changes she had made in parenting practices as a result of participating in the program:

Because before I screamed at them a lot, and I know I’m not supposed to do it, but I was raised that way. My mom did the same with us. And even though you know you are not supposed to do it, now with the classes they make you think about it. They talk a lot about those troubles and that makes you think about it. It changes you a lot. You treat them (the children) better I think.

Another parent also discussed how she has changed some parenting behaviors:

Cause a lot of us, like me I did a lot of screaming and you know hitting on the hands or whatever. And if you take a parenting class and you go to the kids’ room, you can’t do that in there and the teachers are sort of modeling for you different ways of helping kids solve problems. Like here a lot of the
parents talk the way that the teachers talk, saying we have to use our quiet voices right now, you use your loud voices outside or, I hear a lot of us saying that and I think all of them really correlate together because you use one thing, you’re gonna use it in the other rooms because you learned it and you see how it works.

The parents’ self-reports indicate that they are making gains in positive parenting practices. Clearly, they are gaining an understanding of appropriate parenting practices and they are attempting to put their acquired knowledge into practice.

**Other Program Outcomes**

The qualitative analysis of the data found that Even Start participants made other personal and family gains as a result of program participation. Individual gains in self-confidence and self-esteem were evident as well as changes in family interactions and social support networks. From a systems perspective, changes in these areas may affect changes in parenting practices. Previous studies support this in that links have been found between depression and poorer parenting practices (Cohn et al., 1990; Cox et al., 1987; Davenport, et al., 1984). Higher levels of self-esteem have been associated with positive parenting (Koeske & Koeske, 1990).

**Self-confidence and Self-esteem**

When Even Start parents in this study were asked how the program had helped them as an individual, many responded that it had helped them gain self-confidence and self-esteem. One mother shared
They’ve (the staff) have raised my self-esteem completely and pretty much gave me the support to where I now believe I can just about do anything I want. Which I think is great! And with the kids! God send! They have helped me with the kids, and helped the kids with me. And I’ve gotten a lot of good friends out of it. I have to say, a lot of really close, I won’t say lifetime friends, cause we’re all, we know where everybody lives and it’s kind of neat. And of course I got my GED!

Another mother noted her similar experiences:

I think Even Start, first of all and most of all, helped me with my self-esteem. I think that was the major thing. I’m not a good mother, I don’t know how to do this, I’m stupid, I didn’t graduate. I’ve got three kids. But if it hadn’t been for the kids now I wouldn’t have graduated. So I think that them and all those other people that have been working with me in the last two years all helped me with my self-esteem and my outlook on life. Also, I want to set an example and how could I say (to my kids), you need to go to school and graduate if I didn’t. And they look at that! I need to set that example and they (the staff) pushed me in a lot of ways that I really needed to be pushed in.

Both of these examples indicate how an increase in the parents’ self-esteem and self-confidence made changes in their relations with their children. The parents realized that they are a model for their children.

Parents’ Social Support

Parents participating in Even Start had varying amounts of social support from friends and family. Of the parents that were interviewed, 10 reported having family members that they could call on for help and 15 reported no family support. Family help was in the form of child care, transportation, or help with financial needs. One reason reported for not having family support was that family members did not live in the area. One parent cited the reason she had no support was that her family was very
dysfunctional. Some other parents were very clear that they would not, or could not, call on their family for help, however, they did not elaborate on the reason why.

The same scenario evolved when the parents were asked if they had friends they could call on for help. Approximately half of the parents said they had someone who they could call upon although the extent of their social support system of friends appeared quite small. Most parents only mentioned having one or two people they could call. Several parents identified other Even Start parents and program staff as their friends that they relied upon. One parent shared

Yeh, before I didn’t. Until this program and you’ll probably hear that from a lot of girls here. Not even just at school. Now we’re extending it out to like if one of us is going to do something, we’ll invite a few of the other girls to bring their kids to do stuff together. So I think that’s really neat. And if somebody needs something, like there was somebody here that had just moved down and they didn’t have furniture. And we got, we had a bulletin board up and she put down what she needed and everybody that could find it or if they had it at their house, gave it to her. So that’s one of the ways we all try and help each other.

Another parent shared how since she began coming to Even Start she had developed friendships with other participants:

My friends since I’ve started coming here have helped me to overcome a lot of issues that I had around my problem with being a survivor of domestic violence. And being able to talk with people that have had the same experience, maybe going through the same experience, knowing that me and my story may help them and their story is helping me to be stronger to say something to them. I babysat for one of the girls here and you know they are willing to babysit for me.

Even Start parents appear to have small social support networks of friends and family. One by-product of the program is to enlarge social support networks. The
relocation of families and friends and dysfunctional relationships are two reasons for the small networks.

Chapter Summary

Qualitative interviews with parents participating in Even Start indicate that most have a goal of furthering their education, primarily attaining their GED. The families are receiving the three components of parenting education.

