

Family Engagement and Family-Sensitive Caregiving: Identifying Common Core Elements and Issues Related to Measurement



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Introduction and Background

As policymakers and program administrators work to enhance the quality of early care and education settings, there is renewed emphasis on examining specific domains of quality that align with sought after outcomes for children and families. This shift is in part due to recent research that has documented significant, but small associations between current measurements of high quality care and child outcomes.²

One quality domain of interest to program administrators and Quality Rating and Improvement System developers focuses on the relationships between families and providers. High quality family-provider relationships have been hypothesized to affect both child and family outcomes. However, there are multiple perspectives on family-provider relationships (e.g., family

engagement, family-sensitive caregiving, family-centered care, parent involvement), each one unique in its emphasis, conceptual model, and targeted outcomes. Consequently, though a number of measures of family-provider relationships exist, each of these measures tend to assess concepts unique to the conceptual model upon which it was based.

In order to facilitate the measurement of core components of high quality family-provider relationships, the Office of Planning, Research, and Evaluation (OPRE), in collaboration with the Office of Head Start and the Office of Child Care, sponsored the *Family-Sensitive Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Core Elements*. This two-day meeting, held in June 2010 in Washington, DC, brought together researchers and federal staff to work towards identifying the essential elements of two perspectives on family-provider relationships: family-sensitive caregiving, which aims to facilitate both child and family well-being through sensitive family-provider interactions, and family engagement in children's learning.¹

While family engagement and family-sensitive caregiving are not new concepts, this working meeting provided an opportunity to build upon their existing definitions and to make progress towards identifying effective strategies for measuring their shared core constructs. Meeting participants represented a variety of perspectives and expertise related to family engagement, family-sensitive caregiving, family-centered care, Head Start, home- and center-based early care and education providers, schools and school-based programs, measures development, research, and professional development training. The purpose of this Brief is to summarize discussion from the meeting regarding common core elements of family engagement and family-sensitive caregiving and issues related to the research and measurement of these concepts.

¹ For more information on this meeting, see *Family-Sensitive Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Core Elements, Meeting Summary* available at www.researchconnections.org.

Definitions and Core Constructs

As mentioned, family engagement and family-sensitive care are two of several different ways of defining and conceptualizing family-provider relationships. Family engagement has recently been defined as “a reciprocal partnership between parents and programs that reflects a shared responsibility to foster young children’s development and learning.”⁶ The primary outcome of interest according to the family engagement perspective is positive outcomes for children and this outcome is achieved through the joint and collaborative efforts of parents and providers. The family-sensitive caregiving perspective posits that providers’ positive and respectful attitudes towards families; their knowledge about the strengths of families, the realities they live in, and the values and beliefs that shape their decisions; and their responsive practices with families serve as a foundation for supporting positive parent as well as child outcomes.¹ Though positive child outcomes are a desired outcome of the family-sensitive caregiving perspective, the primary emphasis of this perspective is to support families, and this support is hypothesized to act as a resource for empowering families to facilitate their child(ren)’s positive development. Though the family engagement and family-sensitive caregiving perspectives vary in terms of their theoretical foundations and primary intended outcomes, these perspectives also share some core constructs (e.g., reciprocal information exchange and empowerment of families through mutual relationships).

The goals of the OPRE working meeting were to come to a clear understanding of the perspectives of family engagement and family-sensitive caregiving and to move towards the development of appropriate measures that are inclusive of both of these perspectives by identifying: 1) common and unique core elements of these concepts as applied in early care and education settings; 2) best methods for measuring these core elements; 3) gaps in existing measures of family engagement and family-sensitive caregiving as applied within early care and education settings; and 4) next steps for measures development.

