



PARENT-CHILD HOME PROGRAM

A PROVEN BEGINNING FOR SCHOOL SUCCESS SINCE 1965

Bridging the Gap between Poor and Privileged

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Last spring, American Educator published research by Betty Hart and Todd Risley showing that, on average, low income parents spoke much less to their children (and spoke to them about a narrower range of topics using a smaller vocabulary) than did their higher-income counterparts. As a result, the average low-income child had heard 30 million fewer words than his higher income peers by the time he or she was just three years old. The obvious question: If this early word gap is a major source of the subsequent school achievement gap, what can be done? High quality early education programs can make up some of the difference. But consider how the achievement gap could be reduced if low-income parents were to begin interacting with their children in ways that greatly diminished this 30-million word gap.

One program that attempts this stands out for its effectiveness, its research base, and its longevity: the Parent-Child Home Program. PCHP is as simple as it is effective. While a home visitor engages a toddler from a low-income family by reading a book or playing with an educational toy, the parent is either participating or, at the very least, observing. Parents quickly begin to interact with their young children in similar ways—and by the beginning of kindergarten, the children look very similar, cognitively and behaviorally, to their middle-class peers.

—Editors

By LaRue Allen and Anita Sethi

Phyllis Levenstein had a hunch. Immersed in the 1960s quest for social justice and in her own quest to earn a doctorate in clinical psychology, she knew that a critical step in the cycle that locks generations in poverty was dropping out of high school. The dropout rate had to be drastically reduced—but how? Levenstein realized that the path to school failure actually started before school entry. She believed that the dropout rate could be reduced by helping low-income parents see that talking to their young children is a great way to educate them.

Today, nearly 40 years later, it's clear that Levenstein's hunch was correct. Researchers know that the verbal interaction between parents and their young children—especially interaction around books and toys that inspire

the children to initiate conversations—is absolutely essential to cognitive development. Researchers also know that the program that Levenstein developed, the Parent-Child Home Program (PCHP), is

the most effective intervention of its kind. Dozens of studies have been conducted by Levenstein as well as independent researchers; the results overwhelmingly indicate that PCHP is highly effective in preparing young children from low-income families for school. For example, researchers have found lasting increases in IQ scores; scores above national norms on the California Achievement Test in the second, fifth, and seventh grades; and high school graduation rates as high as those of

middle-class students. Even more impressive, results like these have been found among a great variety of children (whites, blacks, non-English speakers, etc.) and in a great variety of communities (New York suburbs, inner-city Los Angeles, semi-rural South, etc.).

Here, we offer a look inside a PCHP home followed by a review of the program's research foundation and evidence of its effectiveness.

* * *

Moises P., a two-year-old boy with dark, serious eyes, is trying to find something to do. He looks out the window but his mother pulls him away, frightened that he will fall. It is early afternoon and there are no children's programs on television—his parents can't afford cable TV—and Moises has no books or toys.¹

Moises lives with his parents and his seven-year-old brother in one room of an apartment that they share with two other families in a small Northeastern city. He is a sturdy little boy with just a bit of baby fat left on his cheeks, but he does not get many opportunities to exercise his growing muscles. The room he lives in is cramped and, during these hot summer months, stifling. All available space is taken up by bedding, dressers for clothing, and a small television. Mrs. P. also keeps some food in the room for the children since things sometimes get "lost" in the communal kitchen.

There is no money for playthings and there is not much space to move around—the bed is used as a couch, workspace, and kitchen table, as well as a place to sleep—and Mrs. P. is always worried that if the children make too much noise, a neighbor will complain that there are too many people living in the apartment. Now that it is summer, Mrs. P. can take the children outside, but drug dealers and drunks are often at the park. And Mrs. P. is tired. She works evenings cleaning a local office building, after her husband comes home from his job. As a result, she often allows the children to spend much of the day watching television. It keeps them quiet, it keeps them still, and she knows they are safe.

Mrs. P.'s biggest worry is the children's safety. Other mothers let their children play in the hallways of the four-story, 1950s-era apartment building they live in, but Mrs. P. does not like to let her boys out of her sight. In the small town in Mexico where she grew up, the children played in each other's yards and in the fields behind their houses.

The families knew one another and everyone watched out for everyone else's children. Here, in this city of abandoned factories and scrawny trees, Mrs. P. knows almost no one. She cannot be sure that others will look out for her boys, so she feels better when they are near her.

