

## Parents as Teachers

# Baby FACE: Improving Educational Outcomes for American Indian Children

### DOES THE BABY FACE PROGRAM BOOST AMERICAN INDIAN CHILDREN'S EARLY CHILDHOOD DEVELOPMENT AND EDUCATIONAL ACHIEVEMENT?

## Project Overview

#### **THE PROBLEM: What Challenge Did the Program Try to Address?**

Rural American Indian communities confront challenges to their families' well-being and educational achievement. The most prevalent challenges are an intergenerational cycle of low literacy, high levels of poverty, and geographic isolation; additionally, American Indian languages and culture have not been well integrated within children's education programs that begin in the earliest years of development. Responding to these issues, the Parents as Teachers National Center (PATNC) applied for an i3 grant to address the need for early education and child development services among very rural American Indian populations.

#### **THE PROJECT: What Strategies Did the Program Employ?**

From 2010-2015, Parents as Teachers and a consortium of 20 Bureau of Indian Education (BIE) schools received an i3 validation grant<sup>1</sup> to implement and evaluate the Baby FACE (Family and Child Education) program, a home visiting program which provided high-needs American Indian families with services for their young children. Parents as Teachers has implemented this evidence-based home visiting model across the United States for over thirty years. The model supports families with children prenatally through the start of kindergarten. It focuses on four goals: promoting parent knowledge of early childhood development and improved parenting practices; enabling early detection of developmental delays and health issues; preventing child abuse and neglect; and boosting children's school readiness and success. Baby FACE was evaluated by a randomized controlled trial at one site, and a quasi-experimental design at all other sites.

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<sup>1</sup> Validation grants provide funding to support the expansion of projects that address persistent education challenges to the regional or national level. All i3 grantees are required to conduct rigorous evaluations of their projects. The quality of evidence required to demonstrate a project's effectiveness depends on a project's level of scale or grant type.

## THE BABY FACE MODEL

- **Home Visits.** Professional parent educators visited families every two weeks. Visits included age-specific information about parenting issues and child development, as well as an educational activity between parent and child adapted to focus on the local culture and language. Parent educators also discussed needs, goal-setting, and referrals during the visits.
- **Family Circle.** The program gave each family an opportunity to engage in a Family Circle with other families on a monthly basis. The circles were designed to be inclusive of American Indian language and culture and were usually combined with cultural and/or social events in the local community. Typical activities included listening to speakers, going on field trips, and making books and toys that incorporated the local language and culture.
- **Health Screenings & Resource Connections.** The program screened children for developmental and social-emotional delays and gave them a health review, which included screening for hearing, vision, and general health. Baby FACE also referred and connected families to local resources if they needed additional support for their child's health or development and/or their family's well-being.
- **Book Distribution.** Baby FACE provided families with at least three books each month to promote the project's early literacy goals. Book sharing organizations – Penguin Putnam and Books by the Bushel – provided two of the three monthly books and Imagination Library sent the other one.

## Summary of Results

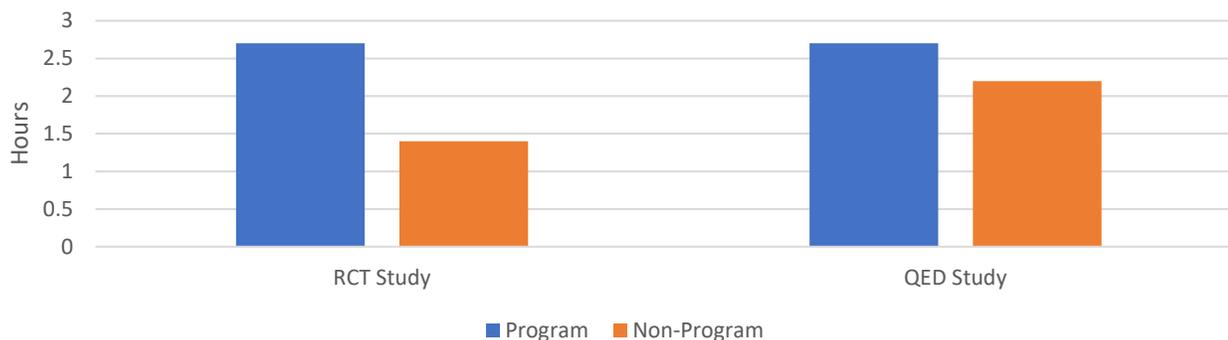
### DOES THE BABY FACE PROGRAM BOOST AMERICAN INDIAN CHILDREN'S EARLY CHILDHOOD DEVELOPMENT AND EDUCATIONAL ACHIEVEMENT?

