

A New Approach to Defining and Measuring Family Engagement in Early Childhood Education Programs

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Almost every state-level Quality Rating and Improvement System (QRIS) in the country includes family engagement as an indicator of early childhood education quality. Yet, most QRIS measure family engagement using a uniform, narrow set of parent involvement activities at the center. We propose an alternative approach that emphasizes a range of direct services for parents, including: (1) parenting classes, (2) family support services, (3) social capital activities, and (4) human capital services. In our proposed rating systems, states would assess how well centers address the highest ranked needs of families and employ evidence-based practices across one or more of the center-selected direct parent service categories. We explore the feasibility of this approach through a qualitative study (n = 14 centers) and case examples. We discuss how this new rating system could be used to monitor quality and as a tool for program improvement to support child development.

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TWO-THIRDS of all four-year-old children in the United States attend early childhood education (ECE) programs, and this number is expected to rise in the coming years (U.S. Department of Education, 2017). As ECE programs expand across the country, there is a growing recognition of the need to measure and improve quality across the diverse ECE landscape, including Head Start, state pre-kindergarten (pre-k), and community-based programs, to improve child outcomes. The major system that monitors center-based ECE programs in the United States is state-level Quality Rating and Improvement Systems (QRIS). This paper explores how to maximize the effectiveness of QRIS for promoting child outcomes by improving the conceptualization and measurement of family engagement, which is one of the most common measures of quality within QRIS.

Galvanized through the Race-to-the-Top Early Learning Challenge, QRIS attempt to improve the performance of individual programs by: (a) assessing ECE programs using a number of quality measures, (b) disseminating program ratings to the local public, and (c) offering improvement supports tied to programs' rating performance. The guiding framework behind QRIS is that top-rated programs represent higher levels of quality, which should mean that higher ratings are associated with greater gains in children's development and learning—a primary goal of early childhood

education programs. Thus, as states and programs target and improve quality measures in QRIS, they should in turn better promote child outcomes.

States typically create the rating component of QRIS by relying on research as well as the professional judgment and values of the many constituents to establish local buy-in. All QRIS across the country include measures of classroom quality (e.g., staff qualifications), and the majority of QRIS (88%) include a set of measures to assess family engagement. Although family engagement is highly valued by QRIS stakeholders (given that it is included in nearly every QRIS), the theoretical framework, evidence base, and measures are less developed compared to classroom quality indicators, often leaving states to make their own choices on how to actually measure and rate family engagement. The most common way QRIS measure family engagement is based on parent involvement in the center, such as whether parents volunteer, attend parent-teacher conferences, help fundraise at the center, or the ways in which centers promote involvement through communication activities (e.g., if the center has a bulletin board; Build Initiative & Child Trends, 2014; Tout et al., 2010).

A central problem is that there is limited evidence that the way in which family engagement is defined and measured within QRIS is related to child well-being. Moreover, QRIS typically employ a top-down approach for measuring family



engagement that often does not take into account families' needs or desires for services. QRIS also assume a "one size fits all" approach for family engagement, generally ignoring the large range in parental need as well as the mission and structural capacities across ECE programs within a state. This combination of factors limits the usefulness of the current measurement of family engagement as an indicator of quality within QRIS.

This paper outlines an alternative approach to assessing family engagement in QRIS. Instead of focusing on a uniform, narrow set of parent involvement activities at the center (e.g., volunteering in the classroom), we draw on the deep and consistent literature that parents' human capital (e.g., education and income), skills, behaviors, and well-being are strongly tied to their children's development. In particular, the extant evidence suggests that targeting these skills could be particularly important for low-income parents given that many early achievement gaps are tied to family background characteristics and low-income parents may have less access to resources to promote their own well-being (Heckman, 2011; Kalil, 2015).

We argue that QRIS should focus on the direct services for parents that target specific parent skills or behaviors that are consistently related to child outcomes. These include: (1) parenting classes, (2) family support services, (3) social capital activities, and (4) human capital services. We do acknowledge that most ECE centers cannot provide all four types of services to parents, nor can QRIS expect a tailor-made program of parent engagement for each individual parent in every center; thus, programs would select at least one area in which to focus and receive a rating. More areas could be included in the future should the provision of direct services to parents expand within and across ECE program. The paper provides concrete recommendations of how QRIS could be structured to take into account the needs of the parents, local context, resources the program has to support parent activities, and likely impact of services to parents on children's outcomes based on theory and evidence. Redirecting the focus of family engagement onto direct services for parents within QRIS will hopefully serve the dual purpose of (a) increasing the frequency of these services given that what gets measured typically gets paid attention to and (b) allowing parents to select centers based on their individual needs (e.g., parents could select a center that has both high-quality classroom quality as well as GED services if they wanted support in their human capital development).

