Child Abuse and Neglect Prevention:

A Qualitative Examination of Missouri's

Strengthening Families Initiative

Submitted to

Children's Trust Fund of Missouri

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Literature review.

According to a recent report by the Center for Disease Control (CDC), one in 50 infants in the U.S. is a victim of abuse or neglect. Furthermore, annually, almost one million U.S. children are confirmed victims of child maltreatment, while almost three million children are reported to authorities for abuse or neglect annually (CDC, 2008). These shocking numbers do not include the many victims whose maltreatment goes unreported. If the cost to individual lives being traumatized is not dreadful enough, consider the financial costs to the U.S. It is conservatively estimated that child maltreatment costs the United States $103.8 billion annually (Wang & Holton, 2007).

Historical information. Documentation and recognition of child abuse and neglect goes back to 1860 when the French professor of legal medicine, Ambroise Tardieu, first described "the battered-child syndrome," characterizing children who had been whipped and burned until they died (Kempe & Kempe, 1978). The historic 1874 case of Mary Ellen of New York City, was prosecuted with the assistance of the Henry Bergh, founder of the American Society for the Prevention of Cruelty to Animals (ASPCA). Although there were laws at that time protecting children from excessive physical punishment, authorities were hesitant to act. While Bergh took action as a private citizen, it was his ties to the ASPCA

that brought Mary Ellen's case forward and began a movement in the U.S. to develop a formalized child protection system and the New York Society for the Prevention of Cruelty to Children (Watkins, 1990).

During the next several decades little attention to child abuse manifested. In 1962, Dr. C. Henry Kempe, brought the "battered-child syndrome" back to the forefront marking the first official acknowledgement of child maltreatment by the medical community (Kempe, 1962). Since that time, Dr. Kempe and others have dramatically increased public awareness of the abuse and neglect of children in their lectures on the battered-child syndrome (Kempe & Kempe, 1978). Acknowledgement of child abuse and neglect as a social problem that *can be solved* must occur before national organizations concerned with prevention and treatment can be successful.

Defining child maltreatment. In the United States, The Child Abuse Prevention and Treatment Act (CAPTA), originally enacted in 1974 year, provides minimum standards for the definition of child abuse and neglect. CAPTA defines child abuse and neglect as "any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse, or exploitation, or an act or failure to act which presents an imminent risk of serious harm" (U.S. Department of Health & Human Services, 2004, p. 45). Because federal law does not furnish a detailed definition, each state must create and incorporate definitions of child abuse and neglect into their statutory laws. According to Missouri Statute Section 210.110 RSMo, child abuse is defined as:

Abuse as any physical injury, sexual abuse, or emotional abuse inflicted

on a child other than by accidental means by those responsible for the

child's care, custody, and control except that discipline including spanking,

administered in a reasonable manner shall not be construed to be abuse;

and Neglect as failure to provide, by those responsible for the care,

custody, and control of the child, the proper or necessary support,

education as required by law, nutrition or medical, surgical, or any other

care necessary for the child's well-being.

Contributing Factors. A combination of individual, relational, community,

and societal factors contribute to the risk of child maltreatment. Although children

are not responsible for the harm inflicted upon them, certain individual

characteristics have been found to increase their risk of being maltreated. Risk

factors are contributing factors—not direct causes (Goldman, Salus, Wolcott, &

Kennedy, 2003). Risk factors cluster into four domains:

- Parent or caregiver factors

- Family factors

- Child factors

- Environmental factors

Parent factors include: personality characteristics and psychological well-

being, parental history of maltreatment, substance abuse, attitudes toward

children and knowledge of child development, and parent's age. Family factors

include: family structure, including organization and cohesion, marital conflict and

domestic violence, stress, and parent-child interaction. Child factors include:

child's age, disabilities, and other child characteristics that increase the caregiver's burdens. Environmental factors include: poverty, employment status, social support or isolation, and community violence (Goldman, Salus, Wolcott, & Kennedy, 2003).

Protective factors are the opposite of risk factors and may lessen the risk of child maltreatment (Goldman, Salus, Wolcott, & Kennedy, 2003). Protective factors also exist at individual, relational, community, and societal levels. Protective factors cluster into five domains:

- Parental resilience

- Social connections

- Concrete support in times of need

- Knowledge of parenting and child development

- Social and emotional competence of children

Prevention programs. There is widespread recognition that prevention programs may reduce child maltreatment or recurrence of child maltreatment. Three types of prevention programs are noted in the literature: primary, secondary, and tertiary (Chalk & King, 1998; Cicchetti & Rizley, 1981; Daro, 1993; Daro, 2000; Daro & Cohn-Donnelly, 2002). Primary prevention programs focus on the general population and provide services and activities to all families, regardless of expressed need. Secondary prevention programs focus on more urgent needs, providing services and programs to families at high risk for maltreating or neglecting children. These programs target populations that have more risk factors or fewer protective factors. Secondary prevention is provided

before maltreatment occurs. Tertiary prevention programs provide services and activities after maltreatment occurs. This type of prevention is designed to protect children from future maltreatment. Tertiary prevention can also be called intervention.