So, on this hot July day, Mrs. P. takes the children with her to the laundromat, where she meets a young woman who is posting colorful fliers, written in Spanish, on the bulletin board. The fliers offer free toys and books; although Mrs. P. hasn't room for these things, she still wishes her children had them. The woman has a nice smile and tells her, in Spanish, that her boys are handsome.

A few minutes later, the woman, whose name is Liliana,² is telling Mrs. P. about the free book and toy program while Mrs. P. empties her laundry into a large machine. The boys run around the space, happy to have room to move and new things to look at, even if they are just clothing spinning around

¹ Facts about Moises, as well as all of the other program participants mentioned in this article, are taken directly from PCHP records; the participants' thoughts were extrapolated from those records.

² Liliana is a pseudonym given to protect the privacy of the particular site and participants discussed.

in machines. Liliana explains that twice each week, a “home visitor” could come to their apartment and play with Moises and Mrs. P. for half an hour. The visitor will be a person trained to work with children, and she will bring a toy or book for Moises to keep each week. The program is called the Parent-Child Home Program, and a visitor could start coming in just a few months. Best of all, it costs nothing—all Mrs. P. has to do is sit with the visitor and Moises and play with them together.

Mrs. P. is still wary, but wants so badly for her sons to have the things that other children have—not just toys, but opportunities and abilities—that she decides to gamble and give the program a try. She has been worried that Moises does not seem to be talking as much as his brother did as a two-year-old and wonders if it is because he does not get enough attention. She is concerned that he will have trouble when he begins kindergarten in three years. She gives Liliana her address and phone number.

At Risk for School Failure

Mrs. P.’s concern for Moises is well-placed. Based upon his demographic characteristics, Moises is at risk for school failure. Variables such as poverty (Stipek and Ryan, 1997), low maternal education (Chandler et al., 1999), and being a member of a racial/ethnic minority (Swick, Brown, and Boutte, 1994) affect school readiness. Making matters worse, the effect of these factors appears to be additive: Cumulative risk factors are associated with even poorer math and vocabulary scores among 4-year-olds (Nord, Zill, Prince, Clarke, and Ventura, 1994). For example, a recent study found that only 26 percent of three- to five-year-old children with two or more risk factors (such as a low level of maternal education, mother’s language not being English, familial poverty, or a single parent home) exhibited three out of the following four critical readiness skills: recognizing all letters, counting to 20 or higher, writing one’s name, and reading or pretending to read. In contrast, 40 percent of children with one risk factor and 47 percent of children with no risk factors exhibited three out of four readiness skills (Chandler, Nord, Liu, and Lennon, 1999).

Study after study has found that school readiness is largely based on early childhood experiences within the family. Children like Moises are less likely than their middle-class peers to experience the sorts of activities—like being read and spoken to frequently—that help a child come to school ready to learn. For example, when surveyed, 91 percent of parents with none of the risk factors listed above reported having read to their three- to five-year-old at least three times in the past week. Among parents with two or more risk factors, that figure dropped to 66 percent (Chandler et al., 1999).

The impact of poverty on children’s academic and social-emotional development is made shockingly concrete by the work of Hart and Risley (1995). These researchers found that over a 100-hour week (of non-sleeping time), the typical child in a professionals’ family was exposed to 215,000 words, while the typical child in a family on welfare was exposed to 62,000 words—less than half the amount that the professionals’ children hear. By the time they are four years old, professionals’ children will have accumulated experience with about 45 million words, but children from families on welfare will have accumulated experience with just 13 million words. Compounding this deficit, the children of professionals were supported by environments that were more positive and encouraging than were the children in lower-income homes. Specifically, children of professionals heard six times more encouragements per hour than the children in families on welfare. In contrast, children in families on welfare heard almost twice as many prohibitions per hour.³ This sort of negativity has a direct impact on school performance: Parents who are controlling and unsupportive of autonomy are likely to have children who show less persistence in approaching a difficult task (Frodi, Bridges, and Grolnick, 1985) and who exhibit poorer school adjustment (Barth and Parke, 1993).

³ For more information on Hart and Risley’s research see “The Early Catastrophe,” Spring 2003 American Educator, online at www.aft.org/american_educator/spring2003/catastrophe.html

The stresses of poverty make it difficult for parents to act as children's teachers, leading researchers to observe that the lower school performance of poor children could be explained by the absence of cognitive stimulation from parents and the type of emotional support that comes from reading, playing, and conversing together (Korenman, Miller, and Sjaastad, 1995). Klebanov, Brooks-Gunn, McCarton, and McCormick (1998) suggest that the bulk of the relationship between poverty and children's cognitive outcomes is associated with poor parents' inability—whether it is due to poverty or its correlates—to engage their children in a stimulating, enriching way.