All of the parents interviewed liked the Even Start the program. One parent stated that she would prefer to have PACT twice a week rather than four times a week. She felt there was too much emphasis on parenting education. This was due to her desire to concentrate on getting her GED and job skills. She felt that she already had the parenting skills she needed. This same parent, however, when asked what she liked about Even Start, stated PACT time.

There were only two parents who wanted additional information on parenting that was not already being provided. One parent, who was relatively new to the program, wanted additional information on available services for families. Another reported that she desired more information on parenting older children into their adolescence.

Like all parents, Even Start parents face many challenges in raising their children. The topic of discipline was most frequently cited as a challenge in parenting. The challenges identified by parents were frequently used as topics in parenting education. Parents self-reports indicate that they were making changes in their parenting behavior. Other changes were also occurring for these parents including increased self-esteem,
changes in interactions with extended family members, and improved social support networks.

The positive changes in these Even Start participants' lives were evident in the face-to-face interviews although they were not statistically significant in the quantitative measures. Triangulation of methods assisted the research team in capturing small improvements.

The change experienced by these families goes beyond parent-child interactions to incorporate changes with extended family members. Some participants were able to get their parents or partners to start participating in family night activities and parenting classes. For these parents, the program was changing more than their parenting practices and literacy ability. Total family systems changes were occurring.
CHAPTER 6

Discussion

Only one of the four hypotheses tested quantitatively for this study was partially supported. This chapter discusses the results of the quantitative and qualitative analyses and possible reasons for the lack of support for the quantitative hypotheses.

Hypotheses 1 and 2 examined changes in parenting knowledge and practices from pretest to posttest. Although both hypotheses were rejected, findings did provide information on possible program effects and measurement difficulties in program evaluation. Qualitative data indicate that some gains were made. Hypothesis 3 examined mental health and social support issues. This hypothesis was partially supported. Hypothesis 4 examined the relationship between number of hours of service and program effectiveness, and was not supported.

Even Start Participants Versus the Comparison Group

Hypothesis 1 was not supported. Even Start participants did not make greater gains in parenting knowledge and parenting practices than did the comparison group. Some possible explanations for this may be that: (a) there were ceiling effects in the outcome measures where scores were high on the pretest and had little room for improvement, (b) the time between pretest and posttest was not long enough for increases to become statistically significant, (c) the measures were not sensitive enough to capture
the changes made by parents in their knowledge and parenting practices, (d) multiple program effects or (e) the small sample size. In addition, it must be kept in mind that overall this population faces many barriers to making change. The participants have very low incomes, marginal employment skills, and have frequent changes in household composition and housing. Of the parents participating in the study, 61% were rated at risk for clinical depression at the time of entry to the program according to the CES-D measure.

Changes in Parenting Knowledge

The mean summed score on the parenting knowledge measure at pretest was 40 out of a possible 48 points. Therefore, parents on average were scoring 83% of the items correctly. This would indicate that most parents have a good idea of basic child development and parenting knowledge upon entering the program. Knowledge of how to obtain services for their family and information on nutrition was being obtained through the program as evident from the qualitative data. These results would indicate a problem with a ceiling effect in that many parents were not able to improve their scores as the scores were already very high.

Even Start is designed to be a long-term program serving families for a minimum of three years. The changes the program aims to make are family systems changes. Even Start staff provide information on the challenges of parenting, where parents can receive services for their families, and activities parents can do with their children. The information is integrated into other program components to help parents learn how their
role as a parent extends to other parts of their life such as being a student or employee.

Helping these parents make changes takes time and perhaps the nine-month time period was not long enough to detect this change. In addition, some participants did not participate the full nine months. The national Even Start evaluation also noted that the time allowed between measurements might not be long enough in their study to detect the changes that can occur for participants (U. S. Department of Education, 1995).

Changes in participants are often very small and difficult to detect. Program staff shared stories with the evaluation team indicating that parents were indeed making important gains. For example, one parent had for the first time had gone six months without her power being turned off to her house. Another story involved a woman who for the first time was able to write a check. Although these are important basic skills and responsibilities parents need to maintain a stable household, these very small increments of improvement are often difficult to detect in written measures. These small changes are illustrative of the heterogeneity that occurs over the life-course (Bengtson & Allen, 1993). Each parent is progressing through the program at their own rate and making changes in their parenting as needed for their specific family situation. The qualitative data indicated that parents were learning how to access services for their families. As part of the overall evaluation of the Oregon Even Start programs, participants were asked a series of questions assessing their knowledge of community resources and life skills. Statistically significant differences reflecting greater knowledge were found at posttest supporting the findings of the qualitative data.
Changes in Parenting Practices

Parenting practices are perhaps the most difficult to capture adequately in written measures. The parents may know the socially acceptable response to a question, although their behavior within the context of their own family may be different. One parent discussed how she had changed discipline strategies:

