

# REPORT



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## Exploration of Integrated Approaches to Supporting Child Development and Improving Family Economic Security

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## Exploration of Integrated Approaches to Supporting Child Development and Improving Family Economic Security

November 2017

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We would like to thank the members of the Exploration of Integrated Approaches to Supporting Child Development and Improving Family Economic Security Technical Working Group. They are listed below, along with the organizations they worked with at the time we consulted them. The views expressed in this publication do not necessarily reflect the views of these members.

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## OVERVIEW

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### Introduction

The *Exploration of Integrated Approaches to Supporting Child Development and Improving Family Economic Security* project investigated the design and evaluability of approaches to alleviating poverty that address the needs of low-income parents and children. The project examined programs that deliberately combine services that are intended to support both child development and parental economic security. Recent advances in implementation science and other fields of research provide key insights for new programs that may prove more effective than similar programs designed in the 1980s and 1990s. The project was funded by the Office of Planning, Research, and Evaluation (OPRE) in the Administration for Children and Families (ACF), U.S. Department of Health and Human Services, and was conducted by Mathematica Policy Research and Northwestern University.

### Primary research questions

This project addressed three primary research questions:

1. What is the range of programs that aim to meet the needs of low-income families (parents and children) through intentionally combined sets of activities?
2. What does it mean for programs to be high quality, intensive, and intentional in their service delivery?
3. What is the state of the research on programs that provide economic self-sufficiency programs to adults while serving children up through age 12, and what are options for future research on such programs?

### Purpose

The project provided ACF, program designers, researchers, and other stakeholders with information to consider for future investments in programs intended to meet the needs of both children and parents. It involved several activities:

- Consultation with experts informed a targeted literature review and a scan of currently operating programs.
- Mathematica identified and described program models gleaned from diverse programs across the country and field work with four compelling programs.
- Mathematica and its consultants from Northwestern University developed a conceptual framework to inform ACF's future work on a program that, by design, integrates services for low-income adults and children.

## Key findings and highlights

Findings of the project included:

- Contemporary programs tended to originate as child-focused programs or were designed to serve parents and children together. Their service models blended multiple offerings for parents and children to meet the needs of individual families.
- The conceptual framework developed for integrated parent and child services depicts integrated service delivery and expected outcomes for parents, children, and in the home environment in both the short and long term.
- The literature review indicated that quality and intensity may need to be at high levels for programs to have an impact on parent and child outcomes.
- The partnership framework, which is built on theory and discussion with implementation experts and practitioners, shows how partnerships tend to evolve through stages of cooperation, coordination, and collaboration.
- Given the developing state of the field and limited empirical evidence, more research is needed both on how best to implement integrated parent and child programs and their level of effectiveness.

## Methods

The project activities included:

- A targeted literature review, scan to identify programs operating as of January 2016, consultation with experts, and field work to learn more about selected programs;
- Development of conceptual frameworks to inform program design and research;
- Assessment of existing research on programs that provide economic security services to adults along with services to children up through age 12; and
- An assessment of opportunities for future research and evaluation on such programs.

LIST OF ACRONYMS

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|         |  |
|---------|--|
| ACF     | Administration for Children and Families in the U.S. Department of Health and Human Services |
| CCDF    | Child Care and Development Fund  |
| CDA     | Child Development Associate credential   |
| CSBG    | Community Services Block Grant   |
| DC PCSB | District of Columbia Public Charter School Board   |
| EHS     | Early Head Start   |
| ESL     | English as a Second Language   |
| ESOL    | English for Speakers of Other Languages  |
| HHS     | U.S. Department of Health and Human Services   |
| OPRE    | Office of Planning, Research, and Evaluation (within ACF)                                    |
| OST     | Out-of-school-time programming (after school or in the summer) for school-age children       |
| QED     | Quasi-experimental design for an effectiveness study   |
| RCT     | Randomized controlled trial, a design for an effectiveness study                             |
| TANF    | Temporary Assistance for Needy Families  |
| WIOA    | Workforce Innovation and Opportunity Act   |

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## EXECUTIVE SUMMARY

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Addressing the needs of low-income parents and children through intentionally combined sets of activities holds promise for reducing the transmission of poverty across generations. Well-paying jobs, opportunities for training, and accessible, high-quality early care and education can help families move toward economic security and create circumstances that promote child and family well-being. Yet, low-income parents face significant challenges as they attempt to navigate education and employment while finding high quality care for their children. A promising idea to address this disconnect is to provide integrated services to low-income parents and to their children, sometimes called a two-generation or whole-family approach. This approach in general is not a new idea. However, contemporary programs are combining services for parents, children, and families in innovative ways that have not yet been rigorously evaluated (Chase-Lansdale and Brooks-Gunn 2014).

Mathematica Policy Research and Northwestern University conducted the *Exploration of Integrated Approaches to Supporting Child Development and Improving Family Economic Security* project for the U.S. Department of Health and Human Services, Administration for Children and Families (ACF). It focused on programs that intentionally combined services to improve parents' economic security and their children's development and well-being. Such programs typically offer services to help parents obtain steady employment with higher earnings as their children are receiving developmental and educational services. This project was designed to give ACF and practitioners, researchers, and other stakeholders an overview of the current state of programs that aim to meet the needs of low-income parents and children through intentionally combined sets of activities. The project explored theory, program models, research evidence, and opportunities for future research.

An initial wave of programs that used an integrated approach to support child development and family economic security were evaluated in the 1980s and 1990s. The evaluations found few or no impacts on parental employment, parental earnings, and children's readiness for school (for example, Bernstein et al. 2000; Polit 1989; St. Pierre and Layzer 1999). However, a lack of intentionality, quality, and intensity of services in those programs might have contributed to the discouraging findings (Chase-Lansdale and Brooks-Gunn 2014; Sommer et al. 2012). The programs tended to emphasize services for one generation over the other, rather than intentionally connecting services for both generations equally and capitalizing on the mutually reinforcing motivation and outcomes of parents and children (Chase-Lansdale and Brooks-Gunn 2014). In some cases, the early education and care services for children also were of uneven quality. In programs that emphasized services to adults, parents often did not have access to quality, affordable care for their children. In general, adult services focused on building parenting and basic literacy skills, obtaining entry-level jobs, and accessing public benefits, rather than helping parents attain education and certification for career employment. Furthermore, many program services were "light touch" or provided through referrals and thus lacked sufficient dosage or intensity (Chase-Lansdale and Brooks-Gunn 2014). In their shortcomings, these early programs illuminated a path forward for contemporary service providers who see the promise of serving parents and children together.

Family systems theory suggests that intentionally combining sets of activities for parents and children may strengthen services and reinforce the impacts on all family members (Chase-

Lansdale and Brooks-Gunn 2014). Although evidence is limited, we expect that coordinated and aligned services for parents and children would be mutually reinforcing and that the benefits to both generations would compound over time. Research indicates that parents' improved economic security is linked to improvements in children's home environment (Duncan and Murnane 2011), greater parental engagement in their children's schooling (Crosnoe and Kalil 2010), and stronger parenting skills (Guryan et al. 2008; Kalil et al. 2012), which may in turn lead to improved child outcomes. Alleviating family economic security concerns while children are young has the potential to close socioeconomic gaps that would otherwise persist and contribute to intergenerational poverty (Duncan and Murnane 2011; Fernald et al. 2013; Hernandez 2011). Access to early care and education for children can remove labor market barriers for their parents (Adams et al. 2015) and improve employment outcomes. Parents and children may both be motivated to engage in integrated services. Parents may engage if they see services as helping their children as well as themselves (Sommer et al. 2012). Children may be more motivated if they know their parent is engaged nearby.

This report presents findings from the *Exploration of Integrated Approaches to Supporting Child Development and Improving Family Economic Security* project. The project activities included (1) a targeted literature review, environmental scan, and fieldwork to identify and describe existing programs; (2) development of conceptual frameworks to inform program design and research; and (3) development of suggestions for the directions that future research and evaluation might take. The report describes the findings in detail and offers recommendations for future research on programs and approaches. This executive summary highlights key findings from the report.

#### A. Literature review and scan of programs

### **1. The literature review indicated that quality and intensity may need to be at high levels for programs to have an impact on parent and child outcomes and that an intentional approach to serving both generations may matter**

Our literature review aimed to define quality, intensity, and intentionality in integrated programs for low-income families. The research-based definition of quality varied according to whether services focus on children or adults. Research defines two aspects of high quality child services: (1) process features and (2) structural features. Process features have to do with how services are provided—such as interactions between children and adults—and can be hard to quantify. Structural features are aspects of quality that are easily observed, such as child-to-adult ratios or whether a curriculum is used (Vandell and Wolfe 2000; Blau and Currie 2006). Process and structural features of quality tend to correlate with child outcomes (better quality being associated with better outcomes) but available research has not yet confirmed whether quality causes those favorable outcomes. Existing research on adult services defined quality mostly in terms of the types of services available. High quality economic security services for adults prioritize education and training, employment, or both. In addition, they prepare adults for in-demand jobs and provide ways for adults to connect with those jobs. High quality adult services may include developmentally supportive learning environments with a progression of increasingly complex tasks, contextualized learning, small learning communities, supports such as financial assistance, and professional development for instructors.

In the research we reviewed, intensity was defined as dosage, duration, and range of services. The research suggested that more intensive programs—those with a higher dosage and a longer duration—may be more likely to achieve outcomes for participants. However, the available research did not define thresholds for either of these dimensions of intensity. The range of services seemed to be an especially important consideration in programs that serve both generations at once, such that both adults and children are offered a variety of services to meet their needs.

Intentionality is another hallmark of programs that purposefully combine services for parents and children. However, more work is needed to define clearly the dimensions of intentionality. One approach to understanding intentionality is through the partnerships used to serve parents and children together. Rarely will a single organization possess the expertise and capacity to serve parents and children with equally high quality, intensive services (Anderson-Butcher and Ashton 2004). Partnerships with other programs take time to develop, but may be an essential component of delivering intentionally integrated services for parents and children.

**2. Programs have a range of ways that they began and a variety of services and emphases. Their service models blended multiple offerings for parents and children to meet the needs of individual families.**

We conducted an environmental scan based on public sources to catalog programs that were providing economic security services for parents alongside services to promote child development and well-being, focusing on programs that were operating in January 2016 and serving children up through age 12. We collected information about the characteristics of the programs based on public websites and documents. This research revealed a wide range of programs with diverse backgrounds and services, but some similarities emerged. Many programs originated as child-focused services that added adult services, while fewer originated as the reverse. Programs often grew out of Early Head Start or Head Start (one of the earliest initiatives to intentionally serve parents and children together). However, programs that jointly address parent economic security and child well-being tend to go beyond what many Head Start programs offer to parents by providing adult education and workforce development services such as job training, job placement, sectoral training, literacy, English as a second language, and high school equivalency or postsecondary education. Most programs offer both workforce development and education services to parents. These services tend to be paired with center-based education services for young children, such as Head Start and prekindergarten. About half of programs included case management for families alongside services for parents and for children.

Providing multiple and diverse services to families requires almost all programs to partner with other service providers in the community. The depth and importance of these partnerships differ across programs. Programs that merely referred adults or children to external providers (for example, a workforce program that helped parents find a child care provider) were excluded from the scan. Eight programs originated as place-based initiatives that brought multiple community services together under shared goals and objectives. Close partnerships emerged as critical elements of two programs that we studied through our fieldwork.

### **3. The most recent wave of integrated programs for parents and children is still developing.**

The field of programs with an integrated approach to serving parents and children is emerging. Many programs are still developing services and refining strategies to truly reach both parents and their children. Research on these programs is scant. In addition, programs may lack data systems, research partners, or technical assistance to support data-driven program development. Nearly half of the programs identified in the environmental scan were either pilot programs or only a few years old.

#### **B. Conceptual frameworks for programs that serve parents and children together**

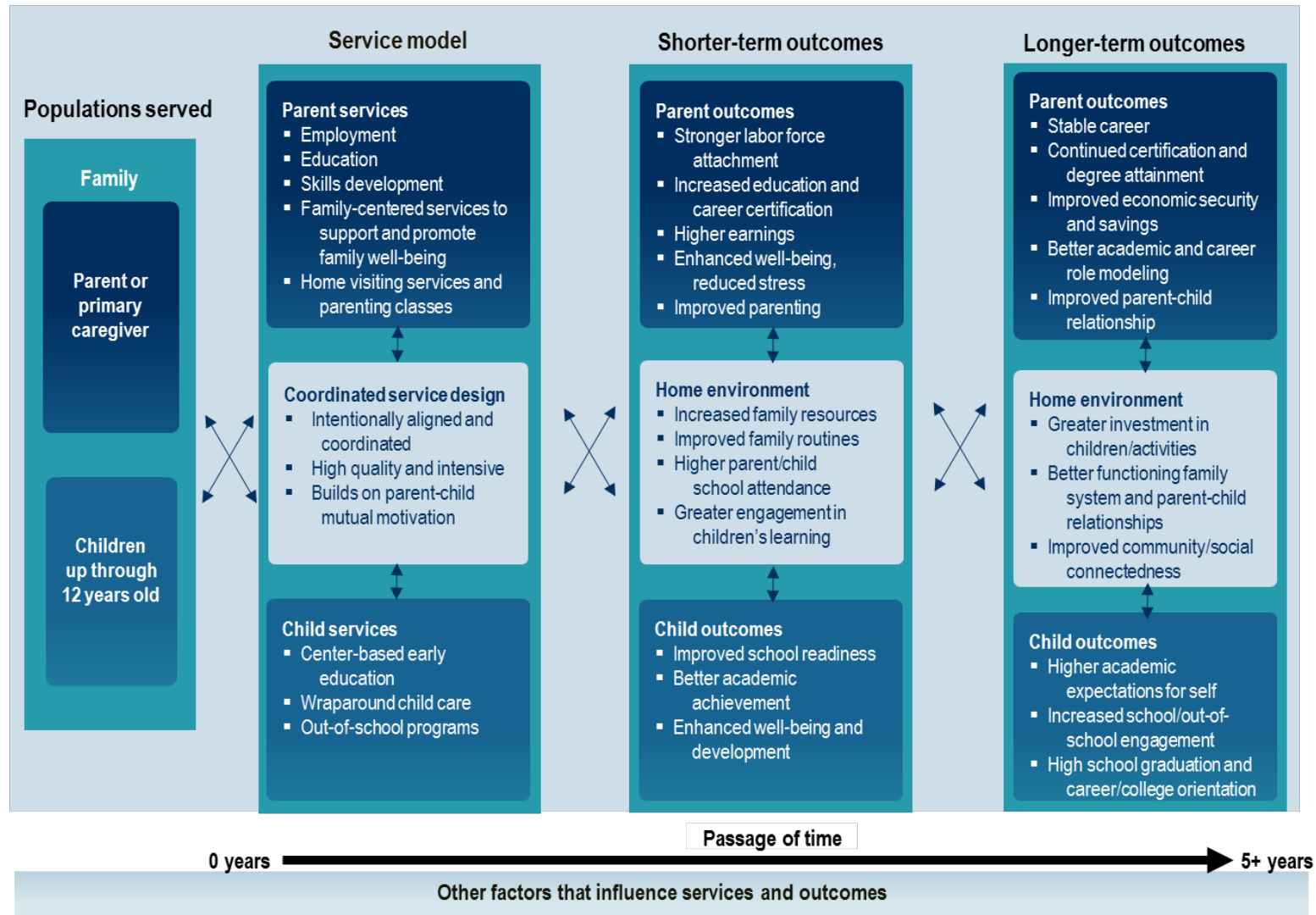
We developed a pair of conceptual frameworks for this project, drawing on the literature review findings, input from a panel of experts, and interviews with staff and parents at a small number of programs.

#### **1. The first conceptual framework depicts integrated service delivery and expected outcomes for parents and children, and the home environment, in the short and long term**

The first framework, a change model for economic security and child well-being programs, captures the essential elements of program approaches (Figure 1). This framework uses theory and evidence from developmental science and economics to illustrate potential outcomes for parents and children, as well as possible changes in the home environment. It builds on the Chase-Lansdale and Brooks-Gunn (2014) two-generation change model. The services include those directed at parents, such as workforce development and training and adult education; those directed at children, including both early childhood education; and those serving both parents and children together, such as home visiting services. For services to be successfully integrated, they need to be intentionally aligned and coordinated, high quality and intensive, and built on parents' and children's mutual motivation. We recognize that outcomes will depend on the services that programs provide, but found it helpful to imagine what outcomes might occur in a program with a wide range of services. In the short run, we expect parents will improve their education and skills to find employment and help their children achieve in school. In the long run, we expect that they will complete their higher education, experience continued career development, and achieve greater economic security. At the same time, in the short run, we expect that children will have fewer school absences; better academic achievement; and better mental and physical health, including age-appropriate cognitive and social development. In the long run, children should graduate from high school, enroll in college, and have greater expectations for their own futures. Changes in the home environment will take place concurrently: in the first few years, families will improve their functioning and will have sufficient resources to meet their needs. Within three to five years, families should have stable housing, savings, and maintain a better functioning family unit. Over the long term, families are expected to continue to have stable housing, savings to meet emergencies, and healthy functioning.



Figure 1. Change model for economic security and child well-being approaches



Source: Adaptation of Chase-Lansdale and Brooks-Gunn (2014).

This framework (Figure 1) suggests ways to intentionally reinforce, align, and coordinate services for parents and children to reflect outcomes that also support and enhance one another. Coordinating content is another way for programs to align parent and child services. As described above, parent and child outcomes from these services reinforce one another, which potentially enhances the impacts of programs that integrate services for parents and their children. The second framework shows how partnerships may move through stages of cooperation, coordination, and collaboration.

The partnership framework (Figure 2) is based on partnership frameworks from the business and public management fields (Keast et al. 2007; Austin and Seitanidi 2012). At collaboration—the deepest stage of involvement depicted in the framework—organizations identify shared values and develop joint missions, which results in systems change and innovation around how services are developed and provided and how problems are jointly solved. Such a level of engagement may be critical to the intentional delivery of programs that attempt to meet the complex needs of children and families. Programs could seek to locate their partnerships on this continuum and could use it to generate ideas about changing how they work with partners in order to serve parents and children in new and better ways. Future research could explore how the depth of a partnership relates to the quality and intensity of services, family engagement, and ultimately outcomes for families and children.

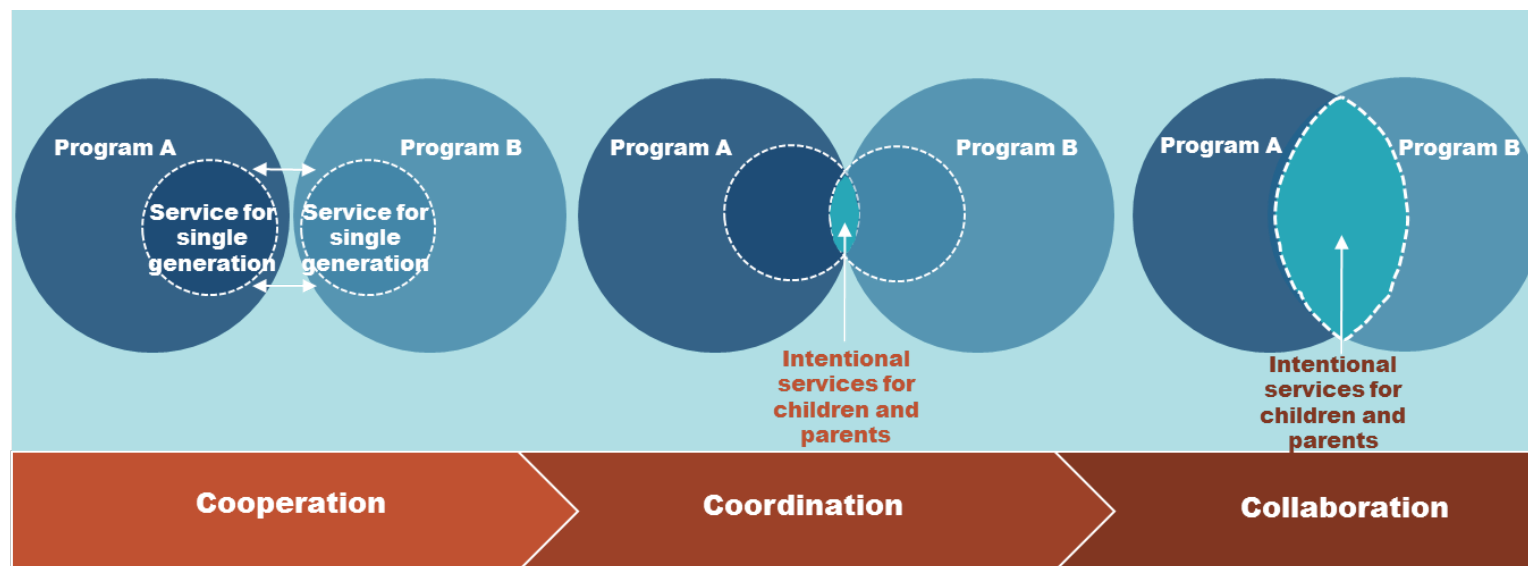
### C. Opportunities for future research and evaluation

#### **1. Given the nascent state of the field and limited empirical evidence, more research is needed both on how best to implement integrated parent and child programs and on their effectiveness.**

The literature review and scan of programs showed that the available research and evaluation have not yet caught up to the theory supporting such programs. Research identified through the literature review informed definitions of quality and to a lesser extent intensity for services for parents and children. However, existing research does not offer clear definitions for quality and intensity of services provided through integrated approaches. We also still lack a clear definition of intentionality and a set of dimensions to assess whether services are delivered intentionally to parents and children.

Research should match the level of the development of programs to be useful to practitioners and policymakers alike. We considered design options for descriptive research and effectiveness research as part of this project and prepared three options for each type of research, as described below. Researcher-program partnerships can help programs develop their service models and approaches. Learning communities may provide opportunities for programs to learn from their peers and network with researchers, who can share research-based best practices and promising innovations.

Figure 2. Conceptual framework for development of partnerships in programs that serve parents and children



As approaches move along the continuum, programs shift in some key areas

**Engagement:** Move from cooperative cross-referrals and task-oriented engagement to significantly increased dialogue and investments of time by each program

**Mission:** Shift from separate missions to a shared mission that addresses the needs of the entire family and establishes program goals resulting from more frequent and deeper joint planning

**Resources:** No longer simply sharing individual services or money and instead rethinking how to strategically and equitably use human and financial resources to achieve maximum benefits for all

**Co-creation of value:** Move from operating separately and maximizing distinct assets and strengths to intentionally co-designing and co-delivering services to both parents and children

**Innovation and systems change:** Shift from limited joint planning to collaboratively addressing challenges, using knowledge from co-designing services to change how an entire system or approach is delivered

Note: Dimensions and phases on this continuum draw from the work of Austin and Seitanidi (2012) as well as from Keast et al. (2007).

For developing programs (that is, most of the programs we identified in our scan), descriptive research that supports program implementation is appropriate. This type of research will help programs develop and refine their logic models; strengthen their data systems; and use data to assess program activities, outputs, and costs. It can contribute to a process of continuous improvement, leading to stronger programs that are primed for more rigorous forms of effectiveness evaluation. Three options for descriptive research are:

1. **Supporting programs in their efforts to align their goals, services, and outcomes** through logic modeling, creating or enhancing a program data system to track services and outcomes, and using these tools for continuous improvement
2. **Conducting a descriptive study of programs for parents and their children** to establish a basic understanding of the program services and their outcomes
3. **Learning more about partnering to offer coordinated services for parents and their children** through in-depth implementation research, including interviews of program and partner staff, program participants, and community stakeholders

Evaluations of program effectiveness should focus on “proud programs” that are providing services at a level of quality and intensity that are likely to produce positive outcomes for families (Campbell 1988). Prematurely evaluating program effectiveness may lead to improper conclusions for theoretically grounded programs, such as finding limited or no positive impact on outcomes. Identifying programs that are ready for effectiveness evaluation involves assessing how well they are implemented, thinking critically about their theory of change, and considering the maximum rigor of evaluation design possible (quasi-experimental or experimental). Prior descriptive or implementation research can be a source of identification for programs that are ready for evaluation. For example, our literature review identified four operational programs that had participated in implementation research and might be ready for an effectiveness evaluation. The report describes three options for effectiveness evaluation:

1. **Assessing the overall effectiveness of a program compared to whatever services are available in the community.** This study could use random assignment with a control group that receives any other services available in the community. Alternatively, a quasi-experimental design (QED) could use demographic and other data to match people who enroll in the program to a similar group who did not enroll in the program.
2. **Assessing the effectiveness of a program that serves both generations compared to a program that serves either parents or children.** This study would measure the extent to which services for both parents and their children enhance the impacts of a program compared to a program that serves one generation only. As with the first option, this study could use random assignment or QED. In this case, the control group would receive similar adult services or similar child services, not both.
3. **Assessing thresholds for service quality and intensity that are necessary for programs to have positive impacts on parents’ economic security and children’s well-being.** This evaluation could begin with a descriptive analysis of the quality and intensity of services provided to parents and their children by programs shown to have favorable impacts. A design that could measure the impact of greater quality or intensity would randomly assign

many programs to implement alternative levels of quality or intensity for adult or child services and assess the impacts on parent and child outcomes.

#### D. Conclusion

Programs that serve low-income parents and children in an integrated way are proliferating. Although rigorous impact evaluation is still to be done, these programs hold promise for reducing intergenerational poverty. Therefore, they are of high interest to program administrators, researchers, and other stakeholders who wish to understand how services are delivered and whether they work. Conceptual frameworks are important initial steps for applying research theory to the development of programs that have an integrated approach to serving parents and children. Descriptive research informed by conceptual frameworks can guide program development and measurement as well as learning about important program features and outcomes for parents and children. Effectiveness evaluations of programs that are ready for such research will advance our understanding of program impacts and the critical levels of service quality and intensity required to generate impacts. Just as earlier evaluations provided a road map for the current array of integrated approaches, research on and evaluation of contemporary programs will contribute to further development and refinement of frameworks and strategies for programs that intentionally coordinate services for parents and children.

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## I. INTRODUCTION

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Approaches that address the needs of low-income parents and children through intentionally combined sets of activities may hold promise for reducing the transmission of poverty across generations. Well-paying jobs, opportunities for training, and accessible, high-quality care and education can help families move toward economic security and create circumstances that promote child and family well-being. Yet, low-income families face significant challenges as they attempt to navigate education and employment for parents while finding high-quality early care and education for their children. A promising idea to address this disconnect is to provide services to both low-income parents and their children. Sometimes called “two-generation” or “whole-family,” these approaches in general are not a new idea (see background section), contemporary programs are combining services for parents, children, and families in innovative ways that have not yet been rigorously evaluated (Chase-Lansdale and Brooks-Gunn 2014).

*Exploration of Integrated Approaches to Supporting Child Development and Improving Family Economic Security* was a project conducted by Mathematica Policy Research and Northwestern University for the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF). It focused on programs using intentionally combined services that aim to improve parents’ economic security as well as children’s development and well-being. Such programs typically offer services to help parents obtain steady employment with higher earnings as their children are receiving developmental and educational services.

This project was designed to give ACF and other stakeholders an overview of the current state of programs that aim to meet the needs of low-income families (parents and children) through intentionally combined sets of activities. The project explored theory, program models, research evidence, and areas for future research. Project activities included: (1) a targeted literature review, environmental scan, and field work to identify and describe existing programs; (2) development of a conceptual framework to inform program design and research; and (3) suggestions for the directions future research and evaluation might take. In this report, we describe the findings in detail and offer recommendations for future research on programs and approaches.

### A. Background on approaches to meeting the needs of parents and children together

The struggle of low-income families to achieve economic security is a significant public policy issue in the United States. Twenty percent of children live below the federal poverty line, and another 20 percent face economic hardship due to living below 200 percent of the poverty line (U.S. Census Bureau 2016). Although, parents are the central source of support for children, it is often difficult for low-income parents to find steady employment at wages that support a family because they may have low education levels and low job skills. These parents may lack the preparation and resources they need to pursue additional education and training. Low-income parents often face cost- and eligibility-related barriers to accessing child care with stimulating learning environments that are developmentally appropriate. Moreover, parents may find that the

limited availability of reliable, affordable, high quality early care and education poses a barrier to employment (Adams et al. 2015).

### 1. **Research findings relevant for contemporary approaches to meeting the needs of parents and children together**

Why might intentionally combining services for children with services for parents be a promising way to support low-income families? Research and social science theory offer several reasons.

- **An approach that intentionally combines services for children with services for parents may be a stronger intervention for both parents and children than single-generation services.** Serving parents and their children with coordinated services may help to strengthen the services and reinforce impacts on both parents and children (Chase-Lansdale and Brooks-Gunn 2014). Serving both may increase parent and child engagement in services by making it logistically easier to participate (Karp 2011), thus increasing the effects of the services on parents and children. Serving both may increase parent and child engagement in the substance of the activities through mutually-reinforcing motivation, as parents view their education and employment activities as helping their children as well as themselves (Sommer et al. 2012), and children perhaps may be more engaged in classroom learning activities knowing their parent is engaged nearby. Finally, parent and child outcomes of coordinated services may reinforce each other, as the parent's learning enhances the home learning environment for the child (Duncan and Murnane 2011; see also next two bullets) and the child's learning and positive behavior has the potential to improve the parent's emotional well-being and the parent-child relationship.
- **Further education and economic security for low-income parents is linked to better academic outcomes for their children.** Parents' education and income are strongly related to children's development and school success (Chase-Lansdale and Brooks-Gunn 2014; Deaton 2016; Yeung et al. 2002; Currie and Moretti 2003; Magnuson 2007; Magnuson et al. 2009; Sastry and Pebley 2010). Also, mothers with higher levels of education tend to be more engaged in their children's schooling (Crosnoe and Kalil 2010). This correlational and descriptive research suggests that more education for parents could lead to better parent engagement in the child's education and better academic outcomes for children, although more research is needed to understand the direction of causality.
- **More education for parents may also translate into stronger parenting skills.** Mothers with higher levels of education are more likely to shape their parenting in response to their children's development needs compared to mothers with lower levels of education (Guryan et al. 2008; Kalil et al. 2012), which in turn is associated with children's well-being at all age levels (for example, Amato and Fowler 2002).
- **Parents' labor market outcomes are linked to their education.** Increases in parents' educational attainment and certification may foster higher levels of family income (Oreopoulos and Petronijevic 2013). This could improve family economic security, with benefits for both parents and children (Duncan and Murnane 2011; Duncan et al. 2010). But, parents may need early care and education arrangements for their children in order to pursue education and certification that could help the parent seek a job with a better income,



suggesting that coordinating adult and child services can remove barriers to employment (Adams et al. 2015).

- **Economic insecurity in childhood has lasting consequences for children.** Family economic hardship during early childhood poses significant risks to successful learning and healthy social development later on (Duncan and Murnane 2011; Duncan et al. 2010). Socioeconomic gaps in educational achievement emerge in early childhood and persist throughout the years the child continues in school (Duncan and Murnane 2011; Fernald et al. 2013; Hernandez 2011). Therefore, approaches to alleviating families' economic hardship and supporting children's development when the children are young have the potential to close socioeconomic gaps in achievement and economic security that persist across generations.

One early effort to serve low-income parents and children with a coordinated approach is Head Start, which was established in 1965 as part of President Lyndon B. Johnson's War on Poverty. It provides children with enriched learning environments and helps families access the services that will enable them to support their children's development and school readiness (for example, parenting education, social services, health and mental health services). Most programs rely upon other community service agencies to provide at least some of the services families need. Other previous programs that have aimed to meet the needs of children and parents together, including early welfare reform demonstration efforts in the 1980s and 1990s, emphasized services for one generation over the other (Chase-Lansdale and Brooks-Gunn 2014).

## 2. Past research on programs aiming to meet the needs of both children and parents

Past research on a wave of programs from the 1990s that aimed to meet the needs of both children and parents found few or no impacts on parental employment and earnings or children's readiness for school (for example, Bernstein et al. 2000; Hsueh and Farrell 2012; Polit 1989; St. Pierre and Layzer 1999). One likely reason that previous programs were not effective is that the services offered for either or both generations were of insufficient quality, intensity, and intentionality (Chase-Lansdale and Brooks-Gunn 2014; Metz and Bartley 2012; Metz et al. 2015; National Human Services Assembly 2013; Sommer et al. 2012).

To date, most early childhood education programs and education and job training programs have operated independently, but now a number of programs across the country are integrating services for children and parents in innovative ways. Program administrators and policymakers recognize that serving one generation is an incomplete response to the multiple challenges experienced by low-income families. Some researchers have begun to study the implementation and effectiveness of these newer integrated programs (Hsueh and Farrell 2012; Sabol et al. 2015).

## B. Exploration of integrated approaches to supporting child development and improving family economic security

This project focused on programs<sup>1</sup> that aimed to improve the economic security of parents and to support the learning, development and well-being of children. These programs typically offer services to help parents find higher-paying, steady jobs and to foster the development and education of their children.

Virtually no large-scale rigorous evaluation of the impacts of this type of intentional programming has occurred (Chase-Lansdale and Brooks-Gunn 2014). And, there is no consensus yet about what it means to intentionally combine and deliver high-quality, intensive services to children and parents. This project can provide some insight on what research has to say about critical dimensions of programs that aim to meet the needs of parents and children together, offer some thinking about frameworks for program development and research planning, and suggest directions for future evaluation.

### 1. Literature review, environmental scan, and field work

The project began with a targeted literature review, an environmental scan of publicly available program documents and websites, and field work (telephone calls and site visits). The field activities aimed to identify and describe existing programs that intentionally combine services for children and parents. They also informed later project activities.

***Literature review.*** The literature review (Chapter II), examined prior research to answer three questions:

1. What is the range of contemporary programs that aim to address economic security and child development and well-being?
2. What does it mean for services in these programs to be high quality, intensive, and intentional?
3. What is the state of the research on the implementation, outcomes, and impacts of these programs on children and their parents?

***Environmental scan.*** The environmental scan identified and described programs, including federal and foundation grantees, that are intentionally combining parent and child services to improve family economic security and support child development and well-being (Chapter III). To be included, programs had to be active in the U.S. as of January 2016. Public documents and websites were the sources of information about whole-family services. (Additional information about some programs is in Appendix C.)

For the purpose of this project, we included programs that provided direct economic security services to parents or other primary caregivers, such as education and employment programs. Child-focused services could target children up through age 12. Whereas the literature related to integrated parent and child services often focuses on early childhood, we were interested in

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<sup>1</sup> For this project, we focused on active programs that intentionally combine services for children with services for their parents. This included partnerships among programs that individually had more discrete services.

exploring a broader age group. If programs are combining services for parents with high-quality out-of-school-time services for older children, we wanted to capture that in the scan. Child care funding for children up to age 12 is available through Temporary Assistance to Needy Families (TANF) and the Child Care Development Fund (CCDF); more than 75 percent of children served by the Temporary Assistance to Needy Families [TANF] program are younger than age 12 (Administration for Children and Families 2015a).

**Field work.** To learn more about some of these approaches through field work, OPRE and the project team selected four programs, identified through the environmental scan. In late 2016 and early 2017, the project team interviewed staff from these programs to understand their goals, services, engagement of families, and expected outcomes, and how they partnered with other organizations in their communities. The research team invited participants (parents) from three of the programs to share their families' experiences with the programs. Appendix C at the end of this report describes the programs involved in the field work, and we used that information to inform ideas for the conceptual framework and evaluability assessment phases of the project.

## 2. Conceptual framework

Drawing on the work of the first stage, the project team developed two conceptual frameworks to provide visual, systematic pictures of our hypotheses about (1) program activities and outcomes and (2) service collaboration. (Chapter IV). The first conceptual framework builds on the "Change Model for Two-Generation 2.0 Programs" presented by Chase-Lansdale and Brooks-Gunn (2014). It focuses on child, parent, and family services and outcomes as reflected in contemporary programs. This framework also illustrates how theory and evidence from developmental science and economics would predict the expected outcomes for parents and children. The second conceptual framework draws on partnership frameworks from the business and public management fields (Keast et al. 2007; Austin and Seitanidi 2012). It addresses the dimensions of service collaboration and the progression from cooperation between independent programs (and possibly agencies) that serve generations separately to deeper collaboration leading programs to offer resources and services to whole families.