Similarly, Yeung, Linver, and Brooks-Gunn (2002) found that the family's inability to provide resources to support cognitive development mediates the relationship between poverty and cognitive outcomes. Yeung and her associates looked at data from a large longitudinal study of over 3,500 children and their families. They found that the presence of intellectually-stimulating toys (such as books or games that involved numbers, colors, shapes, sizes, or letters) in the home, and the tendency of parents to spend time on such activities, as well as on things like playing a sport together, was significantly related to children's scores on standardized tests of cognitive development. In fact, the impact of low income on children's test scores was no longer significant when the mediating effects of these stimulating toys and activities were included in the analysis. This means that the ability to spend time and money on stimulating toys and activities—not poverty per se—is the real key to achievement. As we will see, the Parent-Child Home Program offers parents the books, toys, and skills they need to stimulate their young children.

We see each of these issues in Moises' situation. His mother cannot afford the books or puzzles to engage him intellectually, and is too isolated to send him to preschool. (Although PCHP serves families of all races and ethnicities, the under-representation of Latino families in center-based programs makes home-based services an especially appropriate intervention for this population.) Mrs. P's living situation presents many restrictions (on noise and level of activity), forcing her to prohibit more behaviors than she would like. Mrs. P. is tired from her multiple responsibilities and does not have the concrete or emotional resources to teach her son, even though she is concerned about his development.

It is these early and pervasive family-based experiences that PCHP aims to alter, and this is where Liliana Vasquez comes in. Liliana, who immigrated to this country from Ecuador in 1993, is the mother of three children and a PCHP home visitor. To combat the fear and isolation she felt when she first arrived in the U.S., she signed up for English as a second language classes at a local community college. It was there that she saw fliers offering free books and toys. She enrolled her middle child and upon his graduation from PCHP was hired as a home visitor.

Moises Is Entranced

Liliana visits Mrs. P. in the early weeks of September. Mrs. P.'s older son is back in school, giving him something to do for much of the day, but Moises is still underfoot and increasingly hard to entertain. Liliana arrives and explains that she is collecting "intake" information. Mrs. P. is anxious—will her immigration status make her ineligible, will she be reported to the U.S. Citizenship and Immigration Services—but Liliana does not ask any such questions. Instead, she wants to know how old Mrs. P. and her husband are, how much education they have, and whether or not they work outside the home. Liliana asks what country they are from and when they came here, but does not ask about immigration status. She then schedules two 30-minute time slots per week when she can see Moises and his mother.

When Liliana begins program visits in October, she brings a copy of *Goodnight Moon*. She sits down on the floor, inviting Mrs. P. to do the same, and reads it to Moises. Mrs. P. has never heard anyone read a book like this before: Instead of just reciting the words, Liliana speaks in a gentle, singsong voice that is like a soothing lullaby to both Moises and his mother. She says words like "author" and

“illustrator” to Moises, and engages him in the story by asking what he thinks is going to happen next. She points out interesting little details in the pictures—things Mrs. P. never had the chance to notice before—and makes the story a game by asking him to find a tiny mouse hidden on some of the pages. Moises is thoroughly entranced, and seems utterly surprised and delighted that he gets to keep the book when Liliana leaves.

The book is so bright and the memory of Liliana’s kind voice is so warm that Mrs. P. is happy to pick up the book several times before Liliana’s next visit. She shares it with her older son, who enjoys looking for the mouse, and reads it again to Moises, who laughs each time she says “Goodnight mush.” Moises’ squeals of pleasure are so encouraging, so gratifying, and curling up to read with him is so restful that Mrs. P. finds herself reading the book again and again. When Moises sees Liliana at the door again that week, he runs to fetch the book.

When Liliana comes the following week, she brings a set of brightly-colored blocks with her. The blocks are arranged in a pattern in a little wagon that has a string for Moises to pull around the room. Liliana sits down with Moises, inviting his mother to join them on the floor, and builds a tower, holding up each block and naming the color in Spanish and English as she goes. Moises is transfixed. Liliana engages his mother by asking her to put some blocks on the tower as well. Mrs. P. names the colors in Spanish, imitating Liliana, as she adds them to the tower. Liliana then asks Moises to try to build a tower on his own and Mrs. P. looks on, amazed, while he does. When it is time to leave, Moises stares quietly at Liliana packing up her things. Mrs. P. knows he is wondering what is going to become of the blocks—he is afraid to hope he will be able to keep them, too, but he is also afraid to ask. Liliana seems to read his mind when she stoops down next to him and says, “These are for you to keep. I want you to practice making some more towers with these, and then you can show them to me next time I come back.” Moises beams and gets back to work; Mrs. P. wants to hug Liliana for making her son so happy.

