FAMILY ENGAGEMENT AND FAMILIES’ PERCEPTIONS OF PROFESSIONALS’ FAMILY-CENTERED PRACTICES AMONG HEAD START FAMILIES

By

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To my husband and our children
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Family engagement has been shown to have positive impacts on child learning across all age groups and all socio-economic backgrounds; however, research indicates that family engagement in early childhood programs is lower than desired, especially among low-income families. Further, family-centered practices have been linked to better outcomes for both families and children. The purpose of this study was to examine the relationships between families’ perceptions of Head Start professionals’ family-centered practices and the level of family engagement. This study also examined whether participants’ program satisfaction would be related to the level of family engagement as well as to the family ratings of professionals’ family-centered practices.

Forty-eight Head Start families in a mid-sized school district completed questionnaires pertaining to family engagement. Multivariate analyses were conducted to determine whether families’ perceptions of professionals’ family-centered practices would predict the level of family engagement using a multidimensional measure of family engagement. Relationships among program satisfaction, family engagement, and family-centered practices were also investigated using Spearman’s correlation.
The results of this study indicated that family ratings of professionals’ family-centered practices among Head Start families predicted the level of family engagement in the areas of school-based and home-based involvement. In addition, family-centered practices and parent education predicted home-based engagement of Head Start families. Further, there was a positive relationship between relational indicators of family-centered practices and program satisfaction. Finally, a significant relationship was found between family report of their positive changes due to Head Start enrollment and home-school conferencing. Implications, limitations, and directions for future studies are discussed.
CHAPTER 1
LITERATURE REVIEW

Introduction

Family engagement is paramount to children’s success in school and in life. A significant number of empirical studies of family engagement consistently support the benefits of family engagement on children’s learning (e.g., Arnold, Zeljo, Doctoroff, & Ortiz, 2008; Fantuzzo, McWayne, Perry, & Childs, 2004; Galindo & Sheldon, 2012; Jeynes, 2005; McWayne, Hampton, Fantuzzo, Cohen, & Sekino, 2004). Such findings often suggest the importance of coordinated efforts made at each system surrounding a child in order to bring about optimal learning outcomes (Bronfenbrenner, 1977, 1986). Thus, discussions in the family engagement literature have shifted from whether family engagement is critical to children’s learning, to what factors, including ones related to professionals and communities, foster such engagement (Castro, Bryant, Peisner-Feinberg, & Skinner, 2004). Interestingly, the number of empirical studies exploring factors pertaining to relationships between families and professionals, and the implications of such relationships on family engagement have increased in recent years (e.g., Tucker & Schwartz, 2013; Waanders, Mendez, & Downer, 2007). Nonetheless, research on the impact of family-school relationships on children from economically disadvantaged families is relatively scarce and the factors that promote it are not fully understood for this population.

Theoretical Framework for Family Engagement

Historically, in the field of education, schools and families were viewed as separate entities with different goals for children (Epstein, 2001). However, as research that linked healthier child outcomes to bidirectional, collaborative relationships between
families and schools increased, new theoretical frameworks emerged. In particular, Bronfenbrenner’s Ecological Systems Theory (1977) provides a theoretical framework for understanding the complexities of how family engagement may occur and impact child learning and development systematically.

**Ecological Systems Theory**

In explaining his theory, Bronfenbrenner (1977) argued for the need to go beyond the direct observation of human behaviors at its immediate settings. He further noted that “it requires examination of multiperson systems of interaction not limited to a single setting and must take into account aspects of the environment beyond the immediate situation containing the subject” (p. 514). Specifically, Bronfenbrenner (1977) promoted the idea that the ecological system of human development is nested in structures in which each structure is contained in the larger structures: microsystem, mesosystem, exosystem, and macrosystem.