## 3. Evaluability assessment

A key outcome of the project was developing options for research and evaluation (Chapter V) that can provide an evidence base to guide decisions about future investments in approaches that aim to improve family economic security and support child development and well-being. This evaluability assessment drew upon information and insights gathered across phases of the project, especially the field work. It also considered the status of available research, as identified in the literature review, to recommend future steps that would fill gaps in the evidence base.

## C. Summary

This report on findings from each component of the project is intended for a broad audience of program administrators, funders, and evaluators. Program funders, including policymakers, may wish to act on the findings of the literature review, environmental scan, and evaluability assessment to support decisions about where and how to invest in programs that aim to improve family economic security and support child development and well-being. Evaluators may find the literature review, conceptual framework, and discussion of evaluation designs to be helpful

for supporting program development and designing program evaluations. Program staff and readers who are looking for a basic introduction may prefer useful but less technical information about the program scan, conceptual framework, and evaluability assessment. Companion briefs on each of these topics are available.

## II. LITERATURE REVIEW

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A targeted literature review was part of this project so we could develop a deeper familiarity with existing research on programs that aim to address the needs of children and parents together and learn how they are designed and developed. This review was not an exhaustive examination of all adult and child programming or of all approaches that combine adult and child programming. It focused instead on helping us answer two research questions:

1. What does it mean for programs to be high quality, intensive, and intentional in serving children and adults (individually and together)?
2. What is the current state of efforts to evaluate such programs?

In this chapter, we address the first question, and in Chapter V, we address the second so we can summarize evaluations to date alongside the results of the evaluability assessment we prepared for this project.

### A. Methods

The literature review began with a targeted literature search and screening to identify the most relevant studies for deeper review that would help address each research question.

#### 1. Literature search

The literature search consisted of (1) constructing a “foundational” list of key literature and (2) searching online databases of publications. Examples of foundational literature include the spring 2014 edition of *The Future of Children* on two-generation mechanisms to improving children’s outcomes, and grey literature (sources not published in research journals) from organizations that fund and support approaches and policies intended to meet the needs of both children and parents. The team confirmed and expanded this list with input from experts on program development, evaluation, and best practices for integrated approaches and for adult economic security and child well-being programs. Some relevant additional sources also emerged from the concurrent scan of programs that are intentionally combining parent and child services to improve family economic security and support child development and well-being (described in Chapter III). To supplement the foundational list, the team conducted a keyword search of seven online databases (Appendix A). This search filtered research published since 2006 because, as Chase-Lansdale and Brooks-Gunn (2014) note, this marks the beginning of a resurgence of interest in programming and policy aimed at addressing the needs of children and parents together. The foundational list was not restricted to this period, however.

After screening the literature (which we describe in the next section), the team conducted supplementary database searching on specific topics that had yielded limited information in the first round of reviews. For instance, initial screening indicated that the original search strategy returned limited information on certain types of services, such as community colleges and sector-based employment. The team then conducted targeted searches for literature reviews or meta-analyses in those specific areas.

## 2. Literature screening

The online database search yielded more than 700 unique citations, but not all were relevant to the research questions. The screening step filtered out research that: (1) focused on health outcomes for families or on a program that offered parenting interventions but did not offer economic security services for parents and/or child well-being services; or (2) focused on programs in the context of non-English-speaking countries.

The research team summarized information about central research topics, including research-based definitions of quality, intensity, or intentionality (described in this chapter); the design of integrated programs targeting both family economic security and child development (see Chapter III); and evaluability of such programs (discussed in Chapter V).

B. What does it mean to intentionally combine and deliver high quality, intensive services to children and parents?

Chase-Lansdale and Brooks-Gunn (2014) suggested that insufficient quality, intensity, and intentionality may explain the modest impacts of early programs that aimed to address the needs of both children and parents. New conceptual models for program development suggest that delivering simultaneous, intensive services to both generations in a way that matches the needs and strengths of families is a crucial principle of program design (Gruendel 2014). Some contemporary human services organizations view addressing the needs of the whole family as an intentional way of delivering high quality services that are tailored to build on families' strengths and needs (National Human Services Assembly 2013). These models are also being developed with the recognition that intensive, long-term services may be necessary for some families.

The literature review examined what the research says about defining and measuring quality for child development services and for adult economic security services as well as the evidence that quality at a particular threshold is linked with positive outcomes for children and adults. It also examined the research evidence on the intensity of services needed to generate positive outcomes for children and adults. (The literature review examined each generation separately because limited research was available on programs that serve both generations at once, as discussed later in Chapter V. But, we expect that programs that combine child and parent services would consider the quality and intensity of services to each generation in an integrated way.) Finally, it examined how researchers are defining intentionality for program delivery and the evidence linking intentionality in combined programs to positive outcomes for children and adults.

### 1. Quality

Quality refers to features that are linked, theoretically or empirically, with improved outcomes for children or adults. It includes dimensions such as content and delivery (for example, the format and type and training of staff who deliver the services). Quality can range from inadequate to sufficient to excellent. The literature review examined quality dimensions and measurement for each generation separately because we found that there is not yet much research on quality for programs that serve both generations (see Chapter V).

### a. Quality services for children: early childhood

A central challenge for early education research has been to identify characteristics of early childhood education that are consistently linked with positive child outcomes, and that might, therefore, indicate quality services. (Among the active programs we identified in this project, three out of four offer center-based early childhood education – see Chapter IV.) Successful early childhood programs pioneered in the 1960s and 1970s, such as the Carolina Abecedarian Project and the Perry Preschool Program, featured trained teachers, low ratios of students to teachers, and well-developed, intensively delivered curricula that emphasized language development, school readiness, and several other dimensions of child development (Chase-Lansdale and Brooks-Gunn 2014; Elango et al. 2015).

Quality standards for early education have proliferated. Common quality indicators include personnel management and human resources, learning and environment practices, child health and development (including screening and referrals), and professional development (National Center on Early Childhood Quality Assurance n.d.; Kirby et al. 2015). These indicators are gaining broader recognition. For instance, Quality Rating Improvement Systems (QRIS) give consumers information about the quality of center- and home-based early care and education programs for children from birth through school age (Build Initiative and Child Trends 2014). Yet, it remains difficult to assess quality across a range of program types using consistent measurement. It is also difficult to document how programs' indicators relate to child outcomes (Goffin and Barnett 2015; Boller and Maxwell 2015; Burchinal et al. 2010; Burchinal et al. 2011; Sabol et al. 2013; Sabol and Pianta 2015; Zellman et al. 2011).

Research typically addresses the features of quality center-based early childhood programs by grouping them into two categories: structural features and process features (Vandell and Wolfe 2000; Blau and Currie 2006). *Structural features*—such as group size, child/adult ratio, and teacher training—are more readily measured and can be more easily regulated and summarized for parents who are seeking care and education for their children. *Process features* refer to the interactions in an early childhood setting—between children and adults and among children as well as between children, adults, and the classroom setting. These interactions are best measured by observation, making them more challenging and costly to assess. Quality markers for out-of-school-time (OST) programs that serve older children after school or in the summers also include structural and process features, although research about how these features relate to outcomes for school-aged children is less developed.

The sections below summarize research on structural and process features of child services, and a later section examines their relationship to child outcomes. Programs that serve children and their parents would ideally include these quality features that early education research indicates are linked to good outcomes for children.

#### Structural features

**Small group sizes and low child-to-adult ratios indicate quality in early childhood education; these may relate to better child outcomes but research findings are not conclusive.** Organizations that license and regulate child care often limit classrooms sizes and ratios of children to adults. For instance, Head Start Program Performance Standards (Administration for Children and Families 2016) require classes to have two teachers and to have

group sizes of 13 to 20 students, depending on the children's ages (lower ratios for younger children). Researchers examining ratio and group size have explored how these two features relate to process features and to child outcomes, but findings are not conclusive. In some research, it looks like lower ratios and small group sizes are associated with better classroom activities, caregiving quality, and child achievement (Howes et al. 1992; Howes 1997; Blau 1999; NICHD and Duncan 2003 found this in some of their analyses). But, with other research (such other analyses in the 2003 work by NICHD and Duncan and a 2016 meta-analysis by Burchinal and colleagues) there was no association between group size and child outcomes. Therefore, programs serving young children (including programs that integrate child and parent services) may want to strive for low ratios and small group sizes, but program planners should be aware that these features alone will not necessarily cause better child outcomes.

**Implementing a curriculum is associated with better early childhood outcomes (Boller et al. 2014), and curricula with a deep focus on a particular content area may lead to better child outcomes in that area.** A curriculum prescribes materials and lesson content, and therefore can be more easily observed and regulated. Not all curricula are equally effective overall or across areas of learning. The federally funded What Works Clearinghouse reviewed effectiveness research relating to 16 early childhood education curricula and found that half of them improved children's cognitive outcomes. Even when the curricula were effective, the effects were generally small (What Works Clearinghouse Finding What Works Tool, n.d.). But, a teacher's focus on a particular content area (perhaps supported by a tailored curriculum), may improve outcomes for children in that area. Research on young children suggests this may be true for at least social-emotional curricula and social and emotional development (Morris et al. 2014), and for language-rich education (such as reading and responding to children) and language outcomes for young students (NICHD ECCRN 2003; Zaslow et al. 2010). Therefore, a curriculum that focuses on priority outcomes for the program is an important quality feature for programs that serve young children, including programs that combine services for parents and children.

**The levels of caregiver education and professional development are an important quality feature in early childhood programs and may be associated with positive child outcomes.** Early childhood accreditation and regulation programs set standards for staff education (such as an associate or bachelor degree) and training (such as experience with early childhood education and/or ongoing staff development. (National Association for the Education of Young Children 2015; Office of Head Start 2008). Research on teacher credential and degree attainment found some favorable and some mixed results for children. For example, two studies found that more education for teachers was associated with better achievement for preschool children (NICHD ECCRN and Duncan 2003; Howes 1997). Other studies found negative or mixed associations of teacher training with children's behavioral and academic outcomes (Blau 1999; Early et al. 2007) and with classroom quality (Early et al. 2007), but the authors of those studies cautioned that limitations of their study design and measurement might explain the unexpected negative results. Taken together, research and accepted practice in the field of early education indicate that appropriate caregiver education and training are important to delivering high quality services to young children – this will be important in programs serving both children and parents just as it is in programs that serve children alone.



## Process features

**High quality educational programs for children include developmentally supportive learning environments and a sequence of progressively more complex tasks.** A definition of quality that includes developmentally appropriate learning environments (those that support increasingly complex tasks over time) grounded in positive relationships may apply to programs that serve a range of populations (Smith et al. 2009). This could include programs that combine services for parents and children. For children, research consistently shows that developmentally supportive environments and scaffolding the complexity of tasks are associated with better academic outcomes (Burchinal et al. 2016; Zaslow et al. 2010). The quality of the relationship (sensitivity and warmth, for example) between children and their caregiver or teacher is also associated with better behavior and cognition among children, though the magnitude of these findings is small and the association is not causal (NICHD ECCRN 2003; Mashburn et al. 2008; Howes et al. 2008).

**More instructional support from teachers—such as helping children develop higher-order thinking skills and solve problems, and offering continuous feedback—is associated with better academic outcomes for children.** One research-based quality measure, the Classroom Assessment Scoring System (CLASS), is widely used to assess classroom process quality features that research has identified as important at various children’s ages: infant, toddler, prekindergarten, kindergarten through grade 3, upper elementary, and secondary classrooms (Teachstone 2016). To achieve higher ratings on the CLASS, teachers must be emotionally supportive and organize their classrooms to engage students’ attention and build on students’ existing skills to scaffold more complex learning (Pianta and Hamre 2009). Other research supports the importance of instructional support. Zaslow and colleagues (2010), in their literature review of quality in early childhood programs, found two studies of pre-K students in which classrooms with better instructional support had children with better academic outcomes. In both studies, the association between instructional support and child outcomes was statistically significant after controlling for children’s characteristics (Howes et al. 2008; Mashburn et al. 2008). In a large study of Early Head Start (EHS), the CLASS-Toddler dimension most like instructional support (Engaged Support for Learning) was associated with some language and social-emotional measures in the expected direction at age 2 and 3 (more so at age 3), but in a few cases, the associations were not in the expected direction (Aikens et al. 2015).

**A supportive relationship between caregivers and children is associated with positive behavior and cognition for young children, and such a relationship may support children’s interactions with peers.** Relationship support is a common measure of the quality of early care and education environments. A supportive caregiver attends to and responds to children’s communication, is affectionate and reassuring, and speaks positively to children (NICHD ECCRN 2003). Many QRIS also rate the learning environment and measure “process quality” (to indicate the quality of the interaction between children and care providers). Supportive relationships between children and with teachers or caregivers in early childhood centers are associated with positive behavior and better cognitive outcomes for those children (Mashburn et al. 2008; Howes et al. 2008; NICHD ECCRN 2003; National Academies of Sciences, Engineering, and Medicine 2016). In infant through preschool classrooms where children have more secure relationships with teachers, they also are more likely to interact with peers (Howes

et al. 1992). Researchers have measured supportive relationships using several tools for observing classroom environments, including the Observational Record of the Caregiving Environment (NICHD ECCRN 1996), the Early Childhood Environment Rating Scales (ECERS) (Harms et al. 1998), and the CLASS measures. Coaching strategies—involving ongoing support to early childhood teachers to help them improve their practice—have positive relationships with teacher-child interactions, but research has not yet identified whether coaching teachers can improve the outcomes of the children in those teachers' classrooms (Aikens and Akers 2011).

### **Areas for future research on quality services for young children**

**Research on structural and process features of quality services for children usually examined how these features *correlated* with child outcomes, but not whether the features *caused* those outcomes.** Most studies of quality in early care and education did not test the impact of a quality feature on child outcomes. The literature sometimes suggests that structural features of quality support child outcomes (for example, Blau 1999; NICHD and Duncan 2003). More consistently, research has measured a positive association between process features and child outcomes (for example, Burchinal et al. 2016; Sabol et al. 2013). Taken together, research on early childhood education programs suggests that focusing on structural and process features together may yield high quality programs. More rigorous research is needed to establish whether these features actually improve outcomes for children.

**Structural features of quality in early care and education may moderate the relationship between process features and child outcomes, but more research is needed.** Researchers and practitioners have agreed that center-based early childhood programs should attend to both structural and process features of quality. Researchers have hypothesized that structural features can affect the relationship process features have to child outcomes (Halle et al. 2011; Morris et al. 2014). For example, researchers who used complex statistical modeling examined how ratio and caregiver training relate to young children's cognitive outcomes and found some support for this hypothesis (NICHD ECCRN 2002). In a review of research on quality features in early childhood care, Zaslow and colleagues (2010) suggested that inconsistent research conclusions about how structural features relate to child outcomes suggest the need for further examination of how structural features moderate the effect of process features on child outcomes.

**Although research has not yet confirmed that the structural and process features described in these sections can cause better outcomes for children, they are promising, recommended practices in early childhood education and should be a core part of integrated programs that serve young children and their parents.**

#### **b. Quality services for children: elementary years**

Once children reach kindergarten, school educates children during the day, but parents' schedules might require that children receive additional care and education services. The quality of school-day services for elementary-age students is outside of the policy focus of ACF. Instead, for elementary-age children, the literature review focused on the quality of OST programs that provide care and education before and after school. Structural and process aspects of quality are relevant to OST programming for elementary-age children as well, but research was more limited on quality features for this age group than for early childhood settings. Because they

offer services when classes are not in session, OST programs could help students maintain their academic progress. Academic skill loss disproportionately affects low-income students, who are more likely to fall behind in reading skills over the summer than their higher-income peers (McCombs et al. 2011).

**Researchers recommend that OST programs attend to such structural features as leadership, planning, and community partnerships, but research on whether doing so is effective for children is not yet available.** A pair of research teams who conducted literature reviews and case studies of several programs found that some common structural features for popular summer learning programs included offering smaller classes (for elementary and middle school students, ratios of 3 to 10 students per teacher), designated leaders who plan programs throughout the year, strong community partnerships, creativity in identifying sustainable funding streams, and a focus on evaluation and improvement (Bell and Carillo 2007; McCombs et al. 2011). Yet, another study found that structural features were not strongly correlated with quality for after-school programs, and that process features mattered more (Smith et al. 2008).

**Research (of varying rigor) on older children suggests that offering high quality process features in OST programs, such as supportive interactions with staff and peers, may improve student outcomes.** Process quality indicators in OST programs include the content of activities and instruction, the level of engagement and interactions between students and staff, and the level of supportiveness and safety of the classroom environment (Smith et al. 2009). A study of changes to after-school programs in one county found that programs in which staff focused on offering environmental supports for learning and peer interaction had higher quality (as measured by a diagnostic quality assessment tool) after their program improvement process than before (Smith et al. 2008). Process features may explain some of the quality improvement. In other exploratory research, recommended process features for summer learning programs included: a focus on accelerating student learning by providing content beyond the remedial level and aligning school and summer curricula (Bell and Carillo 2007; McCombs et al. 2011). A meta-analysis of 35 OST programs<sup>2</sup> found that OST programs for at-risk students can improve reading (in elementary and middle school students) and mathematics (for middle school students), regardless of whether they were delivered after school or during the summer (Lauer et al. 2006). Programs that offered tutoring and included both academic and social components improved student achievement the most.

### c. Quality adult economic security services

Dimensions and measurement of quality in economic security services for adults have not been fully developed. Unlike researchers in other fields, such as those who focus on services to children, researchers on economic security services for adults have neither consensus on quality standards nor systems for rating and monitoring quality. Therefore, the definitions researchers proposed for quality were drawn from case studies of promising practices, literature reviews that distilled themes across effectiveness studies, and individual effectiveness studies.

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<sup>2</sup> Among the 35 programs offered in the U.S. that had impact evaluations published in 1985 through 2003, only 5 served children in 9th grade or higher, and only 3 served no children in grades lower than 9th grade. As such, the meta-analysis results are highly applicable to children up through age 12, who are the focus of our project.

**High quality educational programs for adults include developmentally supportive learning environments and a sequence of progressively more complex tasks.** A definition of quality that includes developmentally appropriate learning environments (those that support increasingly complex tasks over time) grounded in positive relationships may apply to programs that serve a range of populations (Smith et al. 2009). Learning environments and relationships matter for adults. For example, acquiring more complex skills through education and job training is associated with better economic security outcomes for adults (King et al. 2011; Zeidenberg et al. 2010). Peers and mentors can also help parents increase their economic education and employment as their social connections and networks grow (Shore and Shore 2009; Sommer et al. 2016b).

**Adult economic security services may prioritize education and training, employment, or both (Martinson and Holcomb 2007; Martinson et al. 2010); doing both together has research support and is a widely used approach with low-income populations.** Programs for adults that mix training, services and support, financial incentives, and access to employers are effective at improving job retention and advancement if they are implemented “in an environment where pressures to gain employment are strong” (Holzer and Martinson 2005). In general, programs that combine several employment and training strategies are a popular approach to serving low-income adults (Sama-Miller et al. 2016) and providing adults with multiple services at once can be effective at boosting employment and reducing receipt of public assistance (Vollmer et al. 2017). A simultaneous approach to education and employment may work best for adults if necessary additional supports are also offered. A welfare-to-work evaluation that compared interventions focused primarily on achieving employment to those that focused on skills development first found that neither approach was better at moving low-income adults into long-term earnings growth and employment stability (Hamilton 2002). However, the approach most effective at improving employment and earnings was a hybrid intervention (the Job Opportunities and Basic Skills [JOBS] program in Portland, Oregon) that focused on job readiness services along with education and training. Job readiness services in the program included structured job searches, resume workshops, and job developers who helped workers secure jobs that paid well, even if it meant waiting for the right opportunity. JOBS staff also offered additional supports: help with child care and transportation. Over time, the focus of economic security services for adults has varied from a strong emphasis on employment to a greater focus on education and training. Several recent anti-poverty policies for adults had a “work first” focus (Goldrick-Rab and Sorensen 2010; Shaw et al. 2006) that supported skills development only if job seekers could not become quickly employed with the skills they already had (Lee et al. 2015). Recently, instead of a “work first” focus, reauthorized Workforce Innovation and Opportunity Act (WIOA) legislation allows job seekers to work while developing their skills rather than sequencing services. WIOA also offers the possibility of additional services to young adults who are pregnant or parenting (Lee et al. 2015).

**Postsecondary education and job training are necessary to succeed in the 21st century economy, and some features of these programs show promise for supporting low-skill and low-income adult learners.** Education beyond high school or a General Education Development (GED) credential is necessary for the long-term economic security of workers (King et al. 2011; Achieve 2012). A recent analysis of the U.S. Department of Labor-sponsored Occupational Information Network (O\*NET) showed that most people with only a high school diploma work in fields with limited advancement opportunities (Achieve 2012). Postsecondary education and

attainment of credentials in high-demand fields can support a worker's labor market success (Hamilton 2002; Heinrich and Holzer 2011; Haskins et al. 2009; Jacobson et al. 2004). Some adults need more basic education first, though. Basic education programs serve people who lack a high school diploma or GED,<sup>3</sup> and they can satisfy prerequisites for later job training or postsecondary education (Strawn 1998). The strategy of mainstreaming, or placing students who need better basic literacy or mathematics skills directly into college-level courses and supporting them with tutoring or study skills courses has shown promise (Rutschow and Schneider 2012). Studies of postsecondary education for low-income adults tend to focus on community college (not four-year college) success. Community colleges often serve low-income adults, immigrants, and parents (Gault et al. 2014), and thus are highly relevant to this project. Research on postsecondary, mostly community college, education noted these quality features:

- **Contextualized learning is a promising strategy but more research on its effectiveness is needed.** Contextualized education helps underprepared students gain developmental skills quickly while they learn in their vocational field (Rutschow and Schneider 2012). A prominent strategy of this type is the Integrated Basic Education and Skills Training (I-BEST) program in Washington State. I-BEST allows low-skilled adults to enroll in technical and community colleges. It delivers integrated basic skills instruction, occupational training, and postsecondary instruction, all in an effort to help students improve their skills quickly and advance through their studies in a specific career sector. It also offers substantial financial aid. The credentials students earn can be “stacked”—that is, sequenced—to support career advancement (Glosser et al. 2014). A quasi-experimental study that compared I-BEST students to other students who enrolled in occupational education found a positive impact of I-BEST on both the number of credits earned and basic skills (Zeidenberg et al. 2010). However, researchers noted that I-BEST students had more financial aid than the comparison group, which may partially or fully explain the results because perhaps those students could better afford to stay enrolled longer.
- **Career pathway (or career ladder) programs, which may include contextualized learning (Fein 2012) could support career development, but more research is needed.** Programs that train entry-level workers in specific industries as part of a sector-based training strategy (King et al. 2011) can also support career development that leads to wage increases over time. Career pathway training may also incorporate elements of basic skills education when it is framed within the context of a specific career or sector, as I-BEST is (Wachen et al. 2010). This type of program shows promise in some moderate-wage fields in health and hospitality and in the “green” alternative energy and environmental sector (Martinson et al. 2010). Forthcoming evaluations of OPRE-funded Career Pathway programs, such as the [Pathways for Advancing Careers and Education project](#) and the [Health Profession Opportunity Grants](#), will provide additional information about program designs and their impacts.
- **Small learning communities were recommended but this strategy also needs more research.** A cohort of peers might support a community college student's learning (Edelman and Holzer 2013; Heinrich and Holzer 2011; Karp 2011; Sabol et al. 2015). Some

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<sup>3</sup> Basic education may take other forms, such as English as a Second Language (ESL) classes. With the literature review, we found no research defining quality in ESL or other forms of general education.

studies that tested the effectiveness of community college small learning communities found that they can improve students' enrollment and persistence (Bloom and Sommo 2005; Cho et al. 2012). But other well-designed effectiveness studies found no effect on course enrollment or completion, degree attainment, or labor market outcomes (Visher et al. 2012; Weiss et al. 2014). A synthesis of several well-designed studies of linked-learning communities, which are postsecondary education programs that link curriculum to a social offering such as a cohort of learners to help students integrate the themes and concepts they learn, found that those communities tended not to have very large effects on community college students enrolled in developmental education (What Works Clearinghouse 2014).

- **Financial aid may help students pursue their degree.** A series of well-implemented random assignment studies found that parents enrolled in community college had better enrollment and college persistence outcomes when offered a \$1,000 performance-based scholarship for two semesters than parents who were not offered the scholarship (Brock and Richburg-Hayes 2006; Richburg-Hayes et al. 2009, as reported by the Clearinghouse for Labor Evaluation and Research).
- **Professional development for instructors is recommended but it has not been rigorously tested.** A review of promising adult basic education programs noted that programs that provide basic or developmental adult education commonly offered professional development opportunities—such as team teaching—to faculty (Coffey and Smith 2011). In basic education programs, teachers' education and experiences are associated with better skill development for students (Hamilton 2002).

**To attain economic security for themselves and their families, adults need skills that prepare them for in-demand jobs and ways to connect with those jobs.** Developing skills that employers need can help entry-level employees improve their labor market outcomes, especially over the long term (King et al. 2011). Therefore, researchers recommend that programs that focus on skill development link educators to employers. This helps employers by appealing to the needs of their businesses, and future workers by considering their skills (Osterman 2014; Martinson et al. 2010). In a meta-analysis of welfare-to-work programs, Gorey (2009) found that a highly influential predictor of whether those programs “worked” was the availability of jobs in the local economy (availability of child care was also important). Promising efforts to connect workers to jobs include the following:

- **Workforce intermediaries can link employers and job seekers, but effectiveness research is limited.** Intermediaries collaborate with job seekers and employers alike to support workers' skill development and match them with jobs (Smith et al. 2007). (Another term for this is “industry partnership,” as in Conway and Giloth [2014]). Promising workforce intermediaries identify local high-need job sectors and broker relationships between employers with needs and institutions that are educating or training job seekers (Grobe et al. 2015). A community college can act as a workforce intermediary by shaping curricula to match the needs of local job markets and linking students to local employers for sector-focused training in a specific career pathway (Martinson et al. 2010; Grobe et al. 2015).
- **Sector-based training can place low-income adults in high-demand jobs.** Training for low-earning workers is most effective in increasing wages when it provides skills that match

the needs of the local private sector (Holzer and Martinson 2005). Preparing workers for the demands of a specific job sector can sometimes improve long-term earnings relative to people who do not have access to sector-based training (King et al. 2011; Maguire et al. 2010<sup>4</sup>). Credential programs may be valuable in the workplace, but they are not yet supported by effectiveness research. Local employment trends and real-time labor market information can point to opportunities for service providers to focus on high-growth job opportunities when developing training programs (Administration for Children and Families 2015b; King 2014).

**To help families maintain economic security, a high-quality program may offer families additional needed supports beyond direct economic security services.** Low-income adults who are trying to work and learn while juggling family responsibilities often need child care, support from case managers, and public benefits to maintain economic stability (Gorey 2009; Karp 2011; Hamilton 2002). Programs that offer these supports without education or employment services were not the focus of our project, but many programs within the scope of this project pair supports with employment or education services. Researchers noted several categories of support that may be especially important to offer to disadvantaged families with children.

- **Child care** availability may improve employment outcomes if jobs are available locally (Gorey 2009), and having on-site child care may help community college student-parents to balance their demands (Karp 2011).
- **Financial incentives and supports that are tied to employment**, if offered alongside other services to workers, can improve and stabilize employment outcomes (Holzer and Martinson 2005; Wissel and Borradaile 2016) but the impact of these strategies on employment outcomes may not be very large (Vollmer et al. 2017). In some prominent experiments, employment outcomes did not occur until well after the first year of program services (Hendra et al. 2010), which has implications for designing and timing the evaluation of such programs.
- **Public benefits** can help low-earning parents stretch their earnings to cover new expenses associated with learning and working (Hamilton 2002). Some initiatives can help clients apply for additional benefits and services for which they qualify (Martinson and Holcomb 2007). Online applications for benefits can help, but this approach has not been rigorously tested (Sama-Miller and Kauff 2011).
- **Supporting asset development**, such as through financial education and access to individual development accounts may help families build savings and protect against future financial setbacks (King et al. 2011; Martinson and Holcomb 2007). Early results from a randomized control trial of matched savings individual development accounts showed a seven percentage point increase in share of participants with liquid assets, a 34 percent

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<sup>4</sup> The Employment Strategies Evidence Review (<http://employmentstrategies.acf.hhs.gov/>) recently noted reservations about the validity of the findings in two of the three sites examined in this study because the sites had high attrition and the authors did not demonstrate that groups remaining in the analysis had a similar earnings history before those two programs began.

reduction in housing, health, and utility hardships, and a ten percent increase in participant confidence in ability to pay normal monthly expenses (Mills et al. 2016).

- **Personal social supports**—peers, mentors, and counselors—can support low-income working parents as they balance multiple demands (Shore and Shore 2009), and integrated programs that help parents build these networks of support might be more successful than programs that do not (Chase-Lansdale and Brooks-Gunn 2014; Sommer et al. 2016b), but more research on the effectiveness of this strategy is needed.

### Summary and limitations of research on quality economic security services for adults

Literature on quality economic security services for adults indicated that postsecondary education should support high-demand skills and that employment services are most promising when they point to a career path and are linked with education and training. Contextualized learning, small learning communities, and financial aid may also support students. Research, including effectiveness studies, has shown that skill development and additional supportive services are important to educational attainment and, sometimes, to future labor market outcomes. Even with strong education and employment services in place, families may need other services such as child care, public benefits, and a network of social support to help them persist in their educational and employment efforts.

Two gaps were evident in the literature we reviewed about economic security services for low-income adults:

- Although popular, case management as part of employment programs is not clearly effective and more research is needed. Some researchers have suggested case management is a useful support for job seekers when combined with other employment services (Martinson and Holcomb 2007; Heinrich and Holzer 2011). However, in a review of effectiveness research on employment and training programs, Barnow and Smith (2015) examined studies that tested the effectiveness of case management as a method of assigning job seekers to services. Relative to (1) assigning job seekers to services based on their background characteristics and (2) offering other workforce services alone, case management had no added effect on employment and earnings. (These researchers noted that few effectiveness studies of case management in workforce settings exist, and that case managers may help in other ways, such as linking clients to services and helping them understand their strengths and goals.) Additional research has indicated that coaching and other interventions may be effective in strengthening self-regulation and related skills, but there is much to learn about whether these skills contribute to employment outcomes and economic security (Cavadel et al. 2017). More research could reveal whether case management is an effective part of a group of services for certain subpopulations, and whether it can improve outcomes other than employment and earnings (such as goal-directed behavior and executive functioning).
- As noted, no research had rigorously tested career ladders and workforce intermediaries at the time of this literature review in early 2016,<sup>5</sup> although some researchers recommend these

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<sup>5</sup> More recently, research funded by OPRE has evaluated career ladder programs in the health sector. For more information, see <https://www.acf.hhs.gov/opre/research/project/health-profession-opportunity-grants-hpog-implementation-systems-and>



as promising practices. There is some limited effectiveness research to support sector-based training strategies, however.

**In summary, programs that aim to meet the needs of both children and parents will need to attend to the elements of quality services for both adults and children.** Doing so is especially important for contemporary programs because researchers think that insufficient quality of previous programs may be one reason those programs were not effective (Chase-Lansdale and Brooks-Gunn 2014). And, as we discuss in Chapter V, developing a program with sufficient quality will be an important step before programs are ready for effectiveness studies.

## 2. Intensity

Intensity refers to the strength of an intervention, including the dosage (amount offered or received at a point in time), and the duration. Some researchers consider the range of services being offered to also be a component of intensity (King et al. 2011; Heinrich and Holzer 2011; Morris and Kalil 2006). Intensity is an important concept to explore when attempting to understand programs aiming to serve both children and parents because the services offered to children and parents may be overlapping and concurrent rather than isolated and sequential. That is, the sequence of services to each generation of a family has implications for the overall intensity of services that the program offers. (Notably, the research about intensity that was identified in this literature review rarely discussed the intensity of services concurrently provided to parents and children.)

### a. Dosage and duration

Researchers have defined intensity in terms of both dosage and duration. Dosage refers to the amount of a service; such as the number of hours or days per week or month that services are offered or received (Zaslow et al. 2010). Duration is the period over which services are intended to be offered (Smith 2009) or the period over which they are received. Services with higher dosage and longer duration are said to have greater intensity (Barnett and Masse 2007). Researchers have noted that higher intensity is associated with “high quality” programs for children and adults (Zaslow et al. 2010; Rangarajan 2001; Hamilton 2002), which suggests that they believe intensity is important to service delivery. The summary below of dosage and duration research describes findings from correlational studies and researchers’ conclusions based on their descriptive and correlational research. Little evidence is available about the minimum or optimal dosage and duration of services to improve outcomes for young children and adults.

Participant engagement is also an important component of dosage and duration. Programs may offer services that participants do not fully use (Smith 2009; Smink 2007), so the intensity of services offered might not equal the intensity received. This is why measuring and evaluating implementation (as described in Chapter V) is an important aspect of program evaluation.

**Some high-dosage, long-duration early childhood education programs had positive impacts, but existing research does not prove that the levels of dosage or duration are the reasons for the impacts.** Widely cited examples of promising interventions that had favorable cognitive and behavioral effects for children in infancy through preschool, such as the Carolina Abecedarian Project and the Infant Health and Development Project, included care delivered for

7 to 10 hours per day throughout the week (Ramey and Ramey 2004; Barnett and Masse 2007; Duncan and Sojourner 2013). The services also covered a range of needs, addressing health, education, and family issues. The EHS program, which was designed to provide intensive center- or home-based services from pregnancy through age 3, has shown modest impacts immediately at the end of program participation (Love et al. 2005) and at prekindergarten (Chazan-Cohen et al. 2013), although impacts did not persist into 5th grade (Vogel et al. 2010). And, some research indicates that more preschool instruction time in a particular content area (such as mathematics) was associated with greater skills in that area, especially in classrooms that had higher quality instruction (Burchinal et al. 2016). However, the design of the studies does not allow researchers to separate the effects of dosage and duration from the range of services nor from the quality of those services.

Existing research does not prove that more time in early care and education directly and consistently improves outcomes for children. Some studies have examined the association between dosage and duration in early care and education and children's outcomes, and results suggest that intensity is associated with better cognitive and academic outcomes for children (Ramey et al. 2009; Reynolds et al. 2014; Arteaga et al. 2014; Yazejian et al. 2015; Burchinal et al. 2016). However, these studies involved different variations in dosage and duration (such as full day, full year, and multiple years). They also were correlational studies that could not prove (and were not designed to prove) that program dosage alone caused the difference in children's outcomes that researchers observed. Measuring the effect of the "dose" of care received is also complicated because dosage measurement is often confounded with the developmental age at which children enter care (NICHD ECCRN 2003). Intensity may be associated with better academic outcomes but not with better outcomes of other types. A literature review explored the complexities of dosage and concluded that higher dosage and duration of high quality early care and education is associated with better academic achievement for children, but also with possibly unfavorable outcomes such as behavioral problems and low social skills (Zaslow et al. 2010).

**For elementary-age children, there is some evidence to support a dosage threshold for OST programs but more research is needed to understand the ideal duration.** A recent literature review suggested that students who attend more hours of OST programs acquire greater benefits from those programs than students who attended less frequently (McComb and Scott-Little 2003, as cited in Lauer et al. 2006). Lauer and colleagues conducted a meta-analysis of impact studies on 35 OST programs, including summer learning programs and after-school programs. The study examined the duration of those programs in a moderator analysis that aimed to learn what was associated with different outcomes for various OST programs. It identified that effective programs delivered at least 45 hours of services in total, but also noted that programs longer than that threshold did not always have more positive outcomes (Lauer et al. 2006). Lauer and colleagues suggested that program administrators should carefully consider whether to maximize duration, inasmuch as offering more than 45 hours of programming may not be appropriate for all content areas. The meta-analysis compared the effectiveness of several OST programs of differing durations, but the individual evaluations included in the meta-analysis did not aim to test the effectiveness of differing durations, and research that does so is needed.