Over the next few days, Mrs. P. finds herself mimicking the warm, encouraging words she heard Liliana use with Moises. When he builds a tower, she tells him she likes the blue block at the top, or the yellow block at the bottom. She does not always remember, and she does not always have the time or energy to focus, but she has a new idea now about how to talk to her toddler. When Liliana returns that week, Mrs. P. is proud to see Moises accurately name all of the colors of the blocks.

How PCHP Works

All PCHP replication sites start the program with a book and alternate between a book and toy for the 46 weeks that comprise the intervention. (The minimum length of the intervention is 23 weeks per year for two years, but many sites offer more.) In order to make the program flexible and responsive to the needs of various communities, each site is provided with a set of criteria to guide selection of books and another set to guide selection of toys. The criteria are quite specific—toys, for example, must elicit or at least permit language, and must have a readily-discernible goal. Another important criterion is that the materials be like those that children will see in preschool and kindergarten, so that they will feel familiar with such items when they confront them later on. For these reasons, puzzles are a common PCHP gift. Books are expected to have many large, colorful, detailed illustrations and should be within the reading level of most parents. Books should be appealing to boys and girls and should “widen the child’s experience,” but not cover topics that might make a child anxious.

For the next 21 weeks, Liliana returns, bringing a new toy or book at the beginning of each week and spending two half-hour sessions demonstrating its use to Moises and his mother (she will then take a summer break and return the following October for another 23 weeks of weekly gifts and twice-a-week visits). In each visit, she sits down with Moises, usually on the floor. She invites Mrs. P. to join (parents must agree to participate, even if they are just watching the session), and plays with him or reads to him. This seemingly simple activity—“demonstrating” the use of the toy or book—is the

core of the intervention. Liliana's overarching goal is to help Mrs. P. find ways to interact with Moises in a supportive, intellectually stimulating way. As stated by Phyllis Levenstein, the founder of the program, there are only two proximate goals of PCHP: "(1) to increase the cognitive and emotional development, and thus the school readiness and perhaps eventual literacy, of at-risk toddlers, and (2) to promote parents' verbal interaction with their children and other parenting skills" (Levenstein, Levenstein, & Oliver, 2002, p. 333). Within these broad targets are sub-goals influenced by the needs of the family and the characteristics of the local community. For Mrs. P., a goal is giving her ideas for things to do with Moises in their limited space so that she can be more supportive of his curiosity and less negative in her interactions with him. For example, one day Mrs. P. is folding laundry when Liliana arrives, Liliana shows her how she can engage Moises, naming colors and putting socks in one pile and shirts in another. Liliana also acts as a resource for Mrs. P., referring her to a housing agency to help her find a better living situation and alerting her to the Head Start program in her area.

Although Liliana may indirectly cover many topics in her visits, home visitors are trained to have a "light touch" (Levenstein, 1988) and not to be counselors or even teachers. Rather, they are encouraged to simply play and chat with the parent and child (generally about the toy or book they've brought) in order to demonstrate developmentally appropriate, supportive interactions. This approach reflects the program's philosophy that the parent is the most important person in the child's life and that that role should not be usurped by PCHP or any other intervention. The goal of PCHP is for the parent to "own" the suggestions and activities offered and not to feel that they must memorize a set of behaviors. For this reason, there are no "lessons" or tasks to be completed by parents—the learning happens through observation and interaction.

Home visitors receive 16 hours of training before working with families, and they represent a range of educational, ethnic, racial, and personal histories. A recent evaluation of five PCHP sites across three states found home visitors with graduate degrees and those with less than a high school education. Across the country, however, most home visitors do not have college diplomas. In our evaluation, the majority lived in the communities they served, had children, and were in their mid-forties (although the range was from 25 to 63). A third had participated in the program as parents themselves. The only unifying characteristic was that all of the home visitors were women (Allen, Astuto, and Sethi, 2003).