Dunst (1995) summarizes that treatment is acting to eliminate or reduce the effects of an existing problem; prevention is deterring a potential problem before the onset of negative functioning to reduce the incidence or prevalence of poor outcomes; and promotion is enhancing and optimizing positive functioning to develop and increase a person's or family's competencies and capabilities. It can be said that some prevention programs use a promotion approach. There are various types of prevention programs in the United States. However, many programs have not evaluated the effectiveness of their program, leaving us to wonder about the effectiveness of current prevention programs. Creating effective primary programs is crucial for reducing the financial and social costs of child abuse and neglect (Wang & Holton, 2007).
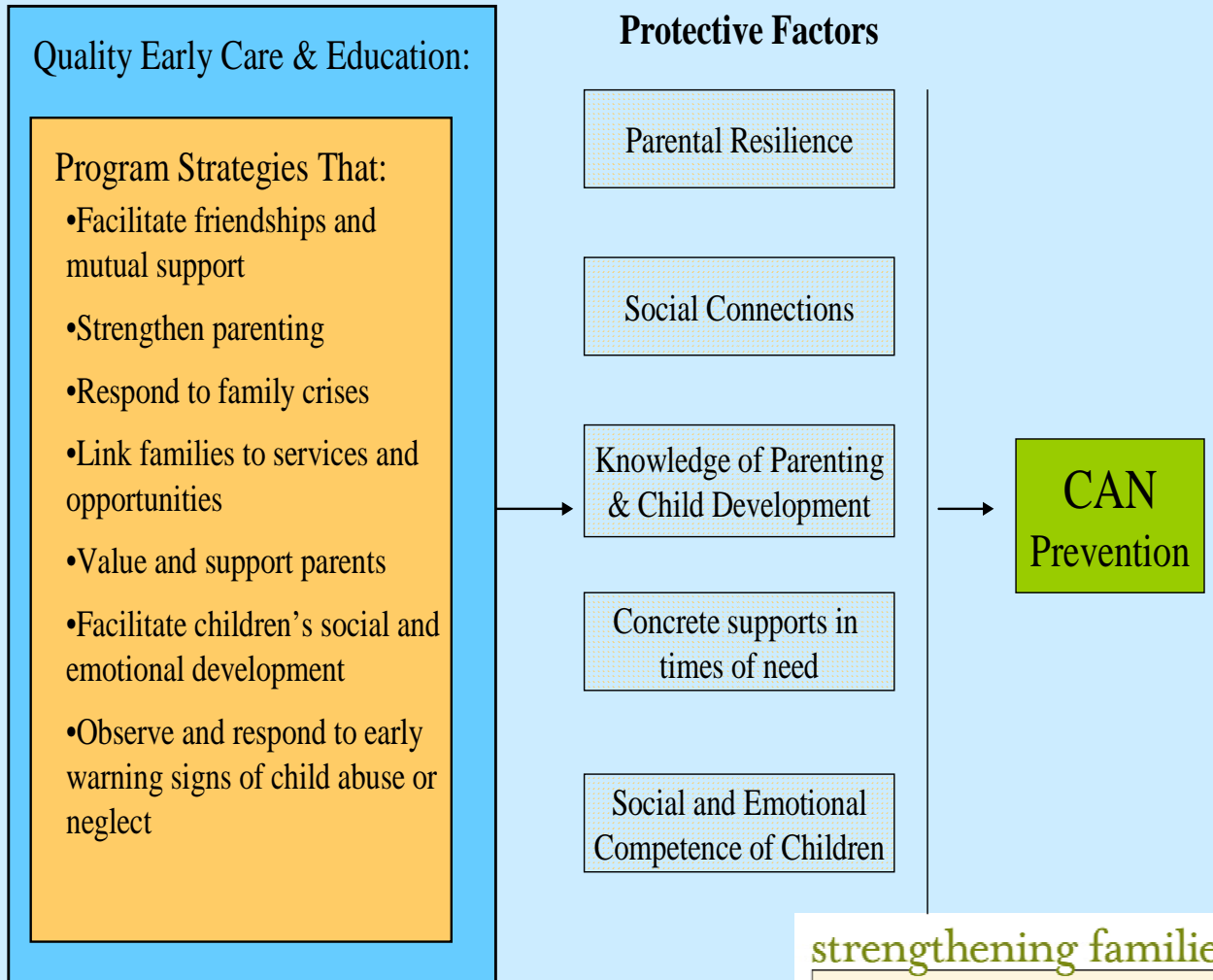
Strengthening Families Initiative. The Strengthening Families Initiative of Missouri will be examined in light of the risk and protective factors that the Initiative addresses. The goal of the Strengthening Families Initiative (SFI) is to prevent child abuse and neglect so that families will not ever encounter child welfare services.

The research report will seek to answer the following questions:

- Did this primary prevention program have elements (risk and protective factors) that have been shown to be effective?

- What risk factors did this program address?

- What protective factors did this program address?