**Adults with low skill and education levels might need a longer service duration—which may include several components (such as education and career management)—to help them prepare for, obtain, and sustain jobs that lead to economic security.** (Rangarajan 2001;

Meckstroth et al. 2009; Babcock 2014). Some programs that offer job readiness services for two months or less have successfully linked low-income adults with employment (Freedman 2000; Freedman et al. 2000a; Freedman et al. 2000b), but these programs had other services (such as case management and referrals to vocational training) and requirements (such as financial sanctions for clients who did not actively participate). Although these programs linked people to employment, it is not clear whether the jobs offered career paths and paid wages that support family economic security. Preparing adults for family-supporting jobs typically takes much longer than a few months. Skill development programs sometimes have a set duration linked to academic or credentialing requirements. For instance, many associate degree programs require more than 60 credit hours (Johnson et al. 2012), a daunting commitment for some people. Only 39 percent of students who enroll in community colleges graduate within six years (Shapiro et al. 2014). Every non-degree credentialing program has requirements for the level at which someone must participate in training in order to earn a credential. For example, a CDA credential, which is often recommended to clients of workforce development programs, requires at least 120 hours of formal education and 480 hours of classroom experience with young children (Council for Professional Recognition n.d.). A descriptive study of *CareerAdvance*®, a program that integrates services for children and parents, found that within 16 months of starting the program, 76 percent of parents had obtained at least one credential in the health field, but noted that reaching the highest rungs of these credentialing ladders (such as a nursing degree) could require three to four years of training for parents who often need to take breaks between stages of career training because of work or to attend to family needs (Sabol et al. 2015).

#### b. Range of services

Some integrated programs offer only one service to each generation; others offer several services at once or in sequence. In the literature we identified for this review, researchers discussed the range of services as a component of intensity in services to each age group.

**Early childhood education programs described as intensive were comprehensive (offering several services) and had a long duration, as well as other features; when such programs had effects, it is not clear what part of the program was the cause.** For example, programs such as Abecedarian and Infant Health and Development Project had trained staff to promote children's cognitive and social development. The programs also offered other services—such as home visits, transportation, support groups for parents, counseling, case management, and basic health care—in addition to center-based early childhood education (Ramey and Ramey 2004; Barnett and Masse 2007; Duncan and Sojourner 2013). The Comprehensive Child Development Program offered a case manager to help families connect with a range of supporting services as well as early childhood education, from birth through age 3, and support for kindergarten entry (St. Pierre et al. 1997). Early Head Start provides child development services, supports the building of family and community partnerships, and supports staff to deliver high-quality services. Children who experienced Early Head Start followed by formal early childhood education experience (center-based child care, state prekindergarten, or Head Start) tended to have the best overall outcomes (Administration for Children and Families 2006). The program has modest impacts at ages 2, 3, and 5 on a range of parent, child, and family economic security outcomes, and has broader and stronger impacts when programs are implemented with fidelity to quality standards, although the broad pattern of impacts is not sustained by the time children reach 5th grade (Vogel et al. 2010).

**Limited research suggests that a range of OST programs, if they are structured, may improve academic achievement of low-income school-age children.** A study of Canadian families who received public assistance examined outcomes among their children who enrolled in up to three types of structured activities (sports, lessons, and clubs). The study found that participation in a combination of the three was associated with better school achievement and social behavior for students than outcomes for students who did not participate in any structured activities, even after statistically controlling for family characteristics (Morris and Kalil 2006).

**Economic security services for adults may be most effective if they offer high-dosage, long-duration education or training coupled with individualized services, mentoring, or other forms of support** (Heinrich and Holzer 2011; Grubb 2001), although the literature reviews drawing these conclusions do not clearly define thresholds for “high” or “long.” From case study research, a recommended practice in sector-based employment programs is making substantial investments in clients through such strategies as long training periods and high levels of support through financial assistance and counseling, as well as more involvement with employers (Osterman 2014).

**Integrated programs may be more likely to improve outcomes for adults and children if they offer services of appropriate dosage and duration to both generations, but the right mix of services is undefined in the literature.** For programs that aim to address the needs of parents and children, intensive services will, by definition, include programming for both parents and children, but there is little research regarding what combinations might be effective. Earlier programs tended to provide more intensive services to one generation than to the other. For example, Comprehensive Child Development Program offered ongoing case management to families from their children’s birth until kindergarten entry to help the families connect to social services, as well as child development and health services, health and economic security services to parents, and parenting education. The program had no effects on parents and children. Evaluators concluded that one possible reason was that quality and intensity of individual services might have been insufficient (St. Pierre et al. 1997). Some contemporary programs are offering intensive services, but effectiveness studies on such programs are not yet available.

### **c. Engagement or take-up: services offered versus services received**

In general, programs might aim to provide more intensive services than participants actually receive, often due to limited engagement by the participants or to differences between the intended model and actual service delivery (Smith 2009; Smink 2007; Wasik et al. 2013). This will likely also be true for programs that combine services for parents and children. Even if one program successfully engages participants, sustaining that engagement is a key implementation challenge when replicating and scaling up promising programs (Supplee and Metz 2015). Successfully engaging participants in services is vital for delivering services with the intended intensity. Yet, low-income adults and families who participate in programs often do not receive the intended dosage of program services. This has been observed in career ladder programs (Osterman 2014; Haskins et al. 2009) and early childhood and parenting support programs aimed at low-income families (Hsueh and Farrell 2012; Caronongan et al. 2014; Boller et al. 2013).

**To know whether participants are engaging with services, program administrators can regularly monitor and evaluate the intensity of services they offer and ascertain whether clients receive some or all services.** Implementation (also called process or formative)

evaluation is important to understanding what services are actually offered; the level of participation by clients and their satisfaction with services; challenges to participating; and ideas about ways the program could be improved (Rossi et al. 2003; Smith 2009). Program developers can support program implementers by offering data-driven feedback as a program is scaled up; a continuous improvement cycle can identify participation and engagement challenges early so that they can be addressed in a timely fashion (Supplee and Metz 2015).

**For programs that combine services for parents and children, two promising engagement strategies are ongoing support for parents and collaboration among service providers.** Both strategies involve developing relationships between staff and parents and adjusting programs for adults and children in response to family needs. A qualitative study of a contemporary program included several in-depth interviews with parents, and the results suggest that offering parents coaching and peer support could boost engagement among the parents and their children in services to each generation (Sommer et al. 2015). Researchers who have examined several integrated programs have suggested that offering a range of program elements supported by collaboration among service providers (which we will discuss in the next section) may be important to engagement (King et al. 2011).

This review of the literature suggests that intensive services are important for programs that seek to improve low-income families' economic security and their children's well-being. That has important implications for program planning and evaluation, as we will discuss later in this report. For example, research suggests that it is difficult to intensively provide many services concurrently to both generations while still maintaining quality (St. Pierre et al. 1997; Hsueh and Farrell 2012). Intensive programming also has resource implications: achieving higher engagement rates requires relatively more resources (Hamilton 2002), and serving clients for longer durations requires more staff and funds, which are often limited. The ideal dosage, duration, and range of program services are important to consider in future rigorous research. Finally, the likely need for longer education and training services for parents has implications for evaluation planning. Job seekers who focus first on education and training might have relatively low earnings initially and then may "catch up" to or surpass the earnings level of similar people who were served by "work first" programs, but the catch-up process could take two to three years after finishing a program (Smith et al. 2007; Card et al. 2015). Therefore, evaluations will probably have to examine longer-term outcomes to capture the full effect of an intensive program.

### 3. Intentionality

Intentional programs aimed at meeting the needs of both parents and children invest purposively and deliberately link services for both generations (Chase-Lansdale and Brooks-Gunn 2014; King et al. 2011). "Intentionality" in combining services for children and parents has not been well defined or rigorously tested, but likely depends on aligning the efforts of stakeholders that traditionally focused on one generation. Contemporary programs (Chapter III) may combine providers from early childhood education, housing, community colleges, and workforce development. Stakeholders may come from different departments within an organization or from several organizations.

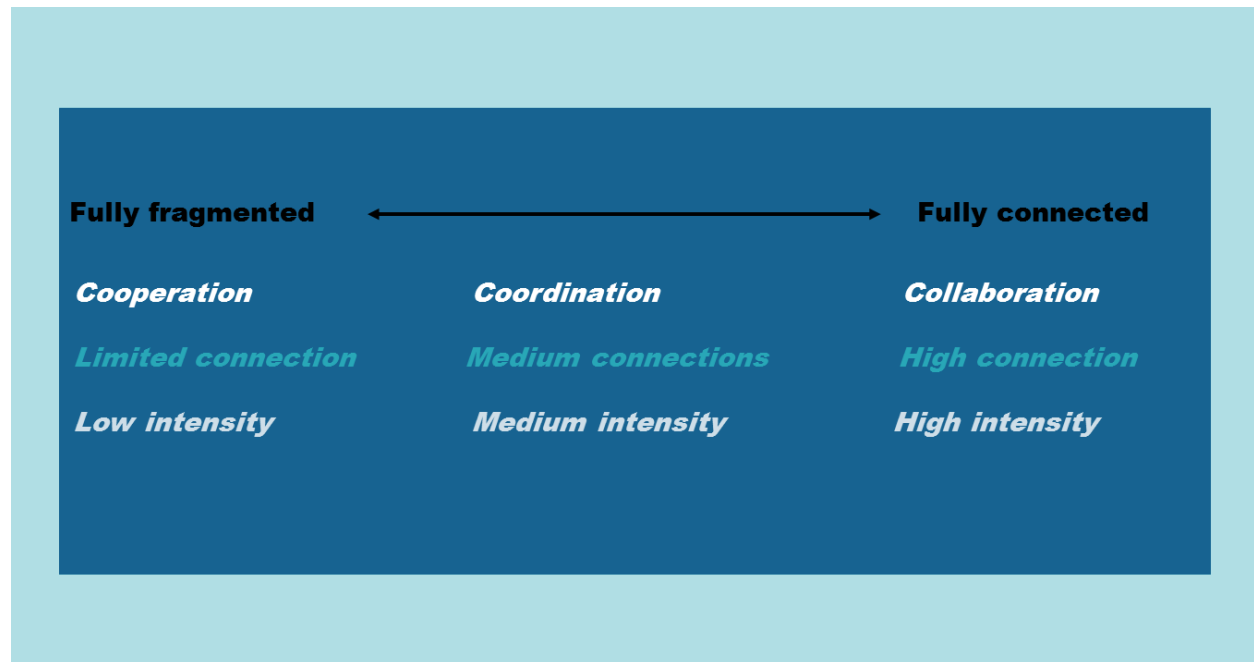
**a. Typologies of stakeholder collaboration can inform work with integrated programs for parents and children**

No research-based definition yet exists for intentional service delivery in integrated programs for parents and children. Therefore, typologies from both the business and public management fields that describe relationships among several stakeholders serve as a useful reference point. We identified two typologies of collaboration among stakeholders, each of which has dimensions relevant to partnership frameworks. In each typology, stakeholder relationships on each of several dimensions can be described by their location along a continuum, such as level of engagement or connection (low to high) or scope of activities (narrow to broad).

Keast and colleagues (2007) (Figure II.1) defined stages of deepening engagement in partnerships. Their typology (which they call a horizontal integration continuum) indicates that partnering relationships evolve from cooperation to coordination and then collaboration. Collaboration among program partners is likely to have many dimensions, including several not defined in the Keast et al. framework. Therefore, different labels for and dimensions of collaboration must be defined for understanding program intentionality.

Austin and Seitanidi (2012) listed several dimensions that shape the stage of engagement a partnership has attained. Their typology (which they term the collaboration continuum) originated in research about business and nonprofit collaboration, and illustrates how movement along 14 dimensions is important as partnerships develop. Some dimensions (Figure II.2) correspond to themes that arose from literature about programs that serve both parents and children and the partnerships that support them. Other dimensions are less relevant to this context than to a business setting. The terminology used for the stages along this continuum (philanthropic, transactional, and integrative) might not be intuitive labels for the phases of program collaboration, but they are roughly equivalent in intent to the cooperation, coordination, and collaboration stages defined by Keast and colleagues (2007). For this project, the two typologies became the foundation of the conceptual framework for program partnerships to support family economic security and child development and well-being, which we present in Chapter IV of this report.

Figure II.1. Horizontal integration continuum



Source: Keast et al. (2007).

Figure II.2. Selected dimensions of the collaboration continuum

| Dimensions of relationship   | Stage I     | Stage II | Stage III             |
|------------------------------|-------------|----------|-----------------------|
| Level of engagement          | Low         | ← →      | High                  |
| Importance to mission        | Peripheral  | ← →      | Central               |
| Resources: magnitude/type    | Small/money | ← →      | Big/core competencies |
| Scope of activities          | Narrow      | ← →      | Broad                 |
| Co-creation of value/synergy | Sole/seldom | ← →      | Conjoined/predominant |
| Innovation                   | Seldom      | ← →      | Frequent              |
| External system change       | Rare        | ← →      | Common                |

Source: Austin and Seitanidi (2012).

Note: The last two dimensions listed here, innovation and external system change, were not discussed in the literature we reviewed, but were noted as important themes during our field work for the current project. Therefore, this project’s conceptual framework for program partnership development to meet the needs of both parents and children (see Chapter IV) includes these dimensions, and we list them here to show the linkage of theory to implementation in the field.

**b. Intentional program partnerships could have dimensions similar to these typologies**

Several dimensions of partnership defined in the collaboration continuum (Austin and Seitanidi 2012) align to themes from the literature review of how programs rely on partnerships to deliver services intentionally to both parents and children. These dimensions are: engagement,

mission, resources, and creating value. The scope of activities was important to partnerships in this framework, and is also relevant to whole-family programs. We discussed earlier in this chapter the range of services (the section on intensity). Importantly, measures of intentionality (including collaboration) exist but are not well developed, and have rarely been tested in the early care and education field (Chien et al. 2013). This will be an important consideration in the later discussion (Chapter V) of the evaluability of programs that aim to meet the needs of both children and parents.

**Engagement: Researchers have suggested that for a program to be successful, closer attention to serving both parents and children is important; this may require engaging with partners to deliver services.** Evaluations of earlier integrated programs suggested that not serving both generations intentionally might have been a reason for their limited impacts (St. Pierre et al. 1997; Hsueh and Farrell 2012). Therefore, funders and researchers hypothesize, more intentional concurrent delivery of services to parents and children is crucial for modern programs (Chase-Lansdale and Brooks-Gunn 2014; Annie E. Casey Foundation 2013; King et al. 2011; Mosle et al. 2014). Deeper engagement among partners can build knowledge, trust, and transparency, and can create intrinsic value for the partners as they work together to deliver a product (Austin and Seitanidi 2012).

**Mission: The mission of a program that aims to address the needs of parents and children together should identify benefits of the program for both parents and children.** When the missions of different partners align, they can develop deeper relationships (Austin and Seitanidi 2012). Deeper relationships may require jointly agreeing on an action plan, and perhaps having partners who are formally working to change a system in which all organizations are involved (Keast et al. 2007). Therefore, a mission that is relevant to parents and children could support deeper relationships among organizations that serve each generation. This might be the mission of a single organization that serves both generations or a mission that several partners commit to pursue together for both generations. A mission that focuses on intentional implementation could state how policy intent will translate into outcomes for parents and children through goal setting (Mosle et al. 2014).

**Resources: Intentional collaboration requires resources, perhaps from many sources, and that can pose a challenge.** Resources can include money, space, or staff; each partner may have some or all of these to devote to services for parents, children, and families. Researchers and stakeholders attuned to the integrated approaches that are developing today have noted that aligning funding streams may help (Mosle et al. 2014; Sommer et al. 2016b). However, the different sources of public and philanthropic funding that might support these approaches have varied grant schedules, reporting requirements, and regulations, and this can make aligning funding streams challenging (King et al. 2011; Annie E. Casey Foundation 2013).

**Creating value: Collaboration among programs and staff with a range of expertise can create value for children and parents in new ways.** New value for families might be created as partners bring their varied expertise together to pursue a common goal for both generations, perhaps creating new programs and opportunities together. Committed, goal-oriented staff and organizations might recognize that no single agency or person can meet a family's complex needs (Anderson-Butcher and Ashton 2004). Individual or agency expertise may focus on one generation, and such an agency might have to borrow strength from partners. Partners may also



help address practical concerns. Even arranging the schedule of services for each generation to complement the needs of the other can be difficult: existing programs for young children tend to be part-day or part-year, yet parents pursuing education and employment might need child care for full days and throughout the year (King et al. 2011). Parents might need several care providers to meet their need for coverage that matches their training or work schedule (Adams et al. 2015; Kisker and Ross 1997; Ross and Paulsell 1998; Sandstrom and Chaudry 2012), including care at nontraditional times, such as evening hours and on days when a child is sick. Intentional partnerships might have synergy or the ability to create a whole package of services that is greater than the sum of its parts. The “virtuous cycle” of collaboration occurs when partners see how working together helps each side succeed and how the partnership can create “an entirely new constellation” of possibilities that increases the value of their efforts (Austin and Seitanidi 2012). Literature we reviewed for this project rarely identified examples of programs characterized by intensely collaborative partnerships. This may be related to the fact that many are too new to have research available about them, and they might also be too new to have yet developed these deep partnerships.

### c. **Intentional partnerships may benefit from time and committed leadership**

Two important considerations for intentional program collaboration seem to be strong leadership and time. Rather than being dimensions on a collaboration continuum, these supportive features, research suggests, might help partnerships develop along the dimensions mentioned above.

**Programs may require committed leaders to support intentional program collaboration.** As collaborations among partners become more involved, they also become more complex, so managerial and leadership effort is needed to sustain the partnerships (Austin and Seitanidi 2012). The Comprehensive Child Development Program delivered disappointing impacts except at one site; the experience of the successful site could be related to strong leadership that fostered collaboration among partners (St. Pierre et al. 1997).<sup>6</sup> Program leaders in the local school district were notably unconcerned about protecting “turf.” They devoted substantial time to understanding one another’s organizations and developing relationships. Successful networks that cross agency boundaries to address complex problems often have a champion who organizes and sustains a network of stakeholders, plus core leadership staff who support the network, and core technical staff who have content expertise (Agranoff 2006).

**With time, intentional relationships might deepen.** The services of a fully connected collaborative partnership will be more interdependent than those of a cooperative partnership (Keast et al. 2007). But developing a collaborative partnership among program providers may require time. St. Pierre and Layzer (1999) noted that investing the time to develop a partnership might have contributed to the relative success of an early effort to serve both children and families. No research was available about the minimum intensity (dosage or duration) of time required to build an intentional partnership for delivering services to parents, children and families.

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<sup>6</sup> Other possible reasons the research team offered included the location of the program, mutual respect, and low turnover among staff, as well as the intensity of program exposure for families.

### C. Conclusion

Contemporary researchers and the results of prior studies have suggested that quality, intensity, and intentionality matter in programs that aim to address the needs of both children and parents. This review identified some useful information about definitions of quality and intensity, but intentionality was less well-defined. Moreover, information on how contemporary programs approach the two generations intentionally was limited.

The literature review revealed no clear thresholds for quality and intensity in services to either generation, although it did point to promising features and measures that may be helpful for developing integrated programs that serve both children and parents. As research on quality and intensity of services to either generation develops, integrated programs will benefit from information about the findings of that research and applying it. Importantly, information on how modern integrated programs address quality and intensity in their services was limited.

Intentionality still lacks a clear definition and dimensions for programs that combine services for children with services for parents. No typology of intentional programs to serve the needs of parents and children simultaneously existed in the literature we reviewed for this project, nor had researchers clearly indicated the dimensions that matter when developing intentional programming to serve both children and parents. Concepts from the business, public administration, and social work literature as well as studies of integrated programs for parents and children may be building blocks in the early understanding of intentionality. For instance, partnership may be understood along a continuum (from cooperation to coordination and then collaboration) and the partnership might have many dimensions that are relevant to integrated programs (such as engagement, mission, resources, scope of activities, and co-creation of value.) More work in this area is needed. (Drawing from the theories identified in the literature review, our team developed a pair of conceptual frameworks for this project for how programs can serve children, parents, and families and how stakeholders can work together to provide those services, as described in Chapter IV.)

Other activities within this project built on the information from our literature review. After reading existing research and developing a catalog of existing programs that combine services for children with services for parents, the team undertook field work with selected programs to understand the contexts that service providers actually face (Chapter III). This gave us a chance to ask preliminary questions about the quality, intensity, and intentionality of programs that aim to meet the needs of both parents and children. The literature review and field work helped us develop the conceptual frameworks in Chapter IV, as well as contributing information to help the team assess opportunities for future evaluation (Chapter V). The latter offers a typology of partnerships and dimensions of the partnership in an effort to fill the gap in discussing intentionality in integrated programs that we identified with the literature search. The team refined the framework based on field work observations, and we used it to guide the evaluability assessment. Each of these steps and the relationship among them are discussed in later chapters.

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### III. FEATURES OF CONTEMPORARY PROGRAMS AIMED AT ACHIEVING FAMILY ECONOMIC SECURITY AND CHILD WELL-BEING

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In this chapter, we present the results of an environmental scan—a targeted review of publicly available documents and literature—to identify currently operating programs in the U.S. that serve families by offering services to support adult economic security and children’s well-being. The scan addressed one of this project’s research objectives: identifying and describing programs currently in operation. We explored the types of services offered to help improve the economic security of adults and their families and to support the healthy development and well-being of children 12 and under. Once we identified the programs, we examined dimensions along which to categorize the services, including the types of services provided to adults and children, the extent to which these services were coordinated and aligned, and the target populations served. We also reviewed the types of infrastructure used (including policies and funding streams) to support established and developing programs.

As the scan findings show, programs that focus on addressing the needs of children and their parents together are evolving and emerging from a wide variety of sources. The findings reflect a field in the early stages of development, experimenting with ways to engage families to improve their economic stability and advance their children’s development. We provide in this chapter a snapshot of a dynamic field and the breadth of these programs. (A companion brief summarizing these findings was released separately.)

#### A. Methods

The environmental scan began with two key activities: reviewing multiple sources to develop a broad list of all programs that focus on addressing the needs of children and parents together, and then screening the list in two stages to narrow it to only those that aimed to improve family economic security and support the development and well-being of children 12 and under.

##### 1. Identifying programs for the scan

The research team conducted a targeted review of sources that described current programs that aim to meet the needs of children and parents together. Sources included (1) federal program grantees that support both family economic security and children’s development and well-being, (2) websites of foundations that fund these programs, (3) membership lists of groups that support “two-generation” programs and/or policies, and (4) lists of programs identified through other Mathematica projects.<sup>7</sup> Table III.1 provides a full list of these sources.

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<sup>7</sup> Additional grant programs have started since we ended the environmental scan activities. They include the Department of Labor’s Strengthening Working Families Initiative, which is supporting 14 grantees to establish partnerships to enhance parents’ economic prospects and access high quality child care, and the Parents and Children Thriving Together: Two Generation State Policy Network, a technical assistance and peer learning initiative to develop state-directed programs serving whole families, led by the Annie E. Casey Foundation, the Center for Law and Social Policy, and the National Governors Association. We did not review programs that were part of these initiatives because they were not established at the time we conducted the scan.

Table III.1. Sources reviewed to identify programs that aim to meet the needs of parents and children together

| Source reviewed   |
|---|
| <p><b>Federal grant programs</b></p> <ul style="list-style-type: none"> <li>• White House Rural IMPACT demonstration grants</li> <li>• Pathways for Advancing Careers and Education (PACE)*</li> <li>• Head Start University Partnership Dual Generation Approaches*</li> <li>• Health Profession Opportunity Grants*</li> <li>• Office of Family Assistance Systems to Family Stability National Policy Academy sites*</li> <li>• Subsidized and Transitional Employment Demonstration*</li> </ul> <p><b>Foundations that fund programs</b></p> <ul style="list-style-type: none"> <li>• Annie E. Casey Foundation</li> <li>• W.K. Kellogg Foundation</li> </ul> <p><b>Groups that support integrated programs for parents and children and/or “two-generation” policies</b></p> <ul style="list-style-type: none"> <li>• Ascend Network at the Aspen Institute</li> <li>• Ray Marshall Center for the Study of Human Resources</li> <li>• National Head Start Association</li> <li>• Northwestern University’s Institute for Policy Research</li> </ul> <p><b>Other Mathematica projects</b></p> <ul style="list-style-type: none"> <li>• Goals-Oriented Adult Learning in Self-Sufficiency*</li> <li>• Home Visiting Evidence of Effectiveness Systematic Review*</li> <li>• Implementation and Outcomes Evaluation of the Working Families Success Network</li> <li>• Promise Neighborhoods Design Study</li> </ul> |

Note: An asterisk indicates a project ACF sponsors.

The research team conducted two additional activities to ensure that the list of programs was as comprehensive as possible. First, we put out a call to colleagues in human services fields to ask for recommendations of programs with which they were familiar. Second, we reviewed all foundational literature and literature identified through the online database search (described in Chapter II) for names of additional programs. We identified 157 programs through the review of sources and additional activities.

## 2. Screening programs

We screened programs in two stages to assess whether they fit our criteria. To be included in the first stage, a program had to be active in the U.S. as of January 2016 and have a website or public documents to review. This stage removed some demonstration programs no longer in operation, such as the Evanston Two-Generation Pilot; efforts that were in the process of planning their implementation, such as several of the White House Rural IMPACT Demonstration sites; and programs from outside the U.S. that the online database scan had identified.<sup>8</sup> The first stage of screening removed 38 programs from consideration.

In the second stage, we created a set of inclusion criteria to examine whether programs matched our project’s focus on family economic security. The criteria were as follows:

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<sup>8</sup> We included literature on the effectiveness of programs outside the U.S. (for example, Benzies et al. 2014) in our discussions of research questions 2 and 3, but specific international programs evaluated in that literature were not eligible for inclusion in the scan.

- **Programs provided services for adults and for children younger than age 12.** Services could be provided by a single organization or through partnerships between organizations.<sup>9</sup>
- **Adult and child services were coordinated for families.** Programs expected both parents and children from the same family to participate in services and that some baseline level of cooperation, coordination, or collaboration occurred between the services for each generation.
- **Adult services focused on economic security.** Examples of economic security services included adult basic education, postsecondary education, career interest and exploration, workforce training, occupational credentialing, and job placement. Programs could also provide other related services, such as financial literacy or parenting education, but these were not the focus of the scan. We excluded programs whose adult services focused solely on changing behaviors or developing “non-cognitive” or “psychosocial” skills, because those outcomes are outside of the economic security focus of this project.
- **Child services emphasized child well-being.** We considered a wide variety of child services, from Head Start and prekindergarten to services aimed at creating a safe and stimulating home environment, such as home visiting programs. We excluded programs if the extent of their child services was to provide daycare while parents were engaged in other services, or to provide parents with referrals to area child care providers. OST services provided to school-aged children after school or during summer breaks were included in the scan. (The quality of classroom instruction for school-aged children is important, but it was not a criterion for inclusion because it is not within ACF programs’ purview.)

The second stage of screening was an iterative process and proceeded in concert with investigation of other research questions. We kept and regularly revisited a list of programs that did not pass our project inclusion criteria as we worked with OPRE to clarify the range of child outcomes and intensity of coordination and collaboration among agencies necessary for inclusion. Programs that had been screened out due to lack of publicly available information were re-included if OPRE or other experts were able to provide enough information for us to draft a profile. The second stage of screening removed an additional 67 from consideration.

We used the information we gathered on the 52 programs (which we describe in the remainder of this chapter and list in Appendix B) to select 6 sites for in-depth follow up. Lessons from this follow-up inform our conceptual framework (Chapter IV) and evaluability assessment (Chapter V). At four sites, we led site visits and conducted interviews with administrators, direct service staff, and key informants from partner organizations. At two of these four sites, we held focus groups with adult program participants, and we held a brief discussion with participants at a third program. We conducted in-depth phone interviews with lead staff from two additional programs. More information on the methodology of site selection, and detailed profiles of the four sites we visited, are in Appendix C.

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<sup>9</sup> Partner organizations had to indicate through public documents that they cooperated to serve clients and that families were expected to receive services through both organizations. Organizations that only referred clients to one another were not considered partners for this criterion.

## B. Features of programs with integrated approaches to supporting child development and improving family economic security

In this section, we describe the features of the 52 programs that met inclusion criteria for investigation of public documentation. These features include program origins and target populations, adult services, services for children, service coordination and alignment, and funding.

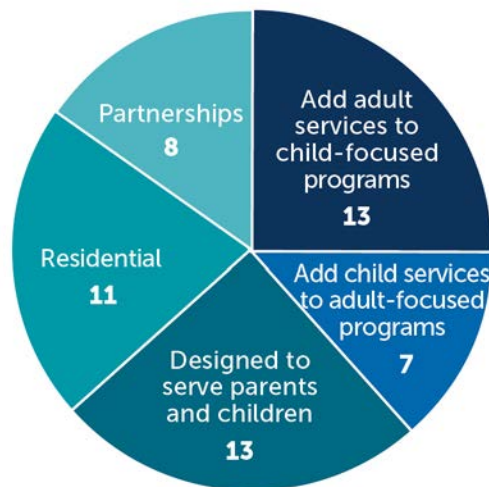
### 1. Programs that intentionally combine services for parents and children were developed to address specific, emerging needs of their target populations

Programs can be grouped into five categories based on how they began serving children and families (Figure III.1):

1. **Added new or additional adult services.** In 13 of 52 programs (25 percent), child-focused programs developed adult programming in order to serve the whole family. For example, the Family Self-Sufficiency Program in Tallahassee, Florida, added adult education and workforce development to its early childhood programs because the staff observed that some families had multiple generations of Head Start participants—a sign of persistent, intergenerational poverty. All but 2 of these programs provided Head Start as their primary child-focused service, and all but 4 added both adult education and workforce development services.
2. **Added child services.** Seven programs (13 percent) added child services to adult-focused programs. Finding child care is a common challenge for individuals who seek to improve their economic security (Bird et al. 2014). All but one of these programs added center-based early childhood education, such as preschool and infant and toddler care, to alleviate this barrier. For example, in 2014, Family and Workforce Centers of America, in St. Louis, Missouri, opened the Early Explorers Child Development Academy to address the child care needs of all of parents attending its workforce education and training programs. (No adult-focused programs added Head Start as part of their approach.)
3. **Originally designed to serve parents and children.** Thirteen of the programs (25 percent) included services for both parents and their children in their initial set of service offerings. Three of them were sponsored by government agencies and five were run by large, multiservice community-based organizations. Avance, for example, has operated the Parent Child Education Program in various locations throughout the Southwest for more than 40 years. Parents and children in the Parent Child Education Program each participated in weekly classes and monthly home visits for nine months to develop educational skills and a social support network.
4. **Residential.** Eleven programs (21 percent) served families by providing housing and supportive services for single mothers and their children. With one exception, residential programs were located on or near college campuses and required residents to be enrolled in college.
5. **Partnerships.** Eight programs (15 percent) operated as close partnerships between two organizations with complementary goals and service populations (for example, one organization serving adults and the other serving children). Five of these partnerships were designed to address intergenerational poverty and low academic achievement in their

communities. Three of the “place-based initiatives” were sponsored by the Annie E. Casey Foundation; the other two were part of federally designated areas—Promise Neighborhoods and Promise Zones—targeted for large federal investments of resources and comprehensive wraparound services. These programs provided family case management to coordinate existing workforce development programs with existing early childhood and elementary education providers in their communities. Three of these eight partnerships included clinics pairing with a Head Start program or a charter school, or a Head Start program partnering with a workforce development program. While these partnerships resulted in new programs, their component services were ones that existed previously in their communities.

Figure III.1. Backgrounds of programs



Source: Program documents and public websites.

Note: N = 52

A key consideration in planning future services and program evaluations is the length of time that programs have been in operation and the extent to which their models were established. Most programs were in the early stages of development in early 2016. Nearly half (21 programs) were pilots or had offered services for adults and children for only a few years at that time. Fewer than one-fifth (9 programs) examined had scaled up or expanded their programs. Only 2 programs had progressed to the point of participating in an outcomes evaluation (we describe them further in Chapter V).

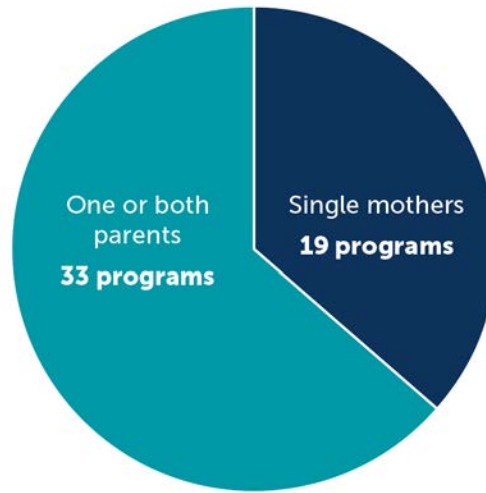
Regardless of origin, programs in our scan were designed to serve low-income and disadvantaged families. Programs used different determinations to define their target population. More than half had eligibility guidelines, including 21 Early Head Start (EHS) and Head Start programs, programs that served families who were eligible for TANF, and one that targeted residents of an income-targeted housing development.<sup>10</sup> Other programs served families living in

<sup>10</sup> Criteria other than family household income and age of the child are used in determining Early Head Start and Head Start eligibility. For example, homeless children, children in the foster care system, and children from families receiving public assistance (including TANF and Supplemental Security Income disability) are eligible for Early

economically disadvantaged communities. Forty-six programs (88 percent) were in cities or served an urban center and its surrounding suburbs.

Though most programs were open to two-parent families, services for mothers were more common than those for fathers (Figure III.2). About 19 programs (37 percent) served single mothers exclusively. No program focused services exclusively on single fathers with either custodial or non-custodial children.

Figure III.2. Types of families served



Source: Program documents and public websites.

Note: n = 52.

No program was designed for single fathers.

The nature of adult services offered was influenced by the populations served. For example, the College Access and Success program, in Manhattan, New York, and Briya Public Charter School, in Washington, DC, had well-established adult English as a Second Language (ESL) programs and tended to serve large proportions of immigrants. Residential programs tended to serve only single mothers because they did not have living quarters available for men.

We included in the scan only programs that served children 12 and under (Figure III.3). Most targeted children 5 years old or younger. Forty-four programs (88 percent) served children from birth to age 3, and 38 programs (72 percent) served 4- and 5-year-olds. Eighteen programs (35 percent) served older children and adolescents, generally through afterschool programming or summer camps. No program exclusively served families with children older than 5 years old but combined services for older children with early childhood services. Programs tended to serve

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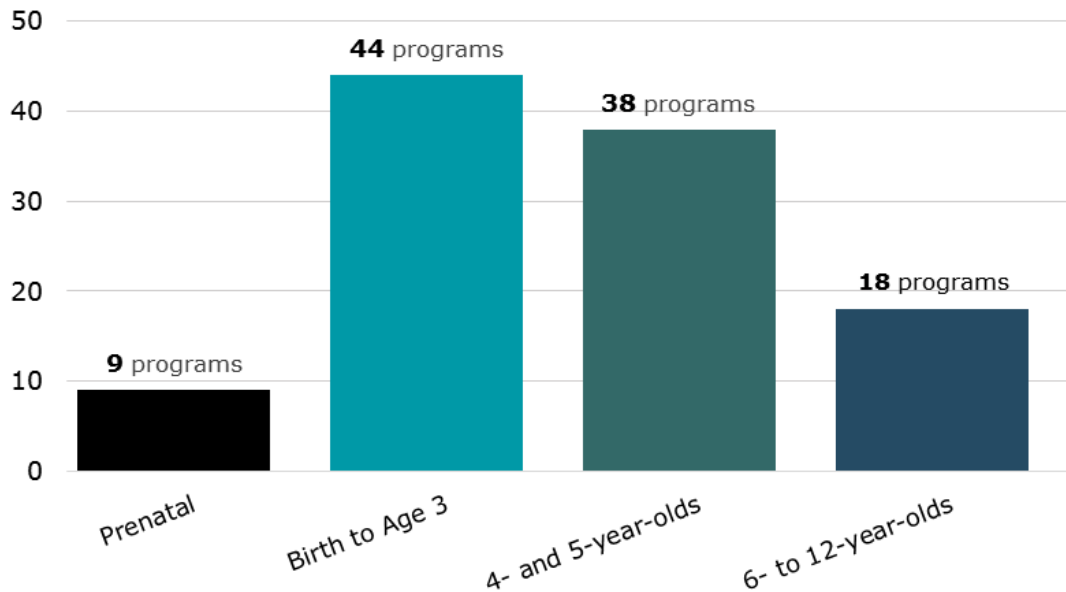
Head Start and Head Start. Programs may also enroll a proportion of children whose families make more than the federal poverty level. Pregnant women may qualify for Early Head Start. Eligibility for TANF benefits is set at the state or local level.