The training of home visitors is supported by weekly supervision sessions with Program Coordinators, who visit families two or three times each year to oversee and advise on progress. Program Coordinators keep their programs aligned with PCHP goals through these weekly sessions that they, in turn, must document in reports to the National Center (the executive offices of PCHP). Once each year, program sites must complete two reports describing their activities during the year and confirming that they have followed protocol with all families. Both reports serve to remind the sites of the goals of PCHP and to alert them to any deviation from the model, while also keeping the National Center apprised of the activities of each site. Attendance and attrition rates are yet another source of information about the work being done at each site; if average attendance rates are consistently low at a given site, the National staff will look more carefully at the activities at that site.⁴

In addition to their roles as monitors of program fidelity, Program Coordinators also may make referrals to other agencies to assist with issues such as domestic violence, substance abuse, mental illness, learning disabilities, or other family matters that are beyond the scope of the home visitors' training. It is the job of the Program Coordinator to make decisions about a family's eligibility for a program as well—if a given family is repeatedly absent when the home visitor arrives, and has no reasonable explanation, that family is given a warning and may eventually be terminated from the program.

⁴ Attendance rates are how many sessions each family attends, although data are kept on cancellations versus "no-shows." Attrition rates are how many families drop out. Attendance rates are related to attrition rates in that families who have low attendance rates for no readily-resolved reason may be asked to leave the program or may leave themselves.

PCHP tries not to have rigid rules about the number of sessions that a family may miss before being terminated so that home visitors and program coordinators can consider each family's circumstances before making such a decision. Families often face challenges such as eviction, pregnancy, illness, job loss, or immigration issues that affect their ability to participate. One of the benefits of the high frequency of visits in PCHP—higher than any other home visiting program of its kind—is that home visitors can keep up-to-date with events in each family's life. Programs with lower frequencies of visiting—as low as once a month, for some programs—often do not know when a family is about to be evicted, for example, making it hard to respond in time to help prevent the eviction, let alone learn where the family has gone. The high rate of visiting in PCHP means that a home visitor will know when a family may need to miss some sessions and will make allowances. Further, because many home visitors live in the communities in which they work, they are often able to find a family who has “no-showed” and identify what the hurdle to participation might be. As a result, the attendance rates for PCHP are high compared with other home visitation programs. Gomby, Culross, and Behrman (1999) reported attendance rates ranged from 42 percent to 56 percent of intended visits in their review of six non-PCHP home visiting programs. In contrast, PCHP boasts attendance rates of 85 percent, attributable in part to the higher intensity of visits and the staff's connection to the community. The intensity and structure of the program and PCHP's commitment to retaining families in the program result in very low attrition/termination rates and reduce the self-selection that may otherwise occur if families in high-stress situations must motivate themselves to participate. It is notable that in the studies reviewed by Gomby et al., higher attendance rates were associated with better outcomes. Related to this, PCHP tracks families' completion of the program. Around the country, 80 to 85 percent of families complete the two years, although there is some variation across sites because some communities are much more subject to changes in work status, etc., that can affect program participation.

Evidence of Effectiveness

As with any intervention, the real proof of its effects is in the research data. Good research results are difficult to obtain, however. First, the type of research that one must conduct to successfully evaluate such interventions—field-based research—is fraught with so many challenges that conducting a methodologically-sound study is an achievement in and of itself. Many home visitation programs have not been studied enough to know if they work or not. Second, it is hard for one intervention to alter the course of things because the lives of children and their families are affected by so many variables. Of the home visitation programs that have been studied, most lack strong evidence of effectiveness—a recent review of six early childhood home visiting programs (not including PCHP) found no consistent positive effects upon parents or children across programs (Gomby et al., 1999).

On both scores, PCHP stands out. It has a strong research history, not only in terms of the quantity and quality of research conducted, but also in terms of the outcomes obtained. Overall, the large body of research that has been conducted on PCHP indicates that it is an effective program that addresses many of the risk factors associated with poverty by showing parents how to teach and stimulate their children. We'll review a sample of the dozens of studies on PCHP to provide examples of the broad range of evidence of its effectiveness. And, in more poignant terms, we will illustrate that evidence with the recollections of the children and parents who have participated in the program.