**Microsystem**

A microsystem “is the complex of relations between the developing person and environment in an immediate setting containing that person” (Bronfenbrenner, 1977). Notably, a microsystem includes family, school, and workplace where individuals may have immediate connections. To grasp human development at the microsystem, Bronfenbrenner explained the need for understanding two-way relationships between a developing person and his or her immediate connections (Berk, 2013). For example, a child’s difficult temperament may worsen parenting capacity of already frustrated parents, which in turn may exacerbate the child’s challenging behaviors. In school, a child’s prosocial behavior may lead her teacher to reward such behavior, which likely reinforces the child to engage in even more prosocial behaviors in the future. In family
engagement research, scholars may study the relationships between family characteristics and family engagement (e.g., Fantuzzo, Tighe, & Childs, 2000; Fantuzzo et al., 2004).

**Mesosystem**

The second system in the Ecological Systems Theory, a mesosystem, is described as “the interrelations among major settings containing the developing person at a particular point in his or her life” (Bronfenbrenner, 1977, p.515). This may include relationships between family and the child’s school, the effects of childcare on how parents communicate with their child at home, and the stress of having multiple children on parenting styles. In family engagement research, scholars may investigate communicative aspects of collaboration between parents and school, and barriers that may hinder family engagement (Tucker & Schwartz, 2013). In describing the effects of external forces on family functioning at the mesosystem, Bronfenbrenner (1986) also illustrated the interrelations between family and school, and the impacts of family engagement on children’s school achievement. Interestingly, recent work in family engagement research reflects an increased interest in examining factors associated with mesosystem relationships in early childhood literatures (e.g., Bruder & Dunst, 2015; Dunst, Bruder, & Espe-Sherwindt, 2014; Galindo & Sheldon, 2012).

**Exosystem**

The third system, exosystem, is explained by Bronfenbrenner’s Ecological System’s theory (1977) as

An extension of the mesosystem embracing other specific social structures, both formal and informal, that do not themselves contain the developing person but impinge upon or encompass the immediate settings in which that person is found, and thereby influence, delimit, or even determine what does on there (p.515).
For example, employment conditions of a mother likely shape her day-to-day parenting style at home, positively or negatively, and could notably impact the quality of interactions between the mother and her child pertaining every aspect of the child’s development.

Importantly, the exosystem is a nested structure that encompasses environmental structures, including a geographical location of where a child and his family may reside. To study the effects of geographical locations on family engagement, Keys (2015) examined community location (urban vs. rural) of Head Start families as a contributing factor to family engagement. The findings from this study indicate that self-reported family engagement was higher among Head Start families living in urban communities as opposed to families living in the rural settings, providing insight into how community setting can impact behaviors associated with family engagement.

**Macrosystem**

Lastly, the fourth system, a macrosystem refers to “the overarching institutional patterns of the culture or subculture, such as the economic, social, educational, legal, and political systems, of which micro-, meso-, and exo- systems are the concrete manifestations” (Bronfenbrenner, 1977, p.515). In order to study the impacts of macrosystem, scholars in family engagement research must explore the effects of larger, societal conditions or structures, such as poverty, on families’ capacities to support their child’s learning. Alternately, researches may conduct cross-cultural studies to examine cultural influences on family engagement, for example, comparing the cultures that emphasize the value of high educational achievement and the cultures that may place less focus on academic achievement.
Contributions of ecological systems theory on family engagement

Unquestionably, Bronfenbrenner has made substantial contributions to the understanding of human development and how optimal production of family engagement and the subsequent child outcomes require systemic efforts at each interrelated system. Notably, Bronfenbrenner’s ecological systems theory informed childcare practices nationally (Lerner, 2005), including a federally-funded program, Head Start, the two-generation program which aims to support not only the child but also her family and their community. Four nested structures of Bronfenbrenner’s Ecological Systems Theory are shown in Figure 1-1.

Family-Centered Practices

Service delivery models used in helping professions impact practitioners’ views in approaching each family but also how they should become involved in empowering families (Dunst, Boyd, Trivette, & Hamby, 2002). Dunst (2002) conducted a review of service delivery models most often used in early childhood population through secondary schools. In particular, the author discussed a continuum of family-oriented models often associated with supporting families with children and youths, including professionally centered, family-allied, family focused, and family-centered. Each family-oriented model differs in how it views families in terms of their capacity to make informed choices and to the degree of professional involvement in supporting families to build such capacities (Dunst, 2002; Dunst et al., 2002). For example, professionally centered models place the least emphasis on recognizing family strengths and views families as incapable of making decisions, and the services delivered to families is most often led by professionals without input from families (Dunst et al., 2002). Contrarily, family-allied and family-focused models may place more focus on family unit than the
professionally centered model but differ from family-centered models because family-centered models emphasize the most on providing support to the families on the basis of existing family resources to expand family capacity (Dunst et al., 2002).