How Early Childhood programs contribute to prevention of child abuse and neglect

Quality Early Care & Education:

Program Strategies That:
- Facilitate friendships and mutual support
- Strengthen parenting
- Respond to family crises
- Link families to services and opportunities
- Value and support parents
- Facilitate children's social and emotional development
- Observe and respond to early warning signs of child abuse or neglect

Protective Factors

Parental Resilience

Social Connections

Knowledge of Parenting & Child Development

Concrete supports in times of need

Social and Emotional Competence of Children

CAN Prevention

strengthening families
THROUGH EARLY CARE & EDUCATION

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THE STARFISH POEM

Once upon a time there was a wise man
who used to go to the ocean to do his writing.
He had a habit of walking on the beach before he began his work.
One day he was walking along the shore.
As he looked down the beach, he saw a human figure moving like a dancer.
He smiled to himself to think of someone who would dance to the day.
So he began to walk faster to catch up.
As he got closer, he saw that it was a young man
and the young man wasn't dancing,
but instead he was reaching down to the shore,
picking up something and very gently throwing it into the ocean.
As he got closer he called out, "Good morning! What are you doing?"
The young man paused, looked up and replied,
"Throwing starfish in the ocean."
"I guess I should have asked, why are you throwing starfish in the ocean?"
"The sun is up and the tide is going out.
And if I don't throw them in they'll die."
"But, young man, don't you realize that there are miles and miles of beach
and starfish all along it.
You can't possibly make a difference!"
The young man listened politely.
Then bent down, picked up another starfish and threw it into the sea,
past the breaking waves and said,
"It made a difference for that one."
(Anonymous)

Introduction

So often we think, "You can't possibly make a difference!" Respondents in

this study are people, like the young man in the Starfish Poem who say, "It made

a difference for that one."

The Strengthening Families Initiative is a primary prevention program intended for children and families who are already connected to early care and education programs. This evaluation specifically examines the implementation of the SFI in Missouri.

The Study. This study examined the piloting of the Strengthening Families Initiative in six early care and education programs across the state of Missouri. These programs were provided a small grant, technical assistance and training in Zero to Three's Preventing Child Abuse and Neglect: Partnering with Parents Curriculum through the Missouri Child Care Resource and Referral Network, and training on the MELD curriculum from the Parents as Teachers National Center.

The Missouri Strengthening Families Initiative (SFI) was supported by the Doris Duke Charitable Foundation, and the Center for the Study of Social Policy (CSSP). SFI "is a cost effective strategy to prevent child abuse and neglect by helping early childhood centers work with families to build protective factors around children." This research was supported by a grant from the National Alliance of Children's Trust and Prevention Funds.

The objective of this evaluation was to examine the implementation of the Strengthening Families Initiative (SFI) in Missouri six pilot sites across the state. This initiative was undertaken between June 2006 – June 2008.

Background. In 2006, the Child Abuse/Neglect Hotline Unit in Missouri received 51,383 reports of child maltreatment involving 75,474 children (the total of 75,474 children includes duplicated children as 10,547 children had more than

one report in 2006, thus the unduplicated number of children reported in 2006 was 60,925 children; MO DSS, 2006).

Beginning in 2004, several agencies gathered together to form a committee to examine the potential for implementing the SFI in Missouri. In 2006, the Missouri Children's Trust Fund, in conjunction with the Department of Social Services, chose pilot sites to begin the implementation of the SFI in Missouri. Pilot sites were chosen to give depth and breadth to the implementation of the project. Specifically, sites in the three major metropolitan areas of the state were chosen, included within the metropolitan sites was a family child care home program in addition to two center-based early care and education programs. Two rural sites were chosen, with one of the rural sites having multiple partners.

The SFI logic model can be found on page 9 of this report. As children do not develop in a vacuum, a family systems theory perspective (Bowen, 1978) will be used to analyze the data. Furthermore, Bronfenbrenner's bioecological model (1979) will be called upon to examine the data and provide recommendations.

Purpose. This evaluation investigated the implementation of the SFI in Missouri. The results suggest that multiple techniques were used in the various programs' efforts to work with children and families to prevent child abuse and neglect. The populations served varied greatly among the different pilot sites. The experience and expertise of the staff and administrators of the programs also varied. Results indicate that the pilot sites made strides in their continuing efforts to build upon the protective factors of the families they serve.

Scope. The evaluation aimed to examine the development of each pilot site's Strengthening Families Improvement Plan based on the Strengthening Families Self-Assessment of each individual program. Furthermore, the evaluation sought to understand each program's use of grant funds, their development as exemplary programs, their contributions to strengthening families and preventing abuse and neglect, and the strategies they used to promote staff retention and on-going training of new staff. Additionally, evaluation efforts endeavored to understand the effects of the Zero to Three, Partnering with Parents training and the MELD training on the staff and parents.

It should be noted that this was an in-depth qualitative evaluation. A qualitative evaluation provides an in-depth perspective of the lived experiences of those involved in a phenomenon (Denzin & Lincoln, 2005). This evaluation focused on specific informants who are key players in the implementation of this Initiative.

Methods

   Selection of the program sites began in the summer of 2006. Sites were chosen to give depth and breadth to the study. A letter was sent to all licensed home, group, and center-based early childhood programs in the state of Missouri to invite them to apply to be SFI pilot sites. Fifty-seven programs applied to be SFI pilot sites. Final site selection was completed after extensive review of the applications and visitation of all study finalists by a sub-committee of the state's SFI leadership team.