I was raised in a family that you spanked for discipline. And these days the kid will call the cops on you if you spank them or whatever which, when she was first crawling and pulling up on stuff she would get her hand popped for getting into things. Well, I learned when we got here that I shouldn’t spank her and that, either give her time out or something, don’t spank her. I’ve learned that, I learned it the hard way actually. It’s kind of hard to get out of spanking her when you’re so used to spanking her and then she understands don’t do it again. The potty training that’s a really hard challenge. And we, Marion’s given us brochures about it, we’ve sat and talked about how she, she tells us how she did things with her oldest daughter. How it was the easiest for her and most of the time I go home and try it and that’s really easy to do.

Clearly this parent is trying to make a systems change and break old family patterns of parenting.

Even Start participants did not make statistically significant gains in parenting knowledge and practices as measured by the self-reporting instruments, although they did score significantly lower on the measures at pretest and posttest than the comparison group. This would indicate that the Even Start programs are meeting the federal requirement that they serve the most needy families in their communities. The lower score for the Even Start parents compared to the comparison group at posttest may indicate the difficulty in working with this population in that progress is slow and comes in small increments.
The complexity of the Even Start model and the family systems approach raises the question of what to measure. The changes that occur in a family support program like Even Start may be due to multiple program effects. Even Start serves the entire family and it may be difficult to separate out how successfully one component of the program alone has contributed to the change in a participant. In fact, the systems perspective asserts that the change of one part of the system affects the entire system (Whitchurch & Constantine, 1993). For example, a parent may gain more positive self-esteem because she passes some GED exams. That may eventually assist in improving her parenting ability as she has a more positive sense of self although the changes may not be detected as statistically significant on written measures over one program year. This example illustrates that changes occurring in other parts of the family may contribute to more positive parenting as a result of multiple program effects.

**Demographic Differences and Parenting Knowledge**

The typical Even Start parent in Oregon is a married female, 28 years of age with a ninth grade education. Beyond that simple description there is great variation among the participants. Most participants have two children, although the number of children per family range from one to six. Almost 40% became a first-time mother as a teen. Nearly one-half of the participants (47%) are of Hispanic origin. Although the sample varies in demographics, the proportion of parents in this group who do not follow a traditional life-course trajectory of completing school, marriage, parenthood, and a rise in family income, appears greater than that of the general population.
Hypothesis 2 was not supported in that younger parents with younger children, lower incomes, and less formal education did not make greater improvements on parenting knowledge and parenting practices scores from pretest to posttest. The life-course perspective acknowledges the diversity of individual lives. The Even Start participants are very diverse in Oregon as each program is serving the people most in need in their local community. Perhaps the level of change in parenting knowledge and parenting practices was not significant in the measures due to the diversity of parents in the programs.

Examining parenting knowledge scores at pretest and posttest did find significant differences among the parents based on demographics. At pretest and again at posttest, parent's level of education, age of the oldest child and parent's age were significantly associated with higher scores on parenting knowledge. Income was included in the model, however, it was not a significant predictor of parent knowledge. As expected, parents with less education scored lower on the parenting measure. This predictor alone, however, would not be a complete explanation as perhaps parents with less education had lower literacy skills and could not understand the questions as well as other parents. Including education in the model with parent's age and age of the oldest child, gives a more complete understanding of the context in which parenting takes place for Even Start families.

The age of the oldest child was significantly associated with parenting knowledge. Families with older children had greater parenting knowledge. This would be expected as those families would have more experience in parenting. The age of the parent, however, was negatively associated with parenting knowledge. The discrepancy in these findings
may be due to the small sample size that included some outliers; the narrow variability in the measure (range of possible responses was 1 to 3); a ceiling effect; or a suppressor effect, where a third variable conceals the relationship between two variables of interest.

Younger parents scored higher on the parent knowledge scale than older parents. This finding may be due to younger parents having the most current information on child development and parenting. Often first-time parents try to obtain as much information as possible about their new baby and then as the child gets older and more children are born into the family, less outside advice and information is sought. Some younger parents in the Even Start program reported participating in the nutritional Women Infants and Children (WIC) program. Parenting and nutrition information is provided in that program. This and other sources of parenting education for young parents may be a reason why younger parents scored higher on the parent knowledge measure.

The life-course perspective includes historical time as a characteristic, acknowledging that historical events and trends affect an individual and the family (Bengtson & Allen, 1993). Trends in child development and parenting are subject to change with new research, changing economics and lifestyles. Older parents perhaps responded to the questions according to what was considered good parenting when their oldest child was an infant and toddler.