In comparing the similarities as well as the differences among these family-oriented models, Dunst (2002) described what differentiates family-centered practices from the other family-oriented models by providing the definition of family-centered practices and examples of what constitutes family-centered practices, especially in early intervention and early childhood education.

**Definition of family-centeredness**

According to Dunst (2002), the term, *family-centered* refers to “a particular set of beliefs, principles, values, and practices for supporting and strengthening family capacity to enhance and promote child development and learning” (p. 139). It is also “an approach to working with families that honors and respects their values and choices and which includes the provisions of supports necessary to strengthen family functioning” (Dunst, Trivette, & Hamby, 2007, p.370). The term, *family-centered helpgiving*, is often used as synonymous with family-centered practices (Dunst et al., 2007). Dunst et al. (2007) describe two dimensions of family-centered helpgiving practices (relational and participatory) that bring both direct and indirect influences on multiple levels of outcomes concerning family and child. According to the authors, relational helpgiving practices include those skills often associated with good clinical practice (e.g., active listening techniques, having compassion and respect when approaching families) and help families identify their existing strengths. On the other hand, participatory helpgiving practices involve practices that “are individualized, flexible, and responsive to family concerns and priorities, and which involve informed choices and family involvement in
achieving desired goals and outcomes” (p. 370). For example, families may perceive professionals as employing participatory helpgiving practices when they help families compare options for medical services that fit their specific family needs. While both relational and participatory indicators impact recipients of services, participatory indicators are more effective in partnering with families and supporting families build their capacity (Dunst et al., 2002). While many service delivery models in helping professions may contain both relational and participatory helpgiving indicators, family-centered practices are perceived as adhering to the highest on both indicators, and thus, considered the most effective in supporting families (Dunst et al., 2002).

**Outcomes associated with family-centered practices**

Family-centered practices are considered as the family support principles which impact a number of family variables including parent-efficacy and family outcome variables such as program satisfaction and family functioning (Dunst, Trivette, & Hamby, 2006). To explore the relationships between relational and participatory helpgiving practices and family and child outcomes in early childhood education, Dunst et al. (2007) conducted a meta-analysis of family-centered practices described in 47 studies. The participants in this meta-analysis included 11,187 caregivers of children with developmental difficulties. The authors examined six outcome domains (satisfaction, self-efficacy, social support, child behavior, well-being, and parenting) and their relationships with professionals’ family-centered helpgiving practices. Dunst and colleagues’ findings revealed that the strongest relationship between family-centered practices and outcome domains was found with parent satisfaction with the professionals, as well as with the programs. The authors also found that family-centered practices were positively correlated with caregivers’ self-efficacy beliefs and that
participants viewed supports and resources delivered by professionals as more helpful when professionals used family-centered practices. The results from this study also revealed stronger relationships between participatory helping and family-reported program satisfaction, while relational helping was found related to both personal and family well-being. Based on this review of family-oriented models, Dunst and colleagues (2007) refute critics of family-centered practices who argue that the family-centered practices seemingly take the focus of intervention away from a child, and stress that family-centered practices is a type of service delivery that focuses on how the support is delivered to the child and his or her family.

Intriguingly, the family-centered practices illustrated by Dunst and his colleagues align well with Ecological Systems Theory (Bronfenbrenner, 1977) in that interactions between a child and his family within the microsystem as well as collaborations between professionals and the family at the mesosystem all affect the outcomes of child learning and development. Dunst and his colleagues’ family-centered practices also support how relationships between families and professionals can not only impact the child but also vital family variables such as family’s self-efficacy and well-being (Dunst et al., 2007).