In order to develop a shared understanding of the unique and shared core elements underlying family engagement and family-sensitive care, selected participants gave brief presentations summarizing multi-disciplinary literature focused on family-provider relationships, family engagement from a Head Start perspective, the family-sensitive caregiving conceptual model, and similarities and distinctions between the concepts of family engagement and family-sensitive caregiving. These presentations were followed by large and small group discussions. In small group discussions, which were organized to represent the diverse perspectives of center-based providers, home-based providers, and families, critical elements of family engagement and family-sensitive caregiving were identified by meeting participants. Then, through large and small group discussion, brainstorming activities, and a modified group Q-sort process², these elements were further refined into key attitudes, knowledge, and behaviors representative of common core elements of family engagement and family-sensitive care. Through this process the following cross-cutting elements were identified as being central to high quality family-provider relationships:

- **Communication:** Positive, two-way communication in which family members feel valued and listened to and meaningful content is shared; level of detail, frequency, mode (e.g., text, email, voicemail, notes, charts, etc.) and language of communication are sensitive to family members’ preferences.
- **Responsiveness (Flexibility):** Individualizing services; being responsive and flexible to accommodate/be inclusive of parents’ work issues, culture, and unique needs.

² In this process, meeting participants brainstormed a list of elements central to defining family engagement and family-sensitive caregiving. Participants were then divided into groups of three and asked to identify the three elements from this list that they believed to be essential for successful family engagement or family-sensitive caregiving. The groups shared these choices and the small group process was repeated.

- **Gathering and using existing knowledge about families over time:** Understanding family circumstances; advocating for families and referring them for additional services when appropriate; gathering family feedback about the program.

Meeting participants emphasized that cultural responsiveness permeates all aspects of family engagement and family-sensitive caregiving. They also stated that provider self-reflection is necessary in order for providers to be responsive to families while setting appropriate boundaries. Likewise, being welcoming/having a family-friendly environment (e.g., physically accommodating families by providing adult-sized chairs; communicating an appreciation for families; being warm, open, and inclusive) was highlighted as a facilitator of communication with families.

Identification of these elements was the first in a series of steps towards developing a new measure of family-provider relationship quality in early care and education settings. Before additional steps towards measure development can be undertaken, these elements must be further explored and refined through focus groups with parents and early care and education providers and discussions with key stakeholders (e.g., Quality Rating and Improvement System administrators and national organizations representing provider groups).

Issues Affecting the Measurement of Family Engagement and Family-Sensitive Caregiving

In addition to identifying common core constructs, meeting participants identified several issues that must be addressed in developing a measure of family engagement/family-sensitive caregiving. These issues can be organized into three categories: (1) conceptual, (2) measurement, and (3) logistical. Conceptual issues relate to the validity of the core constructs the tool is intended to measure (i.e., does the content of the measure truly capture high quality family-provider relationships?). Measurement issues focus on what decisions need to be made in order to collect reliable and valid data (e.g., unit of analysis, who the respondent should be, how frequently data should be collected). Finally, logistical issues refer to the ease with which the measure can be administered and analyzed. Though some of the issues discussed below are associated with clearly defined practices (i.e., creating reliable and valid behavioral indicators), others raise questions that can be only be answered in the context of the purpose of the measure. For example, determining whether a measure should be applicable across different types of early care and education providers, the unit of analysis, who administers the measure, and how many assessments are needed before determining that a reliable assessment of the family-provider relationship has been obtained depends on how the information collected through the measure is to be used.³

Conceptual Issues

- **Defining objective, behaviorally-anchored indicators.** Once the core elements of family engagement and family-sensitive caregiving are further refined, behaviorally-anchored indicators will need to be selected and tested in order to operationalize these elements. These indicators should consider frequency, intensity, and quality of family-provider interactions. In developing the indicators, consideration should also be given to the full range of possible quality in this domain and in both wording and scaling the items. Setting benchmarks for high quality scores may be particularly challenging if ideal levels of quality are not currently being practiced in the field.³

³ For a fuller discussion of issues related to various purposes for measurement, see Zaslow, M., Tout, K., Halle, T., & Forry, N. (2009). *Multiple purposes in measuring quality in early childhood settings: Implications for collecting and communicating information on quality. OPRE Issue Brief # 2.* Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