In the current paper, we first review the existing evidence on parent involvement at the center, the most common way to define family engagement in QRIS, and review whether this indicator follows the underlying logic model for QRIS. We then present the compelling research on the ways in which parents' own human capital, skills, behaviors, and well-being relate to child outcomes and how ECE programs could serve as a platform for promoting parent outcomes, with the explicit goal of promoting child development. Based on this

evidence, we suggest a new three-step approach to measuring and rating family engagement in QRIS and using this rating to improve services offered to parents. First, we suggest that centers survey parents' needs; second, assess how well the direct services they offer to parents serve the mostly highly ranked needs of families; and third, rate the extent to which the services offered are evidence-based.

As a first step in assessing the frequency of direct services to parents and testing the feasibility and appropriateness of the proposed framework, we conducted a qualitative study of ECE centers in Illinois. We selected programs that exemplified the range of ECE programs that serve low-income families (e.g., Head Start, state pre-k, and community-based organizations). We then offer two case examples of ECE programs that had high parental needs yet differed greatly in their delivery of direct services to support parents. We demonstrate how a new rating approach could be used to monitor and improve centers' efforts so that each may have the highest likelihood for improving parent and child outcomes.

Evidence on Current Definition of Family Engagement in QRIS: Parent Involvement in Center

Nearly all of the state QRIS across the country emphasize parents' involvement in centers as the key domains of family engagement. These measures are broadly defined as the activities and strategies that ECE centers implement to engage and support families in their children's learning. Parent involvement at the school includes activities such as: parent attendance at school meetings or parent-teacher conferences, volunteerism in the classroom, attendance on field trips or student performances, help in fundraising for the school (e.g., organizing bake sales), or service on a committee or council. In addition, QRIS often measure the ways in which centers promote parent involvement through communication activities, including whether the center has a bulletin board, parent handbook, and/or written communication between parents and centers.

Overall, correlational studies suggest few relations among parent involvement activities at a center or school and child outcomes (Hindman & Morrison, 2011; Mattingly, Prislun, McKenzie, Rodriguez, & Kayzar, 2002; Sabol, Hong, Pianta, & Burchinal, 2013). For example, Robinson and Harris (2014) used over 60 items of parent involvement among several large-scale data sets (e.g., National Educational Longitudinal Study and Child Development Supplement in the PSID) and found that parental school involvement was only modestly related to changes in elementary student achievement. One reason that parents' involvement in a center does not consistently relate to child outcomes is that "light touch" parent involvement activities, such as fundraising for the school, may not relate to the proximal processes that may matter for children directly, such as improved home environment or parenting quality.

Instead, many of the activities that parents participate in may actually serve more as a signaling tool from parents and ECE programs to demonstrate their commitment to their children's education. Parent involvement at the school, such as volunteering, also may help to reduce teacher burden or build school community, which may be important outcomes themselves but may not have a direct effect on children's school success (Fantuzzo, McWayne, Perry, & Childs, 2004; Powell, Son, File, & San Juan, 2010).

Including these types of family engagement activities in QRIS has the potential to dilute the predictive power and utility of overall center ratings. If ECE programs do value these activities as important outcomes, then states may decide not to include them in the center quality rating and instead report this set of items separately. However, the aforementioned evidence does not support the current practice of using of these indicators within the aggregate rating to represent center quality and serve as a target of quality improvement to promote child outcomes.

New Definition of Family Engagement for QRIS Contexts: Direct Services for Parents

We propose an alternative approach that focuses on the direct services for parents that aim to promote parent outcomes directly and are typically not measured in most QRIS, which include: (1) parenting classes, (2) family support services, (3) social capital activities, and (4) human capital services. For direct services for parents, the theory of change rests on the evidence that parents' own skills, competencies, and well-being influence their interactions with children, parenting skills, and home environment, all of which play a critical role in children's success over the life course.

Parents are children's first educators and are recognized as the "primary engine" of development for young children (Bronfenbrenner, 1979; Phillips & Lowenstein, 2011). The parent-child dyad forms the foundation for children's healthy development (National Academies of Sciences, Engineering, and Medicine, 2016) and plays a critical role in fostering children's cognitive, language, and socio-emotional development (Sandler, Ingram, Wolchik, Tein, & Winslow, 2015). Children do better when they have close, high-quality relationships with key family members who are able to invest time and resources in their skill formation (Carneiro, Meghir, & Parey, 2013).