Familial perceptions of professionals’ family-centered practices

When evaluating family-centered practices, it seems logical to examine families’ perceptions of the services that they receive. Bruder and Dunst (2015) applied a consumer service perspective to examine parental judgments of professionals’ competence and confidence in six recommended practices in early intervention and early childhood programs: family-centered practices, child assessments and evaluations, teaming and collaborations, the Individualized Family Support Plan (IFSP) and the Individualized Education Plan (IEP), instructional practices, and natural
environment and inclusion practices (Sandall, Hemmeter, Smith, & McLane, 2005). A consumer science perspective focuses on identifying consumers’ subjective judgments of the quality of service or product. In this study, competence was measured by family ratings of professionals’ abilities to carry out recommended practices and confidence was examined by asking the families to “judge the ease with which their practitioners performed specific intervention practices in the six areas” (Bruder & Dunst, 2015, p. 201).

In their study, Bruder and Dunst (2015) also evaluated how parental judgments of professionals’ competence and confidence might be related to the level of family engagement among families participating in early childhood programs. The method used to collect data regarding family engagement, however, was based on the parental report on a scale of 0 to 5 on the following continuum: how much parents thought professionals attempted to involve parents during intervention and the confidence that parents felt regarding applying the intervention skills without the presence of professionals. The participants of this study were families enrolled in Individuals with Disabilities Education Act (IDEA) Part C early intervention and IDEA Part B-619 preschool special education. Although study participants varied in terms of their demographic backgrounds (e.g., household incomes, parental education, and ethnicities), most participants were from middle class, predominantly Caucasians with college education. The results of this study indicate that families in both early intervention (Part C) and preschool special education (Part B) perceived professionals as more confident than competent in adhering to recommended practices to serve this population and when families were more actively engaged in the services provided to
them, they were more likely to perceive professionals in a positive manner that is consistent with six recommended practices in early intervention.

In their study, Bruder and Dunst (2015) also raised concerns about the lower than expected levels of family engagement among families participating in early intervention and early childhood education programs despite the fact that the importance of family engagement is explicitly articulated in the federal law, the IDEA. The authors also expressed concerns with ineffective practices on the part of the professionals in engaging families and therefore not adhering to the recommended practices in early childhood intervention. While the measure of family engagement in this study was based only on one item regarding families’ perceptions of how professionals may involve families in the delivery of services, there seems to be a discrepancy between the recommended practice for early childhood programs and the execution of family engagement practices.

**Empirical Foundations of Family Engagement**

For several decades, researchers in the field of education have used different, but similar, terms to illustrate what families do to promote their child’s learning. Such terms include parent involvement, family involvement, parent engagement and family engagement. Although there are slightly different connotations to the terms, and they have been used in different contexts, all have been associated with positive outcomes for children. For example, empirical findings support positive relations between family engagement in early childhood programs and child’s gains in cognitive, language, and social-emotional developments (Castro et al., 2004; Fantuzzo et al., 2004), positive effects on children’s social skills (McWayne et al., 2004), and positive child outcomes in elementary and secondary schools (Hoover-Dempsey et al., 2005). Further, positive
associations were found between family engagement and school achievement among minority students after controlling for gender and race (Jeynes, 2005). In addition, when schools put more efforts into engaging families in their child’s learning, child’s gains in school achievement increased outstandingly (Galindo & Sheldon, 2012).

Many models exist to describe school-family-community connections, and they differ as to how much emphasis they place on roles undertaken by school, family, and its community (Hindman & Morrison, 2011). Joyce Epstein (2001) has written extensively on school-family-community partnerships and parent involvement, primarily at elementary level.