   Training and technical assistance for the pilot sites began in late 2006 and continued throughout the course of the project, until June 2008. Programs in the study were provided a small grant ($5,000), technical assistance and training in Zero to Three's Preventing Child Abuse and Neglect: Partnering with Parents Curriculum through the Missouri Child Care Resource and Referral Network, and training on the MELD curriculum from the Parents as Teachers National Center.

   This report synthesizes results from a qualitative study of the Strengthening Families Initiative in six sites in Missouri. Data were collected over the course of the two-year project. Cross-case analysis and constant comparison techniques (Glaser & Strauss, 1967) were used as the data collection and analysis process unfolded. Over the duration of the project, the investigator conducted a series of three interviews with respondents from each category: staff, administration, and parents from each program. Naturalistic observation was also conducted at each site. Interviews with selected providers of the technical assistance also occurred.

Participants. All early childhood teachers and administrators and a sample of parents in the pilot sites were selected as participants at the beginning of the research project. A random selection of the providers of technical assistance was chosen as participants as well. The research project was developed to gain an understanding of the effects of the Strengthening Families Initiative on families and early childhood programs. The education levels of the teachers and administrators in this study ranged from high school only to a Master's degree in early childhood education or a closely related field, with the majority of the participants having at least some college. The experience of the teachers and administrators ranged from less than six months experience in early childhood to more than 40 years experience working with children and families.

Data collection. Serial face-to-face interviews were conducted with the teachers, administrators, and a sample of parents over a 15-month period, beginning in March 2007. In every program six-twelve parents were interviewed during each data collection period. Additionally, naturalistic observation was used to observe each program at a peak time during which parents were either dropping off or picking up their children. Interviews with technical assistance providers were conducted over the course of the study to verify training and triangulate the data.

The interviews covered a wide range of issues related to children and family well-being (see Appendix A for sample of interview questions). The interviews were approximately 4 months apart and each interview lasted approximately 45 minutes. The interviews were conducted in the early childhood

programs in which the study was conducted. All interviews were recorded on audiotape and transcribed verbatim. Respondents were not given any monetary incentives for participation.

Between interviews, the researcher coded and analyzed the data to discover emerging themes that guided subsequent interviews. Analyses of the transcripts included a careful reading of the text, comparing and contrasting across time (i.e., multiple interviews) and across respondents. To verify the authenticity and validity of the data collected during the interviews, during the 3rd interview, the researcher shared impressions regarding emerging themes with the respondents and received feedback from them.

Data Analysis. To facilitate data management and analysis, QSR NUD*IST Vivo, a qualitative data analysis software package, was used (QSR, 2000; Richards, 1999). Data were analyzed using Glaser and Strauss's (1967) constant comparative method. This is an inductive approach blending data collection, coding, and analysis. The data were analyzed using open, axial, and selective coding (Strauss, 1987). During open coding, data were broken into categories representing emergent phenomena. Data were reconstructed using axial coding techniques to add strength to the emerging relationships among the categories. Finally, selective coding was utilized to determine core categories and describe relationships among the categories.

Results

Results indicate that the programs involved in this study were aware of and diligently sought to partner with parents to work on reducing risk factors and enhancing protective factors. Results shared in this study include data gathered about programming choices of each site. Data gathered from the programs includes the varied services provided by the sites at the time of this study.

Risk Factors

Parent or caregiver factors. Parent or caregiver factors that staff and administrators of the programs contend with include personality characteristics and psychological well-being, parental history of maltreatment, substance abuse, attitudes toward children and knowledge of child development, and parent's age. In several programs, staff must struggle with parents who are prone to angry outbursts or who struggle with mental health issues. Staff discussed having had to make judgment calls on occasions when an unstable parent came to pick up their child from the early care and education program. Also mentioned by some staff were issues dealing with parents who are substance abuse users. In both of these cases, staff called upon their training and experience to make the decision about the child's safety. Furthermore, staff discussed that having a positive relationship with the family prior to the incident was crucial to successfully handling such a situation.

Having a strong relationship with the family also helped staff when situations arose in which it was evident that parents were lacking knowledge about child development or had negative attitudes about children. Staff

mentioned that due to lack of child development knowledge, many parents spoke of their children's intentions in a negative manner. Staff often turned these conversations into learning opportunities, explaining to parents that young children do not necessarily have malicious intentions when they act out.

I'm a big believer in Becky Bailey [Loving Guidance Curriculum]. I mean she's probably my all time favorite. I saw her present live and so I learned a lot of relaxation techniques and there are a lot of sensory integration techniques as well. A lot of times I like to tell the parents to see if you can get the child to relax.

A new little boy came into my classroom and probably within four hours he was off and he had a really angry moment and we just did some relaxation techniques and some activities. He calmed down and then after he calmed down, he was able to tell me why he was angry.

He went home and told his mom "Mrs. [teacher] squeezes my muscles." She said, "Oh and how does she do it." So he took her arms and he went (demonstration). She came in the classroom and said "What's this squeezing muscles and how do I do it?."

I did teach her how to do it and now whenever he gets worked up, she does the relaxation techniques, which is usually ten pushes on the shoulder and ten or fifteen little squeezes on his arms and legs and by that time they're relaxed. You can talk them through it.