The parent-child dyad is affected by a number of factors, including child characteristics and shared parent-child genetic predispositions, but also by a set of parent characteristics, including parent mental health, parents' human and social capital, and families' economic resources. Family stress models posit that family instability, including lack of financial resources, food or housing insecurity, or marital conflict, can lead to increased stress and adversely affect parents' mental health, which in turn can disrupt household routines and negatively affect the way parents interact with

children and children's development (Yeung, Linver, & Brooks-Gunn, 2002). According to the family investment model, parents with greater human capital and economic resources are better able to then purchase resources that are directly beneficial for children and youth (e.g., learning materials in the home; homes in safe, secure neighborhoods; Yoshikawa, Aber, & Beardslee, 2012). More economically disadvantaged families may need to purchase goods for the family's more immediate needs (Votruba-Drzal, 2003).

Improving parents' own capacities, skills, and human capital thus has the potential to improve the quality of parent-child relationships and the home environment, leading to better outcomes for children. ECE programs that serve families are in the unique and promising position to support parents. Parents may view ECE programs as a safe, trusting environment and thus may be more likely to engage in activities offered through these programs (Chase-Lansdale & Brooks-Gunn, 2014). ECE programs also offer a work support to parents, which frees up time for parents to pursue their own educational or employment goals. Reframing family engagement in QRIS to emphasize the services that directly benefit parents thus has the potential to strengthen parents' own development as a means of promoting children's outcomes. In the following, we briefly review the evidence on each of the four areas of direct services. (A deeper review of the literature can be found in the online Supplemental Material.)

Parenting Classes

Parenting classes are intended to improve parents' knowledge, attitudes, and beliefs about child development and positive parenting practices. Parenting classes can be offered through a number of formats, including home visiting, courses, case management, or family workshops (St. Pierre & Layzer, 1999). Many past parenting classes offered through ECE programs did not lead to meaningful changes in parenting practices or result in benefits for children. In fact, a recent meta-analysis among almost 50 studies of parenting programs did not detect differences in child outcomes when comparing ECE programs that did offer parenting programs compared to those that did not (Grindal et al., 2016). However, the meta-analysis did offer recommendations about the types of parenting classes that may be most effective. In particular, programs that offered parenting classes with frequent and regular opportunities for parents to practice their parenting skills and receive feedback through home visiting led to increases in parenting skills and child well-being (Grindal et al., 2016).

There is also some emerging evidence that lower cost interventions that leverage technology and tools from behavioral science can also support changes in parenting practices. For instance, Mayer, Kalil, Oreopoulos, and Gallegos (2015) used a set of behavioral tools, including weekly text reminders, goal setting, and social rewards, to increase the time that

low-income parents spent reading to their children. The short-term (6 weeks) but intensive intervention led to a standard deviation increase in the usage of the reading application. Overall, the evidence suggests that repeated and content-specific parenting information combined with reminders on using the parenting information may be effective at improving parenting practices and child outcomes in the short term.

Family Support Services

Family support services for low-income families seek to improve family well-being and stability. These services may include: emergency crisis services, housing assistance, mental health services, substance abuse programs, child abuse prevention, domestic violence or marriage and relationship counseling, or support for families with incarcerated family members. The types of outcomes targeted by family support services are strongly related to children's developmental outcomes, including improved parent mental health, (Lovejoy, Graczyk, O'Hare, & Neuman, 2000), reductions in partner conflict and domestic violence (Goldberg & Carlson, 2014), and reductions in housing instability, financial upheaval, and job loss (e.g., Coley, Leventhal, Lynch, & Kull 2013). In particular, family support services that target these components of family functioning seem to be the most effective when the provision of family support services does not interfere with instructional time (Camilli, Vargas, Ryan, & Barnett, 2010).

Notably, intensive family support services can be expensive and difficult to administer with fidelity. There are a variety of texting programs or apps that intend to better connect parents with educators and administrators at their children's schools, which could presumably be used to facilitate relationships with family support specialists and parents (e.g., Kraft & Rogers, 2015). Overall, ECE programs should consider who will provide services to families (teachers or other support staff) and when these services will be offered (during the instructional day or otherwise) in order to not take away from instruction. Evidence-based programs that are offered with high intensity have the greatest chance for success (Hall, Cole-Lewis, & Bernhardt, 2015).

Parent Social Capital Activities

Social capital interventions offered through early education programs are designed to promote community cohesion and social support to parents. Examples of social capital-building activities include parent meet-and-greets, family nights, and parent leadership opportunities that allow them to work closely with other parents and center staff. These differ somewhat from parent involvement activities (described previously) in that the explicit goal is to promote parents' social capital and connectedness.