**School-Family-Community Partnerships**

Epstein and her colleagues’ extensive work on school-family-community partnerships in elementary schools has impacted many educators and researchers alike who aim to enhance child learning through building stronger partnerships with families and their communities. In the 1980’s, Epstein developed a theoretical model, overlapping spheres of influence, based on empirical data gathered by Epstein and her colleagues from teachers, parents, and students in elementary schools (Epstein, 2001). Unlike earlier theories that focused solely on examining distinct educational goals set for each stakeholder (e.g., schools, parents), Epstein focused on developing a new perspective which reflected her empirical findings that “the most effective families and schools had overlapping shared goals and missions concerning children, and conducted some work collaboratively” (Epstein, 2001, p. 43). In her argument, Epstein (1995) stated that, despite the notion held by earlier researchers, there is a shared interest among students, families, and schools to work collaboratively to achieve student success in school.
In addition to the idea of the shared responsibility, Epstein (1995) extended parent involvement beyond what parents may do at or with schools and included other types of activities that parents may do with their child that are educationally relevant, such as home-based learning activities. Epstein also voiced the importance of school personnel in involving families. For example, Epstein (2001) explained that earlier theories mainly delineated what parents needed to do to promote their child’s learning in schools instead of asking what schools needed to do to develop effective programs to support all families in their child’s learning. Thus, based on the evidence from her and colleagues’ work, Epstein proposed a partnership model that emphasizes shared responsibilities among all parties involved in promoting children’s learning.

According to Epstein’s overlapping spheres of influence, there are three external structures: school, family, and community (Epstein, 2001). Each structure has areas which overlap with other structures and the amount of overlap is dependent on “time, experience in families, and experience in schools” (Epstein, 2001, p. 27). For example, overlaps of influence by the family and school spheres on a youngster who just began her preschool may not be as impactful when compared to that of a 2nd grader whose family may have had many interpersonal exchanges with school personnel over time. Further, there is no complete overlap of all spheres due to some unique functions that only each sphere may maintain (e.g., family’s evening routines at home). This framework illustrates the fluid nature of each sphere’s influence on child learning at different points in time. Further, Epstein described internal structures of overlapping spheres of influence, which focuses on the interpersonal relationships and the patterns of influence among three spheres (i.e., school, family, community).
In explaining how school-family-community partnerships might be strengthened, Epstein developed a framework for parent involvement that illustrates six types of parent involvement that are essential for successful partnerships between families, their schools, and its communities (Epstein, 2001). The six types of parent involvement include: parenting, communicating, volunteering, learning at home, decision making, and collaborating with the community. For example, schools can assist parents with parenting skills to help them with parenting aspect of parent involvement, and schools may also support parents to become more proactive in their decision-making skills by including parents in school activities such as advocacy activities for the Parent Teacher Association (PTA). In addition, to support learning at home, schools can help parents develop tools to help their child's homework and to implement school related learning activities at home. Although these six types of parent involvement are equally important, each school and its community may focus on different type of parent involvement, with a shared goal to strengthen school-family-community partnerships.

Epstein (2001) also describes empirical findings that inform how parent involvement differs across social class and formal schooling. For example, she describes empirical findings that indicate varying parent involvement by social class, from affluent communities to disadvantaged communities, and overall decline in parent involvement in secondary school. Importantly, Epstein (1992) asserts the need for concerted effort by each stakeholder (i.e., school, family, and community) to develop and sustain parent involvement at various social class and educational levels. Similarly, Hoover-Dempsey et al. (2005) argue that while not all families need encouragement to become involved in their child’s education, efforts made by school personnel to engage
families are needed for more effective family involvement. Epstein (1992) agrees with Hoover-Dempsey et al. (2005) and emphasizes that, “effective practices of partnership are developmental and responsive to the common and different needs of families” (p.1).

Epstein’s work in parent involvement is particularly vital due to its acknowledgement of a shared goal regardless of demographical backgrounds, as well as its emphasis on a partnership model that has been shown to bring long-term positive child outcomes. Another implication of Epstein’s work is the need for schools and professionals to adapt to change as today’s families rapidly become more diverse. Similarly, Lichter (1996) points out that schools must “keep pace with the profound demographic changes in the family” (p. 265) to successfully build strong relationships with today’s diverse families. The movement towards more inclusive partnership models that integrate culture and community has been discussed more and recommended in early childhood education programs (Halgunseth, Peterson, Stark, & Moodie, 2009).