All of the programs in this study served a disproportionately large number of young families in poverty. Two programs mentioned serving mothers as young

as 13-14 years old. One mom, age 14, who was interviewed, was very appreciative of the care provided to her infant while she continued her high school education. This program was located within walking distance to the high school, very important for this mother who was too young to obtain a driver's license. When asked about child development knowledge gained while her son attended this program, she said,

> They take care of [child] and they tell me how much he eats. Sometimes they give me some advice about when to start feeding him more. Like, I didn't know when to start him on cereal.

Family factors. While family factors were certainly an influential risk factor for the families served by the programs in this study, program staff sought to address these factors in creative ways. Many fathers were actively involved in the early care and education programs in this study. This was due to program intentionality. Programs mentioned having "Donuts for Dads," support groups for fathers, and recruiting fathers to assist with cookouts and maintenance needs in the facility.

> Teacher: We invite dads in because usually it's always mom who takes care of all the kids and all that stuff. When we write notes home and we know dad's in the picture then we attach his name to it. Like [father] has been picking [child] up lately, so I've been putting his name in front and then I'll put [mom's] name next because [father] is picking [child] up. I just ask him how things are going and tell him, "This is what we're doing. What do you think about this?" or "How would you do this?"

If we're having conferences we'll say, "Hey, we're having a conference on this day and I'd really like you to be there." We also have throughout the program Fathers' Night Out and things like that. They'll get together and play games and have pizza and stuff like that. I think we try to do that at least once a year.

Interviewer: Do you ever do any morning parent activities?

Teacher: We did a breakfast one morning and it was for the whole center. We had it set up in here and then they dropped off their child and came in here and visited with each other. We had muffins and fruit and bagels and things like that for them.

Several administrators reported that participation in this study changed their intentionality towards parent involvement. For example, one director stated that participation in the study made her and her staff spend more time brainstorming on methods to gain increased parent participation in volunteer activities and parent events. Her most useful technique was,

…directly asking a parent if she or he will come to my parent event. Or I come right out and ask a Dad if he would help me to fix a toy or a bookshelf. People don't refuse me when I come right out and ask. I think this works better than putting things in the newsletter because it is more personal and the parents feel needed.

Another program sought to address one common family factor, marital conflict, through a support group for couples. This support group met weekly throughout the summer months, addressing typical concerns of young couples

such as financial matters and child rearing decisions. Domestic violence, while potentially an issue with families in this study, was mentioned by only one program. Staff rallied around a mother who suffered partner violence near a major holiday, providing her with gift cards so that she could purchase gifts for her children. Families in the program, aware of this family's situation, also assisted the family with needs such as food and clothing.

Stress within the family was a common risk factor that all of the programs helped families to manage. Again, many creative techniques were employed to help families cope with daily stressors. One program, knowledgeable in obtaining community support, was able to offer mothers a "Spa Day." Another program offered quarterly parent events so that families could meet other families in the program to increase their social network. Observations at programs revealed that parents were familiar with the other children and parents in their child's classroom, often greeting them by name when they entered the room to drop off or pick up their own child.

Another family risk factor that programs addressed was parent-child interaction. As parents learned more about age-appropriate behaviors, staff noted an increase in positive parent-child interaction. One director spoke at length about a mother with two children under three, one of whom was autistic, who was learning to have more reasonable expectations of her children. This mother was also interviewed. She spoke very highly of the program. Her children were recent enrollees in the program; her oldest child, the child with autism, had been expelled from her previous early care and education program for behavior

issues. This mother spoke of how much she and her children had already benefited from advice and support from the director.

Interestingly, the director in this program, while able to be a supportive leader that parents mentioned going to for advice, was unable to maintain consistent or educated staff. All of the teachers in the program had less than six months experience and none had more than a high school diploma. Parents did not look to the teachers for support in this program. Whereas, in other programs parents revealed that they looked to not only the administrators for support, but also to the teachers. And, actually, because of the daily interaction with the teachers, they were the first people that parents in all of the other programs spoke of seeking out for advice or support.

Child factors. Research shows that child factors, including the age of the child and characteristics of the child, including any disabilities, increase a parent's burdens and are thus a risk factor. Families served by these programs all had young children and some families had multiple children, increasing the pressure associated with this risk factor. Moreover, some of the families interviewed had children with disabilities.

Administration in each program discussed the necessity to work diligently to learn how to accommodate children with disabilities and to support their families. One program administrator discussed internet searches she conducted in order to learn about the needs of a child in her program who was found to be allergic to the sun. This administrator was actually instrumental in assisting the parents in seeking treatment for their child, prior to the child's diagnosis. Once

the child received the diagnosis, the administrator and the staff made the environmental changes necessary to accommodate the child, including investing in new sun blocking window shades. This concrete support felt like emotional support to the parents who were able to continue to have their children in the same familiar program.

Teachers spoke of the importance of the Preventing Child Abuse and Neglect training in helping them to understand child behaviors and the effects of those behaviors on the family.

One of the things I learned in that training was not to be so judgmental and not to make those assumptions because a lot of times I would do that to a child and a family. I would make assumptions like, "That child must not have any discipline at home." I learned not to make those assumptions, especially when you find out that there's a diagnosis of a behavior disability going on with that child. Then you actually talk to the parent and they say, "What can I do? I need your guidance and your help. I think, "They really did want my help. They really didn't just want their child running around and doing whatever."