The Baby FACE program demonstrated a positive impact on children's cognitive ability and SEL development, among other factors.

- **SOCIAL-EMOTIONAL DEVELOPMENT.** Comparison of the Baby FACE and comparison groups found that Baby FACE two-year olds in the QED study scored significantly higher on the initiative subscale of the DECA (The Devereux Early Childhood Assessment for Infants and Toddlers measures social-emotional development). There was no statistically significant difference between three-year olds' scores in the 2 groups. In the RCT study, Baby FACE three-year olds scored higher than their comparison group on the same subscale of the DECA. This difference was statistically significant.
- **COGNITIVE ABILITY.** Outcomes from the QED found that Baby FACE had a positive impact on children's cognitive ability assessment scores at a statistically significant level. Analyses found that participating in 18 personal visits positively impacted children's cognitive ability at age three, as well as frequency of literacy activities and the number of books in the home, all at a statistically significant level. The children in the study were aged two and three. The RCT also found an increase in cognitive ability for the Baby FACE children.

### SECONDARY FINDINGS

Hours Parents Read to Child per Week



- **HOME LITERACY ACTIVITIES.** Baby FACE parents read more frequently to their children than non-Baby FACE parents. In the QED, parents enrolled in the Baby FACE program read to their children on average 2.7 hours per week, compared to 2.2 hours per week of those not in the program. Similarly, data from the RCT showed that Baby FACE parents read to their children 2.7 hours per week, compared to 1.4 hours per week of non-Baby FACE parents. Both differences were significant.
- **MORE BOOKS AT HOME.** Baby FACE parents also reported more age-appropriate books in the home than non-Baby FACE parents reported. Children participating in Baby FACE engaged in home literacy activities more frequently than did non-Baby FACE children.

Please see Appendices B and C for information about the evaluation's design and the quality of the evidence, respectively.

### OTHER CONSIDERATIONS

Based on interviews with staff supervisors and parent educators as well as focus groups with parents/caregivers, the implementation evaluation highlighted several strategies and challenges for successful program implementation. It also suggested several lessons for promoting successful program outcomes.

- **SUCCESSFUL IMPLEMENTATION STRATEGIES.** Program staff mentioned that incentives were helpful for recruitment and enrollment and promoted continued participation in the program. Building personal relationships, trust, and rapport also enhanced recruitment and implementation. In addition, social networks, particularly Facebook, served as an effective instrument for recruitment and implementation at eight of the twenty sites.
- **TRUST.** Programs such as Baby FACE require parents and parent educators to have trusting personal relationships in order to achieve their intended impacts. Establishing such trust takes time, patience, and persistence on the part of parent educators.
- **CHALLENGES TO IMPLEMENTATION.** Families' schedules and time commitments hindered consistent participation in home visits. Transportation and distance were a major challenge for enrolling and serving families in nine of the twenty sites. Challenges to enrollment and service provision also included family mobility, stress and crises in families' lives, lack of trust in parent educators, and unrealistic expectations for the program. The implementation sites' rural setting and limited access to resources also posed a challenge to staff recruitment and retention.
- **MULTIPLE FAMILY CRISES.** Parents who had to address multiple crises could not fully engage in the program. Parent educators found creative ways to serve these families (e.g., connecting via text message).

- **GROUP ACTIVITIES.** Families who were able to attend Family Circles benefited from connecting with other families to discuss effective parenting techniques and get support for overcoming parenting challenges. Children also developed their social skills by interacting with one another.
- **CHILD DEVELOPMENT.** Both parent educators and parents reported that children met milestones for socio-emotional and physical development, along with pre-literacy, language development, and school readiness skills. Staff provided examples of how children in the program were outperforming non-participants in pre-literacy and pre-numeracy skills.
- **FAMILY WELL-BEING.** Some parents reported that the encouragement of parent educators and the goal setting promoted through the program helped them obtain diplomas and degrees, increase stability through routines, achieving housing stability, or improve communication among themselves.
- **BOOKS AND HOUSEHOLD ITEMS.** Families really appreciated and enjoyed receiving free books, baby items, and household supplies. Often, the books received through the program were the only ones in families' homes. The program distributed over 5,500 books to families. Each family received 96 books on average.
- **PARENTING SKILLS AND CONFIDENCE.** Baby FACE helped parents learn about developmental milestones and activities they can do to promote their child's development. Parents talked and engaged more with their children and felt more confident as parents and as advocates for their children.