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multiple age ranges. Thirty-four programs served children from birth to age 5, and 17 programs served children from birth through age 12.

Figure III.3. Ages of children served



Source: Program documents and public websites.

Note: n = 52.

Categories sum to more than 52 programs because many programs served multiple age ranges.

## 2. Adult economic security services focused on employment training and education

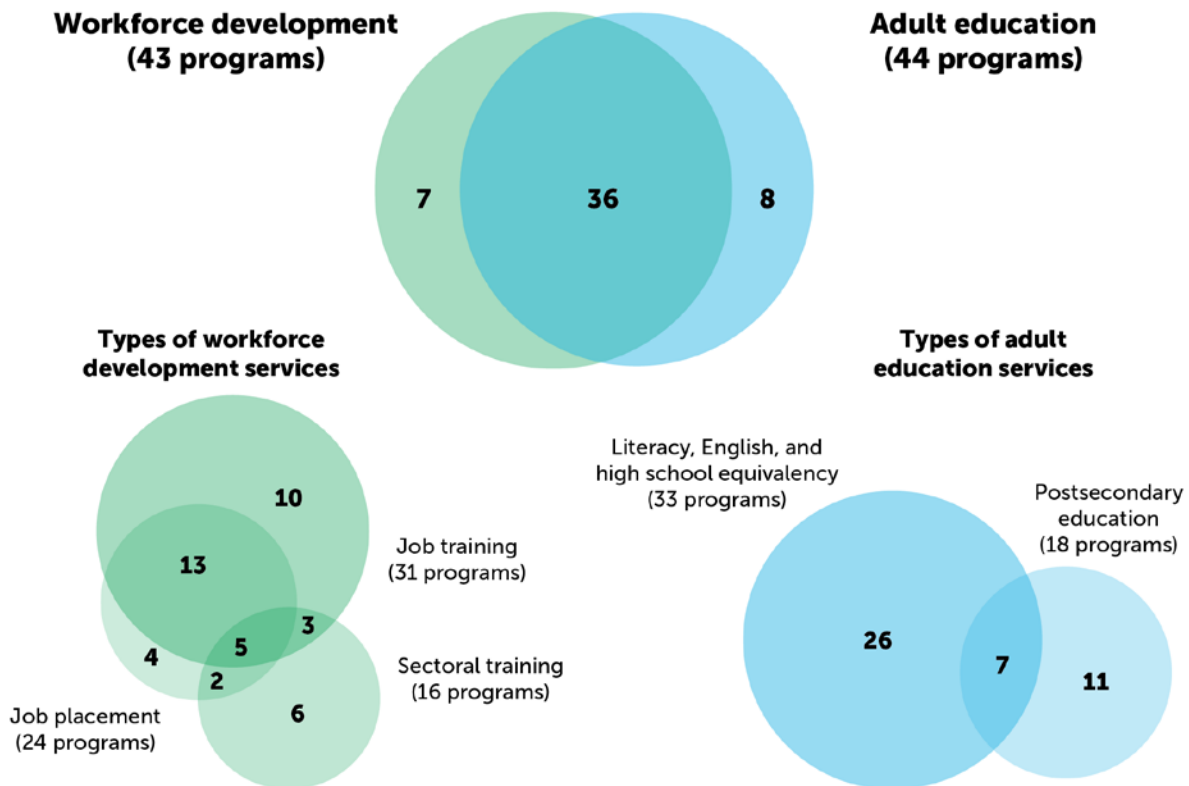
Adult services were oriented around two approaches to increasing economic stability: securing employment and increasing educational attainment and building skills toward career employment (Figure III.4). Given the generally disadvantaged populations targeted, economic security services tended to focus on the needs of the low-skilled, high-need populations. Programs commonly provided more than one economic security-directed service. About equal numbers of programs provided workforce development and educational programming (43 and 44 programs, or more than 80 percent, respectively); 36 programs (69 percent) provided both types.

1. **Workforce development services.** Most workforce development services aimed to help participants secure jobs in a timely fashion through short-term job training and job placement. Training involved developing computer skills, professional attitudes and behaviors, and communication skills. Three programs provided job training services that intentionally counted toward state TANF work requirements. Sixteen programs (31 percent) provided sectoral training—focused job training programs that resulted in a certification or credential. For example, four programs helped parents earn a Child Development Associate (CDA) credential to become a teacher’s aide, using the children’s program as a laboratory for classroom experience; others provided training in food service, transportation, and other fields. These programs took several months to complete and included more than 100 hours of on-the-job training. The Parent Training Program in Minneapolis, Minnesota, for example, provided five sectoral training programs in fields such as food service, transportation, fitness,

and clerical services. Its early childhood development program included an optional internship that involved 700 hours of classroom training.

2. **Educational attainment and skills.** Thirty-three programs (63 percent) sought to improve adults’ foundational skills through a combination of adult basic education, ESL, and/or classes that prepared participants to take high school equivalency tests. (The scan did not include programs that provided only ESL classes to adults; programs offering ESL did so to prepare non-native English speakers for workforce development, other adult education services, or postsecondary education.) The other 18 programs identified as adult education services (35 percent) provided access to postsecondary education, helped parents apply to college, or required parents to be enrolled in college to participate in program services. For example, El Valor, a Head Start provider in Chicago, partnered with area colleges to provide classes for degree programs in the evenings at its early childhood centers. These degree programs ranged from associate’s degrees to doctoral programs.

Figure III.4. Types of adult services provided



Source: Program documents and public websites.

Note: n = 52.

One program provided intensive family case management and is not pictured.

Programs that offered more than one adult economic security service did so to meet the needs of adults with a variety of skills, backgrounds, and interests. Two of the 36 programs developed different “tracks” for parents with various goals, interests, and needs. One of the programs, *CareerAdvance*<sup>®</sup> in Tulsa, Oklahoma, developed an “educational pathways” program with GED and developmental education classes for parents who needed basic skills in order to be able to participate in *CareerAdvance*<sup>®</sup>’s health professions credentialing programs.<sup>11</sup> Twenty-three programs (44 percent) provided case management to parents and families to identify and address participants’ specific needs and barriers to economic security by connecting them to services offered by the program and to other services in the community. Additional services for adults included financial literacy services (26 of 52 or 50 percent) and parenting education (22 of 52 or 42 percent).

### 3. Child services were primarily center-based

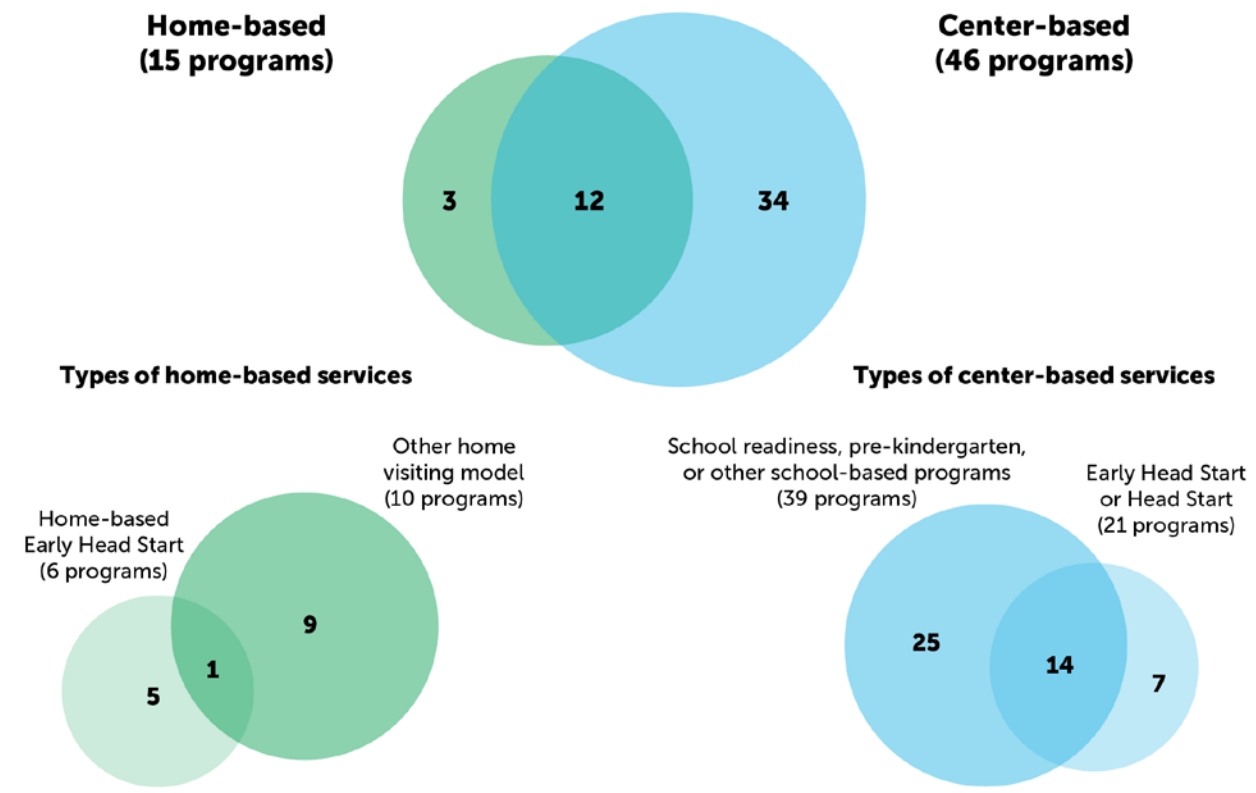
We identified two broad categories of child services: those that took place in a center or classroom, and those that occurred in the family’s home (Figure III.5). All but three programs provided some form of center-based child services. The emphasis on center-based services is not surprising, given that they also served parents outside of the home and offered parents the time away from their children to invest in education and work. Programs designed children’s services to support school readiness and achievement, social-emotional and cognitive development, and physical and mental health. Home-based services were designed to promote positive parenting and supportive home environments.

1. **Center- or school-based education.** All but three programs provided center- or school-based education, and many offered more than one child-focused service. Twenty-one programs (40 percent) involved EHS and/or Head Start. The rest of the programs with center- or school-based services provided other prekindergarten programming. Generally, the prekindergarten programs focused on school readiness, social-emotional and cognitive development, and the development of literacy and numeracy. Two-thirds of programs with EHS/Head Start programs—14 programs—also offered an additional type of early childhood education, such as prekindergarten. For example, Garrett County Community Action Committee in rural western Maryland operated two Head Start centers of its own while also partnering with the local school district to run five state-funded early childhood centers in county elementary schools.
2. **Home-based services.** Fifteen programs (29 percent) provided home-based services. Ten offered home-visiting, adopting evidence-based program models such as Nurse Family Partnership and Healthy Families America. Six provided home-based EHS, beginning when mothers were pregnant. Generally, these services sought to encourage a healthy and safe home environment and positive interactions among parents and their children.

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<sup>11</sup> In early 2016, Community Action Project of Tulsa County (CAP Tulsa) combined the educational pathways program and the *CareerAdvance*<sup>®</sup> health credentialing program to make the transition between the two more seamless. CAP Tulsa kept ESL as a separate service with the aim of helping parents improve their language skills to communicate with their children’s teachers.

Figure III.5. Children’s services provided



Source: Program documents and public websites.  
 Note: n = 52.  
 Three programs provided neither home-based nor center-based services and are not in the figure.

In addition to early education, many providers offered other child well-being services. Four programs delivered programming to address behavioral or mental health, such as family therapy. Nine provided health services. For example, Briya Public Charter School in Washington, DC, offered infant and toddler, prekindergarten, and adult ESL classes, and co-located with a health clinic that provided pediatric visits, dental care, mental health screenings, and other wellness services.

**4. Programs could combine services in ways that decrease participation barriers**

Overall, the programs identified in the scan tended to provide multiple services to adults, and to provide center-based education to children. Thirty-one of the 46 center-based child programs (69 percent) provided both adult education and workforce development services. Of the 15 home-visiting programs, 9 (60 percent) provided both types of adult services. Six of the 52 total programs we identified (12 percent) provided center- and home-based child services, and adult education and workforce development services.

The organizations that deliver these programs provided little information about the intentionality of adult and child services, but two tactics—co-location and schedule alignment—emerged as some of the service coordination methods identified in the scan. Nine programs (17 percent) indicated that services were co-located, either by housing adult services centers with

access to multiple services, in school settings, or by providing college classes on-site at early childhood centers. Six programs provided adult and child services at the same time, helping parents coordinate their own schedules with their children’s.

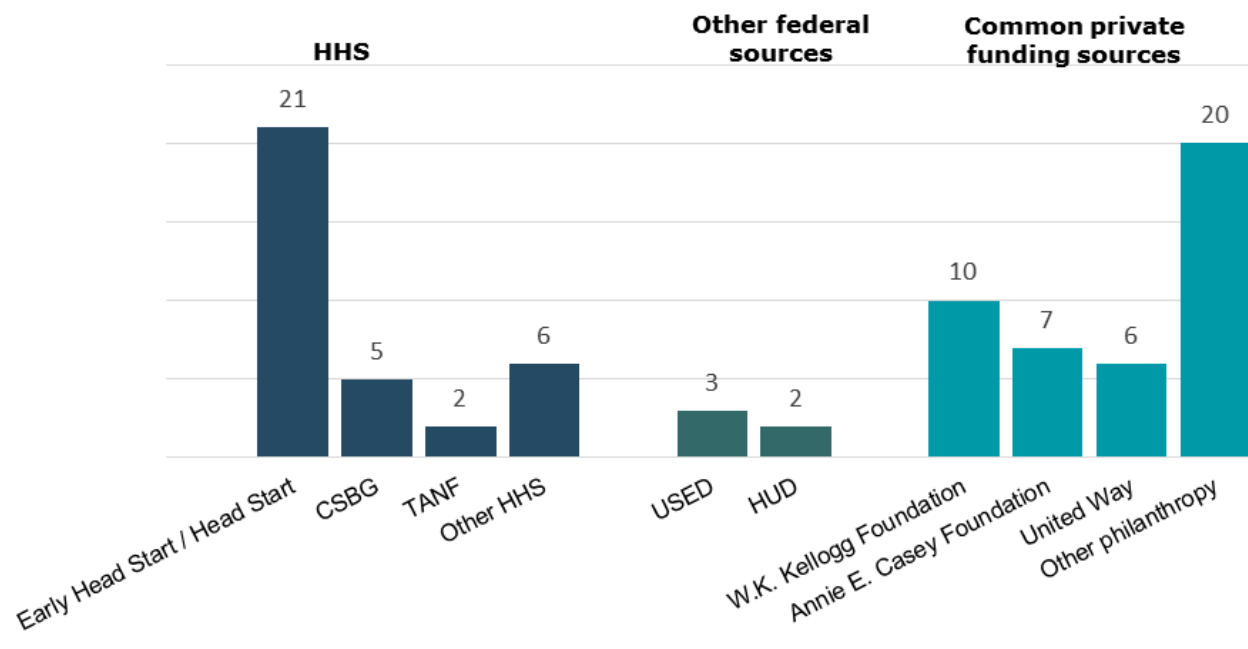
C. Supports for programs with integrated approaches to supporting child development and improving family economic security

Programs combined multiple funding streams to support their services.

**1. Funding came from federal funding streams, philanthropic sources, and state and local grants**

Head Start, Community Services Block Grant (CSBG), and TANF block grants were examples of federal funding streams for the programs identified in the scan (Figure III.6). We identified 21 Head Start agencies and 5 Community Action Agencies that offered programming for both parents and children. Two of the 52 programs identified in the scan drew from TANF funds. Eleven programs received federal funding other than Head Start, TANF, or CSBG. Most of the other federal funding streams came from HHS grants and programs, and others. Another 16 programs (31 percent) received state or local funding.

Figure III.6. Common funding sources



Source: Program documents and public websites

Notes: N = 52.

Categories may sum to more than 52 because programs received funding from more than one source. CSBG = Community Services Block Grant, TANF = Temporary Assistance for Needy Families, HHS = Department of Health and Human Services, USED = U.S. Department of Education, HUD = Department of Housing and Urban Development.

Community foundations and private philanthropies were actively involved in promoting efforts to coordinate services for whole families. The two largest foundation funders, in terms of the number of programs supported, were the W.K. Kellogg Foundation (10 programs) and the Annie E. Casey Foundation (7 programs). Twenty programs (38 percent) received funding from smaller foundations and individual donors. Overall, 38 programs received funding from private sources.

Few programs subsisted solely on a single funding source. Because few funders provided money to serve both adults and children, programs used multiple streams of funding. For example, a Head Start provider may use federal Head Start money to provide early childhood education and limited family engagement, and a foundation grant to fund adult services. In total, 18 of the 26 federally funded programs supplemented their federal grants with monies from other sources.

## **2. There is nascent interest at the state and local level in integrated approaches to supporting child development and improving family economic security**

Half of the 16 programs that received state or local funding experienced administrative involvement from state and local government agencies. One, the Next Generation Kids pilot in Utah, was developed after the state passed legislation aimed at reducing inter-generational poverty. Though several states have shown interest in supporting such programs through initiatives such as the Office of Family Assistance Systems for Family Stability Policy Academy and the National Governors' Association's Parents and Children Thriving Together initiative, Connecticut and Utah were the only states as of January 2016 that had passed legislation to support approaches to coordinating services for whole families within a single program. State and local sponsorships include the Connecticut Departments of Education and Public Health and Social Services, the Utah Department of Workforce Services, a New Jersey One Stop Center, and local school districts. Most of the programs that were receiving state and local government funding were community organizations, including clinics, workforce development agencies, and multi-service agencies.

## D. Conclusion

Our review of currently operating programs designed to simultaneously promote adult economic self-sufficiency and children's well-being and development reveals a field still emerging and innovating. As Chase-Lansdale and Brooks-Gunn (2014) also found, many programs are still emerging—developing and refining their services and program models. The programs have a variety of origins: some leverage partnerships among multiple organizations and services for families evolved out of services for adults or children, while others serve both adults and children from within a single organization and have a deliberate “whole-family” or “two-generation” approach. These programs provide a variety of services to adults and children. For adults, programming is generally oriented toward getting a job and increasing skills and educational attainment (through basic education, postsecondary education, or individualized services such as case management). For children, nearly all of the 52 existing programs provided center-based education services, but 15 offered home-based services as well. Programs targeted a variety of service populations although most were low-income and disadvantaged. Programs served one- and two-parent families, but more services were directed toward mothers. Similarly,

even though programs provided services for many age ranges, most targeted children younger than six years old.

Public support and funding were core elements of support for existing programs. Many received support from Head Start and other DHHS grants or funding streams. Two states—Connecticut and Utah—were involved in service planning and delivery; many other states and local human services agencies have shown interest by participating in federal and foundation initiatives that focus on addressing the needs of children and parents together.

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#### IV. CONCEPTUAL FRAMEWORKS FOR INTENTIONAL APPROACHES TO IMPROVING ECONOMIC SECURITY AND CHILD WELL-BEING

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In this chapter, we describe two frameworks, or change models, that are intended to help stakeholders think about the design and implementation of programs that aim to meet the needs of low-income parents and children through intentionally combined activities and approaches. Conceptual frameworks draw on both theory and research evidence to create a logical pathway that links, for example, program services to participant outcomes (W.K. Kellogg Foundation 2004). A conceptual framework does not depict a proven program design but suggests associations between services or activities and intended outcomes yet to be tested. The hypothesized pathways can then be measured through additional research and evaluation. The resulting research findings can inform program improvement and effectiveness.

The conceptual frameworks for programs that intentionally combine services for children and adults that we discuss in this report provide visual, systematic pictures of our hypotheses about program activities and outcomes (Figure IV.1) and service collaboration and partnerships (Figure IV.2). The first conceptual framework focuses on services and outcomes for children and their caregivers as reflected in contemporary programs that align services for adults and children. This framework uses theory and evidence from developmental science and economics to illustrate potential outcomes for parents and children, as well as possible changes in the home environment. The second conceptual framework shows the dimensions along which organizations might partner to serve parents and children. Partnerships might move from cooperation between independent programs or organizations that serve parents or children separately to deeper collaboration and even co-location of services that are aligned, coordinated, and mutually reinforcing for parents and children. The conceptual frameworks build on the Chase-Lansdale and Brooks-Gunn (2014) two-generation change model and on partnership frameworks from the business and public management fields (Keast et al. 2007; Austin and Seitanidi 2012). They also draw on lessons from the literature review, the scan of contemporary programs, and the field work we described earlier.<sup>12</sup>

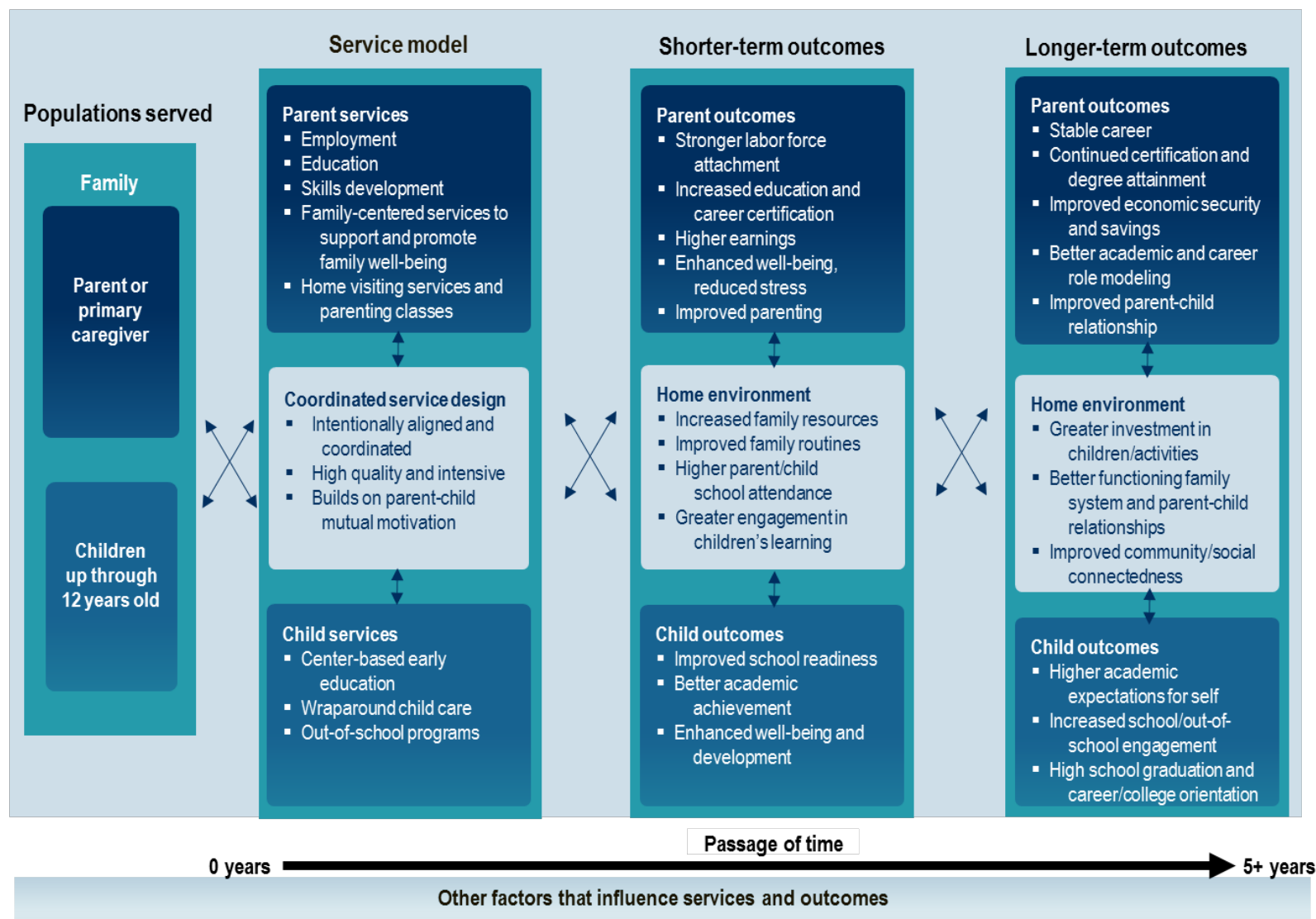
##### A. A change model for economic security/child well-being programs to meet the needs of families (Figure IV.1)

The first framework is a change model for approaches that have an economic security and child development and well-being focus. The model (1) identifies the populations served; (2) describes the service model for parents/primary caregivers and children in the same family; (3) explains how intentionality and quality of services may lead to parent-child mutual reinforcement of outcomes; and (4) illustrates the set of shorter- and longer-term outcomes that may result for caregivers, children, and the home environment. Across the top of the framework diagram, dark blue boxes show services that might be linked to outcomes for parents and other primary caregivers, while lighter blue boxes along the bottom of the figure show services and possible corresponding outcomes for their children. Across the center of the figure, the lightest blue boxes suggest how services are intentionally aligned and coordinated across generations (in

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<sup>12</sup> However, we avoided using examples from the field work to describe how services could relate to outcomes because those pathways are yet to be tested.

Figure IV.1. Change model for economic security/child well-being approaches



Source: Adaptation of Chase-Lansdale and Brooks-Gunn (2014).

the services column) and how these programs might result in changes in the home environment (in the outcomes columns). Vertical arrows between the boxes indicate that services and outcomes for each generation contribute to how programs are delivered and to the outcomes that programs may produce. Cross-arrows between the services and outcomes column indicate that we expect intentional pairing of services for parents and children to be mutually reinforcing. We describe the framework in greater detail below. We conclude this section with questions that program administrators and researchers could ask as they apply the framework to their work.

## 1. Populations served

The change model for programs that support parents' economic security and children's well-being focuses on primary caregivers and children in the same family.<sup>13</sup> Our project scope included programs that serve children through age 12, although our scan yielded few programs that focused on children ages 6 through 12 (see Chapters I and III for more discussion of the focus of the project and findings of our scan).

## 2. Service model

- **Parent services.** Services to parents in these types of programs could fall into four suggested categories.
  - **Employment services.** Connecting parents with employers and employment is key for improving family economic security. Services may include job training and employment supports. Employment-related activities may include goal setting, educational and career coaching, and job search and placement.
  - **Education services.** Previous research suggests that combining employment-focused and education-related services might be effective (Holzer and Martinson 2005; Hamilton 2002; see also the findings of our literature review in Chapter II). Education-related activities may include secondary and postsecondary coursework and degrees (including General Education Development [GED] and ESL and developmental education at community colleges) and career pathway certification in high-demand sectors of the local economy.
  - **Skill development.** When bundled with education and employment services, activities to promote skills development may enhance labor force attachment and earnings as part of an overall strategy to improve family economic well-being. Development of soft skills might include budgeting, financial literacy, and asset development.
  - **Family-centered individualized services that support and promote family well-being.** As we described in Chapter II, some families need support beyond education and jobs to maintain economic security and promote well-being (although research has not confirmed whether supportive services are consistently effective in helping to achieve education and employment outcomes). For example, parents entering a workforce training program may need not only financial and transportation assistance, but also help finding after-hours care. A family-centered approach would address child care needs not

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<sup>13</sup> Previous economic security approaches that served parents and children alike tended to prioritize single mothers receiving public assistance. The current model is broader and includes programs for a wider range of potential caregivers, including mothers, fathers, grandparents, and non-custodial parents. (We refer to primary caregivers as parents in the rest of our discussion in this chapter.)

just as a work support, but as important to children's safety and well-being and to parent's ability to coordinate a schedule that balances work, school, and family obligations. These additional services may include emergency financial assistance, removing barriers to participation (such as transportation challenges), support in navigating public assistance programs and the courts, identifying and engaging with health and mental health services, and seeking improved housing opportunities. Services may also involve up-front needs assessment and ongoing case management for the entire family.

- **Home visiting services and parenting classes.** For parents with young children, as their schedules allow, home-based services to promote parenting skills, home safety, child health and well-being, and other outcomes may be a component of the array of services offered to both generations. Such services may have a range of formats and durations, but are often delivered by professionals (such as nurses) or trained paraprofessionals who visit families' homes on a regular or semi-regular basis.
- **Child services.** Services for children within programs that aimed to meet the needs of children and parents simultaneously often seek to promote healthy child development and children's strong academic performance. These may include high quality center-based early care and education for children from infancy through prekindergarten (including Head Start and other community-based early care and education programs), as well as out-of-school programs for school-age children. Services that promote children's emotional well-being and physical health supplement educational programming.

### 3. Intentionality, quality, and parent-child mutual reinforcement

The framework depicts, in two ways, the effects that parents and children in the same family may have on each other that are expected to improve outcomes for both. First, vertical arrows from parent and child services, respectively, to the center light blue box show that services to each generation can add to one another in a way that creates something new, beyond what each generation receives on its own. Second, crossed arrows between the services and outcomes boxes indicate that services to both generations might influence the outcomes experienced by each generation.

Intentionally aligned and coordinated services across generations are central to programs that serve parents and children at the same time. This idea draws on family systems theory and the interrelated influences among children and their caregivers (Foster 2002; Linver et al. 2002; Waldfogel 2006; Yoshikawa et al. 2012). Aligned and coordinated services across generations can be mutually reinforcing in a number of ways. For example, needs assessment and goal setting for parents and children can occur together and take into account the strengths and needs of family members in each generation. Curricula content for parents and children can also foster skills in similar areas and promote shared activities (for example, parents and children both learning computational and budgeting skills and using those skills together to plan and monitor children's college savings accounts). Moreover, parent and child school schedules may be coordinated such that parents are able to complete their work and school activities and be available for their children. These kinds of activities may support parents in their multiple roles as caregivers, economic providers, and life-long learners. For example, home visiting services provide opportunities for parents to work with skilled professionals to enhance their children's development and improve their own coping skills. Parenting classes for parents of children

enrolled in center-based early care and education services can serve a similar function. Services for parents of school-age children may involve activities to promote home-school connections and home-based learning activities.

Yet, for such an approach to be fully effective, the service model requires that programming for each generation be high quality and intensive. This means that services would involve research-informed features of quality and intensity that we described in Chapter II. Ideally, services will also be provided in a culturally competent context (see Calzada and Suarez-Balcazar 2014).

Moreover, programs that combine high quality education and skills training for parents with high quality early care and education services for children might be mutually motivating, boosting the participation of family members from both generations. For example, parents who witness their children thriving in high quality early care and education may be especially motivated to model educational persistence for their children by enrolling or persisting in their own schooling. Likewise, parents who are learning new academic skills and growing in their confidence may be more interested and equipped to engage in enrichment activities with their children. A lack of quality early care or education for young children is a common barrier to educational and career achievement of parents (Adams et al. 2015; Gardner et al. 2017). Parents who see that their children are thriving in quality early care and education are likely to be more motivated to pursue their own goals than parents whose children are not benefiting from these settings, or whose extra-familial care is lower quality (Chase-Lansdale and Brooks-Gunn 2014; Sommer et al. 2016a; Sommer et al. 2012). However, sometimes parents feel it is too late in life to improve their education and employment. When high quality early education programs help parents see the explicit connection between their own education and employment success and their children's healthy development, parents might be more likely to persist in achieving their goals (Sommer et al. 2016a).

#### **4. Shorter- and longer-term outcomes**

Multiple theoretical frameworks from developmental science and human resource and investment theories from economics inform our thinking about the potential outcomes to expect (which Chase-Lansdale and Brooks-Gunn [2014] outlined in more detail). For example, as parents improve their education and find more stable jobs with higher earnings, they are likely to invest more financial resources in their children (Oreopoulos and Petronijevic 2013; Kornich and Furstenberg 2013). Families with greater economic resources and more consistent work hours are more likely to be able to purchase more opportunities to support their children's development and may have more time to spend with their children (Foster 2002; Linver et al. 2002; Waldfogel 2006; Yoshikawa et al. 2012). A more positive home environment, resulting from better economic stability, may lead to improved child development and increased children's school readiness (Crosnoe and Kalil 2010; Guryan et al. 2008; Kalil et al. 2012). And, children's improved school success could reduce parent stress further and motivate them to increase their engagement with education and employment. A better functioning family and expanded social networks through program participation can also lead to increased education, employment, and cultural and social opportunities for parents and children (Sommer et al. 2016a).

Applying these theories, this change model identifies a set of shorter- (one to two years) and longer-term (three to five years and beyond) outcomes for parents and children that may then occur in the home environment. The links between these services and outcomes are hypothesized

and would need to be measured later through evaluation. Below, we first describe expected outcomes of parent services on parents and child services on children, and then we describe the cross-generational effects of coordinated and aligned services to both in the home environment section.

- **Parents.** Parent participation in services related to employment, education, skill development, and family-centered case management could lead to stronger labor force attachment and increased education and career certification in the near term. Effects could be even stronger when combined with children’s early care and education services and other supportive services. Higher-skilled employment is also likely to produce greater earnings. Together, these outcomes are likely to result in the enhanced well-being of parents (perhaps characterized by optimism and self-efficacy) and reduced parental stress or emotional distress. If improvements in education, employment, and well-being continue, parents may achieve a stable career, continue to improve their credentials and certification, and possibly increase their overall economic security and savings. In turn, they may be better equipped to serve as academic and career role models for their children.
- **Children.** For young children, participation in quality early care and education environments and other key services (such as home visiting and developmental supports) are expected to improve children’s school readiness, academic achievement, and overall well-being and development in the first two years. These are expected to result in children having higher academic expectations for themselves, increased engagement in school and out-of-school activities, and higher educational attainment (for example, high school graduation) and a greater career and college orientation among older children over time.
- **Home environment.** As outcomes for parents and children improve, we also expect to see enhancements in the home environment that are likely to result from coordinated services for parents and children and the expected bi-directional (or cross-generational) influence of one generation on the outcomes of the other. For example, parents’ stable employment and higher earnings are likely to increase available resources in the home and reduce family stress. Consistent and coordinated parent and child schedules might also result in improved family routines and better school attendance for both generations. As economic security and savings increase, parents may also invest further in enrichment and out-of-school activities for their children. Such investments might, we believe, improve children’s well-being, family functioning, and the community and social connectedness of parents and children.

## 5. Using the change model framework

Administrators and funders of programs that intentionally combine services for children with services for their parents should not necessarily expect to see changes across all outcomes depicted in the framework. Instead, stakeholders might focus on the outcomes that are more likely to occur for a particular target population and combination of services. Moreover, many contextual factors could influence the extent to which such approaches or programs achieve their intended results. These factors include the state and local policy context, local labor market conditions, and the availability and quality of services for adults and children within a community. For example, state TANF rules influence the level of cash assistance for which low-income families qualify, and whether parents’ participation in workforce training and career certification training programs counts toward work requirements that parents must meet as a condition for benefit eligibility. The strictness of such requirements are likely to have an effect

on parent take-up. Additionally, higher rates of employment and higher wages available in the local labor market could increase the likelihood of labor market success for parents participating in such a program. Similarly, if quality and affordable early care and education are widely available with flexible or extended hours, parents of young children may be more likely to become stably employed.