Staff often discussed methods they employed for supporting parents as they dealt with typical and atypical issues related to their young children. Parents already stressed with other issues sometimes find daily parenting a burden. Common childhood issues that staff assisted parents with were: colic, feeding, schedules, toilet training, and seeking early intervention. Staff in two programs seemed less capable of assisting parents with such needs. Staff in one of these

programs were very young, had limited education (i.e., high school degree), and very little experience working with children and families. Furthermore, staff in this program did not feel that administration trusted them to speak to the parents. It should be noted that this program dropped out of the project partially through the study. In the second program in which the staff seemed less capable of supporting parents, leadership was in flux, with two people sharing the role of director, causing the staff to perceive that there was less support for their work.

Environmental factors. Environmental risk factors include poverty, employment status, social support or isolation, and community violence. All of the programs in this study served a disproportionately large population of families in poverty. Families in each program experienced some concern over employment status. Social isolation was common among at least some families in each program. Community violence beleaguered the families in three programs in this study, which were located in the inner core of large urban cities.

Staff found the Preventing Child Abuse and Neglect training advanced in this study to be very helpful in helping them to understand environmental or cultural factors families experienced.

> I've learned not to be so judgmental especially with our Hispanic family, to learn more about their culture. They do things a lot differently than I would do at my home. I try to be more patient with the mother when she comes here with him. She kind of baby's him a little bit and wants to help him with his food. That's just probably something she does and that's ok. She's actually started to understand that we want them to serve themselves and

to feed themselves and be independent so she's started to kind of back off. She doesn't stay as long in the classroom and she's ready to just go, which is good.

Programs sought to assist families with low incomes by providing such varied services as: clothing closets, access to food pantries, provision of disposable diapers and infant formula, assistance with applying for social services, and extensions on overdue child care payments. Program size did not make a difference is the amount of assistance programs were able to provide, instead, connections to community resources was the fundamental factor. Families relied on these programs for far more than child care. One program, located in a struggling school district, hosted a fair to assist parents in applying for scholarships for local private schools for children who were graduating from preschool and entering kindergarten. Another program arranged for a bilingual social service worker from the Family Support Division of the Department of Social Services to attend a parent support group to present social service options available for families. In sum, programs were quite adept at supporting families' needs due to poverty.

Some programs were also able to support parental needs associated with employment. Larger programs or programs associated with Head Start or Early Head Start provided services such as employment fairs, resume' workshops, and connections to local employers who were immediately hiring.

All programs in this study attempted to help families feel less isolated. Often social isolation was a result of community violence; administration and staff

also mentioned that social isolation was also a result of impoverishment. Specifically, when families discovered a social service with limited supplies they often did not tell others of this discovery for fear that the supply would be exhausted more rapidly if others knew. This led families to isolate themselves from others in an effort to endure poverty. Programs sought to combat social isolation by developing support groups for families.

> They [the early childhood program] just have an overwhelming amount of information. If there's any type of crisis or any counseling that's extra that you want to look at or check into, if there's a special need of some kind there are several different programs that are there for the family.

> If you have things that are happening that you need assistance for and we actually have benefited from that in a situation. My husband had been very ill at one time and was in the hospital; they were just there for the kids and me both big time! If you need to talk or want to talk to someone they have those things available. It's been so good and so positive.

This project provided training on MELD, a parenting curriculum that involves long-term support groups. All of the programs were pessimistic in their initial responses to this curriculum. No program believed that the MELD curriculum would work in their community or with the families they served. However, some programs adapted the curriculum to fit the needs of their clientele. For example, one program held a support group and asked parent-

attendees to decide upon rewards that would be received if parents continued to attend the groups for a specified number of sessions. The staff of this program was surprisingly pleased to learn that parents expected others to attend every session in order to obtain the reward. Another program administrator hosted the support groups in her home to make the setting more informal and comfortable. Thus, despite initial misgivings, some programs were able to adapt the MELD curriculum to meet the needs of their program. Other programs mentioned that they would continue to consider the MELD curriculum as they planned for future parent support groups.

Parent or family support to assist with the burden of community violence was a priority for three programs. One of those programs provided support for children aged birth through high school; this program provided older children an alternative environment during after school hours and the summer. Administrators of this program spoke of having served some children all the way from early childhood through adolescence.

We serve children from six weeks old to 18 years old. About 65% of the children we serve are here for that full span of time. We have to teach mothers that we serve what a support network is and how to build one. In this culture, women do not have women friends because they can't trust others. Everyone rips them off.

Some of the parents in our program live in shelters. When you live in a shelter you don't have time to be a parent, much less a person. Six

nights a week they have to take classes at the shelter and on the seventh

night they have to do laundry.

When parents have been in our program for about six months or

more they get more stable and we start to see parents stopping to talk to

one another or asking the social service workers to check on moms that

they haven't seen in a while.

Another program discussed the changing population of the community,

leading to many changes in the program. This program had served a large

African-American population for many years, but in recent months the

demographics shifted in the community. More Hispanics were moving into the

area and the program clientele shifted from 90% African American to 60%

Hispanic. At the same time as there was a shift in the clientele served there was

a dramatic change in the staff and administration. A long-term senior

administrator resigned and within a few months of that resignation, over 50% of

the remaining staff and administration left the program. Despite these major

changes throughout the study, the final interviews at this program revealed that

the new administration embraced the philosophy of the SFI and looked forward to

serving as an exemplary site or model program for the state in the future. The

program was already mentoring several other programs in their immediate area

on the SFI.