Epstein’s work has made tremendous influences on educators and scholars and has also impacted federal policies including Goals 2000: Educate America Act in 1994 (Epstein, 1996). Specifically, one of the eight National Education Goals calls for school’s effort to promote partnership with parents to increase parental participation (National Education Goals Panel, 1999). Further, Epstein’s model of parent involvement (2001) has impacted educational polices including the No Child Left Behind act of 2001 and the Improving Head Start for School Readiness Act of 2007 (Hindman & Morrison, 2011). Moreover, many principles derived from Epstein’s work regarding parent involvement have been reflected in the federal law, the Individuals with Disabilities Education Act (IDEA). For instance, elementary and secondary schools receiving Title I funds serving
children and youth from low-income families must make efforts to enhance parent involvement as a part of the Elementary and Secondary Education Act of 1965 (“Parent Involvement: Title I, Part A,” 2004).

Theoretically, Epstein’s framework aligns well with Bronfenbrenner’s (1977, 1986) Ecological Systems Theory in that child learning can be achieved at the optimal level when concerted, systemic efforts are pursued to achieving shared goals. Epstein’s work also resonates with Dunst’s (2002) and his colleagues’ work on family-centered practices in early intervention and early childhood special education. For example, both approaches highlight partnership models between professionals and families to bring the optimal child learning outcomes; however, Epstein’s work primarily derives from elementary schools while Dunst’s and his colleagues’ work mainly stem from families in early intervention, in particular, programs for infants and toddlers, but also in preschools.

**Multidimensionality of Family Engagement**

While the evidence for positive impacts of family engagement on children’s learning has grown, some scholars have raised concerns regarding shortcomings of research studies surrounding family engagement (e.g., Baker & Soden, 1998; Castro et al., 2004; Fantuzzo et al., 2000; McWayne et al., 2004). Such concerns are related to lack of consistencies as to what constitutes effective family engagement and the methodological challenges that accompany such inconsistencies. For example, traditional family engagement is thought of as activities that families may engage at school such as volunteering and attending meetings in school (Castro et al., 2004). With such a narrow view of family engagement, scholars may only capture family engagement related to school-based activities, which would exclude other educationally
relevant activities that families may carry out to promote their child’s learning such as reading to their child daily and taking him to the local libraries.

Many scholars today, however, conceptualize family engagement as more than families engaging in school-related activities and recognize the multidimensional nature of family engagement that occur in multiple settings simultaneously, including school, home, and communications between these two settings. For example, Fantuzzo and his colleagues have conducted research studies to explore multidimensionality of family involvement among families from low-incomes families and early childhood (Fantuzzo et al, 2004; Fantuzzo, Rouse, McDermott, Sekino, Childs, & Weiss; 2005; Fantuzzo, Tighe, & Shields, 2000). Fantuzzo et al. (2000) argued for the lack of adequate instruments to measure multidimensionality of family involvement, and developed a questionnaire named the Family Involvement Questionnaire (FIQ) based on the work by Epstein (1995) and an ecological model proposed by Bronfenbrenner (1977, 1986). Specifically, Fantuzzo et al. (2000) took the ecological perspective of Bronfenbrenner (1986) to reflect the impacts of interrelated systems and relationships between families and schools on the FIQ.

As discussed previously, Epstein (1995, 2001) delineated six types of parent involvement that are essential components of strong school-family-community partnerships. Influenced by Epstein’s work and its multidimensionality of parent involvement, Fantuzzo and his colleagues included three categorical family involvement in the FIQ: School-Based Involvement, Home-Based Involvement, and Home-school Conferencing. A study by Fantuzzo et al. (2000) included families from preschool, kindergarten, and 1st graders in urban settings. The findings from this study suggested
that parent education was significantly correlated with Home-School Conferencing and School-Based Involvement on the FIQ, which is consistent with family involvement research in that, the more educated parents are, the more involved they are in their child’s education (Fantuzzo et al., 2000). Further, two parent-homes had higher Home-Based Involvement and Home-School Conferencing on the FIQ. Additionally, after controlling for parent education and marital status, significant differences were found among different early education programs, and Head Start families were significantly more involved in the school-based activities compared to families in other early education programs. This may reflect the efforts made by Head Start staff to increase family engagement by offering families volunteer opportunities and parent activities (Fantuzzo et al., 2000). Interestingly, Home-Based involvement did not differ across early education programs.