Ethnicity was included in the model of parent knowledge in a further analysis due to the disproportionately high number of Hispanic participants represented in Oregon Even Start families. Although some programs offer English as a second language classes, it was not expected that the number of non-white participants would be so high in the
Oregon programs. The high proportion of Hispanics was partially a function of some programs with high Hispanic populations were those who had the greatest number of participants completing both the pretest and posttest. When ethnicity was entered into the model assessing parenting knowledge at pretest all predictors remained significant except income as found in the model prior to the addition of ethnicity. At posttest, only ethnicity remained significant for parent knowledge with Hispanic parents scoring lower on the measure.

If the parenting classes are making a difference for families it would be expected that differences in age, income, education level, and age of oldest child would disappear at posttest. The demographic data would indicate that ESL students have more difficulty with the parenting knowledge information. The measures were translated into Spanish by an experienced translator, however, they may have lost some of the meaning from the English version in translation. Ideally, the measures would have been back translated and then checked against the English version.

Two other possible explanations for Hispanic participants scoring lower on the parenting knowledge measure are the cultural differences and literacy rates. Hispanic participants were more likely to have less formal education than other participants. The mean level of education upon entering Even Start for Hispanic parents was 7.5 years compared to 10 for other parents. This would most likely affect the ability of Hispanic parents to read and understand the written measures.

There may also have been some cultural biases toward white middle-class values on appropriate parenting. For example, in the United States parenting experts advise
parents that it is not good for baby to be left in a crib for most of the day. Other ethnic
groups may have different opinions on whether or not this is harmful to an infant.

Howrigan (1988) discusses how cultural absolutism can effect the measurement of parent-
child interaction outcomes. She reminds researchers that white middle-class parenting
practices represent one possible adaptation to a family's situation. It may not be the best
for a family with different cultural experiences.

**Demographic Differences and Parenting Practices**

The regression model of demographics with the outcome variable of parenting
practices also did not reveal any significant change from pretest to posttest. Again,
however, there were differences in demographics from pretest to posttest. Income was the
only significant predictor for the parenting practices measure at both pretest and posttest.
The measure was designed to be a self-assessment of parenting behavior. Parents in
families with lower incomes scored lower on the parenting practices measures. Poorer
parenting is often associated with poverty (Duncan et al., 1994; McLeod & Shanahan,
1993). This finding would support previous literature in that area. The stresses associated
with poverty appear to have an effect on parenting practices according to this self-report
instrument.

Adding ethnicity to the model found that income remained significant at both
pretest and posttest. Hispanic parents scored significantly higher on the parenting practices
measure at posttest only. This is surprising as it was not associated with parenting
practices at pretest. Perhaps this is due to the fact that more Hispanics in the sample lived
in two-parent or extended family settings. Only 2.9% of Hispanic families lived in single-parent family settings as compared to 23.7% of other families. The buffer of having additional adult support in raising children may assist in positive parenting practices. Jennings et al. (1991) found that mothers who had larger maternal networks had a warmer and less controlling style of parent-child interaction. Even Start staff reported fewer parenting concerns with Hispanic families. Another possible explanation is a cultural difference in how children are valued. Perhaps more emphasis is placed on parenting and meeting the needs of children in the Hispanic culture.

Influences of Emotional Well-being on Parenting

Hypothesis 3 examined the effect of emotional well-being of the parent on their parenting knowledge and practices. Specifically, the model examined the influences of parental self-esteem, depression, and social support. Parenting knowledge was not significantly related to emotional well-being, however, parenting practices were related. Depression was found to be significant at both pretest and posttest for parenting practices. Parents who were not depressed scored higher on the parenting practices measure. Self-esteem was not related to parenting practices in this sample.

The finding that parents who are not depressed had more positive parenting practices is consistent with previous research on depression and parenting ability (Cohn et al., 1990; Cox et al., 1987; Davenport et al., 1984; Rutter, 1990). Parents who experience depression are more likely to be controlling and less positive with their children. They are also more likely to be disorganized and have inconsistent interactions with their children.
Even Start parents face numerous challenges in parenting such as poverty, unemployment, single-parenting, substance abuse, and many are recent immigrants dealing with tremendous cultural change. Any one of these challenges might cause a person to become depressed and most Even Start parents face multiple challenges. It is not surprising that the Even Start parents who are more depressed score lower on the parenting practices measures.