Protective Factors

Protective factors, the opposite of risk factors, were also examined in this

study. This Initiative sought to increase protective factors, including: parental

resilience, social connections, knowledge of parenting and child development, concrete support in times of need, and social and emotional competence of children.

Parental resilience. Parental resilience includes coping with the common stressors of life is a part of parental resilience. Many of the programs in this study held a strengths-based viewpoint and thus sought to find the strengths of each parent despite the multiple stressors some families faced daily. A mother in one program discussed how much she had grown as a parent and as a person while her children have attended the program. She was 17 and pregnant with her second child when she enrolled her first child in the program. She was very concerned that the staff would look at her in a negative light because she was about to have her second child. Instead, she found the staff to be supportive as they helped her to stay in school and maintain a relationship with the children's father. Four years later, at 21, this mother reported that she now work in the program, is attaining her A.A. in early childhood education, and has recently married her children's father. Interviewing her and her husband revealed that,

> We really believe in this program. Sure, my mom helped me, but the staff
> here are really the people I give credit to because they didn't look down on
> me. I never felt that they were thinking, "Look at her. She's 17 and having
> her second baby." They saw me as a person who had worth.

All of the programs made sure that families knew who they could speak to if they had a need, understanding that part of resiliency is being able to have someone to call upon in times of need. Some programs had better connections

to community assistance and were thus able to provide more support, when needed.

> There are kids that have told us that they didn't have food and we would tell [family advocate], and she would make the call. There have been times when [family advocate's] resources were used up. Then we would send them to our congregation because our church has a food bank.

Social connections. Many programs regularly held parent events that served a number of purposes. One purpose was for the families to develop connections with other families in the program. Some parents who were interviewed affirmed that these events led to new friendships. Others asserted that the events gave them more confidence in their choice of child care as they came to know their child's teacher better in these informal settings. Teachers in the programs developed interesting methods for getting parents to begin conversations with one another that often led to friendships.

> One thing that I did at the last family picnic was I sat down at a table and some of the moms I would have came to sit with me and I talk to them and we would eat. Then I would get up and leave and go to another table and noticed when I got up that the moms started talking to one another.

Another teacher spoke of initiating conversations among parents during morning drop off time:

> A lot of times we have parents who drop their kids off at the same time. One day there was a mom asking me a question about her child. Instead of answering her question, I asked another mom, "What is it that you're

doing at home with your child? What were those workbooks you were

using? Oh yeah! Well why don't you let her know what that was." Then I

just kind of walked off and the two mothers started chatting. I've noticed

there are a lot of friendships in our room with a lot of the single moms.

Knowledge of parenting and child development. Another purpose of the

parent events that programs sponsored was to provide information about

parenting and child development. In general, programs found that providing

workshops for parents on specific topics was not as effective as centering the

parent event on a meal or an activity and then inserting small tidbits of valuable

parenting or child development information into the event. Additionally, some

programs found that providing written literature to parents at family events was

an effective way to provide parents with information on parenting or child

development. Still other programs found that the daily interactions with parents at

drop off and pick up times was an excellent time to provide information of

parenting and child development.

Concrete supports in times of need. Most parents spoke of being able to

meet their family's needs on a regular basis, but some families found it

necessary to call upon others to assist them on occasion. One program spoke of

their commitment to maintain enrollment for families who were behind in

payments as long as the family was making an effort to make some payment.

This small program relied almost solely on parent tuition or child care subsidies

for all of their income, having not been able to renew a major state grant due to

the changes in that funding stream. Another program asserted that changes in

this funding stream led to changes in the program's enrollment, with the majority of the families in the surrounding community choosing to enroll their 3-5 year old children in the public school preschool, this program began to serve infants and toddlers almost exclusively.

> I lost my MPP (Missouri Preschool Project) Grant so I have more infants and toddlers now. The school district got the MPP Grant so parents are taking their preschool children to the schools. I'm not sure how long I can stay in business with only infants and toddlers.

All programs were observed to have a parent bulletin board that listed social service agencies such as the Family Support Division, WIC, Child Support Enforcement, Child Care Subsidies, Food Stamps, and local food pantries. Administrators found this to be an unobtrusive and non-stigmatizing way to provide this information to all families. Staff in most programs were well-versed in the community and social supports available to help families with concrete needs.

Social and emotional competence of children. Although, research shows that choosing a curriculum that promotes children's social and emotional development will increase children's social and emotional competence, none of these programs chose to implement such a curriculum. Nonetheless, some programs used a specific behavior and guidance curriculum in their classrooms and provided training on this curriculum to parents so they could employ the same discipline techniques at home.

We try to keep hand outs available and information that we get from our trainings that we go to on discipline. We'll make copies and give them to the parents. We've got a social-emotional activity that (lead teacher) does on Monday's with the kids. It involves a little turtle named Tweegle and they have take home activities that (lead teacher) will copy and send those home to the parents.