Early childhood education programs have been found to build trust and connection among parents. For instance, Small (2009) found in an in-depth study of Head Start programs that even routine daily activities, such as dropping off and picking up children at the same time, provide opportunities for parents to build social connection that would not have been possible without organizational support. More intentional evidence-based interventions that seek to promote parents' social capital within ECE programs are somewhat limited. However, the few interventions that have offered explicit opportunities for parents to connect and make relationships have led to expanded social networks and gains in parents' own economic well-being and increased child attendance (Sommer et al., 2017). Light touch activities, offered by most ECE programs, such as family newsletters, or social media outreach, such as classroom-specific Twitter feeds, may provide families with access to information and resources but do not typically create strong ties or meaningful gains in social capital (Granovetter, 1973; Small, 2017).

Parent Human Capital Services

Human capital services at ECE programs seek to improve parent secondary and postsecondary education, employment, and income. Activities at ECE programs that target parent human capital services include adult education services (e.g., GED classes or postsecondary certification), job training (e.g., resume help, computer assistance, job referrals), and English language training. There is a strong and consistent body of research that improvements in parent education, employment, and income (i.e., human capital) relate to children's learning over the long term (Davis-Kean, 2005; Sastry & Pebley, 2012).

ECE programs offer an ideal platform for promoting parent human capital by addressing many related barriers that low-income parents face, including lack of access to affordable, quality child care. For example, Head Start, which offers a work support to parents while their children are enrolled in high-quality early childhood education, has found to have led to improved parent education (Sabol & Chase-Lansdale, 2015), which in turn was associated with increased cognitive development in children (Harding, Morris, & Hill, 2017). Programs that offer more explicit and intensive services for parents, including sector-based workforce training program for parents through connections with community colleges, peer group meetings, financial incentives, and career coaches, can also help advance parents' own education (Sabol et al., 2015).

Admittedly, more intensive two-generation human capital intervention that addresses parents' barriers is very expensive and may be challenging for many ECE programs to take on. There is some emerging evidence that lower cost, tech-based interventions could offer a promising pathway to

promoting parents' human capital (although no studies to our knowledge use ECE as a platform). For example, texting reminders have been used to increase college matriculation, college loan applications, and persistence in college (e.g., Castleman & Page, 2014, 2015). In sum, parent human capital could be promoted using both intensive interventions and lower cost tools that are purposeful, systematic, and address parental barriers.

Proposed New Rating System for QRIS

Overall, there is strong evidence that parent characteristics, including human capital, skills, behaviors, and well-being, are related to child outcomes. Moreover, there is positive evidence, albeit still developing in some areas, that ECE programs can promote parent outcomes. Thus, if QRIS are intending to promote child outcomes, focusing on the direct services for parents may be a promising pathway to measure ECE quality. As summarized previously, there are specific evidence-based practices within each direct parent service domain that are associated with better outcomes. For instance, parenting classes that offer regular home visits with opportunities for parents to practice high-quality interactions with children may be more effective than those that are offered inconsistently and without clear links to children's development. Moreover, there are numerous options that capitalize on innovations in technology to offer high-contact, evidence-based practice that are implemented with high fidelity to promote parent well-being and may offer a cost-effective alternative for ECE programs with limited funding. What is clear is that light touch or more passive activities (i.e., family newsletters) typically produce less positive or even null effects on parent well-being compared to more intensive options (independent of mode).

Based on this evidence, we propose a new approach to assessing family engagement in QRIS by determining parents' needs and then rating how well the program addresses the highest ranked needs of families through direct service offerings that include evidence-based programming. The idea of aligning services to the needs of parents within centers rather than creating a uniform set of standards to which all centers have to adhere (the common approach in QRIS) is modeled after a community action framework. This approach emphasizes the importance of taking into account the voices and perspectives of the individuals being served when determining and coordinating service delivery approaches (Ferguson & Dickens, 2011; Gambone & Connell, 2004). It also draws on the "system of care" concept from child mental health treatment literature (Stroul & Friedman, 1996), which posits that parent services are more effective when there is greater compatibility between families' needs and the services they receive.

Under the system of care, a universal assessment of families' unique strengths and needs is used to link families

with appropriate resources and services (Daro & Dodge, 2009). For example, a population-wide effort in Durham County, North Carolina—Durham Connects—implemented a universal assessment designed to identify high-risk families or those needing prevention services among all families with newborns. Based on the results of the assessment, families were linked with supports and services to address their individual needs. The Durham Connects program led to positive effects on parenting and child well-being (Dodge et al., 2014)

We suggest that a similar aligned approach could be applied to QRIS but individualized at the center level rather than the individual parent level, with the acknowledgement that it is simply not reasonable to expect that ECE centers could individualize their service offerings to each parent. Instead, centers would assess parents' needs and then offer intensive and systematic services that address them in ways that are aligned with the centers' capacity and resources as well as the evidence. Programs would be rated first on whether they address parental need (independent of intensity or evidence) and then whether they offer parenting services that are within the bounds of what is known to be effective for each area. To make this easier for states to rate programs, researchers could create a comprehensive toolkit on evidence-based practices in each direct service area and then award ratings based on the match between the centers' services and the evidence.