Program administrators should develop a change model tailored to their own approach, informed by Figure IV.1, and by their own experiences and local context. To do so, they may wish to consider the following questions:

1. Which populations of caregivers and children might be best served by a program that is intentionally designed to address both family economic security and child well-being?
2. Which services for caregivers and children does the program already offer? What additional services should it add to support economic security as well as child development and well-being?
3. Given the characteristics of the population and the services offered, what outcomes do we expect in the short term for caregivers and children, and in the home? What outcomes might be expected in the long term?

The change model can support research as well as program planning. For the framework to be used for research or program planning, program administrators and researchers should plan to (1) collect and use measures of the outcomes that are most relevant to the approach and (2) measure program processes such as service enrollment and the dosage of services that parents and children actually receive. They can identify appropriate and feasible measures for each process and outcome of interest. Administrators can devise and support systems to collect outcome measures. Administrators should contact researchers for input on the design and plans to measure the progress of individuals and families in order to assess client needs, monitor the implementation of the approach, and identify areas for program improvements. These partnerships can also use outcome data to measure the impact of such approaches if circumstances allow. (See Chapter V for more discussion of considerations for evaluating approaches that address the entire family.)

The framework for services and outcomes shows how the content, delivery, and schedule of services for parents and children complement and reinforce each other and potentially influence outcomes for parents and children. In order to deliver complementary services to parents and their children, partnerships supporting such an approach may develop between separate organizations or programs, or among different departments in the same organization. Together, these entities may be able to successfully offer high quality, intensive, and intentionally aligned services for parents and children.

- B. Developing partnerships in approaches that aim to meet the needs of parents and children together (Figure IV.2)

Intentionality, or the purposeful and deliberate linking of services and programs for parents and children (Chase-Lansdale and Brooks-Gunn 2014; King et al. 2011), is a hallmark of approaches designed to meet the needs of parents and children together. Yet intentionality is likely to depend on the alignment of mission and resources among a range of stakeholders who

traditionally have focused more narrowly, often on one generation not both. Our literature review (see Chapter II) suggests that more work is needed to define intentionality in the context of such approaches.

One way organizations demonstrate intentionality is through partnerships which can help to achieve broader aims that may not be possible when offered by agencies or programs alone. Partnerships may develop between separate organizations or programs that work together to serve parents and children, or among different departments in the same organization. Partners are likely to bring a range of expertise, staff, and community resources to the partnership. Together, they could identify or develop a shared mission. No single organization is likely to be able to efficiently and effectively meet a family's complex needs (Anderson-Butcher and Ashton 2004), yet partnering can enable two or more providers to increase the range of services they are able to offer and to serve both parents and children. The intensity of these services also influences the ability of these partnerships to achieve their desired aims across generations.

### 1. Description of conceptual framework for partnership development

This second framework builds from the first in that it offers strategies for achieving the parent and child outcomes that stakeholders set out to achieve through partnerships. Specifically, by drawing lessons from business and public management (Keast et al. 2007; Austin and Seitanidi 2012), the framework identifies stages of partnerships between organizations, suggesting an increasing investment of shared resources over time as partnerships evolve. The development of partnerships between at least two organizations may be an essential component of an approach that aims to meet the needs of both children and parents, although an organization could theoretically begin with a whole-family lens—a full complement of services for parents and children—and not need to partner with external providers. Partnerships allow for a broadening of the range of activities than a single organization or program can typically accomplish. Over time, cooperation between two independent organizations may lead to greater coordination or deeper collaboration, and thus a shared identity or mission.

The partnership framework we developed by building on and combining the work of researchers from other fields (Austin and Seitanidi 2012; Keast et al. 2007) shows the deepening of partnerships as a continuum. We hypothesize that five dimensions cited by earlier researchers discussing business and nonprofit collaboration (Austin and Seitanidi 2012) are also dimensions along which organizations partner to provide coordinated services to parents and their children. (See Chapter II for a discussion of how we derived these dimensions from research on partnering in other fields.)

1. **Engagement.** Programs move from cooperative cross-referrals and task-oriented engagement to significantly increasing dialog and investments of time by each program.
2. **Mission.** Partnering programs shift from separate missions to a shared mission that focuses on the entire family, and the programs develop goals that result from more frequent and deeper joint planning, including developing and measuring shared outcomes.
3. **Resources.** As programs partner more intensively, they are no longer simply sharing individual services or money. They are rethinking how to strategically and equitably use human and financial resources to achieve maximum benefits for all.



4. **Co-creation of value.** Programs co-create value by moving from operating separately and maximizing distinct assets and strengths to co-designing and co-delivering approaches to services that benefit both adults and children.
5. **Innovation and systems change.** With deepening partnerships, programs shift from limited joint planning to collaboratively addressing challenges and using knowledge from co-designing services to change how an entire system or approach is delivered.

These dimensions can evolve along a continuum of cooperation, coordination, and collaboration, increasing their level of engagement and investment of resources (Table IV.1). Partnerships to deliver such approaches can also deepen through the co-creation value, in which partners identify shared values and develop joint missions. Doing so may be critical to the intentional delivery of services. Innovation and systems change is a dimension of partnership identified in our literature review (noted in the Austin and Seitanidi 2012 framework) and reiterated through our field work. We therefore include innovation and systems change in the matrix and framework as possible practices that warrant further research.

Table IV.1. Partnership matrix

| Dimension                            | Cooperation  | Coordination   | Collaboration  |
|--------------------------------------|--|--|--|
| <b>Engagement</b>                    | Programs begin cross referrals and limited engagement.   | Programs' engagement is task oriented, in which programs divide roles and responsibilities for shared goals and activities.                      | Engagement is marked by high levels of shared dialog, and significant contribution of time by all partners.  |
| <b>Mission</b>                       | Programs have separate, yet complementary, missions and goals.   | Programs begin to develop shared mission and goals.  | Programs develop shared mission and goals, to which joint program planning is central.   |
| <b>Resources</b>                     | Resources are complementary because relationships are typically unilateral or transactional.   | Each program contributes resources to the program, but they remain separate.   | Program resources are shared; resources include staff competencies as well as money; programs contribute resources in a way that seems fair and reasonable to each.        |
| <b>Co-creation of value</b>          | Programs operate separately and independently; they communicate about logistics and operations but do not think strategically about approaches that benefit the entire family. | Value is created by maximizing programs' distinct assets and strengths.  | Programs co-design and co-deliver services. Desired outcomes directly relate to shared mission and goals and are beyond what either program can offer.                     |
| <b>Innovation and systems change</b> | Programs seldom engage in joint planning or problem-solving to address issues that arise.  | Programs occasionally plan or solve problems jointly but defer to each other's missions and goals without expecting coordination to change them. | Programs frequently innovate by engaging deeply to consider challenges, using knowledge from co-designing services to change how an entire system or approach is delivered |

Note: Dimensions and phases on this continuum draw from the work of Austin and Seitanidi (2012) and Keast et al. (2007).

In less-developed partnerships, the model assumes that stakeholders from programs may begin to cooperate and communicate—perhaps often—even while operating independently. The same is true for service providers or agencies that plan to partner. In deeper partnerships, stakeholders might guide the programs to develop more complex relationships that will support opportunities for cross-program referrals, task-oriented engagement, and coordination. At the farthest end of the continuum, programs fully collaborate to offer an approach in which they co-design programming and engage deeply to achieve a shared agenda or goals.

For example, a child development program and a job-training program might change the depth of their partnership when delivering services intended to benefit the whole family. They may begin by scheduling services so that parents and children can participate in their respective educational activities simultaneously. Then the two programs may develop a shared mission statement about coordinating with each other to help each generation achieve key outcomes and may share resources such as space and materials. Eventually, they might merge services to offer one program to parents and children. Full collaboration involves joint design and delivery of an intervention that benefits the entire family, something that might not be fully feasible or desired if resource investment is too great.

## **2. Using the partnership framework**

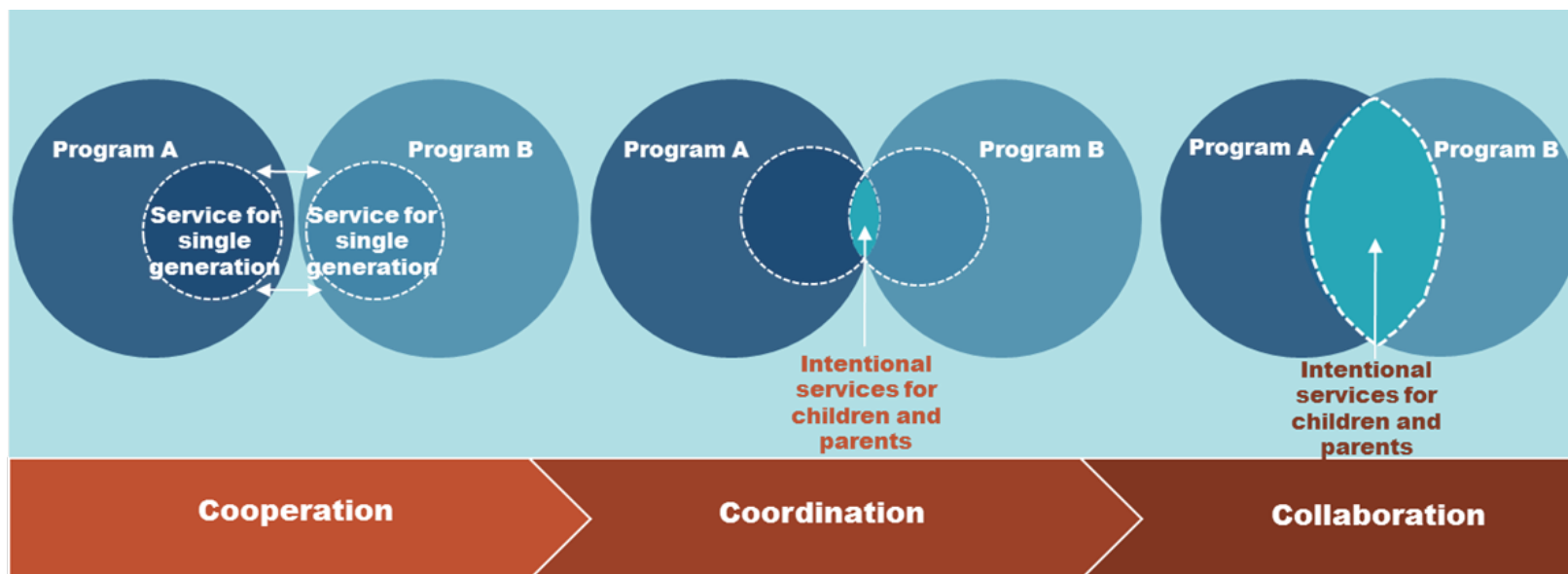
The framework for development of partnerships may be useful to researchers, as well as to program administrators and funders.

Research could explore whether the partnership framework actually reflects how organizations partner to provide coordinated services to parents and their children. Implementation research on such approaches should assess where partner organizations are located along this continuum and whether partnerships change over time (and in which direction). Questions about partnership and program outcomes might also be interesting to stakeholders. For instance, is a collaborative partnership needed to produce improved outcomes for approaches that address the needs of low-income parents and children simultaneously? Is a coordinated partnership sufficient? Evaluations in the future could explore how the depth of partnerships relates to the quality and intensity of services, family engagement, and ultimately, outcomes for families and children. More discussion of opportunities for future research and evaluation of integrated approaches to serve parents and children appears in Chapter V.

The partnership framework in Figure IV.2 provides a structure for a discussion between stakeholders from programs that are implementing an approach that aims to serve children and parents. Questions include:

1. For each program partner, what are the benefits of and barriers to increasing cooperation and coordination, and how can benefits be reinforced or strengthened and barriers decreased?
2. How closely matched are the goals for each generation and program?
3. Are there opportunities to better align goals and services?
4. What is the value added to each organization of sharing resources or pursuing additional resources together?

Figure IV.2. Conceptual framework for development of partnerships in programs that serve parents and children



As approaches move along the continuum, programs shift in some key areas

**Engagement:** Move from cooperative cross-referrals and task-oriented engagement to significantly increased dialogue and investments of time by each program

**Mission:** Shift from separate missions to a shared mission that addresses the needs of the entire family and establishes program goals resulting from more frequent and deeper joint planning

**Resources:** No longer simply sharing individual services or money and instead rethinking how to strategically and equitably use human and financial resources to achieve maximum benefits for all

**Co-creation of value:** Move from operating separately and maximizing distinct assets and strengths to intentionally co-designing and co-delivering services to both parents and children

**Innovation and systems change:** Shift from limited joint planning to collaboratively addressing challenges, using knowledge from co-designing services to change how an entire system or approach is delivered

Note: Dimensions and phases on this continuum draw from the work of Austin and Seitanidi (2012) and Keast et al. (2007).

Through a careful, mutual examination of partnerships, stakeholders from programs involved may deepen their understanding of the combined services that they could offer families by working together. They might discover unmet needs, the possible duplication of services, or ways to improve service efficiency and effectiveness. The needs of individual partners can change over time, of course, so revisiting these questions might support continuous improvement. Researchers evaluating program implementation may also be interested in the questions when exploring how such approaches operate and change over time.

### C. Summary

In this chapter, we have offered two frameworks to researchers, funders, and program administrators who may be interested in developing or refining an approach to simultaneously improving family economic security and children's development and well-being. The two frameworks complement one another. The first suggests how program services relate to parent, child, and home-environment outcomes. The second describes types of partnerships that may lead to such outcomes through coordinated and aligned services for parents and children. Incorporating both frameworks into program design and research should enable programs to consider the level of intentionality, intensity, and quality of programming for services to each generation and for their coordination that may be needed to produce economic and developmental benefits for low-income families.

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## V. DIRECTIONS FOR RESEARCH ON AND EVALUATION OF APPROACHES TO PROMOTING PARENTS' ECONOMIC SECURITY AND CHILDREN'S WELL-BEING

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Programs that aim to improve parents' economic security and children's development and well-being by intentionally coordinating the delivery of services to parents and their children have proliferated during the last several years. Yet, research and evaluation on program implementation and outcomes has lagged. In this chapter, we describe the current state of research on contemporary programs that intentionally serve the needs of low-income parents and children, and we suggest options for future research.

As we discussed in Chapter III, a variety of programs provide services to support adult economic security and children's well-being. These programs offer many different combinations of services to parents and their children, predominantly through partnerships among organizations. Families served by these programs are generally low income and disadvantaged, although the focus is often on specific subpopulations, such as single mothers, residents of a housing development, or families who are eligible for Head Start. Many programs are still emerging, as administrators develop and refine their services and program models and experiment with ways to align and coordinate services and to engage families. Other programs are more fully developed, having established services and engaged families. This reality suggests, as we detail in this chapter, that multi-pronged approaches to implementation and effectiveness research might be most appropriate.

Research and evaluation could be valuable to these emerging program models for many reasons. Research and evaluation can help program staff articulate their goals for parents, children, and families, and can help them understand whether their operations align with their goals for families. It also can help program administrators understand the quality and intensity of services they actually provide to parents and children, and assess the levels of service quality and intensity that might be necessary to make a difference for family outcomes. For more developed programs, research and evaluation can inform stakeholders about program impacts for parents, children, and families. This evaluative work can, by comparing the impacts with program costs, help stakeholders assess the benefits and value of their investment in programming that intentionally serves parents and their children. Finally, research and evaluation can help programs and policymakers replicate and scale up effective programs without diminishing their quality.

In this chapter, we describe a set of options for research and evaluation that could contribute to stronger program development and ultimately address important questions about the effectiveness of program approaches that offer coordinated services to parents and their children. The chapter is organized into three sections:

1. **Section A: An assessment of research on contemporary programs that serve parents and children simultaneously and the programs' readiness for research and evaluation.** This section addresses questions of interest to researchers, policymakers, and program funders: What research and evaluation has been completed or is in progress? How should research designs be matched with programs' developmental stages? How ready for various

types of research and evaluation are programs that intentionally serve parents and their children?

2. **Section B: Research and evaluation to support development of programs that are intentionally serving parents and their children together.** This section addresses questions of interest to practitioners, policymakers, program funders, and researchers: What further research and evaluation supports could help programs to develop stronger service models? What tools and processes would help researchers, program administrators, and policymakers better understand issues of service quality, intensity, and intentionality in programs that serve the entire family? What is the role of research partners and technical assistance in helping programs sustain research that supports program development?
5. **Section C: Effectiveness evaluation of programs that intentionally serve parents and their children.** This section addresses questions of interest to policymakers, program funders, and researchers: What further steps are necessary to determine whether effectiveness evaluation designs are feasible for programs that serve parents and children in concert, and whether particular programs are ready to participate in evaluations? What evaluation designs could continue to address important research questions about the effectiveness or impacts of programs that serve children and parents simultaneously?

#### A. Assessment of research on contemporary programs

The research and evaluation plan we describe in this chapter takes into account existing and ongoing research on programs that intentionally combine and deliver services to parents and their children so as to learn from and not duplicate past efforts. In this section, we briefly summarize the focus of existing research and available findings (see Appendix D for detailed information about each study we reference in this chapter). We also discuss the importance of matching the type of research—descriptive or effectiveness evaluations—with the stage of program development.

#### 1. Little research is available on contemporary programs that support parents and children simultaneously

A small body of recent descriptive research has documented the development of programs that provide coordinated activities for parents and children, the services offered by programs, characteristics of participating parents and their children, and parents' perspectives on services. However, these descriptive studies have been conducted in very few of the current programs that offer such services. Research on the effectiveness of such programs is even more limited: only two programs are conducting or completing effectiveness studies.

**Descriptive research.** In the literature review and program scan (Chapters II and III), we identified six programs that offer coordinated services to parents and their children that had engaged in implementation research (though only four of the programs were still operating as of early 2016).<sup>14</sup> All six programs had research partners that provided research capacities that these programs would not otherwise have been able to support. Researchers and their program partners have developed logic models to articulate program services and goals for participants, and to

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<sup>14</sup> CareerAdvance®, Keys to Degrees, College Access and Success, and Mother's Club.

guide measurement and analysis. Studies from all six programs have measured outcomes for parents and their children, though only four have reported on outcomes.

Findings from descriptive research may provide ideas for other organizations that seek to adopt new strategies. For example, one evaluation reported that a program that focuses on health care career pathways gave participants clear road maps to program completion. In addition, the program's public website posts descriptions of different careers, with information on the personality characteristics and skills that would be useful for such careers, the length of training modules, and jobs available in those career areas. Box 1 highlights promising structural and process features of programs that were identified through descriptive research.

Research that includes participant feedback about program services and operations can inform improved program processes. For example, one program added services to help link participants with living wage jobs after hearing from participants that they had immediate economic security needs that were not addressed by the program's long-term goal of increasing the number of college graduates.

Descriptive research has also assessed program participation levels and short-term employment and education outcomes for parents, and language, achievement, and social-emotional outcomes for children. College Access and Success, which pairs Head Start/Early Head Start services for children with ESL classes and help accessing postsecondary education for their parents, measured adult enrollment and completion of college degrees as well as short-term outcomes for children (Appelbaum 2014). For a study of parents and their children participating in Mother's Club, a Head Start program that added adult literacy, life skills programming, and mental health services, researchers used pre- and post-program surveys and administrative data for 2002 through 2011 to describe changes in parents' feelings of stress and isolation (Zargapour 2011). The study also reported gains in literacy and literacy-related activities for children, and decreased stress and isolation for the parents. Without a comparison group, however, the findings are descriptive and do not reflect program impacts.

**Effectiveness research.** Only two contemporary programs that offer intensive services aimed at improving family economic security and child well-being have participated in studies of their effectiveness.<sup>15</sup> One study used a randomized control trial (RCT) design, considered the

**Box 1. Sample of promising practices identified by research for delivering coordinated services to parents and their children**

**Structural features**

- Strong partnerships with other community organizations
- Parent-centered education and employment programming
- Coordinated and flexible parent and child service scheduling
- Expanded staffing to address turnover and improve child-teacher ratios

**Process features**

- Emphasis on the intergenerational focus of the program in marketing materials
- Thematically aligned adult and child class work
- Individualized and scaffolded instruction to adults as well as to children to better meet needs
- Help for participants to identify attainable goals and measure their progress to motivate ongoing engagement

<sup>15</sup> Our literature review identified two other interventions serving parents and children that aimed to improve economic security and child development and also had effectiveness research. One, the Nurse Family Partnership,

gold standard for measuring the effects of a program on outcomes for parents and children. From 2004 to 2007, Enhanced Early Head Start added workforce training and education services for parents to Early Head Start programs that offered child development services and parenting support for families with infants and toddlers. The evaluation, conducted in Kansas and Missouri, found no impacts on parents and children three years after enrollment (Hsueh and Farrell 2012), although researchers hypothesized that the lack of impacts could be due to the low intensity of employment services that the intervention offered such as providing referral services to parents, and overall low intensity of services implemented. An ongoing quasi-experimental study focuses on *CareerAdvance*®, a career pathways training program for parents that also offers high quality Head Start services for children. The evaluation is examining the impacts on parents and children of adding adult services to Head Start; findings are not yet available. This study, which also includes descriptive implementation components, is being conducted through a research partnership sponsored by a federal Health Profession Opportunity University Partnership Grant.

The lack of research on programs that intentionally support parents' economic security and children's well-being leaves unanswered many important research questions about the design and effectiveness of such programs. The state of the field suggests it would be important to expand the research base on such programs, but research designs should be matched to the program's level of development, as we discuss in the next section.

## **2. Research designs should be matched to the stage of program development**

Researchers and federal agencies that support social science research agree that the continuum of research and evaluation designs (from descriptive to efficacy and effectiveness evaluations) should be appropriately matched to the research questions and the program's stage of development (Institute for Education Sciences and the National Science Foundation 2013; Office of Planning, Research and Evaluation 2016; Davies 2013; Dunn 2008; Wholey 2010). Programs that do not yet have fully defined and implemented services and some evidence of positive program outcomes should not be involved in effectiveness evaluation, as such evaluations are costly and it is not helpful to policymakers or practitioners to learn that a program had no impacts on families when it has not yet been implemented as intended. Instead, programs in earlier stages of development should engage in descriptive evaluations, including process studies and outcomes evaluation, and use the findings for continuous improvement of program services and delivery as well as refinement of their logic model before engaging in effectiveness evaluation.

We have noted that most programs that offer services to improve parents' economic security and children's well-being are in the early stages of program development. Many of them focus on strengthening partnerships and improving coordination of services to parents and their children. For such programs, descriptive and implementation research can support efforts to understand the actual dosage of services parents and children receive, the quality of those services, and outcomes of receiving services (OPRE 2016; Ross et al. 2005). For example, the

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offers a high dosage of services to support parenting but the focus on parents' economic security is minimal. The other, Opportunity NYC-Family Rewards Demonstration, offered a cash payment to families conditional on positive employment outcomes for parents and academic outcomes for children, but did not offer services beyond cash to support parents' employment or children's development.



Utah Department of Workforce Service’s Next Generation Kids program used implementation science frameworks as it designed a pilot intended to focus on coordinated services for parents and their children who receive TANF (see Appendix C for a profile of this program). Developing logic models and measuring services and outcomes to assess how well program operations and outcomes align with the logic model can also support program development.

Many programs that are intentionally serving both generations may not yet be of sufficient intensity or quality to make a meaningful impact on parents’ economic security and children’s well-being. These programs would benefit from descriptive research to better understand the intensity and quality of services they do offer (Box 2).

A few programs that intentionally serve parents and their children may have established service models and a track record of successful implementation. Some of them might be ready for effectiveness evaluation, but this will require further investigation. We describe criteria for readiness for an effectiveness evaluation in Section C.

#### B. Research and evaluation to support development of programs that are intentionally serving parents and children

Many programs that aim to serve parents and their children are in early stages of implementing coordinated services to parents and children (see Chapter III). Recent research and program development experience suggest that fully implementing a program as its leaders and staff envision may require concentrated attention by a team that combines data analysis and program design skills to identify and then solve problems that constrain family engagement, prevent service coordination, and detract from service quality (Metz et al. 2015). Many programs do not have staff teams and a data infrastructure to support this program development work. Partnerships with other programs and with researchers could provide the momentum and sustained focus necessary to support progress toward fully implementing programs that intentionally coordinate services for parents and their children.

We first discuss the ways that peer organizations and researchers can support program development. We then discuss options for research that can support stronger program implementation and at the same time, provide insights about promising approaches to serving parents and their children, organizational partnerships, and outcomes. Such research could be conducted through partnerships between researchers and programs serving parents and their children.

#### **Box 2. Descriptive research could support coordination of services to parents and their children**

##### **Program highlights**

Capital Area Community Action Agency (Community Action) provides two primary services in its integrated program. Adults participate in “Getting Ahead,” a workshop to help parents address employment barriers and training related to the experience of living in poverty. Children participate in Head Start. In the past, few Head Start families have participated in Getting Ahead. Community Action has developed plans to better integrate these services by strategically targeting Head Start families to participate in Getting Ahead.

##### **Research opportunities to consider**

As Community Action begins to coordinate its adult and child services, descriptive research can help to assess the number of families involved in both services and their engagement in each. Participant feedback can provide insights on approaches that can help parents of Head Start children successfully engage with the program and continue to pursue employment and other family goals.

## 1. Partnerships can catalyze program development

Partnerships between programs and peer organizations and between programs and researchers can be catalysts for stronger program development. Partnerships with organizations that support peer networking can create space for program leaders to learn about other strategies for engaging families, coordinating services, and other programmatic issues. Partnerships with external researchers can ensure that the development of data systems, analysis, and learning move forward amid other administrative demands on program staff's time.

Partnerships with organizations that support peer networking can provide a community of practice to facilitate communication and collaboration among practitioners and program leaders. Examples of such communities supported by federal grant programs and by private organizations are provided in Boxes 3 and 4. In a community of practice, program leaders can share ideas and experiences, and they can consult with each other about solutions. Researchers who participate in these networks can support the learning community by sharing research-based best practices and promising innovations. In a few instances, programs that offer coordinated services to parents and children may have in-house data analysis capacity. With dedicated staff, it is possible to ask and answer questions about service levels and quality, participant engagement, and outcomes by examining available data and strategically supplementing and improving program data quality. This information can inform efforts to improve service quality, family engagement, service coordination, and other aspects of the program.

### Box 3. Examples of communities of practice organized by federal agencies

**Rural IMPACT Demonstration Sites**, HHS in collaboration with other federal partners. Ten rural and tribal communities receive technical assistance to develop comprehensive approaches to increasing parents' employment and education and improving the well-being of children. It includes peer learning networks and online document sharing within and across grantees (ASPE 2016).

**Strengthening Working Families Initiative**, U.S. Department of Labor. This grant program is helping communities strengthen links between workforce development centers and affordable, quality early care and education to reduce barriers to employment.

**Systems to Family Stability National Policy Academy**, HHS ACF Office of Family Assistance. This 18-month initiative provides technical assistance and support including peer sharing and learning to eight state and local TANF agencies that were developing innovative redesigns of their TANF programs. One objective of the academy: help programs adopt an approach to case management that took the whole family into account.

### Box 4. Examples of communities of practice organized by private organizations

**Action Learning Network**, Annie E. Casey Foundation. This is a year-long opportunity for programs in five communities to share best practices and provide support in program development. Participants in the network participated in the Family Economic Success-Early Childhood Initiative evaluation.

**Ascend Network**, Aspen Institute. This center shares ideas about state policies to support development of more coordinated services for parents and their children. It disseminates research on promising strategies, aims to influence policy decisions, and develops practice leaders in early childhood through postsecondary education and in health and human services. The network includes 180 partner organizations—researchers, policymakers, and program leaders interested in innovative approaches.

**Parents and Children Thriving Together: Two-Generation State Policy Network**, Center for Law and Social Policy and the National Governors Association. Five states are participating in a network while developing two-generation strategies for systems change.

Partnering with an external research team can support program development because the researchers' focus will be on the particular program—tailoring analysis and drawing implications. Researchers can maintain a focus on

developing data systems and analyzing data so that this important work can continue even when program staff have heavy day-to-day demands of responding to participants' needs and addressing staffing issues. Researchers can discuss findings with program staff to identify ways to refine and improve the program. Research partners can work with program leaders and staff to develop a logic model, identify ways to measure specific items and relationships shown in the logic model, and draw implications from the findings. With an outside—and, ideally, objective—eye, they can help program leaders and staff assess program-specific findings in the context of other research on program development. For example, researchers can provide broad perspective on issues of identifying a target population, refining program activities, suggesting research-based service approaches, and specifying outcomes for adults, children, and families.

Few programs that we examined in the environmental scan (see Chapter III) had either in-house staff with data analysis capacity to support their implementation efforts or external research and evaluation partners. Three programs that had such a capacity used data to inform program development (Box 5). The two programs that had external research partners identified those partners early in implementation and infused research and evaluation into the process of developing the program. Partnerships such as these can help build program capacity for improving services and receive independent analysis and feedback on program development issues. Ultimately, such programs will be well positioned for an effectiveness evaluation of participant outcomes. Next, we describe the types of descriptive research that programs could engage with in-house data analysts or with external research partners.

## 2. Options for research to support program development and to build knowledge about approaches to intentionally combining services for parents and their children

Research to support program development may help many programs that are seeking to improve coordination among services for parents and their children, as most appear to be in early stages of development. We present three research options that can support program development and provide insights about promising approaches. The first option, based on the conceptual framework for services and outcomes we presented in Chapter IV (Figure IV.1), focuses on aligning program goals, services, and outcomes after the program has developed a logic model and data system. The second option uses the logic model and program data systems as a foundation to explore the services and

### Box 5. Research and evaluation capacity of three programs with intentionally coordinated services for families and children

**In-house data capacity.** Next Generation Kids, operated by the Utah Department of Workforce Services, is an intensive case management program for TANF families headed by adults who themselves received welfare benefits as children. To begin this pilot project, program administrators used longitudinal administrative data to identify the second-generation welfare beneficiaries who were eligible for the program.

**External research partners.** College Access and Success partners with local university researchers to articulate program logic models, measure services and outcomes, use data to strengthen program implementation and assess outcomes, and conduct a formative evaluation. With foundation funding, College Access and Success is receiving technical assistance to better use data for program improvement. The program recently used participant feedback gathered by its research partner to improve access to career services.

CareerAdvance® has a similar partnership with researchers and has used data to inform the development of educational services for parents and their children that align topics (such as budgeting for parents and early mathematics for children) to promote parent-child communication about learning.

Both CareerAdvance® and College Access and Success, with their research partners, had effectiveness evaluations underway in early 2017.

outcomes of programs that serve parents and their children in a coordinated fashion. The third research option, based on the partnership framework from Chapter IV (Figure IV.2), focuses on measuring the hypothesized dimensions of organizational partnerships to learn how coordinated services might best be offered to parents and children.

**a. Descriptive Study Option 1: Support programs in their efforts to align their goals, services, and outcomes**

This option starts with foundational work to clarify the program’s services and the expectations for participant outcomes through a logic model and to develop data systems to support further learning. Once these foundational pieces are in place, they can be used to ask questions about services and outcomes that can inform continuous improvement of program services and activities and inform the field about promising strategies and approaches. To ensure that research and evaluation are relevant and actionable for the program, researchers should ensure that program leaders and staff are involved early in planning the broad goals for the research agenda. Over time, program leaders and staff should provide ongoing input into the questions to be addressed and the data required to address the questions. Program partners also can provide important insights to help interpret the research findings and suggest ideas for further exploration.

**Develop a logic model.** A logic model is a diagram that helps articulate and align plans for services (the quality and intensity) with expected outcomes for parents and their children, and identify associated measures for the outcomes. Creating a logic model generally involves five steps (Box 6). Starting points for developing a logic model include the conceptual framework for approaches to meeting the needs of both children and parents from Chapter IV or one contained in “Making Tomorrow Better Together,” the report that summarizes the activities of the Ascend Network two-generation outcomes working group (Ascend 2016). Either conceptual framework could be adapted to a program’s context and goals. Measures of services and outcomes may be identified from large-scale studies of programs for children and families, such as the Head Start and Early Head Start Family and Child Experiences Study, and from measures compendia.<sup>16</sup> We describe later in this chapter some possible measures to use.

**Box 6. Steps for creating a logic model**

1. Describe the target population: family, parent, and child characteristics
2. Articulate the services to be provided to parents and children, including intensity, quality, and duration of services
3. Describe expected outcomes for parents, children, and families in the short and long term, considering the intensity, quality, and duration of services for parents and children
4. Identify how to measure the intended and actual intensity, quality, and duration of services
5. Identify outcome measures for parents, children, and families

*Source: W.K. Kellogg Foundation 2004.*

**Create and/or enhance a program data system to track services and shorter-term outcomes.** Once services, outcomes, and measures are defined, research partners and programs

<sup>16</sup> For example, the design options for home visiting evaluations compendium of measures (<http://www.jbassoc.com/reports-publications/dohve>); and the Early Head Start Research and Evaluation measures compendium (Kopack Klein et al. 2017).

can work together to build a unified program data system to track program services and shorter-term outcomes. Programs might have a data system that meets their administrative requirements, but in many of these systems, data on parents and children are not easily combined, longitudinal tracking might be unreliable, and data items that measure components of the logic model (such as certain inputs or outputs) can sometimes be missing or incomplete. The program's administrative data system may, nevertheless, lay a foundation to support ongoing assessment of program operations and shorter-term outcomes using the logic model as a framework to benchmark whether operations and client experiences align with the expectations of program staff and leaders. Modifications of the data system to support monitoring and analysis of program activities and outcomes can be prioritized by program leaders and the research team, and implemented as funds and staff time to address them become available.

A program's administrative data should capture information on participants, participant feedback, and the quality of program services.

- **Participant information.** Staff should gather participant data throughout the participants' experiences with services, including (1) characteristics of families engaging in services, captured at enrollment; (2) services received and attendance over time; and (3) shorter-term outcomes for parents and children, such as education and employment program completion, assessments of children, and other outcomes from parent surveys.<sup>17</sup>
- **Participant feedback.** Staff can gauge participant satisfaction based on feedback and exit surveys to understand participants' engagement and reasons for leaving the program.
- **Quality of program services.** Staff can capture service quality through information on staff characteristics and training (for example, whether staff in early care and education centers have any or a certain type of credentials in early childhood education) as well as through other measures (for example, observational assessments of early care and education classrooms). Capturing all of these types of data will facilitate analysis and refinement of program services.

**Compare services to the logic model and adjust as needed.** Researchers and program leaders can use the data and logic model to assess whether the program is operating as planned, make changes, and then assess operations again. These continuous improvement cycles entail asking how the program is operating, examining data to answer the question, and implementing changes to improve the program. For example, if the data show that parents are not participating in education programs long enough to obtain a degree, program staff and leaders would identify key points at which parents leave the program (for example, after each semester), identify ways to re-engage parents for another semester, implement changes, collect more data, and check to see if program modifications improved re-engagement rates sufficiently.

The information obtained by examining services received and participants' feedback can also provide useful insights to the design of programs that intentionally combine services for children with services for parents. Alternative design approaches—one idea or several ideas—can be tested in a series of rapid, small-scale evaluations until the desired improvement is

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<sup>17</sup> The logic model may also include longer-term outcomes for parents and children, but program administrative data is unlikely to be the most cost-effective and accurate way to measure these outcomes.

achieved. For example, the program could assess alternative approaches to improving participation rates in employment training by randomly assigning participants to receive services with or without a mentor who completed the employment training a year or two earlier. Similarly, the program could assess the value of cross training staff working with adults and children by cross training some staff members and then asking parents with cross-trained staff and parents with other staff to assess the quality of their relationships with the staff member, the perceived relevance of the instruction provided, and the staff member's ability to understand and provide support for the challenges of working and parenting. In identifying program adjustments, researchers can help program leaders consider strategies that are supported by research evidence. As program improvement work proceeds, program staff may also identify enhancements and refinements to the data system itself, which will strengthen program capacity to understand and improve program operations. . Researchers should continue to identify research questions that can inform theories about these programs and address them, as they will also inform program improvement activities and can be communicated more broadly to inform the field.