Early research revealed that, as expected, mothers who participated in PCHP demonstrated more supportive verbal interactions with their children two years after program completion, and that these interactions were, in turn, associated with school success in first grade (Levenstein and O'Hara, 1993). PCHP aims to help parents listen to children's cues. This helps with school since (as we noted above) parental over-control and lack of support for autonomy are associated with poor school adjustment. Parents learn to listen to their children and are, therefore, more able to help them develop verbal skills as well as more responsive to the content of what their children are saying. Marilyn M., an African-American parent from a suburb of New York City, recalls, “With me, it had to be one way or no way, [but after participating in PCHP] I learned not to be so hard on my child. At the time, I did

nothing with play. Now I know that the best way for a young child to learn is through play.” Five years after participation in PCHP, Marilyn’s son was named the best reader in third grade and won an award for outstanding behavior.

Early research also revealed a significant impact on IQ.

PCHP children’s IQ scores rose, on average, by 17 points, putting these low-income children (most of whom had mothers who were not high school graduates) above the national average IQ score of 100. Notably, this increase in IQ was still evident when the children were in third grade (Madden, Levenstein, and Levenstein, 1976).

More recently, a study in Florence County, S.C., (a largely African-American, semi-rural, Southern community), compared first-graders who had participated in PCHP to first-graders in their community and state on the Cognitive Skills Assessment Battery (CSAB), which is given to all children in the state when they enter first grade. The CSAB assesses children in 12 areas, including fine and gross motor skills, ability to identify differences and similarities in visual and auditory stimuli, ability to classify, compare, and sequence stimuli, and receptive and expressive communication. On this measure, the PCHP graduates were indistinguishable from others in the state, even

though all children in the PCHP group were from low-income, high-risk families. When compared with children from similar socioeconomic backgrounds, PCHP graduates’ rates of passing the CSAB were significantly higher than their peers’ (Levenstein, Levenstein, and Oliver, 2002). In South Carolina, then, PCHP essentially removed the measurable academic deficits associated with low-income status that children typically bring to first grade.

One of the most striking findings from PCHP research is that participation in the program as a toddler is associated with higher rates of high school graduation some 15 years later (Levenstein, Levenstein, Shiminksi, and Stolberg, 1998). In a study conducted in Pittsfield, Mass., (a post-industrial city) 84 percent of the low-income, high-risk children who participated in the program graduated from high school, compared with 54 percent of those in the control group. The 123 PCHP graduates even had higher graduation rates than students as a whole in Pittsfield, graduating at a rate no different from that of middle-income students nationally. Since those who received the intervention were randomly assigned, it is unlikely that graduation had to do with self-selection effects. Further, language tests administered when the students began the program as toddlers indicated no differences between the PCHP group and the control group, suggesting that later differences in academic achievement were not due to fundamental differences in ability or home environment (pre-intervention) between the two groups.

Anecdotes from PCHP indicate that children not only graduate, but often continue their education as a result of the early, important influences of the program. Candy P. is the first member of her family (a white family from Pittsfield, Mass., who has been in this country for many generations) to graduate from college, yet when Candy entered the program in 1979, she was considered developmentally delayed. When she completed the program in 1981, she tested above average on cognitive assessments. By the second grade, her teachers wanted her to skip a grade. In May 2004, she completed an MBA while working full-time.

Her mother believes that PCHP was critical to Candy’s success. Both Candy and her mother remember her particular fascination with the shape sorter, a toy brought by the PCHP home visitor. Candy liked the challenge of fitting the shapes in the correct slots, and she can still describe it exactly. She also remembers that she always knew what day the home visitor would come and that she entered school confident she could succeed.

The confidence Candy recalls is not easily measured, but its effects are far-reaching. Consider the story of Julian G., now an associate in a prestigious New York City law firm. For Julian, graduation from PCHP in 1978 was a first step that led to graduation from Cornell University and then Pace

University Law School. Julian believes the program gave him the confidence he needed to become “comfortable with himself as a learner.” It also “brought education home” so that once he entered school, learning didn’t stop when the school day ended. Confirming his own perceptions, Julian reviewed his prekindergarten and kindergarten records, and discovered that his teachers had noted that he was very focused on learning everything and very comfortable interacting with all the different children in the classroom.

In the winter of 2001-2002, we conducted our own evaluation of PCHP in five communities on Long Island (suburbs east of New York City). We chose to examine three interrelated outcomes of families’ participation in the program: children’s social-emotional skills, children’s academic abilities, and parents’ involvement in their children’s schooling. These outcomes were selected because we expected them to be influenced by PCHP and because of their influence, in turn, on children’s school success.