Programs could prioritize areas of need across the four domains of direct services to parents. To determine the highest priorities, programs could use surveys or focus groups with parents and staff to assess the range and ranking of needs among parents and how well direct services are meeting those needs. For example, a center could survey its parents and find that many or an important subgroup of parents within the program is struggling with depression. The center would then decide that its niche would be to offer professional mental health services, contract with other providers, provide parents with a subsidy to seek counseling, or even employ an evidence-based texting system designed to reduce adult depression (e.g., cognitive training systems).

Under the new system, each ECE program would have to select at least one domain in which to focus. Using a block QRIS structure, programs would first be rated on the extent to which the service domain met the needs of parents. The center could not receive a higher rating until this is achieved. The program could then receive a higher rating if the program offered services that were evidence-based. This allows programs to receive credit for offering some sort of parent service activity as an entry point and then providing a way for programs to move up in ratings. ECE centers would select which direct parent service domain—parenting classes, family support services, social capital activities, and human capital services—they wanted to be rated (with a minimum requirement of one domain). Each rating would be

shared with the public separately (e.g., a separate rating for social capital and human capital). For instance, a program may only elect to be rated for social capital. The other three domains would then not have a rating. Another program may elect to receive a rating for family support services and parent human capital. This allows programs to signal to parents the types of parent services they are prioritizing while addressing the reality that it is likely not feasible for most programs to offer high-quality services in all areas. Moreover, parents could then select centers based on the type of child and parent services they desire.

The idea is that ECE centers should offer services to parents that address their most pressing concerns and do so in ways that are realistic for that center. Yet it remains an open question whether it is reasonable to expect ECE centers to adopt this approach. Our qualitative analysis offers some initial insights by testing the feasibility of our new approach to assessing family engagement in QRIS among a range of centers across one state.

Qualitative Analysis of New Approach to Assessing Family Engagement in QRIS

To explore the feasibility of our proposed new rating system, we conducted a qualitative analysis of family engagement services in Illinois that included 14 centers from an ongoing quantitative validation study of the state's QRIS. At each center, we led focus groups with parents and staff to explore the (1) frequency and range of available direct services for parents, (2) needs of parents for direct services, and (3) alignment between the services offered, needs of the parents, and capacity of the center. We analyzed all 14 centers with these themes to address the feasibility of assessing direct services to parents within QRIS. We present summary findings from this analysis.

We then selected two centers that had top ratings in Illinois's QRIS but that had largely different levels of alignment between parent needs and services. We reanalyzed the two centers—where needs were high and services either matched or did not match the needs and evidence—to understand how the application of a new rating system that emphasized direct services and alignment would work in action and how the rating system could be used as a tool for program improvement (see online Supplemental Material for further information on the methods of qualitative study).

Overall, we found a wide range of parent-directed services across the centers that would have been missed in traditional QRIS. Moreover, there was not a high level of alignment between services offered and parental needs. For example, English as a second language (ESL) services were in demand in many ECE programs with high numbers of parents with limited English proficiency, yet only one program offered an on-site ESL program for parents, suggesting the importance of systematic needs-based assessments and a

system that monitors alignment and offers improvement suggestions.

In the following, we offer examples of centers that represent two ends of the spectrum: a center with high needs and low direct services for parents and a center with high needs and high direct services. For both, we reviewed each of the four categories of direct services for parents and then analyzed the extent to which the services in these areas are aligned or misaligned with parent needs. We then demonstrate how the program would be rated in our proposed system and how the rating could be used for program improvement.

Center 1

Center 1 operated as a small state pre-k program with two half-day programs serving forty 3- and 4-year-old children. The ECE center was co-located with a public elementary school but placed in separate building. The school's principal served as the site director for the pre-k program, and a lead teacher and teacher's aide provided instruction and care to center children. According to staff, most families were working-class and represented a range of ethnic and cultural backgrounds, including a high number of immigrant families with low levels of English proficiency.

Direct Services for Parents

The school staff reported a significant need for direct services to parents but reported limited financial resources or capacity to do so: "There is no way we could do that [provide intensive supports to families] for our early childhood, for any parent. We just don't have the resources for it. I certainly think it's needed" (Staff). At the time of the study, the center mostly engaged in traditional parent involvement services. For example, teachers used a smartphone application to improve home-school communication and better inform parents of children's learning activities. The center also offered a number of opportunities for parents to volunteer in their children's classroom, such as joining field trips, holiday celebrations, or serving as a classroom-based "mystery reader" to children. Yet Center 1 offered few direct services to parents across the four types.