To provide empirical support for the FIQ’s predictive validity, Fantuzzo and his colleagues (2004) examined the relationships between family involvement and child outcomes among urban Head Start families using the FIQ. The authors administered the FIQ (Fantuzzo et al., 2000) to the participating Head Start families in the late fall and also at the end of the school year and collected behavioral and learning outcomes of children, such as classroom problem behaviors, their approaches to learning and vocabulary skills. The findings from this empirical study (Fantuzzo et al., 2004) revealed that many outcome variables in this study were significantly related to family involvement simultaneously. Interestingly, different dimensions of family involvement were associated with children’s learning and classroom behaviors. For example, Home-Based Involvement was found to be the strongest predictor of positive child outcomes.
as compared to School-Based Involvement and Home-School Conferencing, which accentuates that family involvement goes beyond the types of activities that families may only participate within school.

The multidimensional nature of family engagement has received additional empirical support from other researchers. McWayne, Campos, and Owsianik (2008) used the FIQ to explore family engagement among culturally diverse urban Head Start families. In their study, the authors administered the FIQ to 171 culturally diverse caregivers (108 mothers and 63 fathers). The majority of participants (58%) identified themselves as Latinos, and the second largest was Polish (37%) and the small number reported as “other” (5%). In addition to being immigrant families, the participants in this study were unique in that a majority was married, with higher educational attainment compared to national Head Start demographic data (McWayne et al., 2008). The purpose of this study was to examine the relationships among family demographics, caregivers’ level of satisfaction with school contact, and family engagement using a multidimensional measure, the FIQ (Fantuzzo et al., 2000). The level of parent satisfaction with school contact was collected by administering the Parent Satisfaction with Educational Experience Scale (PSEE; Fantuzzo, Perry, & Childs, 2006), which examines parent satisfaction with various school contacts, such as volunteering in the classroom and conferencing with teachers.

The findings from this study revealed that when compared with fathers, mothers were more engaged in all three FIQ subscales (i.e., School-Involvement, Home-Involvement, and Home-School Conferencing). The authors speculated that this might be due to several factors, including Head Start’s inadequate outreach efforts to engage
fathers, fathers’ work schedules, and gender expectations from their country of origins for mothers’ involvement but not for fathers’. In addition, mothers’ level of education was negatively related to Home-School Conferencing, which is consistent with a prior study of low-income African American families (Fantuzzo et al., 2000). McWayne et al. (2008) suggested that this may be a result of a power differential due to social class differences between mothers with low educational attainment and professionals with higher education, which may hinder home-school collaborations. The results from this study (McWayne et al., 2008) also revealed that the language was a barrier to family engagement among fathers of culturally diverse backgrounds and parent satisfaction with school contact was positively correlated with School-Based involvement and Home-School Conferencing subscales on the FIQ.

**Family Engagement and Low Income Families**

Poverty puts children and youths at risk for negative life outcomes. A major negative influence of poverty can be seen in children’s academic missteps (Arnold & Doctoroff, 2003). Children from low-income families are behind in literacy skills as compared to their affluent counterparts before their school entry, and tend to stay behind in those skills throughout schooling (Arnold & Doctoroff, 2003). Thus, researchers have examined factors that may work as shields against adverse effects of poverty including family variables and family engagement (e.g., Kingston, Huang, Calzada, Dawson-McClure, & Brotman, 2013).

An existing literature on family engagement suggests that family engagement works as a protective factor for at-risk minority children in poverty (McWayne et al., 2004) as well as a moderator of limited family and neighborhood resources (Kingston et al., 2013). Moreover, when low-income families with young children were involved in
home-based activities, positive relationships were found between such activities and multiple child outcomes including their motivation, attention, task persistence and receptive vocabulary (Fantuzzo et al., 2004). Family engagement in preschools also made lasting impact on African American children from low-income families well into 6th grade (Hayakawa, Englund, Warner-Richter, & Reynolds, 2013). Most importantly, these families recognize the value of education for their child’s development and seek to become more engaged in their learning (Sime & Sheridan, 2014). These studies further support the importance of identifying the factors that promote family engagement among economically disadvantaged families.