The evaluators also noted several ways to strengthen implementation of Parents as Teachers in the future:

- **FAMILY CIRCLE:** Parent educators and supervisors noted the difficulty of planning Family Circles, including finding a place and time that worked for everyone. To overcome this, some parent educators scheduled Family Circle around other activities, such as school parent night or parent/teacher conferences.
- **SUPERVISORS.** While there were few complaints about the supervisors, the most common from parent educators was that the supervisors were too busy or wearing too many hats.
- **ADDITIONAL TRAINING.** Staff members requested additional training for: working with families and children experiencing domestic violence, working with children with special needs, traditional teachings (especially around birth rituals and childcare), screenings and identifying client needs, how to train parents on the basics of parenting, and computer literacy for Parent Educators.

## For More Information

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### Evaluation Reports

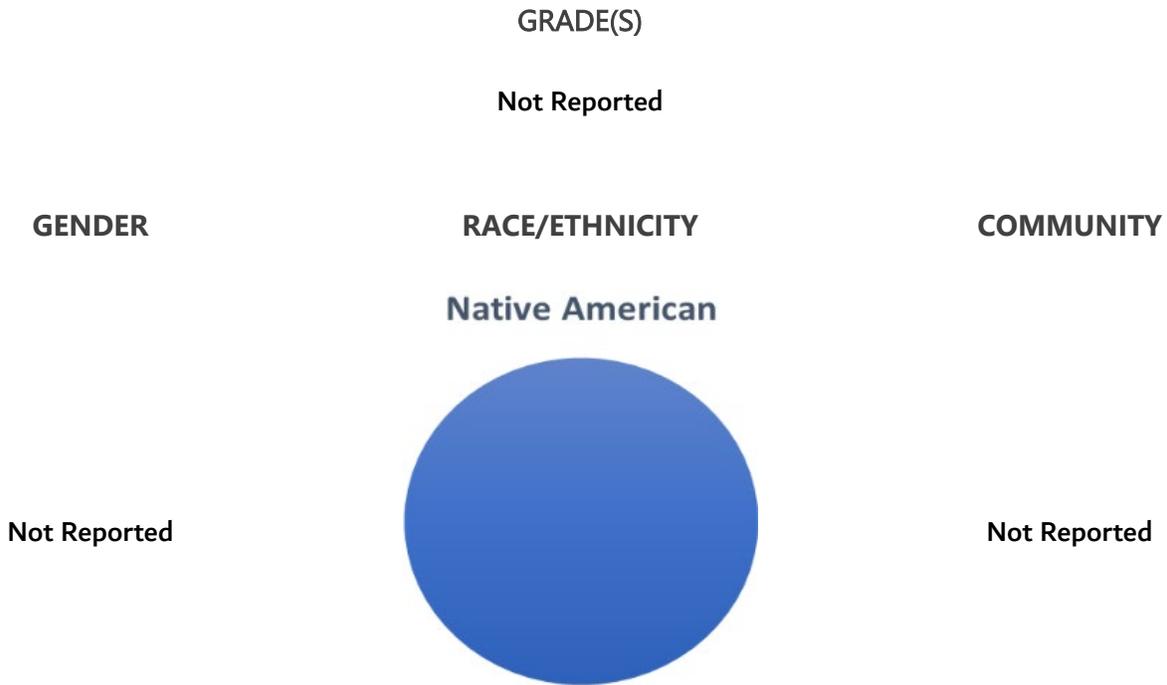
[Impact Evaluation Report](#) (adapted from Research and Training Associates, August 2016)<sup>2</sup>

[Implementation and Qualitative Evaluation Report](#)  
(Wilder Research, January 2015)

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<sup>2</sup> The information and data for this result summary was collected from the most recent report as of the release date: Wilder Research. (2015, January). *Baby FACE Qualitative Evaluation*. Retrieved from [https://www.wilder.org/sites/default/files/imports/ParentsAsTeachers\\_BabyFACE\\_QualEvaluationReport\\_1-15.pdf](https://www.wilder.org/sites/default/files/imports/ParentsAsTeachers_BabyFACE_QualEvaluationReport_1-15.pdf)

## Appendix A: Students Served by the Project<sup>3</sup>



### HIGH-NEED STUDENTS<sup>i</sup>

Free/Reduced-Price Lunch	English Learner	Students with Disabilities
75%	Not Reported	Not Reported

<sup>3</sup>These data reflect the entire student population served by the intervention, not just the evaluation sample used in the impact study.