- ***Sensitivity of indicators despite heterogeneity in the characteristics of high quality relationships.*** Another conceptual consideration in developing a measure of family-provider relationships involves developing indicators that are responsive to heterogeneity in families' needs, values, preferences, and cultures as well as provider characteristics and roles across settings. For example, a provider's level of responsiveness may be higher for families with greater needs or may differ based on a family's cultural preferences. Because measurement items may perform differently when applied in different cultures, cross-cultural comparisons should be considered in the process of generating items and before any tested items are eliminated.
- ***Selecting indicators that can be universally applied across diverse settings.*** If the purpose of the measure is to apply it across settings, for example as part of a Quality Rating System assessment, it is also important to develop indicators that can be applied across different early care and education settings (e.g., centers and home-based child care). Additionally, measures developed for home-based providers should contain indicators that will apply across formal family child care providers and less formal providers, including unpaid family, friends, or neighbors. As an example, in measuring a "welcoming and family-friendly environment," it may be necessary to consider that the resources a center can offer (e.g., a family meeting room) may be different from what a family child care provider can offer. Likewise, indicators for "gathering knowledge about a family" will likely differ for relative care providers and providers with no previous relation to the family.

Measurement Issues

Measurement issues must also be considered in developing a measure of family engagement/family-sensitive care. These issues include:

- ***Determining the unit of analysis.*** Selection of the unit of analysis (e.g., provider, family, child) depends on the purpose of the measure. On a related note, for providers serving multiple children, one must decide whether assessments should focus on one or more focal families, or on global practices that are presumably applied to all children in the classroom.
- ***Sampling decisions.*** In measuring family-provider relationships, care should be taken in determining who the best respondent is and how many assessments are needed in order to get reliable information.
 - ***Choosing a respondent.*** Selecting the most appropriate respondent depends upon factors such as the information that is being gathered, cultural norms, and availability/accessibility of potential respondents. For example, in a center-based program, the director may be a better informant of center policies, whereas a teacher may be more knowledgeable about actual practices. In classroom assessments, one must decide whether the best respondent is the lead teacher, assistant teacher, or both. Likewise, in families, potential respondents include the primary caregiver, one or both parents, and/or extended family members.
 - ***Determining how many assessments are needed.*** Measure developers must also consider how much information needs to be gathered and from whom. This issue is particularly salient when measuring family-provider relationships as families may have different experiences with the same provider over time or with different providers in the same center, and providers' interactions with different members of the same family may vary.

- **Timing of assessment.** Considerations around timing an assessment include: (1) how often the assessment should take place, (2) at what time of day the assessment should occur, and (3) what time of year is ideal for assessing family-provider relationships, which may develop through the year as families and providers get to know each other better.
- **Designing items to capture well-distributed responses.** Item wording and response options, particularly in surveys, must be created to maximize the potential of capturing variability in responses and to be sensitive enough to detect change in response to professional development. Recent research that examined four measures of family-provider relationships (i.e., the Parent Caregiver Relationship Scale (PCRS), items from the National Longitudinal Survey of Youth (NLSY 1997), the Provisions for Parents item from the Early Childhood Environmental Rating Scale, and the Family Provider Partnership measure (FPP)) found limited variation in answers within each measure and a bias towards positive responses across measures.⁹ Positive response bias in assessing family-provider relationships was also found in a survey study of more than 1,000 parents of young children and with the Helper-Client Relationship Inventory which has been used in Head Start settings.⁷

Logistical Issues

Logistical issues in developing a sustainable measure of family-provider relationships focus primarily on the limiting factors of cost and time. Ease of administration and cost of training to attain proper reliability were proposed as factors to consider for any quality assessment in a recent working meeting on defining and measuring quality in early care and education settings.³ These considerations are especially pertinent for measures that might be considered for use in Quality Rating and Improvement Systems (QRIS).⁸

Existing measures of family-provider relationships are heavily dependent upon parent and provider report, as opposed to third party observations.⁵ However, the dearth of available observational measurements of family-provider relationship quality measures is not surprising when considering the logistical issues involved in developing and administering this type of measure. Though observational assessments remain the gold standard in quality assessments, they require significant investments of time and money for training to rigorous standards of reliability in addition to data collection expenses.