Effect of Hours of Parenting Education on Parenting Knowledge and Practices

Hours of parenting education were not found to be associated with significantly greater gains in parenting knowledge and parenting practices as predicted in Hypothesis 4. The average number of hours of parenting education provided per month in the programs ranged from 12 to 20. For many programs an exact count of the number of hours of parenting education was difficult to determine as parenting education was integrated into the other components of the Even Start program such as home visits or in adult education. A truly integrated program will facilitate PACT time with parents and children and then discuss what they learned in an adult education class. For example, one program had the parents and children build kites during a PACT time and used the experience during the adult education class to discuss wind currents. Perhaps the reason that the hours of parenting education did not detect a significant change in parenting knowledge and practices scores is due to multiple program effects. Total attendance hours in the program by participant may be a better predictor of change in parent knowledge and practices.
Chapter Summary

Findings from the quantitative analyses suggest that the Oregon Even Start programs are serving the populations in their communities who are most in need of the program. Upon entering the Even Start program, parents who have lower levels of formal education, are older, and who have younger children have less knowledge of basic parenting and child development. These effects disappeared at the end of the program year for all but the Hispanic parents. Parents who have lower incomes, higher levels of depression and lower self-esteem have poorer parenting practices. Hispanic parents had more positive parenting practices at posttest.

No significant changes in parenting knowledge and practices were found from the time of program entry until the end of the program year. This may be due to ceiling effects, multiple program effects that were not captured in the measures, length of time between pretest and posttest or the characteristics of the population served.

Qualitative analyses revealed that parents have made gains in parenting knowledge and practices. Discipline is a parenting challenge faced by many of these parents and the data indicate they are learning and practicing new ways of managing their children’s behavior. Parents are also learning new information on such topics as nutrition and toilet training. The Even Start parents typically do not have large social support systems. Many have increased their social support or attained better support through the friendships they have formed with other program participants and staff.
CHAPTER 7

Conclusions and Implications

The study of changes in parenting knowledge and practices as the result of participation in Even Start offers implications for program staff, policy makers, and evaluation researchers. This chapter discusses limitations of the study, implications and recommendations.

Limitations

The evaluation of Oregon Even Start programs had several limitations as do all studies. The first limitation was that the funding and contract for the evaluation was not completed prior to the beginning of the program year. As a result the evaluation team did not have adequate time to train program staff in administering the measures. The consequence was that in some cases incomplete data, incorrect data, or no data were returned. Second, evaluation research involves implementing a study in an applied setting, therefore, control of how the study is carried out is often less than ideal. In the case of the Even Start program there were such a variety of different modes of delivery of services that it was difficult to control for all possible confounding variables. In addition, many of the Even Start parents participate in other social service programs such as the federal food stamp program or the Women's Infants and Children (WIC) program. The parents may also be receiving parenting information from these programs, therefore, it is difficult to
determine which program is making a difference. Third, the parenting measures used in the study were self-reports limiting the results to parents' self-perceptions. Finally, the study was unidirectional in nature in that the effects of the children on parenting practices were not examined due to time and funding constraints. Ideally, an assessment of parenting practices would include observations of the parent-child interactions. Funding limitations prevented this type of data collection from being feasible.

**Implications and Recommendations**

Although the study had limitations, implications and recommendations can be made for the program staff, policy makers, and researchers. The implications can assist in future decisions on how to fund and implement the program as well as how to improve the evaluation process.

**Implications for Program Staff**

Data from this study indicate that parents are receiving needed information on parenting. Parents repeatedly reported that they struggle with issues surrounding discipline of their children and that they would like more information on the topic. No one mode of delivery for parenting information surfaced as being preferred. Parents were comfortable with gaining the information from formal classes, support groups, or on an individual basis. This would indicate that a single model of information delivery is not necessary.

The next step may be that staff concentrate on helping parents change behaviors through modeling of appropriate parenting practices and more support groups to discuss
individual parenting challenges. The data indicate that parents know basic child
development and parenting information and now need to know how to put the knowledge
into practice.

The families being served through Even Start are very needy in that they have very
low incomes, poor literacy skills, and many come from homes where substance abuse and
dysfunctional family relationships exist. The progress that the participants make is
sometimes small and takes a great deal of time. Knowing that success, as measured
quantitatively, may not appear for several years will assist staff in understanding that they
are helping the participant although it may be difficult to document significant gains
quantitatively during a single program year.

Implications for Program Administrators

It is important for an evaluation to be useful and informative for program staff. If
the purpose of the evaluation is to strengthen a program, then it must provide information
to the staff that can be used to make necessary changes. Therefore, it is important that the
program administrators assist the evaluation team in helping staff understand the
importance of the evaluation and allow adequate time for the evaluators to train the
program staff in how to implement the measures.

As stated earlier, the systems change that can occur for Even Start families takes
time. This would imply that on-going long-term evaluation would be needed in order to
demonstrate program success. Program administrators need to plan for the funding of a
quality longitudinal evaluation project for Even Start in Oregon to fully assess the impact
of the program. Including program staff in the process would strengthen their commitment to a quality evaluation and assist them in understanding the benefits of evaluation.

Auerbach (1989) asserts that family literacy programs take a deficit approach. Qualitative data from this study indicate that the Oregon Even Start programs are attempting to tailor their services to meet the needs of the individual family and trying to avoid a deficit approach. Program administrators need to be aware of the tendency for family literacy programs to take a deficit approach and encourage program practices that empower families.