Parenting classes. The co-located elementary school occasionally provided parenting classes to parents of children pre-k through eighth grade, yet no parenting classes were directed specifically to parents of preschoolers. Parenting classes were not viewed as top priority according to parents or staff at this time.

Family support services. As a publicly funded pre-k program, Center 1 did not have the staff capacity to help parents identify and address high needs, such as financial,

mental health, or service referrals. Staff identified a variety of immediate needs that were not currently being met by the school or seemingly other community organizations, especially among immigrant parents and English language learners.

Social capital activities. Parents reported a high level of interest in increased connection with other parents yet experienced few center-initiated opportunities to do so: “I don’t know how to even get in contact with other parents, other than meet them right here, and that’s it. The only common person we have is just [the teacher]” (Parent). Center parents also expressed strong interest in knowing other parents at the center. Parents sought more social connection so that they could learn “the ropes” from other parents, especially given that the center’s pre-k program was typically their child’s first school-based experience.

Parents wished that the center could do more to facilitate interactions with other parents and shared supports:

I would find that immensely helpful, if the school had a network of some sort that they were sharing with parents. Or even if there was internally a sign up that would say, “Hey, do you want to sign up to maybe take a kid in an emergency?” You know or something like that where there would be some kind of parent exchange. . . . If it was a little more facilitated by administration it would seem safer and I think parents would be less reluctant to talk to each other. (Parent)

Social capital services were an area of high need and interest at this center.

Human capital services. According to the lead teacher at this center, 45% of enrolled children were dual language learners, and “there’s 7 or 8 languages represented.” These language differences made it difficult for parents and school staff to communicate:

We have so many parents where I think they get notices sent home and they literally have no idea what it says. They’re either embarrassed or they don’t want to ask, or they just don’t care. They can’t access that information. I think translation is a hurdle. . . . I regret that [ELL families] can’t necessarily always be involved because they don’t know what’s going on. (Staff)

At the same time, parents were motivated to improve their English language proficiency and confidence in using English at their children’s ECE center. A number of parents explicitly expressed interest in affordable, quality ESL programs. Staff believed that ESL services were the number one priority for parents that was not being met by the center.

Center 1 did not provide ESL services or regularly refer parents to a community-based ESL program. The center lacked the staff necessary to provide service referrals to parents: One social worker had 1.5 days per week available to serve 600 pre-k through eighth-grade children, and pre-k families could only be referred directly to the social worker

by center staff. The center’s capacity to serve parents’ needs was severely limited.

Applying New Approach to Quality Rating and Program Improvement

As a small, publicly funded pre-k program with a mission to prepare children for kindergarten, Center 1 offered few direct services to parents, and most of what they did offer was low intensity and lacked empirical backing. As a result, the program would receive a low rating on the new proposed QRIS rating system across all four domains (if they decided to be rated in all four domains). Yet improvement would be possible with the new approach. For instance, the program could select social capital and human capital (e.g., ESL training) as two key areas of need. The center could then work to better serve parents’ highest priority needs for increased social connection or ESL services at low cost and intensity. For example, the center could promote meet-and-greet opportunities for parents throughout the year and allow parents to voluntarily pair as an emergency contact or drop-off and pick-up designee. The classroom teachers could facilitate these opportunities, and parent volunteers could provide ongoing support. They could use this as a stepping point to offer intentional, evidence-based social capital activities, such as setting up parent partners within children’s classes. Additionally, the principal could investigate community-based ESL programs that employ evidence-based practices for referrals and establish a mutually beneficial partnership with a program that meets the needs and interests of center parents. Parent participants could then recruit and support other parents who enroll in ESL classes. Spending time upfront to determine how such a partnership would benefit both programs would likely pay dividends to future parents as well. Small investments by the program to serve parents’ social and human capital needs could incrementally increase the program’s capacity to improve child outcomes and raise its quality rating across one or more domains in the newly proposed QRIS.

Center 2

Center 2 was a large Head Start program that offered seven full-day Head Start classrooms and served 136 children. Similar to Center 1, Center 2 was urban and involved a high concentration of immigrant families nearly all of whom spoke Spanish.

Direct Services for Parents

The program was operated by a large, national, nonprofit social service agency that had access to additional funding resources beyond Head Start dollars and a range of staff (e.g., family support and a mental health specialist) to meet

the needs of families. Center 2 provided all four categories of direct services to parents.

Parenting classes. Parenting classes and resources were provided on site at Center 2. Center staff, especially the family support workers whose function was to address parents' emergency financial and service needs, helped parents improve their skills through parenting classes.

We had one child, she would have hour long tantrums. . . . The father attended the parenting skills [the center] offer(s), and the child started regularly changing her attitude, and she's totally different this year. . . . He wanted help. He looked for help. He was asking for help, because he's a single father, and you can see the difference now with the child. (Staff)

Staff also referred parents to parenting programs in the community that were tailored to parents' specific needs.