**Examine parent and child outcomes using the logic model and adjust program services.**

Once the program is operating as expected, research partners and program staff can assess whether measures of parent and child outcomes are changing as anticipated. The outcome measures should be captured at the start of program services as a baseline and be checked against this baseline periodically—once a year, for example. Outcomes measured during program participation and immediately after might not change as expected. For example, employment rates and hours might initially decline as parents focus on gaining education, but in the longer run, we expect that parents will return to employment and have higher earnings and greater employment stability. When researchers and program staff review short-term participation and outcome data, they will need to consider that such changes might be reasonable to expect in the short-term. Ultimately, in the longer term, we expect outcomes to improve, as participants gain new skills and deepen their engagement in employment. Establishing that shorter-term outcomes are improving or at least moving in reasonable directions given the program's services would suggest that the program is promising and might be ready for an effectiveness evaluation using a comparison (or control) group.

If shorter-term outcomes are not moving in expected directions, continuous improvement cycles can be used to identify ways to strengthen services and assess program improvements that might improve outcomes. Research partners can help take stock of what is offered, including the core features of the program's service approach and its ties to evidence-based practices in the literature. Researchers can also help identify what might be unique or novel about program services and whether the services are being delivered with the appropriate quality and/or intensity to generate the outcomes expected by program leaders and staff. Rapid-cycle evaluations can test adjustments to program services, including tweaks in the quality, dosage, or duration of services, or adding complementary services to strengthen program intensity. Program adjustments can be assessed using program data—investigating correlations between services and outcomes that may suggest possible thresholds for quality and intensity, for example—and by consulting program staff, participants, stakeholders, and communities of practice. A community of practice is a real or virtual space in which program leaders can share ideas and experiences and network with peers about solutions.

**b. Descriptive Study Option 2: Descriptive study of services and outcomes of programs for parents and their children**

Once a program has developed data systems and a logic model and has conducted program development research to strengthen its program services, descriptive research on services and outcomes can be informative for other programs and policymakers. Research can describe the quality and intensity (including range) of services provided and the outcomes for parents and their children to inform the field about promising approaches.

A research study under Option 2 might ask several research and evaluation questions that are important to establish a basic understanding of the programs and their outcomes in this nascent field:

- What is the quality of the child development services offered by the program? How does quality compare to other early care and education programs in the community? To statewide standards of quality (for example, in the quality rating and improvement system)? To national standards of quality (for example, Head Start performance standards or quality standards from the National Association for the Education of Young Children's)? To other programs that jointly serve parents and their children?
- What is the intensity of child development services offered by the program? How does the intensity compare to other early care and education programs in the community? To other programs that serve parents and their children?
- What is the range and intensity of education and employment-related services the program offers for parents? Do the services meet industry standards for the intended types of employment? How does the content and quality of these services compare to other employment and education programs in the community and state? <sup>18</sup>
- How do child development and adult services line up in terms of content, delivery, schedules, and location?
- What are the outcomes for children and parents one year, two years, and three years after enrollment?
- What parent characteristics are associated with participating in education services (such as English as a Second Language; adult basic education and GED preparation, job certification programs, or community college? Parent characteristics could include education level; age; employment experience; wage levels; and motivation to engage in employment or education services and in children's services. What parent characteristics are associated with participating in employment training services? With participation for a longer period? What are the patterns of participation in adult services?
- What parent characteristics (for example, age, education level, employment experience, motivation) and child characteristics (such as child age, developmental status, or whether

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<sup>18</sup> The quality of adult education and employment-related services is of interest, but there are no national or state standards for quality to use as benchmarks. A study can address questions of quality by comparing the services to what is required for jobs in the target industry and by obtaining feedback from participants about their experiences.

this is the first-born child) are associated with longer participation in child development services?

A study that examines these questions for several programs that each take a different approach to intentionally combining services for parents and their children could make a significant contribution to our understanding of variations in these program models and the strengths and challenges of the approaches. Ideally, the programs in the study would represent different program backgrounds, types of populations served, and range of services provided. To be most useful, programs participating in the study would be beyond the “emergent” stage of development and would have better-implemented program models. Such programs would have previously conducted some of the work described in Option 1 to establish their program logic models, assess how the services they provide align with the logic model, and started to align their services with the expectations in the logic model. The study would support comparisons of program service quality and intensity and of parent and child characteristics and outcomes if the measures were as consistent as possible.

The study could be a coordinated effort among research partners of each of the programs or as an effort by a team of external researchers working with the programs. Data could come from program administrative data systems if the programs have developed the capacity to collect measures of service quality and intensity and initial characteristics of and outcomes for children and adults. Establishing a set of common “core measures” of key service and participant characteristics would be most helpful in providing a consistent picture across the programs. Information on parents and children after they leave the program could come from other administrative data systems, such as state unemployment insurance (for employment and earnings), and state or local education data systems (for school achievement and progression), or from parent surveys and child assessments, and could provide consistent measures across programs.

**c. Descriptive Study Option 3: Learn more about partnering to offer coordinated services for parents and their children**

As we noted in Chapters III and IV, programs that intentionally serve parents and their children typically involve partnerships within and across organizations that provide narrowly targeted services, usually to one generation. Partnering can be appealing because it allows two (or more) organizations to combine their specific expertise without having to individually build a new skill set and capacity to serve a very different cluster of service needs. For example, a Head Start program that offers high quality early education and parenting services might not need to expand its own service capacity to encompass high school equivalency or vocational education, employment training, and career development, although through a partnership, it might be able to deliver some of these services on site.

Our partnership framework (Chapter IV) provides a structure for thinking about research on partnerships that provide services to meet the needs of parents and their children. A research project under Study Option 3 might ask several related questions about partnering:

- What partnerships have developed to provide services that meet the needs of both children and parents? What types of organizations are partnering, and what services are involved? What gaps/overlaps in services do the partners perceive and to what extent are gaps/overlaps



attributable to challenges in developing partnerships or to program capacity or interest in partnership?

- What are promising approaches to coordinating education, employment training, and early childhood education services to support family economic security and child well-being?
- Which federal and state policies facilitate or interfere with coordinating services for parents and their children?
- How closely do organizations that provide services to parents and their children partner with each other along the specific dimensions of engagement, shared mission, shared resources, co-creation of value, and innovation and systems change? What services are involved in the partnership?
- Along which dimensions and for what services is partnership more challenging and how do programs successfully address the challenges?
- How does the strength of partnerships change over time along each dimension? What activities are associated with these changes?

This research could examine several types of partnerships: combinations of preexisting services, where the partnership was initiated by an adult-serving or a child-serving organization, or organizations that partnered to develop and deliver new services to parents and their children. Our field work illuminated several examples of partnerships to provide coordinated services to parents and their children (Box 7). This research would be exploratory because there is little research about whether “closer is better” on each partnership dimension in Figure IV.2, and whether some dimensions are more important than others. Findings from this research would be useful to agencies interested in partnering to provide coordinated services to parents and their children or in assessing their existing partner relationships.

A descriptive study of several programs that serve parents and children in concert could offer an in-depth look at variations in the level of partnerships and the challenges of partnering and begin to develop measures of the dimensions of partnership. Programs included in the study should represent different approaches to partnerships, stemming from their program history as originally serving either parents or children and adding on

**Box 7. Collaborative partnerships to provide intentionally coordinated services for families and children**

**College Access and Success.** Educational Alliance partnered with the Borough of Manhattan Community College to create the College Access and Success program, which provides ESL classes to the parents of Head Start children as the first step on a pathway to a college degree. The organizations combined their expertise with children and adults in an integrated approach. A task force consisting of staff from both organizations meets monthly to plan program activities, and they communicate daily because of the co-location of Head Start and adult education classes. As a result of the partnership, both organizations feel that they have been able to expand their missions and reorient their service philosophy to think about whole families instead of just adults or children.

**Briya Public Charter School/Mary’s Center.** Briya, which offers prekindergarten and infant and toddler care, family literacy, and adult ESL and sectoral training, was a division of Mary’s Center, a community health clinic, before it became a charter school. The two organizations continue in a close collaborative partnership: they have representation on each other’s board of directors, share a human resources department, and co-locate in three of four Briya locations. The close relationship between the two organizations allows for a near-seamless transfer of clients between services. For example, children with behavioral or learning issues can be quickly referred to Mary’s Center for screening, and Mary’s Center provides a clinical setting for adults in Briya’s medical assistant training program. Briya’s student services staff can access Mary’s Center records to track and follow up on referrals across organizations to ensure that families have their educational and health needs met.

services, or collaborating from the start, as described in Chapter III. Ideally, the study would also include programs with newer and longer-standing partnerships and programs serving different populations. The study would include interviews with each partner to obtain its perspectives on the partnership and to better understand how best to measure the level of collaboration.

Interviews with program participants would provide further insight into the closeness of the collaboration and the degree to which the organizations have coordinated services. Interviews with community stakeholders would provide additional perspective on the collaboration and its challenges.

### C. Effectiveness evaluation of programs that intentionally serve parents and their children

Ascertaining whether programs that offer coordinated parent and child services are effective is critically important, given the lack of a body of research on program impacts. Earlier programs that provided coordinated services to parents and their children in the 1980s and 1990s did not have the large effects their developers and funders expected (Aber et al. 1995; Granger and Cytron 1999; Chase-Lansdale and Brooks-Gunn 2014; Hamilton et al. 2001; Bloom et al. 2000, 2002; Beecroft et al. 2003; Fraker et al. 2002; Miller et al. 2000; Love et al. 2013; Puma et al. 2012; Vogel et al. 2010). Contemporary programs are offering coordinated services to parents and their children in new ways and in a different service and policy environment than programs from the 1980s and 1990s. As we discussed in Chapter III, today's programs are building their service models on a foundation of quality early childhood education programs such as Head Start and Early Head Start, and on adult education and employment training programs that have developed stronger service models in recent decades. These developments suggest that contemporary programs could be offering higher quality services than the earlier programs. At the same time, the general landscape of services for children and families has become stronger over the years, which means families who do not receive coordinated services could nonetheless be receiving high quality services. Our literature review for this project found that very little research is available or in progress to test the overall effectiveness of contemporary programs, largely because most of these programs are still developing their service models and are not yet ready for an effectiveness evaluation.

Because many programs that offer coordinated services to parents and their children are in early stages of development, and others likely are more fully implemented, assessing a program's readiness for effectiveness evaluation requires careful consideration. We discuss an approach to assessing program readiness for an effectiveness evaluation in Section 1. After confirming that the program is ready for an effectiveness evaluation, researchers should select an evaluation design that can address the research questions of greatest interest. We recommend in Section 2 options for addressing different effectiveness questions.

#### **1. Assessing program readiness for an effectiveness evaluation**

Long-standing evaluation theory emphasizes the importance of conducting effectiveness evaluations with programs that are well implemented and that have demonstrated that participants' outcomes are improving. This advice, to "evaluate only proud programs," means it is important to identify programs that have demonstrated that they are providing services at the level of quality and intensity that has been shown to produce positive outcomes for families (Campbell 1988).

For most interventions, three general assessment steps can yield information on whether a program is ready for an effectiveness evaluation (Figure V.1). This “evaluability assessment” first examines the program’s level of implementation and then the strength of its theory of change. Such information is likely to be readily available and is likely to indicate readiness for effectiveness evaluation if the program has partnered with researchers on data-informed program development, as we discussed in Section B. An evaluability assessment also examines other factors related to evaluation capacity, which we discuss in more detail below.

**Step 1: Assess implementation status.** In Step 1, evaluators can use an implementation science framework to assess how well the program is operated (Metz et al. 2015; Metz and Albers 2014; Metz 2016). A program that is not implemented well is unlikely to yield positive outcomes, regardless of the positive intentions of leaders and staff.

To assess implementation status using an implementation science framework, evaluators would examine various organizational factors, such: as how a program hires, trains, and supports staff; what, how, and why program data are collected; how program decisions are made; how committed staff are to the program; and the program’s external partnerships and supports. They would also examine participant responsiveness, such as the number of participants who enroll in the program and the amount of services they receive.

**Step 2: Assess the strength of the program’s logic model.** A theory of change describes how an approach, such as coordinated services delivered to parents and their children, will produce the desired outcomes of parents’ economic security and children’s well-being. Well-implemented programs must also have a sound theory of change if they hope to show positive outcomes for participants in an effectiveness evaluation. This important tool can help researchers and program leaders gauge the strength of the program’s vision for service levels and quality and the expectations for parent and child outcomes.

As we discussed earlier, program leaders and staff can work with researchers to develop a logic model and then use program data to assess how well the types, intensity, and quality of actual services line up with their expectations. Researchers and program staff can also assess whether the outcomes for parents and children are trending in the expected direction.

Building on the work programs may have conducted in partnership with researchers, a logic model and analyses of program data supporting continuous improvement would be helpful in completing this step of assessing program readiness for effectiveness evaluation. Previous research conducted with the program might demonstrate that the outcomes included in the program’s logic model are aligned with the types and amount of activities the program offers, and may show that those outcomes have been trending in the expected direction. Another key question to consider is whether research exists to justify the hypothesized pathways between program services and outcomes—for both generations. Evaluators may consider (1) whether past effectiveness evaluations of a service have shown positive impacts; (2) any key differences between the context of the prior research and the program’s context, such as differences in the target population; and (3) the methodology and rigor of the prior research.

Figure V.1. Three steps to assess a program's readiness for an effectiveness evaluation

### Step 1: Assess implementation status

- *Competency drivers:* Staffing and training
- *Organization drivers:* Leadership, community partnerships, data systems
- *Fidelity of implementation:* Staff knowledge and buy-in, quality assurance, staff support
- *Participant responsiveness:* Enrollment and participation

### Step 2: Assess the strength of the program's logic model

- Are the types of services for parents and children designed to achieve desired outcomes?
- Are the quality and intensity of services sufficient to achieve the desired outcomes?
- Is there research to support anticipated pathways from service components to outcomes?
- Does the logic model indicate sufficient resources and inputs and a realistic time frame for seeing outcomes?

### Step 3: Consider maximum possible rigor of evaluation design

- *Target population:* number of potentially eligible families in the community exceeds program capacity and current and potential referral sources can expand the number of program applicants
- *Program capacity:* number of families who can be served, ability to increase capacity if needed
- *Evaluation capacity:* ability to enroll and randomly assign families from different sources, maintain family random assignment over time, interest in evaluation among program leadership and staff, partner and community support for evaluation
- *Evaluation fidelity:* ability to deliver a positive message about the evaluation and adhere to random assignment outcomes
- *Data capacity:* willingness and ability to assist with data collection at enrollment or baseline and at other points later in the evaluation
- *Community context:* differentiation from other services in the community

Note: Implementation criteria derived from Metz and Bartley (2012); Metz and colleagues (2015); other criteria derived from Davies (2013); Dunn (2008); and Wholey (2010).

**Step 3: Consider maximum possible rigor of evaluation design.** If a program passes the first two steps, an evaluator should determine the most rigorous research design that a program can support. Effectiveness studies with an RCT design can support the strongest conclusions about the impacts a program causes. Quasi-experimental designs (QEDs) can be considered for measuring effectiveness if enrollment and capacity criteria are not met. QED designs are not as well positioned as RCT designs to support strong causal conclusions about impacts, although they can provide a next-best solution for emerging program models.

Evaluators should consider several factors before selecting a research design for an effectiveness study:

- The size of the potentially eligible population in the community and current referral sources for the program to assess the potential for expanding the number of applicants through broader outreach and referrals to meet sample size requirements and to form a control group
- Program capacity for the number of program participants who need to be served to meet targets for the number of families required in order to measure reasonably sized effects of the program
- Leadership support for the evaluation
- Interest in and ability of staff to carry out evaluation activities, including enrolling families who might apply through either child services or adult services, providing clear and positive messages to families about the evaluation, and maintaining random assignments over time
- A strong contrast between the program's services and generally available services in the community

The information necessary to assess a program's readiness for effectiveness evaluation could come, in part, from public documents, including websites and grant proposals, which would provide some information about the program's services, target populations, and theory of change. However, these sources might not always have the appropriate level of detail or might not reflect the most recent understanding of program services.

To deepen the understanding of a program's readiness for evaluation, it is necessary to conduct telephone interviews and additional reviews of documents. Telephone interviews can help clarify the types of services provided for parents and children and summarize research activities undertaken by the program. Documents, including grant proposals, program materials and the website, and research reports, might contain information on the number of families served each year, eligibility criteria for participation, funding sources, implementation challenges, and outcomes achieved. Researchers who have been working in partnership with the program can also provide information about program readiness for evaluation, as they will have a good understanding of the types of information required for an evaluability assessment. With their access to program and other data, researchers might provide customized data summaries that address key issues of importance to evaluation readiness. Summaries might describe the extent to which the program serves parents and their children, rather than parents and children from different families, the types of services parents and children have received over time, levels of attendance by parents and children, service quality, and a wide range of parent and child outcomes.

Site visits could be another useful source of data for evaluability assessment. The most promising programs should be visited, as individual, first-hand contact with a program offers a better understanding of the program's interest in evaluation and staff buy-in, the quality and intensity of services for parents and children, the extent to which the program serves parents and children from the same families, and the existing and potential capacity of a program to support an evaluation. Face-to-face contact with a program's leaders and staff can also foster interest in participating in an effectiveness evaluation. It provides an opportunity to explain the benefits of evaluation, such as further development and refinement of program services, additional program support to help the program succeed, and engagement in a national discussion about how to better serve parents and children in a coordinated fashion.

In-person meetings also provide the opportunity to discuss evaluation activities that programs might need to support, including a systematic enrollment process, enhancements to data collection, continuing strong program implementation, expanded recruitment and enrollment, and adherence to random assignment. Random assignment is the strongest impact evaluation design, as we will discuss below, but it poses a challenge for program staff, who view their role as helping those in need. Program staff are often uncomfortable with the idea of randomly assigning families to receive the program or not. They might be more willing to support random assignment if resource levels and staff capacity are much less than the number of families who are eligible for and interested in the services. Providing lighter-touch services to the control group can also help gain the support of program staff, although such services can reduce the contrast between the intervention and control groups and make it more difficult to detect program impacts.

## **2. Options for research to assess program impacts**

Impact evaluation designs could address several questions of interest about the effectiveness of coordinated service approaches on the outcomes for parents, children, and families. Program administrators, funders, and researchers must determine which research questions are of greatest interest to them before selecting a study design. Here, we describe the designs for three effectiveness studies, which align with three different research questions (Table V).

These designs would have to be tailored to the program operations and research goals of programs interested in partnering in an effectiveness study.

Table V.1. Research questions addressed by three effectiveness study design options

| Design option | Research question   | Comparison  |
|---------------|---|---|
| 1             | What are the impacts of a program offering coordinated services to parents and their children on outcomes for parents and their children?   | A program that offers coordinated services to parents and their children compared to:<br>Programs that are generally available in the community                             |
| 2             | What are the impacts of providing intentionally coordinated services to parents and their children rather than serving parents or children separately?  | A program that offers coordinated services to parents and their children compared to:<br>Child development services only<br>or<br>Education and/or employment services only |
| 3             | What are threshold levels of service quality and intensity for parents and children that are necessary for programs to have positive impacts on parents' economic security and children's well-being? | Variations in the level of quality and intensity for children's services and adult services   |

**a. Effectiveness Study Design Option 1: What are the impacts of a program that offers coordinated services to parents and their children compared to other services generally available in the community?**

An effectiveness study that examines the impacts of a program that offers coordinated services to parents and their children would address the fundamental question of whether the program is improving outcomes for parents and children more than other services generally available in the community. The study would evaluate the impacts of a single program that serves parents and children to begin to establish evidence on the effectiveness of that program. However, given the variety of approaches to intentionally serving parents and their children, a multisite evaluation of several different programs could be even more useful in building evidence about these approaches.

**Design of the effectiveness study.** The program that offers coordinated services to parents and their children would be compared to other services in the community. A random assignment design is the one best able to measure the causal impacts of the program on parents' and children's outcomes. If random assignment is not feasible, other designs, including a wait list control or a QED could be considered. We discuss these designs in turn.

- **Random Assignment Design.** Under a random assignment design, families who apply to the program would be randomly assigned to an intervention group that can receive services from the program or to a control group that does not, but can obtain any other services available in the community. If families approach the program for just parent education/employment services or for just early care and education services for children, the program would have protocols for encouraging participation in parent and child services or for determining eligibility for families who need one service at the outset but who later request broader services. A challenge for implementing the evaluation would be for the program to have well-integrated parent and child enrollment processes and data that can be maintained over time, so that families who apply for either parent services or child services

would be randomly assigned, and that family-level assignment would be preserved for the length of the study. In addition, parent and child services would have to be well coordinated and aligned to maximize benefits for both generations and for parents to see the connectedness and value of services for both generations offered by one program or agency.

- **Wait List Control Group Design.** An alternative to random assignment design is a wait list control group design, in which families randomly assigned to the control group are placed on a waiting list. Control families can be served once the evaluation activities are finished, including program participation and follow-up interviews. This design is attractive to many program staff because it mimics program enrollment processes by forming a wait list when applications exceed program capacity, but instead of first-come first-served, applicants are randomly assigned either to program services or to the wait list. Nevertheless, a wait list control group design may be unsuitable for evaluating programs that intentionally offer coordinated services to parents and their children. Such programs sometimes provide services to families for as many as two or three years, and children may not be age-eligible for services after that period is over. Moreover, many of the expected benefits of programs for the entire family are longer term, such as school success for children and improved career trajectories for parents, requiring longer-term follow-up. Waiting for 5 to 10 years for program services is not helpful to families. A wait list control group is more suited to a short intervention with an evaluation that includes only short-term follow-up.
- **Quasi-experimental Design.** Another alternative to a random assignment evaluation is a QED, which requires researchers to identify an equivalent comparison group of families who do not receive program services. One approach to creating a comparison group is to enroll into the study the families who meet the same eligibility criteria as the program families. Such families might be well matched if they live in a similar location (for example, an urban location if the program is located in a city) within the same state so that policy and economic conditions are similar. A strong QED requires researchers to demonstrate that the intervention and comparison groups are similar at enrollment to the study on a range of characteristics that might affect the outcomes of interest. Characteristics to measure at enrollment include early measures of the outcomes of interest, such as parent education and employment and children's language development and social-emotional well-being. Additional characteristics central to the parent-child focused program approach can improve the credibility of this design, including the parent's motivation to participate in employment or career training, and motivation to improve the child's school outcomes. However, it is challenging to define a comparison group that matches program group families as well as random assignment can, as unmeasured characteristics that influence outcomes can be different, on average, between the two groups.

**Sample size requirements.** The study needs to include a sufficient number of families (parents and their children) in both the intervention and control groups to detect policy-relevant impacts on the most important outcomes of the program offering coordinated services to parents and their children. The sample size requirements show the number of families needed for the analysis of program outcomes. Some families who enroll may not respond to follow-up surveys, so a larger number of families will need to be enrolled in the study to meet sample size requirements. Our calculations assume that 80 percent of families enrolled participate in the follow-up surveys.



We have calculated the sample sizes of parents and their children that would need to enroll in a study to detect a difference in children’s and adults’ outcomes at follow-up that corresponds to a 20 percent effect size (Table V.2). Because families are randomly assigned to the program, the analysis will assess the impacts on parents and on children without the need for clustering and therefore the sample size calculations do not require adjustments for clustering.<sup>19</sup> For children’s achievement, we used the Woodcock-Johnson achievement tests, which have a standardized mean of 100 and standard deviation of 15. For parents’ employment, we used the percentage employed. The calculations indicate that 875 parents and children would need to enroll in the study, with 438 assigned to each group.

Table V.2. Sample sizes needed at enrollment for an evaluation

| Minimum detectable difference in: |                          | Number enrolled: |         |
|-----------------------------------|--------------------------|------------------|---------|
| Children’s achievement outcome    | Adult employment outcome | Children         | Parents |
| 2.9                               | 0.08                     | 875              | 875     |

Notes: The estimated number of children and parents needed for the study is based on power calculations (power = 0.80) for individual-level randomization with 50 percent assigned to each group. The estimates assume a two-sided hypothesis test and a significance level of 0.05. The variance of the outcomes explained by covariates ( $R^2$ ) is assumed to be 15 percent. Parental employment rate is assumed to be 0.55 in the control group. The calculations assume that 80 percent of the sample is available at the follow-up point.

In addition to adequate sample size, the effectiveness evaluation should include a plan for measuring outcomes to assess how parents and their children fared after receiving program services, compared to those in the control group. We next discuss the plan for aligning outcome measures and data collection plans with the study’s research goals.

**Measuring outcomes for parents and their children.** The plan for measuring outcomes of the program should align research questions, outcomes, appropriate measures, and data collection plans to ensure that the evaluation goals are met with minimal burden on the program and families. Program partners should be involved in discussions of measuring outcomes so that the outcomes measured align with their ideas about the program’s most important effects. In addition, program partners can help ensure that existing program data are used to the extent possible in the evaluation and any additional data collection is minimally disruptive to program operations.

Outcomes to be measured should align with the research questions and with the logic model for the program. Table V.3 shows research questions that may be of interest in an evaluation of a program that offers coordinated services to parents and their children and the outcomes that would be aligned with each research question.

<sup>19</sup> Designs that involve randomization at the site or program level, such as Effectiveness Study Design Option 3 (below) would require the sample size calculations to account for the nested design by adding terms that reflect the correlations within and across clusters that increase the minimum sample size needed for the study.

Table V.3. Research questions, outcomes, measures, and data sources for the impact study

| Research questions  | Outcomes  |
|---|---|
| What are the impacts of the program on parents?                                       | Education levels, attainment of training certifications, employment, job stability, career progression, and earnings  |
| What are the impacts of the program on children?                                      | Language and vocabulary development, literacy and mathematics achievement, social-emotional development, health, and well-being   |
| What are the impacts of the program on the family and home environment?               | Family stress, family routines, parenting practices, the educational environment in the home, the parent-child relationship, and parent and child mental health                         |
| What are the impacts of the program on longer-term outcomes for parents and children? | Parents' economic well-being<br>Children's school progress and performance<br>Outcomes for the children as adults, such as employment and earnings, family income, and family formation |

Once researchers and program staff agree on a set of research questions and outcomes of interest, they will have to select appropriate measures of each outcome and a plan for collecting data, at enrollment and at specific follow-up points. Decisions about measures to be used in the evaluation balance considerations about the expected outcomes at that time point, the age of the child, the quality of the measures, and the data collection methods that might be feasible and cost-effective (for example, whether an in-person visit is possible). We discuss these issues in turn.

Table V.4 builds on the previous table to illustrate measures and data collection approaches and the timing of data collection that align with the outcomes shown in Table V.3. In this example, we have assumed that the program serves parents and their preschool-aged children (3 or 4 years old).

Several considerations are critical in choosing outcome measures. Measures should be appropriate to the ages and cultural/ethnic and educational backgrounds of participants, appropriate to the time point at which the measurement occurs relative to enrollment in services, have good reliability and validity, and demonstrated use in previous large-scale studies of programs supporting parents' employment and children's well-being. Other considerations include the cost of using the measure and overall burden of the measures for participants.

At enrollment, the evaluation should measure the demographic characteristics of parents and their children, but should also measure key outcome measures. That way, if the random assignment procedure is disrupted or follow-up survey completion rates are too low, researchers can assess the comparability of the intervention and control group available at follow-up using measures closely aligned to the outcome measures. Baseline measurement of characteristics that include parents' education, employment, and other activities that will be measured later as program outcomes is critical for a quasi-experimental evaluation, as we pointed out earlier, so that initial comparability of the program and comparison group can be demonstrated.

Table V.4. Illustrative outcomes, measures, and timing of data collection

| Outcomes  | Measures and data sources  | Timing of data collection based on enrollment date |        |         |         |         |          |
|---|--|--|--------|---------|---------|---------|----------|
|   |  | Enrollment (baseline)                              | 1 year | 2 years | 3 years | 6 years | 10 years |
| <b>Parents' Employment, Education, and Well-Being</b>   |  |  |        |         |         |         |          |
| Parents' employment, job stability, career progression, and earnings  | State employment agency data on employment, earnings<br>Parent report  | X  | X      | X       | X       | X       | X        |
| Parents' education, enrollment in education or employment/training, and training certifications earned                      | Program data on education, employment/training<br>Parent report  | X  | X      | X       | X       | X       | X        |
| Parent's mental health and stress   | Parent report of depression, stress  | X  | X      | X       | X       | X       |          |
| <b>Home Environment and Parenting</b>   |  |  |        |         |         |         |          |
| Home environment and family functioning (family routines, parenting practices, and the educational environment in the home) | Observation of the home (Home Observation for Measurement of the Environment)<br>Parent report of routines, educational practices, parenting practices | X  | X      | X       | X       | X       | X        |
| Parent-child relationship   | Observation and coding of parent's warmth, parent's supportiveness, and child's engagement with the parent   | X  | X      | X       | X       |         |          |
| <b>Children's Development</b>   |  |  |        |         |         |         |          |
| Children's language and vocabulary development, literacy, and mathematics achievement                                       | Woodcock-Johnson Tests of Achievement-III  | X  | X      | X       | X       | X       |          |
| Children's social-emotional development   | Parent and early childhood caregiver/teacher reports   | X  | X      | X       | X       | X       |          |
| Children's health and mental health   | Parent report  | X  | X      | X       | X       | X       |          |
| School achievement and progression  | School administrative data<br>Parent report  |  |        |         |         | X       | X        |
| School attendance and discipline incidents  | School administrative data   |  |        |         |         | X       | X        |

Notes: Home Observation for Measurement of the Environment Inventory (Caldwell and Bradley 2003); Woodcock-Johnson Tests of Achievement III (Woodcock et al. 2001)

The timing of data collection should take into account important time points in the evaluation (such as enrollment or baseline), the typical length of time parents and their children will receive program services, critical developmental milestones (such as the child's transition to school), and the expectations for program outcomes (such as whether longer-term outcomes are

expected). Table V.4 illustrates a measurement plan that could be used for a study of a program with preschool services and adult education and employment services. In this example, outcome measures will be collected one and two years after enrollment while parents and their children would likely continue to receive program services. Another follow-up is conducted a year later, after the child has moved to kindergarten and the parent might continue to receive employment-related services.

The logic model for programs that offer coordinated services to parents and their children suggests that the changes in the parent's economic status and the home environment, as well as high quality early intervention, will combine to improve the parents' employment and career trajectory and the child's trajectory over the longer term through school and into adulthood. Because of these hypotheses about long-term effects, we include two illustrative long-term follow-up points. A long-term follow-up at 6 years after enrollment, after the child completes third grade, takes into account the typical start of standardized testing in schools that can provide information on early school achievement and progression. A longer-term follow-up 10 years after enrollment, when the child is 13 and in middle school, provides further information about educational progress, the home environment and parenting, and the parent's career progression. After 10 years, parents will likely have completed any educational programs and accrued job experience so that their career trajectory can be assessed. For children, it would be useful to assess their outcomes beyond adolescence, after they have completed their education (which may include post-secondary programs) and move into employment. For a child entering a program as a preschooler, this follow-up point could be two or three decades later. Notably, recent research using income tax records has provided long-term follow-up measures of college attendance, employment, and family income decades after the initial program at relatively low cost (Chetty et al. 2016). Such long-term follow-up strategies should be anticipated when developing the evaluation consent form, and data from the evaluation that can help locate or match study participants should be archived with appropriate security safeguards so that researchers can use it in long-term follow-up studies.

A variety of sources are rich repositories for obtaining the measures in Table V.3. Parent interviews can provide information about the parent's education and employment activities, the parent's mental health, the home environment, and the child's social-emotional well-being. Direct child assessment is a reliable approach to obtaining measures of children's language, literacy, and mathematics achievement at younger ages. Early care and education ECE providers and teachers can report on the child's behavior and achievement. School records can provide measures of progress in school, standardized assessments of academic content areas, attendance and discipline incidents. Administrative data (such as Unemployment Insurance records and the National Directory of New Hires) may be a possible source for employment-related outcomes. As children grow older, they can report about their progress in regard to school, behavior, and expectations of the future.

The outcomes and measures in the table are illustrative. Each program evaluation should design its measurement plan around its own logic model and the research priorities of the program staff, researchers, and other stakeholders who are involved in developing the evaluation. Several resources available for identifying outcomes and measures include a recent working group report on outcomes of two-generation programs (Ascend 2016), a compendium of preschool through elementary school social emotional learning and associated assessment

measures (Denham and Brown 2010); the design options for home visiting evaluations compendium of measures (<http://www.jbassoc.com/reports-publications/dohve>); and the Early Head Start Research and Evaluation measures compendium (Kopack Klein et al. 2017).

A multisite effectiveness evaluation that includes several programs that offer coordinated services to parents and their children, each with an evaluation partner, could select common outcome measures to balance the need to focus on outcomes tailored to the specific program with the benefits of obtaining comparable multisite findings. By identifying a set of core measures common to all programs in the evaluation and a consistent schedule for data collection, the set of evaluations could be jointly analyzed to increase statistical power overall or for subgroup analyses, and to increase confidence in findings about the impacts of programs serving parents and their children. Beyond the core measures, additional outcome measures specific to particular programs could be included to reflect particular program emphases or population characteristics.

**Measuring program experiences.** Data on program services and experiences for families in both the intervention and the control group are important components of an effectiveness evaluation. This information, obtained in a process study, helps measure the differences in the average experiences of families in the intervention and control groups, which can help when interpreting the size of the impacts. Process studies in evaluations can establish that a large proportion of the control group had access to services similar to those received by the intervention group, making it less likely to detect impacts of the program (Puma et al. 2012).

Information from the process study on services the intervention group receives can also be useful in replicating the program if the evaluation demonstrates that the program had favorable impacts on parents and their children. The information would be used in working with other programs seeking to implement programs that intentionally combine services for parents and their children so that their efforts are guided by an effective program approach.

To meet the goals for the process study, researchers should assess the types, intensity, and quality of services the program group receives, and details (including cost) needed to replicate the program if the effectiveness study finds favorable impacts. The study should also measure the types, intensity, and quality of similar services that the control group receives. Table V.5 shows research questions for a process study and associated data sources.

The process study can draw on program administrative data records of services received and attendance for both the parents and children; in-depth interviews with program leaders, staff, and parents; and surveys of parents and staff. Each of these data sources has advantages and disadvantages. Administrative data is the least burdensome source, provided it contains the details needed for the evaluation, is accurate and up to date, and the data can link parents with their children. In-depth interviews with directors, staff, and parents can provide important insights about how the program is working, but they require a large time investment to obtain the information, then code and analyze it. A challenge of in-depth interview approaches is obtaining a representative sample of staff or parents willing to participate, inasmuch as there is often just one chance to hold such interviews or focus groups, and many potential participants do not attend the scheduled meeting. Surveys of staff and parents can include all program staff and all parents involved in the evaluation, but they should be relatively short, and that will limit the breadth of information that researchers can collect.