## Appendix B: Impact Evaluation Methodology<sup>4</sup>

### RESEARCH DESIGN:

<b>Design:</b>	Quasi-Experimental Design (QED) and Randomized Controlled Trial (RCT)
<b>Approach:</b>	<ul style="list-style-type: none"> <li>The Parents as Teachers' Baby FACE program was evaluated through an RCT at one of the twenty implementation sites. All of the others were evaluated via a QED.</li> </ul>
<b>Study Length:</b>	Three years

### DATA COLLECTION AND ANALYSIS

<b>Study Setting:</b>	20 sites at BIE schools
<b>Final Sample Sizes:</b>	<ul style="list-style-type: none"> <li>Intervention Group - RCT: 63</li> <li>Comparison Group - RCT: 66</li> <li>Participants – QED: 853</li> <li>Non-Participants – QED: 476</li> </ul>
<b>Intervention vs. Comparison Group Characteristics:</b>	<ul style="list-style-type: none"> <li>Mother's Education: The intervention and comparison groups were equivalent at baseline on this measure. Over 20% of mothers did not graduate from high school and over 50% had no more than a high school diploma or GED</li> <li>Household Poverty: Approximately 75% of both the intervention and comparison groups were characterized as high poverty</li> <li>Average Household Size: 6</li> <li>Average Mother's Age: 26</li> <li>Mother's Unemployment: 67% (approximately)</li> <li>Primary Language: Roughly 67% reported that English was the primary language used at home; 25% reported that both English and a Native American language were primary; 5% reported that their Native language was the primary language</li> </ul>
<b>Data Sources:</b>	<ul style="list-style-type: none"> <li>Assessments</li> <li>Survey</li> <li>Activity Log</li> <li>Interviews</li> <li>Focus Groups</li> </ul>
<b>Key Measures:</b>	<ul style="list-style-type: none"> <li>Home Literacy Activities (Home Literacy Activity Scale)</li> <li>Cognitive Ability (Boehm Test of Basic Concepts-3)</li> <li>Social-Emotional Development (Devereaux Early Childhood Assessment for Infants &amp; Toddlers)</li> <li>Protective Factors (Protective Factors Survey)</li> </ul>

<sup>4</sup> These data reflect only the evaluation sample in the impact study, not the entire population served.

## Appendix C: Quality of the Evidence

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Although an evaluation may not have been reviewed by the time of publication for this summary, it is possible that the study will be reviewed at a later date. Please visit the websites found in the footnotes on this page to check for updates.

### WHAT WORKS CLEARINGHOUSE REVIEW<sup>5</sup>

STUDY	RATING
Not reviewed as of 02/10/2020	N/A

### EVIDENCE FOR ESSA REVIEW<sup>6</sup>

STUDY	RATING
Not reviewed as of 02/10/2020	N/A

### NATIONAL CENTER ON INTENSIVE INTERVENTIONS REVIEW<sup>7</sup>

STUDY	RATING
Not reviewed as of 02/10/2020	N/A

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<sup>5</sup> <https://ies.ed.gov/ncee/wwc/FWW>

<sup>6</sup> <https://www.evidenceforessa.org/>

<sup>7</sup> <https://intensiveintervention.org/>

# Investing in Innovation (i3) Grantee Results Summary

Validation, 2010-2015

The [\*Investing in Innovation Fund \(i3\)\*](#), established under section 14007 of the American Recovery and Reinvestment Act of 2009, is a Federal discretionary grant program at the U.S. Department of Education within the Office of Elementary and Secondary Education (OESE). i3 grants help schools and local education agencies work in partnership with the private sector and the philanthropic community to develop and expand innovative practices that improve student achievement or student growth, close achievement gaps, decrease dropout rates, increase high school graduation rates, and/or increase college enrollment and completion rates for high-need students.

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<sup>i</sup> “High-need student” refers to a student at risk of academic failure or otherwise in need of special assistance and support, such as students who are living in poverty, attend high-minority schools, are far below grade level, who have left school before receiving a regular high school diploma, at risk of not graduating with a diploma on time, who are homeless, in foster care, have been incarcerated, have disabilities, or who are English learners. For more information see: [\*Applications for New Awards; Investing in Innovation Fund-Development Grants, 81 FR 24070 \(April 25, 2016\)\*](#).