Family support services. The population of parents served by Center 2 had high needs for social services, both immediate and long term, and especially food, clothing, and legal services, according to center staff. As part of the Head Start program, family support workers conducted needs assessments and met individually with parents to set personal goals and help parents improve their economic security. The agency had the capacity to support parents' needs as part of its larger anti-poverty mission. The agency and the center were invested in identifying and addressing parents' specific and individual concerns. Parents and staff described feeling that they were part of a shared effort to improve the lives of children and parents together.

Social capital activities. Center 2 offered many opportunities for families to meet at a variety of times to accommodate parents' scheduling needs (morning, day, and evening) and with high frequency (a minimum of three to four activities per month). These included activity-centered parent meetings (e.g., making a book) and social activities like block parties. Parents also helped promote social connection with other parents by leading parent meetings and sharing information with other parents. Participation in human capital services like ESL and GED services also provided parents with further opportunities to become acquainted, support each other, and pursue educational goals together. Parents described feeling "united" with one another, their own teachers, and their children's teachers, describing the center as: "Basically family-oriented. Everyone sticks together and everybody helps each other. . . . Staff and parents, they know each other and they help each other when they can" (Parents).

Human capital services. Staff at Center 2 seemed to be aware of parents' needs and interests based on both the parents' needs assessments and direct conversations with parents. GED and ESL classes were the highest priorities for

parents. Parents also sought additional education and skills to achieve their goals (e.g., finding a better job) as well as support their children's learning (e.g., better able to help with children's homework).

The center seemed to have successfully met parents' needs through direct services to parents. Center 2 established a partnership with a local university to deliver evidence-based ESL and GED curricula free of charge to its Head Start parents. These services were coordinated around families' schedules and needs, which parents valued highly. GED and ESL classes were aligned with children's schedules, allowing parents to pick up and drop off their children and attend their own classes:

The main thing is that we come in at the same time and almost come out at the same time so we have the opportunity to drop them off and come in to our classes it is the main thing. The other is that we are ready for an emergency or something we are nearby here. (Parent)

The program also accommodated the needs of infants in emergencies, allowing parents to juggle often complicated family schedules.

I used to go to [other GED program 1] but they don't accept babies there, which they have here, patience. You can bring your baby and the people and everyone else understand that . . . it is fun with the baby and they don't make faces at you. Because the baby cries, but also I want to finish my GED to get a better job. (Parent)

Parents felt trust and connection with other parents and staff through their participation in these educational programs and in ways that they had not previously experienced in other programs. Educational services were also well attended by parents at Center 2. Approximately 60 parents participated in the ESL program and 80 parents in the GED program, and staff reported that parents had high success in passing the GED, enrolling in college, and improving their employment. In some cases, parents returned to the program to co-teach classes and coach new parents.

Applying New Approach to Quality Rating and Program Improvement

Center 2 was unusually successful in providing services across all four categories and meeting the highest priority needs of parents at the center (e.g., comprehensive family support services and educational programming). Thus, the center would likely receive mid to high ratings in each of the parent service domains, depending on the degree to which the program provided services that were reflective of the evidence. The center may also elect to only receive a rating in human capital and family support services given the high parental need in both areas and the opportunity to streamline and improve their program offering in each of these areas. For example, the center could expand

its educational partnerships to include programs that offer career certification training for specific careers with wage-growth potential in the local economy or support for entering other community college classes, an approach that has been proven to support adult education and workforce development (Conway & Giloth, 2014). Some parents described challenges in enrolling in college-level coursework:

I have been trying so hard to get into [college] classes but it's hard when my son's school schedule with activities is like I have to wait 'till they are off so I can go back to sleep and then really I have been trying to really but money is very tight. (Parent)

As parents advance beyond the ESL and GED level, they may seek opportunities for further educational advancement and would benefit from partnerships in which services are tailored to the distinct and specific needs of parents with young children.

Center 2 could also improve their family support services with increased use of data to continually align service offerings to parents' needs, monitor whether parents reach their goals, and assess whether the center's services help parents to achieve them by employing evidence-based practices. Continuous program development and evaluation would increase alignment between parents' identified needs and interests and effective services delivered to them.