Implications for Researchers

This study found that Even Start parents had a basic understanding of child development through the parent knowledge measure. If the goal of a parenting program is to change parenting practices then assessment of parenting practices, not knowledge, would be advised. Future research on Even Start families should focus on changes in parenting practices.

Parenting is but one role that Even Start parents fulfill. From a life-course perspective, an individual is in multiple social contexts (Bengtson & Allen, 1993). Continuing to include such factors as the social support systems and emotional well-being in the study of the parenting of Even Start participants will help to capture a more complete picture of parenting. In addition, a holistic approach will assist in avoiding a deficit approach to parenting education for this population as the researcher will be able to see what other factors contribute to the family's situation.
Evaluation research on a statewide basis such as this study needs to pay attention to the diversity of the populations served when selecting measures and research methods. Written measures that need language translation should be back translated to assure that the meaning of the question is the same in either language. Cultural biases in measures need to be assessed so that the researcher is not measuring against white middle-class values.

Chapter Summary

The parents who participated in Oregon's Even Start during the 1995-1996 program year did not make statistically significant gains in parenting knowledge and parenting practices. No one mode of delivery of parent education emerged as better than another. This study did find that there are differences among the parents who have better parenting practices and more parenting knowledge than those who do not. Qualitative data indicate that parents are making gains in positive parenting through this program and the program appears to provide a valuable service to the population it serves.
References


Seckinger, D. & Day, M. (1986). Parenting education: The way we were. Lifelong Learning, 10, 8-10, 23.


Appendix A

Cover Letter to Participants

DEPARTMENT OF HUMAN DEVELOPMENT
AND FAMILY SCIENCES

OREGON STATE UNIVERSITY
Milam Hall 322, Corvallis, Oregon 97331-5102 USA
Telephone (503) 737-4765

September 25, 1995

Dear Even Start Participant,

Welcome to the 1995-96 Even Start Program! You and your child are part of a very special family literacy program in the state of Oregon. There are only seven Even Start sites around the state.

As a required part of the Even Start program, every year each site has to evaluate how well things are going. The evaluation is being conducted by Oregon State University. As a participant in Even Start, we will be asking your help in finding out how helpful the program has been for you and your family.

One way of finding out what kinds of things you are learning from the Even Start program is to ask you the same questions in the fall, and then again in the spring. In this way, we can see how well different parts of the program are working. Only you can provide us with this information. You should know that:

* The information you give will be kept private and confidential. Your answers to our questions will be identified only by a number. Your name will not be used in any way.

* Your responses, together with others, will be combined and used for statistical summaries only.

* You do not have to participate in this evaluation. If you decide that you do not want to answer some questions, that is okay. If you choose not to participate, it will not affect the services you and your family receive from Even Start.

If you have any questions about the Even Start evaluation, you can contact me at (503) 737-1071. If I am not available when you call, please leave a message and I will call back. I will also be out to visit your program sometime soon, and I can answer any questions at that time.

Thank you for your help. We appreciate your cooperation.

Cordially,

[Signature]

Leslie N. Richards, Even Start Evaluator
Appendix B

Informed Consent Form

DEPARTMENT OF HUMAN DEVELOPMENT
AND FAMILY SCIENCES

OREGON STATE UNIVERSITY
Milam Hall 322 · Corvallis, Oregon 97331-5102 USA
Telephone 503-737-4763

EVEN START EVALUATION INFORMED CONSENT DOCUMENT

Project Title: Evaluation of the 1995–96 Oregon Even Start Programs

Evaluator: Leslie Richards, Assistant Professor

As a part of my participation in the Even Start family literacy program I am being asked to help with a research project evaluating the effectiveness of my Even Start program. I will be asked to answer some survey questions in the fall and again in the spring.

The results from this research will help us to better understand how well Even Start is helping families reach their goals, and what parts of the program seem to be most effective.

I understand:

* The information I give will be kept private and confidential. My answers to the questions will be identified only by a number. My name will not be used in any way.

* My responses, together with others, will be combined and used for statistical summaries only.

* I do not have to participate in this evaluation. If I decide that I do not want to answer some questions, that is okay. If I choose not to participate, it will not affect the services my family and I receive from Even Start.

* If I have questions about the research study I can contact Leslie Richards, Milam Hall, Oregon State University, Corvallis, OR 97331, (503) 737-1071. Any other questions that I have should be directed to Mary Nunn, Sponsored Programs Officer, OSU Research Office, (503) 737-0670.

My signature below indicates that I understand the Even Start evaluation project and agree to participate in this study. I understand that I will receive a signed copy of this form.

Participant’s Signature __________________________ Name of Even Start Participant __________________________

Participant’s Address __________________________ Participant’s Phone Number __________________________
ABOUT CHILDREN

Here are some ideas about children and their development. After you read each item, decide whether you AGREE, DISAGREE, or are NOT SURE.