Results were again positive and also shed light on the challenges faced by PCHP families. We evaluated PCHP children and their families during the children’s kindergarten year, just under two years after completion of the program, and we compared them with children in their classrooms who had not participated in the program. The first thing we learned when we analyzed the data was that PCHP families were quite different from other families in their communities: Their parents had lower levels of education than their neighbors, worked less hours per week (which in this community means that they earned less), and were more likely to be Latino immigrants. Each of these differences represents a risk factor experienced by PCHP children but not experienced by their classmates—factors which would, in the absence of some intervention, present hurdles to school success.

Yet despite the presence of these risk factors, PCHP graduates were indistinguishable from their classmates on the bulk of our measures of preliteracy and social-emotional competence. Teachers’ reports indicated no difference between PCHP graduates and their more privileged peers on measures of prereading skills and classroom behavior, two important aspects of school success. This is a key finding since teachers are at the frontlines of decision-making about children’s school pathways—both in terms of the minute-to-minute expectations they set out for their students as well as in terms of the types of placements they seek for them.

In addition to having the teachers assess the children, we also evaluated the children ourselves on tests of inhibitory control, general knowledge, and prereading abilities. Inhibitory control is the capacity to suppress a behavior when it is necessary to do so, despite an opposing desire. Not talking out of turn when one has something important to say is an example of exercising inhibitory control. We chose this construct because as Kochanska, Murray, Jacques, and Koenig (1996) point out, such skills are key in learning to comply with adult demands (such as those from parents or teachers) and much of what represents acceptable classroom conduct involves suppression of the child’s desires (e.g., remaining quiet, remaining in one’s seat, waiting one’s turn, etc.).

Just as with teacher reports of children’s classroom behavior, we found no differences between PCHP graduates and their classmates on inhibitory control. This is an important result, given data that indicate that kindergarten teachers consider children’s behavioral problems to be more of a challenge to their academic and social success than academic delays (Rimm-Kaufman, Pianta, and Cox, 2000), as well as research that suggests that social-emotional competence can support children’s academic development. These results suggest that PCHP graduates have the behavioral skills necessary for classroom success.

To test general knowledge, we used measures developed for the Head Start FACES evaluation (Tarullo, Zill, Hubbell-McKey, and Resnick, 2002). These included assessments of counting, color naming, and knowledge about books (such as identifying the role of the author, recalling items from the book, and indicating where one should begin reading). Kindergartners who had completed PCHP as toddlers scored as well as their classmates from more privileged families on all of these measures.

The more impoverished backgrounds of the PCHP children were only evident in our tests of prereading

abilities, which we assessed with the Peabody Picture Vocabulary Test, Third Edition (PPVT-III; Dunn, Dunn, and Dunn, 1997) and the Test of Early Reading Ability, Third Edition (TERA-3, Reid, Hresko, and Hammill, 2001). The PPVT-III is a standardized test of receptive vocabulary that was normed on a national sample and that is used extensively in research and evaluation. It involves showing the child four pictures and asking him or her to point to the one that best describes a particular word, beginning with words like “chair” and progressing to increasingly complex words like “argument.” The TERA-3 measures children’s mastery of early developing reading skills and was also normed on a national sample. This standardized measure provides a Reading Composite score consisting of three subscales: Alphabet, which measures letter recognition; Conventions, which looks at concepts such as knowledge that print goes from left to right; and Meaning, which looks at early comprehension.

On both of these measures, the more privileged children outperformed PCHP children. This probably means that while PCHP does greatly reduce the gap between low-income children and their higher-income peers, it does not completely eliminate that gap. But there could also be effects that we were not able to detect. For example, Currie and Thomas (1996) found that Head Start had no effects upon children’s PPVT scores, even though effects were apparent for other tests. But when they looked specifically at children whose mothers spoke Spanish at home, they found that Head Start did have a positive impact on those children’s PPVT scores. Unfortunately, our sample of children whose mothers spoke Spanish at home was too small to conduct a similar analysis, so whether or not PCHP has a similar impact is a question for future research. Another question for future research is whether or not an impact on PPVT-III or TERA-3 scores will show up after the children have been in school longer. Because parents are expected to be the vehicle of change in PCHP, it is possible that more time in school may be needed to bring out the program’s effects on standardized tests like PPVT-III and TERA-3, which may require a longer exposure to academic knowledge. In our parent questionnaire, we did find that PCHP parents were as active in communicating with their children’s schools as more privileged parents, so we do have reason to expect that the impact of the program will become greater as parents learn from the school.