Lessons Learned and Implementation Implications for QRIS

For rating family engagement, we argue that QRIS should focus on identifying the needs of parents, through parent surveys and/or focus groups, and prioritizing service provision for the highest among them by offering evidence-based services. In addition, although we cannot fully address all of these issues in this paper, QRIS should take into account the local context, resources the program has to bear the costs of family engagement activities, and sustainability of the approach. For example, for state pre-k programs without family support services (i.e., Center 1), intensive direct services are not likely to be feasible due to limited resources and staff. In this case, referrals to effective outside agencies may be beneficial, especially when paired with opportunities for social connection among parents at the center and reinforced by strong cross-program or agency partnerships. Other centers (i.e., Center 2) may be well positioned to offer direct services to parents across multiple domains, but the new approach to quality measurement could help emphasize the key domains in which to improve supports. Programs like Center 2 already receive data about parents' needs and services. We argue that these data should be better used to identify priorities and improvement in the implementation of family engagement services as we have defined them.

Conclusion

In QRIS, there is a rather myopic focus on parents' involvement in their children's ECE program. Unfortunately, there is very little evidence that parents' involvement in ECE programs as currently measured within QRIS directly relates to child outcomes (Robinson & Harris, 2014; Sabol et al., 2013). This suggests the need for an expanded definition of family engagement within these systems. Encouragingly, theoretical support and extant evidence suggest a set of services that are directly aimed at improving parent well-being—including parenting classes, family support services, social capital activities, and human capital services—could serve as important markers of family engagement quality in QRIS. Supporting parent well-being and skill development through ECE programs draws on decades of research that the interests of young children and parents are indeed compatible and synergistic (Brooks-Gunn, Duncan, & Fuligni, 2000). These services may help support parents' skills, capacities, and well-being, such as mental health and education, that are likely to be directly associated with children's outcomes. Moreover, emerging evidence suggests that direct services for parents can be offered effectively through ECE and lead to both improved parent and child outcomes (Ansari, Purtell, & Gershoff, 2016; Grindal et al., 2016; Harding et al., 2017).

In many current QRIS, these activities would likely be missed from rating family engagement. Given that what gets measured often gets paid attention to, we argue that state QRIS should expand their definition of family engagement to include the direct services that ECE programs should offer to parents, which could be used as an effective tool for program improvement. Importantly, it is not reasonable or feasible to mandate that all ECE programs offer all types of family engagement services to parents. Instead, ECE programs should select the type of service they want to offer that is aligned to the needs of the parents and the centers' mission and capacity to engage with families. An effective QRIS would not reward ECE programs for doing too much but rather emphasize the importance of zeroing in on the ways in which ECE programs can support families intentionally and successfully. Targeted services for families' articulated needs are better able to provide meaningful support than an assortment of services that are provided with little intensity or intentionality (Magnuson & Schindler, 2016).

As exemplified in the qualitative study and case-study examples, there is a broad spectrum in the types of activities offered for parents, needs of families at the center, and how well the centers met the highest priority needs. This suggests a great need for improvement to ensure that programs are best using their resources in areas that have the greatest potential for success. Moreover, our case examples highlight the range of direct services offered between two centers that

both had the highest rating within the Illinois QRIS, suggesting that important information is missed in the current conceptualization and measurement of QRIS that may have implications for ECE quality and child well-being.

Importantly, our qualitative study was the first step in testing the feasibility of our proposed new rating system for family engagement. However, the results are from one state and may not be generalizable to other states, although measurement of family engagement is largely similar across states. In addition, our qualitative sample of ECE centers is small. Yet, we purposely selected a range of types of centers to increase the applicability of our findings. In addition, although the theoretical and emerging empirical evidence on providing direct services for parents is compelling, we did not conduct a cost-benefit analysis of different types of direct services, and many of the most intensive program ideas (e.g., human capital training) may be out of reach for programs. Future work should explore the costs of these services and how to financially support family engagement activities across a diverse range of ECE programs.

To modify the existing QRIS, it will be necessary to establish buy-in from local stakeholders. Due to the market-based policy approach of QRIS, states place a high value on establishing and maintaining constituent support. States often establish buy-in from local policymakers and consumers of quality by eliciting their input on how to generate systems that meet the needs of children, parents, providers, and other stakeholders in the state. As a result, the development of QRIS ratings not only relies on the research to guide the inclusion of indicators that predicts high-quality child care and/or higher levels of child outcomes but also on the professional judgment and values of the many constituents. In the absence of a clear theoretical framework and consistent research base on family engagement, states have been left on their own to make their best guess about the on-the-ground application of developmental research to policy. Thus, to enact change in QRIS, it will be necessary to have a consistent and clear message on the key elements needed to assess family engagement and how to translate that to a QRIS context. This paper is a first step, but much more work is needed in terms of messaging and easy-to-use tools for states to employ.

Through our case example, we demonstrated how even a program with very few financial resources could still meet the needs of parents (e.g., offering opportunities for parents to develop social connections). However, much more work needs to be done to explore how budgets, costs, and program missions may intersect with direct service offerings for parents. Including family engagement as a central component of preschool accountability systems will ensure that family services remain a core part of ECE programming and encourage programmatic innovation and research.

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