Table V.5. Research questions and data sources for a process study

| Research question   | Data sources  |
|---|---|
| What education/employment training and support services did parents receive, and over what time period? What were parents' attendance patterns?   | Parent survey at 12-month intervals<br>Education/employment training program administrative data                              |
| What early care and education services did children receive, and over what time period? What were children's attendance patterns?   | Parent survey at 12-month intervals<br>early care and education program administrative data                                   |
| What assistance did parents receive on goal setting, budgeting, financial literacy, and asset development?  | Parent survey at 12-month intervals<br>Program administrative data<br>Review of workshop curricula (financial literacy, etc.) |
| What emergency services did parents need, and what financial, nutrition, and housing assistance did they receive? What assistance was provided for child support enforcement?   | Program administrative data<br>Parent survey at 12-month intervals<br>Human service agency records                            |
| How engaged were parents in education and employment related services?  | Education / employment training program attendance data<br>Parent survey at 12-month intervals<br>Parent in-depth interviews  |
| What was the quality of early care and education services?  | Observation of early care and education settings using a quality measure such as ECERS-R or CLASS                             |
| What were program staff qualifications and how were they trained? Were adult and child staff cross trained? What was the staff turnover rate?   | Program administrative data<br>Director interview (with each partner organization)<br>Staff survey                            |
| What organizations provided services to parents and children, and which services were provided by each one?   | Director interviews (with each partner organization)  |
| If two or more organizations partnered to offer the services, how closely did they partner in serving whole families on the five partnership dimensions (engagement, shared mission, shared resources, co-creation of value, and innovation and systems change) | Director interviews (with each partner organization)  |
| How seamless was the service experience for parents and their children? What challenges did parents or children experience when moving between services, or in accessing both adult and child services at once?   | Parent in-depth interviews<br>Staff in-depth interviews   |

Note: ECERS-R = Early Childhood Environment Rating Scale-Revised; CLASS = Classroom Assessment Scoring System

### b. Related studies based on Effectiveness Study Design Option 1

If an effectiveness evaluation finds that any of the programs that coordinate services to parents and their children in concert are effective, stakeholders might have additional questions that can be answered in future evaluations that build upon the first.

**Cost-effectiveness study.** This study would use estimates of the costs of programs that coordinate services to promote economic security and children's well-being and estimates of the impacts on parents and children. Estimates of costs include staff salaries and professional development costs, the costs of materials, space for program services, and all other costs

involved in offering the program. The study would measure the additional cost of the program for parents and their children, over and above the costs of alternative programs available to families. Therefore, the costs of the program for parents and their children would be compared to the costs of other services the families in the control group receive. Then, program impacts (the difference in outcomes between the intervention and control groups) can be compared to the difference in costs between the program and alternative services the control group receives. This provides an assessment of the incremental cost of producing the program's impacts.

**Replication and scale-up.** An evaluation of an effective program that is replicated and scaled up would address two questions:

- **Can an effective program that serves parents and their children be replicated and scaled up?** A set of programs would be implemented according to the template for the effective program that simultaneously serves parents and their children. The replication would be based on findings from the process study on staffing levels, qualifications and training, service quality and intensity, and cost. Researchers would assess the fidelity of the replicated programs to the effective program's model by examining staffing, quality and intensity of services, and costs. The study would seek to identify lessons from implementing the replicated program and to understand the quality and intensity of services offered by the replicated programs.
  - **What are the impacts of replicated or scaled-up programs?** In addition to assessing whether a replicated program adheres to the model of an effective program, the research could examine the impacts of the replicated programs. Study design and measures would be similar to those used for the effectiveness study of the original program.
- c. **Effectiveness Study Design Option 2: What are the impacts of providing intentionally coordinated services to parents and their children rather than serving parents or children separately?**

An important motivation for programs to offer intentionally coordinated services to parents and their children is the expectation that impacts will be greater than if services were offered to either parents or their children separately. Taking one example, this argument states that the effects on children of a program that addresses the entire family will be greater than they would be if that program offered only its early care and education services to the children. Such amplified impacts could arise for three reasons we detailed in Chapter IV:

- Greater parent engagement in both adult and child services because the program coordinates service schedules and locations to make it easier for families to participate fully and consistently over time
- Mutual motivation, as parents and children engage in program activities more fully as they recognize and value each other's activities
- Positive outcomes as parents and their children reinforce one another

An effectiveness evaluation that explores the enhanced impact of offering coordinated services to parents and their children compared to offering just parent or child services could be designed to examine the following research questions:

- Does a program serving parents and their children in a coordinated manner have impacts over and above the effects of a similar program that serves either parents or children but not both?
- If the program has favorable impacts, what are the mechanisms or pathways by which it has those impacts?

An important caution about an effectiveness evaluation with this design is that the impacts of a program serving parents and children in tandem relative to a program serving either parents or children alone is likely to be smaller than would be the case if the program were compared to generally available services (Effectiveness Study Design Option 1 discussed previously). Using one concrete example, this research design calls for parents and their children in the intervention group to be offered program services, and children in the control group to receive the same services as children in the intervention group. A focus of the impact study will be whether children's outcomes in the intervention group are more favorable than those of children in the control group when children are receiving the same high quality, intensive services. In the previous evaluation design that examines the impacts of the program geared toward the entire family relative to generally available services, parents and children in the control group will likely not receive services of similar quality and intensity. As a result, the service contrast will be greater and the impacts on the children of the program geared toward the entire family are likely to be larger.

**Design of the effectiveness study.** An effectiveness evaluation of a program offering coordinated services to parents and their children in contrast to a program serving either parents or children alone can be designed in two different ways. One approach would compare the program serving parents and children together with a program serving parents alone. Another approach would compare the program serving parents and children together to a program serving children alone. Ideally, the control group would receive the same parent or child services as the intervention group; they just would not receive coordinated services aimed at the whole family.

As we discussed earlier, random assignment is the strongest effectiveness evaluation design, but it should be used to allocate scarce slots when interest in the program exceeds capacity to serve families. A random assignment design for this effectiveness evaluation option could be challenging to implement, however, if programs have fully implemented a coordinated approach to serving parents and their children. In such cases, it might be difficult for program staff to avoid taking a coordinated parent-child approach to serving just the parent or just the child.

Nevertheless, some particular program situations could more easily accommodate a random assignment evaluation of a program that offers coordinated services to parents and their children compared with offering services to either parents or their children. For example, a program that is offering high quality, intensive adult and child services to separate groups of families, but is beginning to serve parents and their children together might be a good candidate (See Box 8). Starting with families that have just enrolled in early care and education services for their children, the program could recruit parents to participate in the adult services program. Parents who are interested could be randomly assigned to an intervention group that receives adult services or a control group that does not. Alternatively, the program could begin with families enrolled in adult services who have children old enough to enter the early care and education



program. Parents interested in early childhood services could be randomly assigned to an intervention group that receives services geared toward the whole family or to a control group that receives only the adult services. A program that is beginning to combine efforts to serve whole families potentially could recruit and randomly assign families who approach the program for either adult or child services. A limitation of this design is that the program might not have fully implemented a coordinated approach to serving families that includes such features as communication among staff directly working with children and adults, so the coordinated services model might not be strong.

Another situation that could support this random assignment design is a program that serves parents and their children together that does not have the capacity to serve the number of adults interested in parent services but has excess capacity to serve children (or vice versa). That program could decide to randomly assign families interested in services for parents and their children to either an intervention group that receives those services or to a control group that only receives services for children (the service with additional capacity). This design would permit an effectiveness study of just the addition of adult services or just the addition of child services (Box 9).

A challenge for either of the designs we have described is that staff at the program serving parents and their children might not be comfortable providing services only to parents or only to children as part of an evaluation, given the program's focus on the whole family. If other high quality child or adult service programs are available in the community, it might still be possible to assess the effectiveness of a program aimed at the whole family compared to a program of similar quality that serves either adults or children. An evaluator could randomly assign families who apply to the program for the whole family to either an intervention group that receives such services or to a control group that receives "warm" referrals to either the adult or child services program. Program staff should follow up to ensure that families assigned to the control group have a genuine opportunity to receive those services because the design will be compromised if few control group families receive the expected services.

QEDs could also address the questions posed for this effectiveness evaluation. A QED might compare families who receive services geared toward the whole family to families in the same community who receive high quality early childhood education services from a program of comparable quality and intensity and in similar neighborhoods. This design would be similar to the one just described, but without random assignment of families. A drawback of this design is

**Box 8. Using differences in adult and child program capacity to randomly assign participants in an evaluation**

Community Action provides two primary services in its integrated program. Adults participate in "Getting Ahead," a workshop that helps parents address barriers to employment and training related to the experience of living in poverty. Children participate in Head Start. In the past, few Head Start families have participated in Getting Ahead, and Community Action has developed plans to better integrate these services and encourage more families to participate in Head Start and Getting Ahead. Differences in the capacity and length of these programs offer an opportunity to evaluate the effectiveness of adding adult employment-focused services to the Head Start program.

Community Action serves approximately 375 children in Head Start and serves 60 to 100 adults per year in Getting Ahead. Because it cannot serve all Head Start families in Getting Ahead, the agency can select parents to receive Getting Ahead through a randomized lottery. By randomly selecting Getting Ahead participants from a pool of interested Head Start families, researchers can assume that the group selected to participate (the "program group") is not systematically different from those who were not selected to participate (the "control group"). Differences in outcomes for the program group families compared to control group families can be attributed to receiving coordinated parent-child services.

**Box 9. Impact evaluation of a career pathways program in Tulsa, Oklahoma**

CAP-Tulsa, a community anti-poverty agency in Tulsa, Oklahoma, used its Head Start/Early Head Start program as a foundation to add an adult career pathways program in an integrated approach called *CareerAdvance*<sup>®</sup>. The Family Advancement Study (CAP FAST) is using a wait list control design to evaluate its adult services.

Under this design, 300 families are randomly assigned to a program group or control group. There are 150 families in each group. Randomization occurs within each career pathways track to capture the effectiveness of the program as a whole. All families receive Head Start and/or Early Head Start. The program group families get immediate access to the *CareerAdvance*<sup>®</sup> program, including career pathways and individual education and employment services. The control group is put on a wait list to participate in the program up to two years later. The study, which continues through 2018, will compare the outcomes of families in the treatment group to families in the control group, before the control group can participate in *CareerAdvance*<sup>®</sup>.

the likelihood that families who apply to the program that serves parents and their children in concert are different in unmeasured ways from those who apply instead to the early childhood education program that doesn't offer parent services. Alternatively, a quasi-experimental evaluation could be designed for a program that serves parents and their children in which the adult employment training provider serves multiple sites. In this case, the comparison group could be drawn from families in a similar geographic location who receive adult services from the same employment training provider but who do not have access to a program that serves both the parents and the children.

**Sample size requirements.** Just as with Effectiveness Study Design Option 1, this study needs to include a sufficient number of families (parents and their children) in both the intervention and control groups to detect policy-relevant impacts on the most important outcomes of the program offering coordinated services to parents and their children. The policy-relevant

impacts of this effectiveness study design might be smaller, however, as the study focuses on measuring the enhanced impacts on children of offering coordinated services to parents and their children compared to offering services only to the children. If we want the study to be able to detect a smaller impact, for example, a 10 percent effect size, the sample size requirements would be much larger than for the previous design (Table V.6).

Table V.6. Sample sizes needed at enrollment for an evaluation

| Minimum detectable difference in: |                          | Number enrolled: |         |
|-----------------------------------|--------------------------|------------------|---------|
| Children's achievement outcome    | Adult employment outcome | Children         | Parents |
| 1.7                               | 0.04                     | 2,750            | 2,750   |

Notes: The estimated number of children and parents needed for the study is based on power calculations (power = 0.80) for individual-level randomization with 50 percent assigned to each group. The estimates assume a two-sided hypothesis test and a significance level of 0.05. The variance of the outcomes explained by covariates (R<sup>2</sup>) is assumed to be 15 percent. Parental employment rate is assumed to be 0.55 in the control group. The calculations assume that 80 percent of the sample is available at the follow-up point.

**Measuring outcomes for parents and their children.** The impact study would assess the impacts on outcomes relevant to the program that serves parents and their children together, as discussed earlier, and it would examine outcomes for adults and children in the short- and long-term. However, this study would pay special attention to the possibility that outcomes for parents

and children may reinforce one another, and that this is another pathway by which programs that serve the whole family may have enhanced impacts on either children or adults.

**Measuring program experiences.** As we discussed earlier, the evaluation should include a process study to understand both the differences in the average program experiences between the intervention and control groups and to record information relevant to program replication. Process study questions would be similar for this study to the previous one (Effectiveness Study Design Option 1), but a few additional study questions would be pertinent to this effectiveness study design to examine the pathways by which we hypothesize that programs serving parents and children together have enhanced program impacts on either children or adults. It would examine parent engagement to assess whether engagement in services and program attendance is higher in both the adult and child services in such a program compared to engagement in a program offering only adult or child services. It would also assess the presence of mutual motivation, whereby parents and children may be motivated to absorb more of the curricular content and children may be less distressed in early care and education settings when they are receiving joint services.

**d. Effectiveness Study Design Option 3: What are threshold levels of service quality and intensity for parents and children that are necessary for programs to have positive impacts on parents' economic security and children's well-being?**

The literature review (see Chapter II) concluded that we lack research evidence on the critical threshold levels of quality and intensity of early childhood education services that are required to produce positive impacts on children's development. Similarly, the employment-training literature does not provide evidence for the threshold levels of intensity required to produce positive impacts on the employment and earnings of low-income parents, and no quality standards exist for employment-training programs. Programs that intentionally combine services for parents and their children may find that the threshold levels of quality and intensity of services required to produce impacts on parents and children might be different because the effects of services on parents and children may be reinforced and enhanced through parent-child interactions and service coordination.

An effectiveness study that aims to measure thresholds for quality and intensity required to improve outcomes for parents and children could examine the following research questions:

- What level of quality for child development services is necessary for positive impacts on children's well-being in a program that serves parents and their children? Do these thresholds vary by the age of the child who receives child development services? What are the impacts of higher quality child development services on adults' education and employment-related outcomes?
- What level of intensity of child development services—how many years of participation and how much participation per day and per year—is necessary for positive impacts on children's well-being in a program that serves parents and their children? What are the impacts of more intensive child development services on adults' education and employment-related outcomes?

- What intensity of parent education and employment training services (including range of services) is necessary for positive impacts on parents' employment-related outcomes in a program that serves parents and their children? What are the impacts of a higher intensity (including a broader range) of parent education and employment training services on children's well-being?
- Are thresholds for impacts of service quality and intensity different for programs that serve parents and children together compared to programs that serve only parents or only children?

**Design of the effectiveness study.** With the emergence of many programs that coordinate services for parents and their children in concert, addressing these research questions should begin with a straightforward, descriptive study (such as Descriptive Study Option 2, discussed previously) that describes the range of quality and intensity of services such programs provide to parents and their children. The study would report on descriptive statistics (frequencies and means) about service quality, intensity, and outcomes. The study could then assess the correlations between the quality and intensity of child development services, the range and intensity of parent services, and the outcomes for parents and their children. The study would have to include several programs that offer varied levels of service quality and intensity in order to estimate correlations among service quality, intensity, and participant outcomes. The study could use variation over time in service quality and intensity for the same program, as well as variation across programs to estimate the relationships.

Another design could build on a multi-program impact study (such as Effectiveness Study Design Option 1, discussed previously). The study could examine the questions about thresholds for quality and intensity of services using the program impacts on parents and children estimated from impact studies of multiple programs for the entire family, as described above. Although based on the estimated impacts of several programs on parent and child outcomes, this study would not be able to draw causal conclusions about the relationships between service quality, intensity, and impacts; it would estimate the correlations between program impacts and the measured quality and intensity of program services. This descriptive study could identify promising levels of quality and intensity that could be used to structure a future impact study designed to estimate a causal link between levels of quality or intensity and impacts on parents and their children.

A design that could address the impact questions about the critical thresholds for quality and intensity that are causally related to program impacts would randomly assign and help programs implement alternative levels of quality and intensity for adult and child services. This study would randomly assign programs to enhanced levels of quality and intensity of parent and child services, provide strong technical assistance to programs to develop the higher levels of quality and intensity needed, and then measure the impacts on parents and children of participation in the programs. A comparable study is underway for OPRE that examines the impact of enhancing the quality of child-focused services alone.<sup>20</sup>

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<sup>20</sup> A summary of the project, Variations in Implementation of Quality Interventions: Examining the Quality-Child Outcomes Relationship in Child Care and Early Education is at

This study could use a planned variations approach that systematically changes a component of a program; in this case, the quality or intensity of child development services or parent employment-training services. Programs would start out at either low or high levels of quality and intensity of child development and employment-training services, based on a program assessment. Programs would then be randomly assigned to receive technical assistance to improve the quality and / or intensity of parent and/or child services. These levels of quality and intensity would be suggested by the studies using descriptive methods described earlier. Certain conditions would be necessary for the study:

- Evaluation funders and researchers would need empirically-based hypotheses about the levels of “low” and “high” quality or intensity levels for parent or child services.
- The alternative levels of quality or intensity for parent or child services (planned variations) need to be feasible to implement quickly with technical assistance so that comparison programs do not make similar changes simultaneously.
- The evaluation must include information on the actual service quality and intensity received by participants so the success of implementing the planned variations can be assessed and the impact findings can be interpreted.

A challenge for this study is identifying programs for parents and children that could be moved to higher levels of quality and / or intensity within a reasonable time frame, cost, and with a reasonable level and length of technical assistance effort. Considering the possible variations – parent and child services, and high and low quality and intensity for each – means that there are 16 possible combinations. The study could simplify the design substantially by focusing on just one dimension (for example, quality) of one service (for example, child development services).

**Sample size requirements.** The study needs to include a sufficient number of programs to be randomly assigned to receive technical assistance to increase the quality or intensity of parent or child services to detect policy-relevant impacts on parent and child outcomes. We can find a benchmark for the size of the study from OPRE’s *Variations in Implementation of Quality Interventions: Examining the Quality-Child Outcomes Relationship in Child Care and Early Education*. That design study, which would randomize programs of high and low quality to receive technical assistance to improve quality, estimated that 158 early childhood programs would be required to detect impacts of 0.20 effect size for children’s outcomes (Tarullo et al. 2013).<sup>21</sup>

**Measuring program experiences and outcomes.** As we discussed earlier, the evaluation should include an outcomes study and a process study. The impact study would assess the impacts on a similar set of adult and child outcomes across the programs participating in the study. Outcomes would be similar to those discussed in earlier sections. In addition to assessing

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<https://www.acf.hhs.gov/opre/research/project/variations-in-implementation-of-quality-interventions-examining-the-quality-child-outcomes-relationship>.

<sup>21</sup> The power calculations for this design study assume the programs would include three classrooms, each with 12 children, on average. The estimates for child-level impacts assume a center-level intra-class correlation (ICC) of 0.06; a classroom-level ICC of 0.08; and an  $R^2$  of 0.50 at the center level and 0.70 at the classroom level and 0.30 at the child level.

program impacts at a particular point in time, the evaluation would examine changes in impacts over time on parent and child outcomes relative to the levels of intensity and quality of parent and child development services. Questions that the study could address include: Does the threshold for quality and intensity depend on whether the parent and child impacts are measured in the short term or longer term? How do increases in the quality and intensity of child development services affect parent impacts? How do increases in the range and intensity of parent services affect child impacts?

Process study questions would be similar to those we described in earlier sections, but the process study for this design would also have to examine how program development occurred: the level of effort technical assistance specialists and program staff required to improve quality or increase intensity of services, whether there were spillover effects of enhancing the quality of child development services on the intensity of those services or on the parent services, how program development was monitored and assessed, and whether the planned variations in quality or intensity were implemented with fidelity.

#### D. Summary and conclusions

Research and evaluation that matches the stage of development of programs that intentionally combine services for parents and their children can:

- Contribute to stronger implementation of service approaches
- Inform the field about promising strategies and
- Eventually, address questions about the impacts of these programs on parents' economic security and children's well-being.

Most contemporary program approaches to coordinating services for parents and children to promote economic security and children's well-being are in the developmental stages, and therefore, the research and evaluation most useful for programs is descriptive research that supports stronger program implementation. Descriptive implementation research can help programs develop logic models; strengthen data systems; and use the data to assess program activities, outcomes, and costs. This assessment can help identify priority areas for program development. Programs can engage in continuous improvement and rapid-cycle testing of alternative strategies to improve program processes and service enhancements to assess how they are working. Partnerships between researchers and programs and communities of practice to share ideas could help these programs to develop services that align with their objectives for the program.

Once services are well developed, these programs would be good candidates for effectiveness evaluation. Several effectiveness evaluation designs could address important questions about the overall impacts of coordinated approaches to serving low-income families and their children. Evaluations can examine the impact of programs that offer intentionally combined services to parents and their children relative to not having such programs available. Evaluations can also examine the hypothesized mechanisms by which these coordinated service approaches may have amplified impacts on parents and their children by assessing the impacts of these programs compared to a program serving either adults or children alone. A series of

research and evaluation studies could illuminate the critical thresholds for program quality and intensity that are necessary for programs that offer combined services to have positive impacts on parents and their children. Together, these research and evaluation designs will address important questions about the design and value of program approaches to serving parents and their children.

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## VI. CONCLUSION

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Coordination of services to support child development and parent economic security at the same time may be a strategy to reduce the transmission of poverty across generations. That notion is grounded in family systems theory, which indicates that parents and children are interdependent and that both are affected by their interactions with each other (Kerr 2000). Service coordination is one way to increase these interactions in ways that promote positive outcomes for parents and children (Chase Lansdale and Brooks-Gunn 2014). We expect that coordinated and aligned services for parents and children will be mutually reinforcing and that the benefits to both generations will compound over time, though evidence on this is still needed.

In this report, we presented findings from the *Exploration of Integrated Approaches to Supporting Child Development and Improving Family Economic Security* project, which included four key component activities:

- **Literature review (Chapter II):** Explored evidence on the definitions of and thresholds for quality, intensity, and intentional service delivery in programs that combine services for parents and children
- **Scan of contemporary integrated programs (Chapter III):** Examined the range of approaches used by currently operating programs that coordinate services for parents and their children
- **Conceptual frameworks (Chapter IV):** Refined the Chase-Lansdale and Brooks-Gunn (2014) service delivery framework to conceptualize connections between program activities and outcomes for parents and children, and developed a partnership framework, drawn from research from the business and public management fields (Keast et al. 2007; Austin and Seitanidi 2012), to demonstrate the varying levels of potential cooperation, coordination, and collaboration among service providers
- **Recommendations for future research and evaluation (Chapter V):** Identified options for future research to support program development and assess the effectiveness of coordinated parent-child program models

### A. Findings from the project

Our review of programs revealed a field that was still emerging and innovating. Many programs are still developing services and refining strategies to truly reach parents and their children. Nearly half of the programs we identified with the environmental scan were pilot programs or had been offering programs for only a few years. Research on contemporary programs is scant; programs may lack data systems, research partners, and/or technical assistance to support data-driven program development. We have much to learn about what it means to pair economic security services to adults with services that promote child development and well-being in a way that is intensive, intentional, and high-quality. More research is needed both on how best to implement integrated parent and child programs and how to assess their effectiveness.

Our review and scan showed that the available research has not yet caught up to the theory supporting programs. Research we identified through the literature review informed definitions

of quality and, to a lesser extent, intensity, of services for parents and children, but the threshold levels of quality and intensity required to generate positive outcomes for parents and their children have not been demonstrated. Moreover, we lack a clear definition and set of dimensions to assess the intentionality of services for parents and children.

As discussed in Chapter V, research should match the level of the development of programs if it is to be useful to practitioners and policymakers alike. For developing programs, descriptive or formative research that supports program implementation is appropriate. This type of research will help programs develop and refine logic models, strengthen data systems, and use them to assess program activities, outputs, and costs. It can contribute to a process of continuous improvement, leading to stronger programs that are primed for more rigorous forms of effectiveness evaluation. Prematurely evaluating program effectiveness could lead to false conclusions for theoretically grounded programs if they are found to have limited or no positive impact on outcomes.

Partnerships between researchers and programs can help programs develop their service models and approaches. Learning communities may provide opportunities for programs to learn from their peers and network with researchers, who can share research-based best practices and promising innovations.

Evaluations of program effectiveness should be conducted where they are warranted. Effectiveness evaluations should focus on “proud programs” that are providing services at a level of quality and intensity that are likely to produce positive outcomes for families (Campbell 1988). In Chapter V, we discussed an approach to assessing the readiness of programs for effectiveness evaluation. Identifying programs ready for effectiveness evaluation involves assessing how well they are implemented, assessing their theory of change, and considering the maximum rigor of evaluation design possible. Prior descriptive or implementation research can be a source of identification for programs ready for evaluation. With our literature review, we identified four operational programs that have participated in implementation research and that now might be ready for effectiveness evaluation.

The focus of an effectiveness evaluation can vary according to the feasible design options and the availability of a comparison group for a given program or set of programs. We outlined three options for effectiveness evaluations of programs serving parents and their children that would increase the knowledge of the field: (1) the overall effectiveness of the program, (2) the effectiveness of the program compared to programs serving either parents or children alone, or (3) an assessment of thresholds for service quality and intensity that may yield positive impacts for children, parents, and families.

## B. Next steps to advance the field

Going forward, effectiveness evaluations of programs that provide coordinated services for parents and children that are ready for research will advance our understanding of the most important dimensions of quality, intensity, intentionality, and their necessary threshold levels required to generate favorable outcomes for parents and their children. Just as earlier evaluations provided a roadmap forward for the current array of integrated approaches, research to support stronger implementation of contemporary programs and eventually, impact evaluation, will

contribute to further development and refinement of frameworks and strategies for programs that intentionally coordinate services for parents and children.

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## APPENDIX A

### LITERATURE SEARCH METHODOLOGY

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The literature search for this project included a keyword search of seven online databases (Appendix Table A.1), filtering to research published since 2006.

Table A.1. Publication database keyword search terms for literature review

| Research topic     | Keywords   |
|--------------------|--|
| Services           | <p>program* or approach* or mechanism* or service*</p> <p>AND</p> <ul style="list-style-type: none"> <li>• (case manage*) or counseling or resident* or therap*) OR</li> <li>• (employment or job or occupation* or training or educat* or workforce or self-sufficien* or self-relian* or adult-focused or adult focused or human capital or skill* or wage* or earning*) OR</li> <li>• (child-focused or child focused or preschool or pre-school or child care or childcare or child* development or early childhood education or early education)</li> </ul>   |
| Population         | <p>mother* or father* or famil* or parent* or adult</p> <p>AND</p> <p>infan* or newborn* or toddler* or child* or childhood</p> <p>AND</p> <p>low-income or low income or poor or poverty or disadvantaged homeless or unemployed or disab* or ex-offender or reentering prisoner or justice-involved or immigrant or English Language Learner or tribal or American Indian or Native American or Head Start or TANF or public benefit</p> <p>AND</p> <p>two-generation or two generation or dual-generation or dual generation or ((family or parent) near (development or advancement or engagement)) or multi-generation* or multigeneration* or transgeneration* or intergeneration*</p> |
| Terminology        | high-quality or high quality or intensi* or intent* or integrat* or align*   |
| Theory             | ecological theory or human capital theory  |
| Research           | Effect*, effica*, causal, impact, evaluat*, literature review, meta-analy* or meta analy*  |
| Databases searched | PsycINFO, Scopus, SocIndex, SAGE, Academic Search Premier, Business Source Corporate, Education Research Complete  |

Note: An asterisk indicates a truncation. When used in a search term, all words with the root were returned. For instance, a search on effect\* will return citations with the words that have “effect” as the first six letters, including effect, effects, effective, and effectiveness.

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APPENDIX B

INTEGRATED PROGRAMS SUPPORTING CHILD DEVELOPMENT  
AND IMPROVING FAMILY ECONOMIC SECURITY INCLUDED  
IN THE ENVIRONMENTAL SCAN

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The environmental scan identified 52 programs that met the inclusion criteria discussed in Chapter III. These are listed in Table B.1. All programs were in operation as of January 2016, when the scan was conducted.

Table B.1. Integrated programs supporting child development and improving family economic security included in the environmental scan

| Program name  | Organization name(s)  | Service area(s)   | Website   |
|---|---|---|---|
| Atlanta Civic Site  | Annie E Casey Foundation  | Atlanta, Georgia  | <a href="http://www.aecf.org/work/community-change/civic-sites/atlanta-civic-site/">http://www.aecf.org/work/community-change/civic-sites/atlanta-civic-site/</a>   |
| Baltimore Civic Site  | Annie E. Casey Foundation   | Baltimore, Maryland   | <a href="http://www.aecf.org/work/community-change/civic-sites/baltimore-civic-site/">http://www.aecf.org/work/community-change/civic-sites/baltimore-civic-site/</a>   |
| Briya Public Charter School                                   | Briya Public Charter School, Mary's Center                        | Washington, DC  | <a href="http://www.briya.org/">http://www.briya.org/</a>   |
| Buckner Family Place  | Buckner International, Angelina College                           | Lufkin, Texas   | <a href="http://www.angelina.edu/buckner-family-place/">http://www.angelina.edu/buckner-family-place/</a>   |
| Capital Area Community Action Agency                          | Capital Area Community Action Agency                              | Tallahassee, Florida  | <a href="http://capitalareacommunityactionagency.com">http://capitalareacommunityactionagency.com</a>   |
| Capital Area Community Services Head Start                    | Capital Area Community Services Head Start                        | Lansing, Michigan   | <a href="http://www.cacsheadstart.org/Family-Services">http://www.cacsheadstart.org/Family-Services</a>   |
| CareerAdvance®  | CAP-Tulsa   | Tulsa, Oklahoma   | <a href="http://captulsa.org/families/family-advancement/careeradvance/">http://captulsa.org/families/family-advancement/careeradvance/</a>   |
| Center Training Assistant Program                             | Albina Head Start   | Portland, Oregon  | <a href="http://www.albinahs.org">http://www.albinahs.org</a>   |
| College Access and Success                                    | Educational Alliance  | New York, New York  | <a href="http://www.edalliance.org/adults">http://www.edalliance.org/adults</a>   |
| College-to-Career   | Warren Village  | Denver, Colorado  | <a href="http://www.warrevillage.org">http://www.warrevillage.org</a>   |
| Connecticut Even Start Family Learning Program                | Connecticut State Department of Education                         | Middletown, New London, and Torrington, Connecticut   | <a href="https://www.maect.org/content/Family_Learning_Even_Start.asp">https://www.maect.org/content/Family_Learning_Even_Start.asp</a>   |
| Connecticut Supports for Pregnant and Parenting Teens Project | Connecticut State Department of Public Health and Social Services | New Haven, Connecticut  | <a href="http://www.sde.ct.gov/sde/cwp/view.asp?a=2678&amp;Q=334262">http://www.sde.ct.gov/sde/cwp/view.asp?a=2678&amp;Q=334262</a>   |
| Dual Generation Program                                       | Eastside Promise Neighborhood                                     | San Antonio, Texas  | <a href="http://eastsidepromise.org/dual-generation-program/">http://eastsidepromise.org/dual-generation-program/</a>   |
| Eagle Academy   | Community Foundation of Sarasota County                           | Sarasota, Florida   | <a href="http://www.ectacfl.net/uploads/2/2/1/6/22162720/ea_pamphlet_final_final_english.pdf">http://www.ectacfl.net/uploads/2/2/1/6/22162720/ea_pamphlet_final_final_english.pdf</a>   |
| Early Learning Parent Professional Learning                   | Puget Sound Educational Service District                          | Seattle, Washington   | <a href="https://www.psesd.org/services/learning-and-teaching/early-learning/parent-professional-and-personal-development/">https://www.psesd.org/services/learning-and-teaching/early-learning/parent-professional-and-personal-development/</a> |
| Eveline's Sunshine Cottage Family and Child Education (FACE)  | Eveline's Sunshine Cottage Bureau of Indian Education             | Amarillo, Texas<br>Native American reservations in Arizona, New Mexico, North Dakota, South Dakota, Michigan, Minnesota, Mississippi, Utah, Washington, and Wisconsin | <a href="http://www.evelinessunshinecottage.com/">http://www.evelinessunshinecottage.com/</a><br><a href="http://faceresources.org/">http://faceresources.org/</a>  |

| Program name   | Organization name(s)  | Service area(s)   | Website   |
|--|---|---|---|
| Family and Workforce Centers of America                            | Family and Workforce Centers of America   | Wellston, Missouri  | <a href="http://www.fwca-stl.com/">http://www.fwca-stl.com/</a>   |
| Family Leadership Academy  | Crossway Montessori Community   | Kensington, Maryland  | <a href="http://www.crossway-community.org/programs/family-leadership-academy">http://www.crossway-community.org/programs/family-leadership-academy</a>   |
| Family Resource Center   | Los Angeles Valley College  | Los Angeles, California   | <a href="http://www.lavcfamilyresourcecenter.com/">http://www.lavcfamilyresourcecenter.com/</a>   |
| Family Scholar House   | Family Scholar House  | Louisville, Kentucky  | <a href="http://familyscholarhouse.org/">http://familyscholarhouse.org/</a>   |
| Family Support Centers   | Maryland Family Support Network   | Adelphi, Annapolis, Baltimore, Cambridge, Chestertown, Cumberland, Denton, Easton, Elkton, Frederick, Hagerstown, Rockville, Salisbury, Sudlersville, and Westminster, Maryland | <a href="http://marylandfamilynetwork.org/">http://marylandfamilynetwork.org/</a>   |
| Florence Crittenton School   | Florence Crittenton Services, Denver Public Schools   | Denver, Colorado  | <a href="https://flocritco.org/what-we-do/florence-crittenton-high-school/">https://flocritco.org/what-we-do/florence-crittenton-high-school/</a>   |
| Garrett County Community Action Committee                          | Garrett County Community Action Committee   | Oakland, Maryland   | <a href="http://www.garrettcac.org/index.php/education/felonglearning/parent-education">http://www.garrettcac.org/index.php/education/felonglearning/parent-education</a>   |
| Healthy Families- TIP (TANF Initiative for Parents)                | Prevent Child Abuse New Jersey, New Jersey Department of Children and Families, New Jersey Department of Human Services | Atlantic, Camden, Cumberland, Gloucester, Mercer, Passaic, Union, and Warren-Hunterdon, New Jersey  | <a href="https://www.preventchildabuse.nj.org/what-we-do/programs/home-visiting-programs/healthy-families/">https://www.preventchildabuse.nj.org/what-we-do/programs/home-visiting-programs/healthy-families/</a> |
| Homefront New Jersey Keys to Degrees                               | Homefront New Jersey Endicott College, Eastern Michigan University, Ferris State University, Dillard University         | Trenton, New Jersey; Beverly, Massachusetts; Ypsilanti and Big Rapids, Michigan; New Orleans, Louisiana   | <a href="http://www.homefrontnj.org/">http://www.homefrontnj.org/</a><br><a href="http://www.endicott.edu/Keys-Degrees-Prog.aspx">http://www.endicott.edu/Keys-Degrees-Prog.aspx</a>                              |
| Leadership Through Education                                       | El Valor  | Chicago, Illinois   | <a href="https://elvalor.org/leadership-through-education-university-programs/">https://elvalor.org/leadership-through-education-university-programs/</a>   |
| Live and Learn Memphis HOPE (Health Opportunity Pride Empowerment) | Southwest Human Development Women's Foundation for a Greater Memphis, Memphis Housing Authority, Urban Strategies       | Phoenix, Arizona; Memphis, Tennessee  | <a href="http://liveandlearnaz.org/">http://liveandlearnaz.org/</a><br><a href="http://www.wfgm.org/memphis-hope/overview.html">http://www.wfgm.org/memphis-hope/overview.html</a>                                |
| Mothers' Club  | Mothers' Club Family Learning Center, Pacific Clinics   | Pasadena, California  | <a href="http://www.mothersclub.org/">http://www.mothersclub.org/</a>   |
| Mothers Learning & Living  | College of St. Mary   | Omaha, Nebraska   | <a href="http://www.csm.edu/student-life/single-parent-success/mothers-living-learning">http://www.csm.edu/student-life/single-parent-success/mothers-living-learning</a>   |
| Next Generation Kids Pilot   | Utah Department of Workforce Services   | Utah  | <a href="http://jobs.utah.gov/edo/intergenerational/ngk.pdf">http://jobs.utah.gov/edo/intergenerational/ngk.pdf</a>   |
| Northside Achievement Zone Nurse Family Partnership                | Northside Achievement Zone Nurse Family Partnership   | Minneapolis, Minnesota; Nationwide  | <a href="http://northsideachievement.org/">http://northsideachievement.org/</a><br><a href="http://www.nursefamilypartnership.org/">http://www.nursefamilypartnership.org/</a>                                    |



| Program name   | Organization name(s)  | Service area(s)  | Website  |
|--|---|--|--|
| Parent Child Education Program                               | AVANCE  | Alamo, Austin, Dallas, Del Rio, El Paso, Houston, San Antonio, and Waco, Texas; Las Cruces, New Mexico         | <a href="http://www.avance.org/about-us/programs/avance-parent-child-education-program/">http://www.avance.org/about-us/programs/avance-parent-child-education-program/</a>  |
| Parent Training Program                                      | Parents in Community Action, Inc.   | Minneapolis, Minnesota   | <a href="http://www.picaheadstart.org/programs/parenttraining.html">http://www.picaheadstart.org/programs/parenttraining.html</a>  |
| Pathfinder Program   | 2Gen Equity   | San Francisco, California  | <a href="http://www.2genequity.org/">http://www.2genequity.org/</a>  |
| Promise Community Schools                                    | Neighborhood Centers, Inc.  | Houston, Texas   | <a href="http://www.neighborhood-centers.org/schools">http://www.neighborhood-centers.org/schools</a>  |
| Spark at The SOURCE  | Head Start for Kent County, The SOURCE  | Walker, Michigan   | <a href="http://grsource.org/services/#sj_programs">http://grsource.org/services/#sj_programs</a>  |
| Sparkpoint Community Schools                                 | United Way of the Bay Area  | Oakland and San Francisco, California  | <a href="https://uwba.org/2gen">https://uwba.org/2gen</a>  |
| The Elizabeth Ministry                                       | The Elizabeth Ministry  | Washington, DC   | <a href="http://www.theelizabethministry.org/about.php#program_details">http://www.theelizabethministry.org/about.php#program_details</a>  |
| The Glen at St. Joseph<br>The Jeremiah Program               | The Glen at St. Joseph<br>The Jeremiah Program  | Dayton, Ohio<br>Minneapolis and St. Paul, Minnesota; Fargo, North Dakota; Boston, Massachusetts; Austin, Texas | <a href="http://www.glenatstjoseph.org">http://www.glenatstjoseph.org</a><br><a href="http://jeremiahprogram.org/">http://jeremiahprogram.org/</a>   |
| Utility Pre-Craft Trainee Program                            | Los Angeles Alliance for a New Economy, Los Angeles Department of Water and Power, International Brotherhood of Electrical Workers Local 18 | Los Angeles, California  | <a href="http://www.repowerla.org/upct">http://www.repowerla.org/upct</a>  |
| Valley Settlement Project<br>Weinland Park Collaborative     | The Manus Fund<br>The Columbus Foundation, Annie E. Casey Foundation  | Carbondale, Colorado<br>Columbus, Ohio   | <a href="http://www.valleysettlementproject.org/home/">http://www.valleysettlementproject.org/home/</a><br><a href="http://www.columbusfoundation.org/stories/weinland-park-collaborative">http://www.columbusfoundation.org/stories/weinland-park-collaborative</a> |
| WIN Jobs Center  | Friends of Children of Mississippi, Mississippi Department of Human Service, Central Mississippi Planning & Development District            | Jackson, Mississippi   | <a href="http://www.friendsofchildren.org/">http://www.friendsofchildren.org/</a>  |
| Women 2 Work   | Goodwill of the Olympics and Rainier Region   | Tacoma, Washington   | <a href="http://www.goodwillwa.org/training/services/women-2-work/">http://www.goodwillwa.org/training/services/women-2-work/</a>  |
| Women in Construction Program<br>Women With Children Program | Moore Community House<br>Misericordia University  | Biloxi, Mississippi<br>Chambersburg and Dallas, Pennsylvania   | <a href="http://www.moorecommunityhouse.org/">http://www.moorecommunityhouse.org/</a><br><a href="http://www.misericordia.edu/page.cfm?p=583">http://www.misericordia.edu/page.cfm?p=583</a>   |
| Young Mothers Project  | ROCA  | Chelsea, East Boston, Everett, Malden, Revere, and Somerville, Massachusetts                                   | <a href="http://rocainc.org/work/young-mothers-program/">http://rocainc.org/work/young-mothers-program/</a>  |

Note: Programs were in operation as of January 2016.