On family nights we've had speakers come. Parents are invited to our in-service training, where we usually have a lot of speakers come and talk about discipline and education.

Other programs did not have such a formalized method for assisting parents with behavior and guidance issues. But all programs did provide parents with at least informal information regarding behavior and guidance, when parents inquired. Several programs used parent group meetings in order to disseminate either written or verbal information regarding children's social and emotional development. All programs used informal day-to-day parent contact to enhance parents' knowledge of children's social and emotional competence. One mother explained her understanding of children's social and emotional needs when expressed her understanding of how the teachers helped children deal with frustration,

If there are ever any issues as far as getting along in the classroom the teachers have several different things they can do. They have the safe place where they can go. They can go to the play dough table to work out they're frustrations. When the children have different conflicts, the

teachers show us what we can do to change this [behavior] instead of letting [my son] focus on being angry. They just have a real good structure as far as turning the negatives around into the positives.

Risk and protective factors related to parenting young children and child abuse and neglect prevention were enhanced in a variety of ways in the programs in this study. Programs varied in the amount of support provided to the families served, but in general, all programs were very supportive and sought to provide as much assistance to parents as their time, expertise, and funding allowed.

Discussion

All of the programs in this study were already high quality early care and education programs that sought to engage families and support children prior to enrollment in this study. It can be said that the small grants they received assisted the programs in exploring a few new avenues of parental support, but in all likelihood the small grants did not serve as the impetus for the actions of the staff and administration of these programs. Instead, the personal and or professional desire to help children and families was the impetus for program decisions.

While programs spoke of gaining some knowledge through the training in the Partnering with Parents and the MELD Curriculums, most asserted that these trainings were more like "refresher" courses than new knowledge. Several respondents spoke of learning new ways to deal with familiar issues.

Interviewer: Talk about the strengthening families training that you attended.

Respondent: A lot of it was reinforcement of what we already do in [our program]. I think that's one reason we were probably chosen for the grant, because we already believed in those philosophies. There were some things that I learned or maybe refined with what I've already learned. For instance, we had a situation early in the school year with one of our families and I probably had my first training after we had this situation. I think I could've handled it better on my part had I had that information. So the next time I have a situation like that I think it could be handled better.

Sometimes you can, what I call "take the meat and spit out the bone," but there was nothing in the training that I thought that we really didn't need to have. I enjoyed all of it and felt that it was a positive experience.

Staff and administrators of early childhood programs, just as can be the case professionals in many social service fields, can become burned out. Participation in this study contributed to respondents' desire to continue find new and innovative ways to serve families. Respondents also said that the trainings, while not typically providing new information, provided them with renewed vigor necessary to continue to work with children and families.

This study sought to examine the piloting of the SFI in one state. This state chose early care and education programs that were already high quality programs in which to pilot this project. Thus, while the results indicate that the programs provided many services to families and children, the benefits of the SFI should not be overestimated as much of these results would likely have been achieved without participation in this study. With the exception of one program, which is undergoing leadership change, these programs are ready to be considered exemplary programs. This next step, with the status of exemplary or program, can help broaden the SFI to include more programs across the state.

Recommendations

It is recommended that continued technical assistance be provided to the pilot site programs as they transition to exemplary or model programs for the state. Continued technical assistance will provide the programs with the support necessary.

It is recommended that support for the administrators of the programs be enhanced. Perhaps an e-learning group could be established to connect administrators of exemplary programs across the state. Leadership is key to success in any endeavor. This is true for this project as well. Support for the administrators of the programs should be considered crucial to success.

It is likely that it will take more than a small grant and training on curriculum models related to child abuse and neglect to assist programs of lower quality in becoming capable of supporting parents in the manner in which the programs in this study are able to support parents. Therefore, it is recommended that this Initiative partner with other initiatives in the state that are focused on increasing quality in order to increase the likelihood of a successful endeavor.

Limitations

       This was a qualitative study and as such is not generalizable to the population. The purpose of a qualitative study is to provide an in-depth understanding of the lived experiences of a phenomena. While this study lacks breadth, it provides an in-depth understanding of the implementation of the Strengthening Families Initiative in the state of Missouri.

Appendix A

Facilitate Friendships & Mutual Support

Tell me how this program facilitates friendships among staff and parents.

Tell me how this program facilitates friendships among parents.

Tell me how this program supports the parents.

Strengthen Parenting

Tell me how this program provides parenting information to parents.

Tell me about staff or administration training in cultural or ethnic practices.

Describe a typical conversation with a parent at departure time.
　　　What would be different if this parent arrived obviously stressed?

What information is provided to parents in regards to such developmental issues as:
　　　Toilet training
　　　Discipline strategies
　　　Eating
　　　Sleeping

What happens when staff is concerned about a parent's techniques or behaviors?

What extra assistance is provided for families with children with special needs?

Respond to Family Crises

Tell me about staff relationships with parents.
　　　Do staff know about parents interests, activities, extended family?

When families have a crisis or are in distress, do they turn to staff?
　　　What is the reaction of staff?
　　　What actions do staff take?

How are families informed about the role of staff in the event of a family crisis or distress?

Discuss the training that staff have in regards to assisting families in crisis or distress.

Tell me how staff are supported by the program when they are assisting families in crisis or distress.

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