In addition to the general issues raised above, observational assessments of family-provider relationships introduce unique logistical complexities:

- **Scheduling observations.** Assessors need to be available to do assessments during narrow time frames (e.g., at parent drop-off and pick-up times). Additionally, research has documented that most families and providers have short interactions at drop-off/pick-up times, thus making reliable observations challenging.⁴ Finally, identifying a time that lead teachers in centers and parents overlap, depending on the schedule of the lead teacher and the hours the child is in care, could prove difficult.
- **Gathering data without intruding upon personal interactions.** It may be challenging or inappropriate for observers to collect data during interactions between family members and their early care and education providers due to issues of privacy and confidentiality.

For non-observational measures, logistical issues are less burdensome. As with all research, finding the time for a phone/in-person interview can be challenging due to providers' and parents' busy schedules. Likewise, non-response from self-administered questionnaires could be a problem depending on the population being surveyed. For both interviews and self-administered questionnaires, ensuring proper translation for administration to non-English speakers is necessary.

Summary and Implications

This Brief summarizes discussion from the *Family-Sensitive Caregiving and Family Engagement Working Meeting: Identifying and Measuring Common Core Elements*, convened in June 2010 in order to identify: 1) common and unique core elements of family engagement and family-sensitive caregiving as applied in early care and education settings; 2) best methods for measuring these core elements; 3) gaps in existing measures of family engagement and family-sensitive caregiving as applied within early care and education settings; and 4) next steps for measures development.

Based on information shared by experts, findings from a cross-discipline literature review, and a group modified Q-sort process among meeting participants, three specific elements of family engagement/family-sensitive caregiving were identified: (1) bi-directional communication, (2) responsiveness, and (3) gathering and using knowledge about families in offering services. Two overarching elements were also identified: offering a welcoming/inviting environment and cultural competence in interactions with families. Though these five elements are preliminary and require further testing before measure development is warranted, they serve as an empirically-driven starting point for identifying core components of high quality family-provider relationships that cut-across diverse conceptual models.

Multiple resources for professionals interested in learning more about the measurement of high quality family-provider relationships are available or currently under development. A companion Brief entitled *Quality Rating and Improvement Systems (QRIS) and Family-Sensitive Caregiving in Early Care and Education Arrangements: Promising Directions and Challenges* provides a review of promising practices in measuring family-provider relationships in QRIS, from the family-sensitive caregiving perspective. Additionally, a Brief summarizing multidisciplinary literature on indicators of high quality family-provider relationships and associated child, family, and provider outcomes entitled *Family-Provider Relationships: A Multidisciplinary Review of High Quality Practices and Associations with Family, Child, and Provider Outcomes* is available. Finally, the Office of Head Start and Office of Planning, Research, and Evaluation have recently funded a measurement project to more deeply explore the core elements of high quality family-provider relationships from multiple conceptual perspectives and develop a measure that will be applicable across early care and education settings.

In summary, reliable measurement of quality in family-provider relationships within the context of early care and education settings is of interest to policymakers, program administrators, and QRIS developers. Though some early care and education programs, such as Head Start/Early Head Start, have emphasized family-provider relationships since their inception, preparation of providers and provision of support for facilitating these relationships in the context of community-based settings has not yet been fully developed. Reliable measurement of elements core to high quality family-provider relationships that can be applied across different types of early care and education settings will be useful for describing the current state of the field. However, care should be taken to ensure that professional supports, including education and training to prepare providers for interacting positively with families, are also available.

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