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## APPENDIX C

### PROFILES OF PROGRAMS INCLUDED IN PROJECT FIELD WORK

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A key component of this project was fieldwork to support the development of a conceptual framework (Chapter IV) and to assess the evaluability of the field of programs that provide integrated services to adults and children (Chapter V). The goal of the fieldwork was to learn more about specific features of such programs, including their size and scope; their quality, intensity, and intentionality; and the role of organizational partnerships in providing services to both generations. Other goals included learning more about innovative service strategies, implementation challenges, and local contexts. To maximize the usefulness of the fieldwork, the following criteria informed the site selection:

- The program publicly reported a quality indicator for child services—such as a state education agency rating or National Association for the Education of Young Children certification—or provided EHS, Head Start, or an evidence-based home visiting program.
- The program offered a wide range of adult education and workforce development programming or offered services of typically long duration or high intensity, such as sectoral training.
- The program operated with federal funds (including TANF or CSBG) or had state involvement in administering services.
- The program was diverse in the array of services provided, target populations served, and location.
- The program was not participating in other research projects.

Out of the 52 programs identified in the environmental scan (Chapter III), we identified 10 approaches that met the above criteria. In consultation with OPRE, we narrowed this list to 6 (Table C.1). We visited the first 4 listed in the table to interview leadership staff, organizational partners, and direct service staff. We conducted focus groups with participants at the first 2 programs in the table and held a brief discussion with participants at the third program in the table. We conducted telephone interviews with leadership staff at the last 2.

Table C.1. Two-generation programs selected for fieldwork

| Program name                                 | Lead organization interviewed   | Key partner interviewed                | Participant focus group | Service area   |
|--|---|--|-------------------------|--|
| <b>Site visits</b>                           |   |  |                         |  |
| College Access and Success                   | Educational Alliance  | Borough of Manhattan Community College | ✓                       | New York, New York   |
| Briya Public Charter School                  | Briya Public Charter School   | Mary's Center                          | ✓                       | Washington, DC   |
| Next Generation Kids                         | Utah Department of Workforce Services   | United Way of Northern Utah            |                         | Utah   |
| Capital Area Community Action Agency         | Capital Area Community Action Agency  | CareerSource Capital Region            |                         | Tallahassee, Florida   |
| <b>Phone interviews</b>                      |   |  |                         |  |
| Parent Training Program                      | Parents in Community Action Inc.  | Not applicable                         |                         | Minneapolis, Minnesota   |
| Healthy Families–TANF Initiative for Parents | New Jersey Department of Children and Families, New Jersey Department of Human Services | Not applicable                         |                         | Atlantic, Camden, Cumberland, Gloucester, Mercer, Passaic, Union, and Warren-Hunterdon, New Jersey |

The remainder of Appendix C contains profiles of the four programs we visited.

## Program Profile: Briya Public Charter School/Mary's Center

|                              |   |
|------------------------------|---|
| <b>Operated by:</b>          | Briya Public Charter School/Mary's Center         |
| <b>Service area:</b>         | Washington, DC                                    |
| <b>Year started:</b>         | 1989  |
| <b>Stage of development:</b> | Established                                       |
| <b>Website:</b>              | <a href="http://briya.org/">http://briya.org/</a> |

### Program overview

Briya Public Charter School and Mary's Center, a community health clinic, partner to provide education and workforce development services to parents and early education to their children, along with family health care. Their mission is to "provide a high-quality education for adults and children that empowers families through a culturally-sensitive family literacy model." Their two-generation program began in 1989, when the District of Columbia Public Schools earned a federal U.S. Department of Education grant to develop an Even Start demonstration program. The Even Start program merged into Mary's Center in 1998. Mary's Center spun off its educational programming into a charter school in 2005. Briya Public Charter School and Mary's Center maintain a close partnership; they co-locate in three of four school locations, share a human resources department, share client record data, and have developed sectoral credentialing services for medical assistants.

Jointly, Briya and Mary's Center fund the prekindergarten and adult education through local public school funds, as well as private philanthropy and grants. Briya and Mary's Center have also received a District of Columbia Community Schools Incentive Initiative grant.

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### Target population

Briya Public Charter School and Mary's Center target low-income families, though the charter school is open to any family in the District of Columbia. Mary's Center was founded to provide medical care to women fleeing violence in Latin America. According to the program, about 85 percent of the 600 adult Briya participants are women. One hundred percent of families speak English as a second language. About 80 percent speak Spanish as their first language, about 15 percent speak Amharic as their first language, and the remainder are mostly immigrants from around the world. The average adult participant enters the program with the equivalent of a sixth grade education.

In 2016-17, Briya served about 600 adults, about 150 infants and toddlers, and about 50 3- and 4-year-olds in prekindergarten. Mary's Center provided health services to about 36,000 individuals in 2015.

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### Services for adults

Briya Public Charter School provides three primary services for adults. The first is adult English as a Second Language (ESL) classes. Based on their proficiency, adults enter into one of six leveled courses, from basic English to advanced English. Classes meet five times per week for two and a half hours, with sessions offered in the morning or the afternoon. In classes, they learn English skills, including conversational skills to help them communicate with their child's teacher or a doctor, parenting skills, and digital literacy skills, such as how to use computer applications. At least once per week, the final half hour of class is reserved for Parents and Children Together time. During this time, parents whose children are also enrolled in Briya go into their children's classroom (co-located and co-scheduled with adult classes) and work on family literacy skills together. Parents who have children enrolled at other schools also learn family literacy skills and practice a developmentally appropriate activity they will use later at home with their children. ESL classes use a curriculum aligned with the Comprehensive Adult Student Assessment System standards, which are nationally recognized and approved by the U.S. Departments of Education and Labor.

The other two services for adults are sectoral training programs. Adults can earn a Child Development Associate (CDA) and/or a Medical Assistant (MA) certificate. These programs have classes four nights per week for three hours a class, with the additional expectation of two hours of homework per day. The CDA program is 12 months long, and the MA program is 18 months long. Both programs have practicums, which adults can do on-site at Mary's Center and Briya. The CDA program includes over 200 hours of coursework, above the basic certification requirements of the Council for Professional Recognition. The MA program uses a curriculum co-developed by Briya staff and trained registered nurses employed by Mary's Center, and is accredited by American Medical Technologists (AMT). At Mary's Center, families access other supportive and medical services. A social services coordinator provides referrals to families for in-house medical and dental care, behavioral health care, health promotion, chronic disease management, and mental health therapy. Mary's Center also helps families apply for public benefits such as the Special Supplemental Nutrition Program for Women, Infants, and Children program and Supplemental Nutrition Assistance Program and enroll in health insurance.

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### Services for children

Briya Public Charter School offers early education to children from birth through age 5. Infants and toddlers under age 3 attend early education classes for two and a half hours a day, five times per week (in a morning or afternoon session) while their parents attend ESL classes. Three and 4-year-olds participate in prekindergarten classes, which meet five days a week for six hours per day. Prekindergarten classes are dual-language and staffed with an English-speaking and a Spanish-speaking teacher. Classes for both age groups use the Creative Curriculum. Briya measures program quality using the Teaching Strategies GOLD and Classroom Assessment Scoring System assessments. Respectively, these assessments measure

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child pre-literacy, math skills, and socioemotional development, and classroom quality measures such as teacher-student interactions.

In addition to the family health services listed above, Mary's Center provides several services specifically for children, including early intervention for children with special needs and Parent Child Interactive Therapy. Families may also participate in a home visitation program that provides educational and supportive services to pregnant and parenting families to reduce child abuse and infant mortality. The home visiting program uses three home visiting models: Healthy Families America® (HFA), Parents as Teachers, Healthy Start.

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## Evaluation

As of November 2016, the Briya Public Charter School/Mary's Center program had not been rigorously evaluated by an external evaluator, though the organizations measure student growth, outcomes, and organizational performance.

Two of the home visiting models the program uses HFA and Parents as Teachers, meet U.S. Department of Health and Human Services (HHS) standards for an evidence-based program. The Home Visiting Evidence of Effectiveness review, sponsored by HHS, identified 170 studies of HFA published between 1979 and 2012, 52 of which met rigorous quality standards. These studies showed that HFA had positive observed outcomes in the areas of child development and school readiness, positive parenting practices, and reductions in child maltreatment. The same review identified 60 studies of Parents as Teachers published between 1979 and 2012, 23 of which met rigorous quality standards. These studies showed that Parents as Teachers had positive observed outcomes in the areas of child development and school readiness, family economic self-sufficiency, positive parenting practices, and reductions in child maltreatment. The Home Visiting Evidence of Effectiveness review identified one rigorous study of Healthy Start, but there was insufficient evidence to qualify it as an evidence-based program by the HHS standards.

Descriptive research conducted by the Brookings Institution suggests that students at Briya Public Charter School may perform better than children at other District of Columbia Early Childhood Learning Centers. The Brookings Institution compared school-wide scores on aspects of the District of Columbia Public Charter School Board (DC PCSB) Early Childhood Performance Management Framework. At the time of the study, the Brookings Institution could not analyze the outcomes of the adult education program because the DC PCSB had not yet published its Adult Education Performance Management Framework, although it is now available. (The research design does not prove that the Briya program itself caused the effects that were observed for its clients.)

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## More information

- Brookings Institution, Briya/Mary's Center Case Study:  
<http://www.brookings.edu/research/papers/2015/07/15-using-schools-clinics-as-hubs-create-healthy-communities-butler>

- The Atlantic, Briya Public Charter and Mary's Center profile:  
<http://www.theatlantic.com/education/archive/2015/01/a-school-for-childrenand-their-parents/384333/>
- Home Visiting Evidence of Effectiveness profile of Healthy Families America:  
<http://homvee.acf.hhs.gov/Model/1/Healthy-Families-America--HFA--sup---sup-/10/1>
- Home Visiting Evidence of Effectiveness profile of Healthy Start:  
<http://homvee.acf.hhs.gov/Model/1/Healthy-Start-Home-Visiting/11/1>
- Home Visiting Evidence of Effectiveness profile of Parents as Teachers:  
<http://homvee.acf.hhs.gov/Model/1/Parents-as-Teachers--PAT--sup---sup-/16/1>

Links accessed on 12/2/2016

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## Program Profile: Capital Area Community Action Agency

|                              |   |
|------------------------------|---|
| <b>Operated by:</b>          | Capital Area Community Action Agency  |
| <b>Service area:</b>         | Franklin, Leon, and Jefferson counties, Florida   |
| <b>Year started:</b>         | 2013  |
| <b>Stage of development:</b> | Developing  |
| <b>Website:</b>              | <a href="http://capitalareacommunityactionagency.com/getting-ahead-eligibility/">http://capitalareacommunityactionagency.com/getting-ahead-eligibility/</a> |

### Program overview

The Capital Area Community Action Agency (Community Action) aims to help families improve their educational attainment and their employment outcomes and become economically independent. “Getting Ahead in a Just-Gettin’-by World,” or Getting Ahead for short, is an intensive curriculum developed to prepare adults for the workforce. Classes meet with a trained facilitator to discuss socioemotional, educational, and cultural issues standing in the way of economic and family stability. Significant emphasis is placed on discussing underlying cultural implications of poverty and preventing day-to-day crises that can derail longer-term efforts to become self-sufficient. Community Action also provides Head Start services to children in the same communities. Note that a very small number (5 to 10) of Getting Ahead participants have been Head Start parents. While staff believe that Getting Ahead participation for adults will improve relationships between parents and children, services for children provided by Community Action are limited to Head Start. Therefore, most participants in Getting Ahead and Head Start are experiencing Community Action only at the single-generation level. Federal, state, and local governments as well as private donors fund Community Action programs.

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### Target population

The Getting Ahead program targets low-income families in six Florida counties in general. In three of those counties (Franklin, Leon, and Jefferson), Community Action offers Head Start alongside Getting Ahead services. Participant eligibility for services is based on income eligibility and engagement in Capital Area Community Action Agency services.

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### Services for adults

Participants complete the Getting Ahead program, a 15-week course that helps parents set goals and understand how poverty affects decision-making; families are also eligible to request emergency assistance from Community Action to pay for utilities, food, housing, or other needs. Parents may participate in Getting Ahead for up to three years, but must renew their enrollment annually. Then, after participating in Getting Ahead, parents may also participate in Staying Ahead –a longer-term self-sufficiency program with case management and mentorship

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to develop social networks and resources. A client may participate in the Staying Ahead self-sufficiency program for up to three years, but must renew enrollment annually.

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### Services for children

Children age 3 to 5 participate in center-based Head Start at seven centers. The National Association for the Education of Young Children (NAEYC) has accredited each center. Community Action's Head Start programs follow The Creative Curriculum®. Case managers at the Head Start centers provide health services, Teaching Strategies GOLD developmental assessments, and referrals that draw on the Head Start Parent, Family, and Community Engagement Framework.

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### Evaluation

As of December 2016, no external evaluator had conducted an evaluation of Capital Area Community Action Agency.

A 2013 What Works Clearinghouse review of evidence on The Creative Curriculum® concluded that it had no statistical effect on mathematics, oral language development, phonological processing, or print knowledge. Head Start has potentially positive impacts on children's reading achievement (What Works Clearinghouse 2013).

The Getting Ahead program has been evaluated using a pre-post design in multiple sites across the country. The descriptive evaluation found that participants overall gained in scores of psycho-social well-being and content knowledge (particularly, household finance, conflict strategies). Results indicate that women gained more than men and that program participants were predominantly women (69 percent vs. 31 percent).

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### More information

Tallahassee Democrat program profile:

<http://www.tallahassee.com/story/opinion/columnists/dobson/2014/04/25/byron-dobson-initiative-seeks-a-way-out-of-poverty/8159117/>

New York Times community resources:

<http://www.nytimes.com/interactive/2016/02/21/opinion/sunday/100000004168483>

What Works Clearinghouse, 2013, The Creative Curriculum for Preschool:

[https://ies.ed.gov/ncee/wwc/Docs/InterventionReports/wwc\\_creativecurriculum\\_030513.pdf](https://ies.ed.gov/ncee/wwc/Docs/InterventionReports/wwc_creativecurriculum_030513.pdf)

Links accessed on 2/24/2016

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## Program Profile: College Access and Success

|                              |   |
|------------------------------|---|
| <b>Operated by:</b>          | Educational Alliance  |
| <b>Service area:</b>         | New York City, NY   |
| <b>Year started:</b>         | 2011  |
| <b>Stage of development:</b> | Established   |
| <b>Website:</b>              | <a href="http://www.edalliance.org/adults">http://www.edalliance.org/adults</a> |

### Program overview

College Access and Success began in 2011 as part of a two-generation strategy developed by the Educational Alliance to reduce intergenerational poverty. As an agency, Educational Alliance has served families on the Lower East Side of Manhattan for more than 125 years. It developed College Access and Success after administrators began recognizing that the parents of Head Start children had themselves attended Head Start at Educational Alliance when they were young. This return was not an indicator of success to the agency; rather it raised a concern that the agency was not helping families improve their economic security.

Beginning in 2011, parents could access English for Speakers of Other Languages (ESOL) classes, high school equivalency classes, and help accessing postsecondary education, while their children participated in Head Start/Early Head Start. After about three years of operation, College Access and Success also added economic security services, giving parents the opportunity to work one on one with an employment counselor.

College Access and Success served 335 parents in 2015-16. The program has been funded by the New York State Education Department, the Office of Head Start, the J.P. Morgan Chase Foundation, the Lower Manhattan Development Corporation, and the Annie E. Casey Foundation.

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### Target population

In 2015-16, 53 percent of the Educational Alliance's Head Start and Early Head Start families participated in College Access and Success. Educational Alliance targets low-income, Head Start-eligible families living on the Lower East Side of New York; 95 percent of program families have an annual income below \$20,000. This neighborhood has a large proportion of immigrants; program participants in 2014-15 were 45 percent Asian and 37 percent Latino.

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### Services for adults

College Access and Success and its partners provide a set of educational services to adults that the program believes will lead to enhanced economic security through improved language skills and educational attainment, and one-on-one employment counseling.

The Borough of Manhattan Community College (BMCC; part of the City University of New York system) offers program participants daily ESOL classes on site at the Educational

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Alliance's main offices. ESOL classes are intended as a bridge to future economic security, through higher educational attainment and/or employment. BMCC provides high school equivalency classes at the nearby Henry Street Settlement House for adults who lack a high school diploma. A College Access and Success college counselor helps adults who have achieved English language proficiency and a high school diploma enroll in postsecondary education and find scholarships.

Adults who are interested in getting a job can meet with an employment specialist, who provides individualized assistance to adults to help them prepare a resume, develop interview skills, and get placed in a job. The employment specialist also arranges community job fairs and financial literacy workshops. (Employment services are available to all Educational Alliance families, not just those participating in College Access and Success.)

In addition to economic security services, the College Access and Success program sponsors family and program events, including cultural fairs and parenting classes, to help adults develop and strengthen their social networks; parenting groups and family literacy programming to enhance parent-child interactions and promote school readiness; and community development events to help parents become active in their communities. A team of mental health professionals helps families deal with stress and other mental health issues.

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### Services for children

Educational Alliance provides Head Start and Early Head Start to children up to age 5 whose families live in the Lower East Side of Manhattan. Early Head Start is available in home- and center-based settings. It provides child care for siblings who are too old or too young for Head Start or Early Head Start while parents are in classes. Educational Alliance also operates a universal pre-kindergarten program for four year olds. Children enrolled in Head Start can also participate in the universal pre-kindergarten program. In 2015-16, about 550 children participated in Early Head Start and Head Start; the parents of these children could participate in College Access and Success.

Every family can receive case management from a Head Start-funded family advocate. Family advocates use a modified version of the EMPATH Bridge to Self-Sufficiency tool to help families achieve stability in six areas: family (housing and children's needs); well-being (physical/behavioral health and social networks); education and training; financial management (savings and debts); career; and school readiness/child development (see "More Information").

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### Evaluation

As of late 2016, the New York University-Steinhardt School of Education was conducting a summative evaluation of College Access and Success. College Access and Success was also receiving technical assistance to analyze program outcomes, with funding from the Annie E. Casey Foundation.

According to the program, College Access and Success families have made progress towards short, intermediate, and long-term outcomes. As of the 2015-16 school year, 51 adults have enrolled in or completed college. As of the 2014-15 school year, children in the program

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have achieved year-over-year increases in the social-emotional, gross motor, fine motor, language, cognitive, literacy, and mathematics domains of the Teaching Strategies GOLD assessment.

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#### More information

- The National Head Start Association’s “Two Generations Together” report: [https://www.nhsa.org/files/resources/nhsas\\_two\\_generationstogether\\_report.pdf](https://www.nhsa.org/files/resources/nhsas_two_generationstogether_report.pdf)
- The New York University-Steinhardt School of Education presentation about College Access and Success at the Princeton Two-Gen Conference: [https://ers.princeton.edu/sites/ers/files/events/Princeton%20G%20Conference%20May%202014\\_1.pptx](https://ers.princeton.edu/sites/ers/files/events/Princeton%20G%20Conference%20May%202014_1.pptx)
- Teaching Strategies GOLD Learning Assessment: [http://shop.teachingstrategies.com/content/pageDocs/GOLD-Touring-Guide\\_5-2013.pdf](http://shop.teachingstrategies.com/content/pageDocs/GOLD-Touring-Guide_5-2013.pdf)
- The EMPATH Bridge to Self-Sufficiency tool: <https://www.empathways.org/our-work/our-approach/bridge-to-self-sufficiency>

Links accessed on 11/22/2016

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## Program Profile: Next Generation Kids

|                              |   |
|------------------------------|---|
| <b>Operated by:</b>          | Utah Department of Workforce Services   |
| <b>Service area:</b>         | Ogden and Salt Lake City, UT  |
| <b>Year started:</b>         | 2014  |
| <b>Stage of development:</b> | Developing  |
| <b>Website:</b>              | <a href="http://jobs.utah.gov/edo/intergenerational">http://jobs.utah.gov/edo/intergenerational</a> |

### Program overview

Next Generation Kids is a pilot program designed by the Utah Intergenerational Poverty Welfare Reform Commission to take a two-generational approach to reducing intergenerational dependency on public benefits. Families in the pilot program receive intensive case management to connect them with the services they need to become economically secure. The pilot program started with 30 families in 2014 and is funded through Utah's TANF program. Currently, there are 48 families participating across three sites, ranging in size from 11 to 20 families.

An additional component of Next Generation Kids is its role as a laboratory for the development of new case management strategies in Utah; trainings in motivational interviewing, trauma awareness, executive functioning, family assessments and promoting a "kid-friendly" environment have extended beyond the program for TANF recipients statewide.

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### Target population

The target population for Next Generation Kids is families facing intergenerational poverty. State legislation passed in 2012 required the state workforce agency to track data on intergenerational poverty, allowing the agency to identify families that have recently received public assistance for at least one year, families with children age 12 or younger, and family members who received at least one year of cash assistance as children. According to the Department of Workforce Services, adults in families who have experienced intergenerational poverty are among the hardest to employ. Areas of Utah with particularly high concentrations of intergenerational poverty were selected for initial program implementation. After the initial intake of families, parents with children over twelve were not excluded from the program.

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### Services for adults

The primary service provided through Next Generation Kids is intensive case management, provided to the whole family by trained case workers from the Department of Workforce Services. Families generally meet with program staff weekly, and communicate by phone even more frequently. The case managers use strategies such as motivational interviewing to help participants set goals in the areas of employment and family stability. Case managers then work with community partners to provide services intended to help families achieve the goals they set for themselves. At one pilot site at James Madison Elementary School in Ogden, Utah, community partners include the United Way, local

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colleges, the Utah Department of Health, and local community action programs. The University of Utah Social Research Institute is providing technical assistance to support implementation of the Next Generation Kids pilot.

Adult services also include workshops, including financial literacy and cooking for the whole family.

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### Services for children

Case managers engage the whole family in case management. Parents work with case managers to identify goals they have for their children's health and education, but case managers also work directly with children (as age-appropriate) on goals that will improve the family's overall well-being. For more intensive therapy, case managers make referrals. Some of the Youth-focused community partners include Head Start, school districts in which programs are located, The Children's Place and Utah Division of Child and Family Services. These partners work with case managers to provide appropriate services to children.

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### Evaluation

As of December 2016, Next Generation Kids had not been evaluated by an external evaluator. By 2017, an evaluation of Next Generation Kids was underway, conducted by the Social Research Institute of The University of Utah.

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### More information

An Aspen Institute/Voices for Utah's Children issue brief about Utah's work on intergenerational poverty: [http://www.utahchildren.org/images/pdfs/2014/IGP\\_Genesis.pdf](http://www.utahchildren.org/images/pdfs/2014/IGP_Genesis.pdf)

A presentation by the Utah Department of Workforce Services to the Administration for Children and Families of the U.S. Department of Health and Human Services and the Peer Technical Assistance Network:  
[https://peerta.acf.hhs.gov/sites/default/files/public/uploaded\\_files/Two%20Generation%20Webinar%20PowerPoint%20052615%20Final.pdf](https://peerta.acf.hhs.gov/sites/default/files/public/uploaded_files/Two%20Generation%20Webinar%20PowerPoint%20052615%20Final.pdf)

A flyer for Next Generation Kids: <http://jobs.utah.gov/edo/intergenerational/ngk.pdf>

TANF policy paper with a case study of Utah: <https://www.acf.hhs.gov/ofa/resource/tanf-acf-im-2016-03>

Links accessed on 1/26/2016

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APPENDIX D

SUMMARY OF RESEARCH ON INTEGRATED APPROACHES  
TO SERVE PARENTS AND CHILDREN

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Table D.1. Summary of available and forthcoming two-generation descriptive outcomes evaluations

| Citation   | Years of evaluation | Design  | Methods   | Sample   | Key outcomes reported   |
|--|---------------------|---|---|--|---|
| <b>College Access and Success, Educational Alliance</b>  |                     |   |   |  |   |
| <i>None</i>  | <i>Unknown</i>      | <i>No design information available.</i>           | <i>No methods information available.</i>  | <i>Unknown</i>   | 20 parents had enrolled in college by year 3 of the program. <sup>1</sup>   |
| <b>Family Economic Success-Early Childhood Initiative<sup>2</sup> (College Access and Success, Educational Alliance; Atlanta Civic Site, Annie E Casey Foundation; Baltimore Civic Site, Annie E Casey Foundation; Garrett County Community Action Committee; CareerAdvance®, CAP Tulsa)</b> |                     |   |   |  |   |
| <i>None</i>  | 2013–2016           | <i>No design information available.</i>           | <i>No methods information available.</i>  | <i>No sample information available.</i>  | <i>Findings are not available.</i>  |
| <b>Family Literacy Initiative, First 5 LA</b>  |                     |   |   |  |   |
| Quick et al. 2011  | 2002–2011           | Pre-program and post-program outcomes evaluation. | Correlational analysis of pre-program and post-program assessments of participant-reported outcomes and pre-program and post-program assessments of children’s and adults’ skills.<br><br>Administrative participant background and attendance records also used. | 2,731 families mostly of Hispanic heritage.<br><br>Mostly low-income women who had not graduated high school.<br><br>Children 0–5 years old when entering the program. | Parents improved their reading ability, particularly after the first year in the program. Parents who participated for two years improved the most.<br><br>Parents improved parenting knowledge and behaviors, such as believing they should read to their children, getting involved with the school system, and setting rules and consequences for children. Higher dosage was associated with higher outcomes<br><br>Children improved their ability to name letters, numbers, and colors; count objects; comprehend print; and problem-solve, but not their language development. Higher levels of family participation were associated with children’s growth in naming colors and print concepts. |
| <b>Mother’s Club</b>   |                     |   |   |  |   |
| Zargarpour 2011  | 2010–2011           | Pre-program and post-program outcomes evaluation. | Correlational analysis of pre-program and post-program assessments of participant-reported outcomes and pre-program and post-program assessments of children’s and adults’ skills.  | All program participants between 2002 and 2010 (157 parents in total).<br><br>60 percent of parents lacking high school diplomas; more than                            | Children and parents experienced gains in English language literacy after participating in the program.<br><br>Parents report engaging in more literacy-related activities, such as reading to their children and visiting the  |

Table D.1 (continued)

| Citation                                      | Years of evaluation | Design  | Methods   | Sample  | Key outcomes reported  |
|---|---------------------|---|---|---|--|
|   |                     |   | Administrative participant background and attendance records also used in analysis.   | 70 percent speaking a language other than English at home.  | library, after participating in the program.<br><br>Parents reported decreased stress and more engagement with the community and education after participating in the program.   |
| <b>Parent Child Education Program, AVANCE</b> |                     |   |   |   |  |
| Montes 2014                                   | 2013                | Cross-sectional descriptive outcome evaluation; information on mothers and children gathered 7 to 14 years after program participation. | Interviews conducted with individuals who graduated from services between 1999 and 2006.<br><br>Outcomes all self-reported. | 199 young, low-income, Hispanic mothers.<br><br>Mothers selected for interviews sampled to match program demographics on the whole. | Children of program graduates had a high school attrition rate of 10.5 percent, which researchers found was lower than the state average.<br><br>More than 93 percent of mothers felt that their children were ready for school.<br><br>Mothers reported increased educational attainment, any employment, and full-time employment, after participating in the program. |

Notes: Citations provided are for final cumulative publications or, if research has not concluded, the most recent research publication.

Source: Project team analysis of available outcomes studies as of January 2016.

<sup>1</sup>Outcomes from this evaluation were reported in a summary presentation of evaluation work (Appelbaum 2014). No other information about the outcomes evaluation was presented.

<sup>2</sup>Evaluation identified in King and Hernandez (2016) and Guy et al. (2015). King and Hernandez include the Baltimore Civic Site as an evaluation participant, but not College Access and Success. Guy and colleagues do not include the Baltimore Civic Site as an evaluation participant.

Table D.2. Summary of available and forthcoming two-generation effectiveness evaluations

| Citation                         | Years of evaluation | Design  | Methods   | Sample   | Key outcomes reported  |
|----------------------------------|---------------------|---|---|--|--|
| <b>CareerAdvance®, CAP Tulsa</b> |                     |   |   |  |  |
| Chase-Lansdale et al. 2015       | 2011–2014           | Quasi-experimental design, using a matched comparison group selected from other families served by CAP Tulsa Head Start | <p>Parents' self-reported skills and expectations on pre-program survey.</p> <p>Outcomes and participant background information gathered from in-depth parent surveys, direct parent and child assessments, and program administrative data.</p> <p>Participant outcomes linked with Head Start Family and Child Experiences Survey (FACES) to compare participants and comparison groups with nationally representative Head Start families.</p> | 337 participants, mostly young mothers                               | <p>59 percent of participants persist in the program for at least 16 months.</p> <p>76 percent of participants earn a workforce-applicable certificate within 16 months; 68 percent of participants who spend less than 16 months in the program earn a certificate.</p> |
| Sommer 2015                      | 2013–2018           | RCT   | <p>Individual randomization within each career pathway.</p> <p>Access to EHS and Head Start for all treatment and control group families.</p> <p>Control group members placed on a wait list and can participate in CareerAdvance after two years.</p> <p>Outcomes and participant background information gathered from program administrative data.</p>  | 300 participants divided evenly between treatment and control groups | <i>Findings are not yet available.</i>   |
| No publications available        | 2015–2020           | Supplementary evaluation of a federally funded RCT  | <p>Longitudinal evaluation of participants enrolled in an RCT through CAP Tulsa's Health Progression Opportunity Grant (HPOG II).</p> <p>Focus on short- and long-term child academic and behavioral outcomes.</p>  | 1,000 participants.  | <i>Findings are not yet available.</i>   |

Table D.2 (continued)

| Citation  | Years of evaluation     | Design   | Methods  | Sample  | Key outcomes reported  |
|---|-------------------------|--|--|---|--|
| <p>Outcomes and participant background information gathered from parent surveys, program administrative data, and child-level administrative data from CAP Tulsa and local public school districts.</p> |                         |  |  |   |  |
| <p><b>Family Rewards, New York City Center for Economic Opportunity</b></p>   |                         |  |  |   |  |
| Riccio et al. 2013  | 2007–2010               | RCT  | <p>Business-as-usual control group that was ineligible for cash transfers.</p> <p>Participant background data gathered from baseline survey.</p> <p>Outcomes measured using 42-month follow-up participant survey of self-reported outcomes, New York State Unemployment Insurance records, New York City Department of Education administrative records, and program administrative data.</p> | <p>4,790 families split evenly between treatment and control groups.</p> <p>Families earning below 130 percent of the federal poverty line and with at least one child in public school in the fourth, seventh, or ninth grade.</p> | <p>Families reduced poverty and material hardship but effects weakened after cash transfers stopped.</p> <p>Families increased savings over the course of the study.</p> <p>Families increased use of preventative dental care, but not preventative medical care as a result of the program.</p> <p>Families self-reported that they had increased rates of full-time employment after participating in the program, but changes were not reflected in state workforce data.</p> <p>The program did not impact educational outcomes for elementary or middle school children, but increased graduation rates for high school teens with adequate reading proficiency.</p> |
| <p><b>Nurse Family Partnership</b></p>  |                         |  |  |   |  |
| Various   | Various, from 1979–2012 | The Home Visiting Evidence of Effectiveness Review identified 21 impact studies of Nurse Family Partnership published between 1979 and 2012 that met rigorous quality standards. | Varies by study.   | Variety of sample sizes and demographics but program participants always low-income, first-time mothers.  | <p>Participants in the program had positive outcomes in the areas of child development and school readiness, child health, family economic security, maternal health, and positive parenting practices.</p> <p>Families experienced reduced child maltreatment, juvenile delinquency, family violence, and crime as a result of the program.</p>   |



Table D.2 (continued)

| Citation                            | Years of evaluation | Design | Methods | Sample | Key outcomes reported |
|-------------------------------------|---------------------|--------|---------|--------|-----------------------|
| Few studies found negative effects. |                     |        |         |        |                       |

Notes: Citations provided are for final cumulative publications or, if research has not concluded, the most recent research publication.

Source: Project team analysis of available effectiveness evaluations as of January 2016.

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