1. Paying attention to babies whenever they cry will spoil them................................. Agree Not Sure Disagree
2. It is normal for a two-year-old to refuse to do what a parent says.................................
3. A mild to moderate hearing loss does not affect the way young children learn language
4. Accidents are the number one cause of death and injury to young children
5. A good way to teach your child not to hit is to hit back........................................
6. Shots (immunizations) can wait because babies have natural protection from illness for the first year
7. Most two year olds know the difference between make-believe and true stories
8. Most children are ready to be toilet trained by one year of age.................................
9. A young child learns best when you talk about what the child is interested in at the moment
10. Some normal children do not enjoy being cuddled..................................................
11. If you punish your child for doing something wrong, it's okay to give the child a piece of candy to stop crying
12. It really doesn't make much sense to talk to babies before they understand the meaning of words
13. For safe of safety, babies should be discouraged from crawling in the home
14. Playing is simply a way of passing time for children and does not help their learning abilities
15. Children do not need to see a dentist until they get their permanent teeth
16. By the age of 3 children should easily be able to share their toys with others
17. A 5-year-old who wets the bed is just being lazy....................................................
18. By 2 months of age, babies will sleep better at night if they are eating solid foods
19. Normal children never cheat or tell lies.................................................................
20. A baby is not hurt by being left in a crib for most of the day.................................
### ABOUT PARENTING

Parents have many different ways of dealing with problems. Here are some items that describe different ways of parenting. For each, check the box that is closest to what you would do.

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<tbody>
<tr>
<td>1. I allow my children to watch as much TV as they like</td>
<td>Never</td>
<td>Once in a while</td>
<td>Sometimes</td>
<td>Usually</td>
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<td>2. I read to my children every day</td>
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<td>3. When I'm upset or under stress, I am picky and on my child's back</td>
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<td>4. I am the kind of parent that let children do whatever they want</td>
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<td>5. When my child misbehaves, I raise my voice or yell</td>
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<td>6. When I want my child to stop doing something, I firmly tell my child to stop</td>
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<td>7. After there's been a problem with my child, things get back to normal quickly</td>
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<td>8. When we're not at home, I let my child get away with a lot more</td>
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<td>9. When my child does something I don't like, I often let it go</td>
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<td>10. When my children misbehave, I make them tell me why they did it</td>
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<td>11. When my child misbehaves, I threaten to do things that I know I won't actually do</td>
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<td>12. When my child does something I don't like, I say mean things, or call names</td>
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### FEELINGS ABOUT HOW THINGS ARE GOING

For each of the following statements, check the box that best describes HOW OFTEN YOU HAVE FELT THIS WAY DURING THE PAST WEEK.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Rarely or none of the time</th>
<th>A little of the time</th>
<th>A moderate amount of time</th>
<th>Most or all of the time</th>
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</thead>
<tbody>
<tr>
<td>1. I was bothered by things that don’t usually bother me</td>
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<td>2. I did not feel like eating; my appetite was poor</td>
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<td>3. I felt that I could not shake the blues even with help from my family or friends</td>
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<td>4. I felt that I was just as good as other people</td>
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<td>5. I had trouble keeping my mind on what I was doing</td>
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<td>6. I felt depressed</td>
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<td>7. I felt that everything I did was an effort</td>
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<td>8. I felt hopeful about the future</td>
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<td>9. I thought my life had been a failure</td>
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<td>10. I felt fearful</td>
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<td>11. My sleep was restless</td>
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<td>12. I was happy</td>
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<td>13. I talked less than usual</td>
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<td>14. I felt lonely</td>
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<td>15. People were unfriendly</td>
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<td>16. I enjoyed life</td>
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<td>17. I had crying spells</td>
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<td>18. I felt sad</td>
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<td>19. I felt that people disliked me</td>
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<td>20. I could not “get going”</td>
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Appendix F

FEELINGS ABOUT YOURSELF

Here are some other ways people describe themselves. Indicate the extent to which you agree with the following items:

1. I feel that I'm a person of worth, at least on an equal basis with others
2. I feel that I have a number of good qualities
3. All in all, I am inclined to feel that I am a failure
4. I am able to do things as well as most other people
5. I feel I do not have much to be proud of
6. I take a positive attitude toward myself
7. On the whole, I am satisfied with myself
8. I wish I could have more respect for myself
9. I certainly feel useless at times
10. Every time I get ahead, something or someone stops me
11. Planning only makes a person unhappy, since plans hardly ever work out anyway
12. At times I think I am no good at all

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Strongly Disagree</th>
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Appendix G

SUPPORT FROM OTHERS

The following questions are intended to describe the way you feel about your relations with family, friends, and others. This is not a test, so there are no right or wrong answers. For each item check the box that best describes your situation.