Overall, and consistent with previous research, we found PCHP to be an effective program helping families in a broad range of circumstances. While we did not conduct the detailed observations like those undertaken by Hart and Risley, we do believe based on our research and our review of studies that PCHP can help to reduce the enormous gap they noted between preschoolers from families on welfare and those from professional families. This is not a new idea. Thirty years ago, the distinguished psychologist Urie Bronfenbrenner, one of the architects of Head Start, said,

“It is in the social sphere that Levenstein’s method is most distinctive ... the principal and direct agent of intervention becomes not the teacher or the tutor, but the mother. As a result, intervention does not terminate at the end of the program, but continues as long as the patterns of joint activity and interaction between mother and child endure. The system exhibits a distinctive hand-in-glove quality, and thereby an efficiency, that would be difficult to achieve in non-enduring relationships” (Bronfenbrenner, 1974, p. 26).

* * *

Let’s return to Moises, five years after he began the program: As a second-grader, Moises is reading on grade level, something his mother never expected. Mrs. P. took English classes and is training to become an aide at the local Head Start. She is active in her church. Her husband learned enough English to confidently ask for a raise and the family now has their own apartment.

Perhaps the best words of support for the program come from a former parent participant like Liliana Vasquez, who says, “I did not truly understand...what this program would bring to the family. A bilingual home visitor came to my house. She was a sweet person who brought a lot of fun ideas to my family and encouraged me to participate. In the beginning, I was shy and reluctant, but soon I was playing and enjoying myself. Our family learned how to talk to one another. I had thought that a mother’s job was just to feed, clothe, and care for her children. I learned to be a mother with patience and love.”

LaRue Allen is Raymond and Rosalee Weiss Professor of Applied Psychology and director of the Child and Family Policy Center at New York University. Anita Sethi is research scientist with the Child and Family Policy Center at New York University.

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Bring PCHP to Your Community

The model for the Parent-Child Home Program (PCHP) was developed by Phyllis Levenstein for her doctoral dissertation in the 1960s, based on her theory that the most effective way to reduce high school dropout rates—and thus break the cycle of poverty—would be to work with parents and children before the children entered school. In her book, *Messages from Home: The Mother-Child Home Program and the Prevention of School Disadvantage* (1988),* Dr. Levenstein writes that:

Talking to infants comes naturally to all mothers (or mother substitutes). For most mothers, especially those who are at least high school graduates, talking to baby becomes conversation. The dialogue is often focused around the toys and books that middle-income parents can afford. The Program's hypothesis was that this verbal interaction gradually fosters a parent-child network that is both intellectually and emotionally supportive for the child, whatever the family's ethnolinguistic style....

The Program's view was that family factors linked to poverty often hamper the full development of the parent-child network. For children thus at risk for educational disadvantage, an intervention program should begin at home when they are about two years old. The program should center around toys and picture books of high quality, permanently assigned to the family and used as the focus of the child's verbally oriented

play with his or her mother. The mother herself might make gains in parenting skills and self-esteem through her participation in the Program.

Levenstein's first pilot demonstrated short-term cognitive gains from participation in the program. Based on these promising results, she focused on researching the model's effectiveness and developing a small number of replications to duplicate the model program's results. By 1975, there had been four replications, all with positive results. And in 1978, the Parent-Child Home Program, Inc., was incorporated as an independent non-profit to support the spread of the PCHP model. There are currently 136 replications in the United States, each of which costs approximately \$2,000 per year per child.

Replications are sponsored by schools, school districts, public libraries, social service agencies, and community-based organizations that are willing to provide meeting space and secure funding. Each replication is run by a Coordinator with a background in early childhood education or working with at-risk children. Coordinators must receive three days of initial training by the Program's national staff and submit a program implementation plan to establish a replication. The Coordinator receives extra training and supervision throughout the first two years of the replication; during that time, members of the national staff visit to sit in on meetings, check files, and observe home visits. Only minor modifications of the program are allowed to suit individual communities. If all goes well, the replication is certified at the end of two years as an authentic PCHP site—but sites are still required, annually, to document that they are following PCHP procedures.

For more information, visit PCHP's Web site at www.parent-child.org.

To inquire about establishing a replication, contact the Parent-Child Home Program's National Center at 516-883-7480 or info@parent-child.org.

Mother-Child Home Program was the name first given to this intervention. It was changed in 1998 to Parent-Child Home Program to reflect its applicability to both mothers and fathers.

http://archive.aft.org/pubs-reports/american_educator/issues/summer04/gap.htm