1. There is a special person who is around when I am in need.
2. There is a special person with whom I can share my joys and sorrows.
3. My family really tries to help me.
4. I get the emotional help and support I need from my family.
5. I have a special person who is a real source of comfort to me.
6. My friends really try to help me.
7. I can count on my friends when things go wrong.
8. I can talk about my problems with my family.
9. I have friends with whom I can share my joys and sorrows.
10. There is a special person in my life who cares about my feelings.
11. My family is willing to help me make decisions.
12. I can talk about my problems with my friends.
Appendix H

PARENT INTERVIEW PROTOCOL

EVEN START, 1996

We are part of a team that is evaluating the Oregon Even Start Programs and we would like to ask you some questions about your experiences with the program. Your information will help us find out what the good parts of the program are and what needs to be improved or changed. All of the information you share with us is confidential. Your comments may be included in a report however, you will not be identified. We appreciate you taking time to talk with us about the program.

1) First could you tell us a little bit about your family. How many children do you have and what are their ages? Do you have any children not living at home with you?

2) Besides your children, does anyone else live in your household? If yes, Who are they and what is their relationship to you?

3) Do you remember when you started coming to the Even Start program: (probe: How old was your child?)

4) Which other family members participate in the Even Start program?

5) What made you decide to participate in the Even Start program?

6) What is your goal for participating in Even Start?

7) There are four parts to the Even Start program, (adult education, early childhood education, parent education, and PACT). How does your Even Start program provide these activities to you and your child? (Use visual model of the program components).

Parenting:
One of the services most Even Start programs provide is help with parenting. We all know that parenting is a difficult job.

1) What would you say are the hardest things about parenting for you?

2) What would you say are your strengths as a parent?
3) Parenting education is a topic that covers three areas.

a) It helps parents find services available to help their families such as how to find a doctor or where to find good used children’s clothing.
b) It helps parents learn new ways of doing things with their children, and
c) It offers ideas on how to cope with the challenges of parenting.

Has your Even Start program helped you in any of these areas. (Use cards, one with each area listed on it and ask individually. Use the following probes.)

For example:
Has your Even Start program helped you find services for your family?
If yes, what are some of the services:
If not, are there services you need that you are not receiving?
Have you learned new ways of doing things with your children or playing with your children?
If yes, what are some of the ways?

Have you learned ideas on coping with the challenges of parenting that might help make parenting easier for you?

4) Is there any parenting information you would like to get that you are not getting at this time?

We all can use help from others at times, whether it is a ride to get somewhere or help with our children.

5) Do you have any family members you can call on when you need help with something?

What are some ways your family has helped you?

Do you have any friends that you can call on when you need help with something?
What are some ways your friends have friends have helped out?

Early Childhood Education (ECE) and Child Care:
Next I would like to ask you some questions about the preschool and child care services of the Even Start program.

1) Does your child attend some kind of child care or preschool through Even Start?

If yes, ask the following:
a) What does your child enjoy most about the preschool?
b) What do you like the most about the preschool?
c) Is there anything you or your child don’t like about the preschool situation?
d) Is there anything you would like to change about the preschool program?
e) What opportunities, if any, do you have to do things with your child in the early childhood classroom? How does this work for you? How does this work for your child?

If the child is in wrap around care, ask the questions again for the child care situation.

2) Does Even Start assist you with other child care needs so that you can participate in the program? How does that work for you? How does that work for your child?

**Adult Basic Education (ABE)/English as a Second Language (ESL) Classes:**
One of the major parts of Even Start is ABE/ESL.

1) What adult education activities are you participating in?
   
   What is your goal in adult education? To obtain a Graduate Equivalency Diploma (GED), finish an ESL course, go to college or other school?

3) What part of the adult education class do you enjoy the most? Why?

   Is there any part of the ABE/ESL classes you would like to see changed or that has been especially hard for you?

**Support Services:**
Even Start programs sometimes provide other services for you and your family. For example they might provide transportation or help finding housing.

1) Other than parent education, adult education, and child care, does your Even Start program provide other services to you or your family? If yes, what are they and how satisfied are you with the services? (probe about transportation if not mentioned)

2) Are there other things you wish your Even Start program could help with? If yes, what are they?

**Summary Questions:**
Even Start tries to meet the individual needs of the families it serves, so each family’s experience with the program is different. These final questions are to help us see how the program has affected your family.
1) a) What, if any, are the most important ways that Even Start has helped you as an individual?
b) What, if any, are the most important ways that Even Start has helped your child/ren?
c) What, if any are the most important ways that Even Start has helped the rest of your family?

2) Do you think your participation in Even Start will help you and your family after you complete the program? If yes, how so? If no, why not?

3) Do you think anything needs to be changed to make Even Start a better or stronger program? If yes, what?

4) What things would you like to see remain the same?

5) Is there anything we missed or anything else you would like to say about the program?