**Family Engagement and Head Start**

One of the most well-known federally funded programs for preschoolers from low-income households, Head Start, has stressed parent involvement since its inception. Importantly, Head Start was the first early childhood program to intentionally include families in all parts of Head Start service delivery (Merrill, 2015). Head Start is a two-generation program that recognizes ecological impacts of support provided to family on overall child well-being. The Head Start began as a federal program to fight the War on Poverty during President Johnson and to improve “social competence” of children and families in poverty (Zigler & Styfco, 2000, p. 68). When Head Start first began, however, involving families in the process of promoting child learning was seen as rather radical; in fact, many professionals perceived parents as less capable of contributing to child learning than the professionals (Merrill, 2015). Today, the proposed Program Performance Standards of the Head Start programs describe various ways that Head Start aims to assist participating families to increase family engagement, including providing parents with opportunities for Head Start employment and
volunteering, as well as assisting families with how to access family literacy services (U.S. Department of Health and Human Services, 2015). Further, Early Head Start was created to provide early intervention services to low-income children ages 0 to 3 as well as pregnant women from low-income backgrounds (“Head Start Timeline,” n.d.).

**Definition of Family Engagement**

In recent years, Head Start changed its terminology and began using the term, *family engagement*, to reflect their current philosophy towards bringing the optimal outcomes for children and their families in Head Start, and clarified the differences between parent involvement and *family engagement* (“Family Engagement as Parent Involvement 2.0,” n.d.). In their current model, *family engagement* refers to “ongoing, goal-directed relationships between staff and families that are mutual, culturally responsive, and that support what is best for children and families both individually collectively” (“Family Engagement as Parent Involvement,” n.d., p. 1). Consistent with this view of family engagement, Head Start has often focused on building relationships and strengthening collaborations with families to promote child learning and positive overall child outcomes. Notably, Head Start’s approach to family engagement emphasizes shared responsibilities between families and Head Start staff to enhance child learning and development, which is a widely accepted view in early childhood education, influenced by many scholars including Epstein (2001).

Using this definition of family engagement, the Office of Head Start (OHS) has proposed Parent, Family, and Community Engagement (PFCE; “The Head Start Parent,” 2011) as their guiding framework for promoting family engagement. With increased need to measure program effectiveness, Head Start assesses family engagement outcomes based on the PFCE framework, including outcomes for family
well-being, positive parent-child relationships, families as lifelong educators, families as learners, family engagement in transitions, family connections to peers and community, and families as advocates and leaders. This framework is relatively new, and PFCE research is being conducted in Head Start. For example, Keys (2015) examined the relationships between self-report of family engagement and the community locations of Head Start (rural vs. urban) in the Midwest U.S. The results from this study support the effects of community location of Head Start on family engagement using the PFCE framework.

**Family-Centered Practices in Head Start**

Many service delivery models exist in helping professions, particularly for young children and their families. In their article, Odom and Wolery (2003) provide a historical context for early intervention and early childhood special education, describe various theoretical frameworks for serving young children and their families with developmental disabilities, and propose a unified theory of practice. In doing so, Odom and Wolery (2003) also illustrate how early intervention/early childhood special education are more family-centered with individualized care than early childhood education, which serves preschoolers and their families, generally without disabilities. While it is true that early childhood programs such as Head Start often emphasize and promote early literacy and pre-academic skills, the approach in which Head Start professionals employ in their delivery of services have become increasingly family-centered in recent years, which may be a reflection of increased census in the scientific community that family-centered approaches improve child outcomes.

As noted previously, Head Start utilizes the Parent, Family and Community Engagement framework (U.S. Department of Health and Human Services, 2011) to
promote family engagement among Head Start families, which has been influenced by empirical findings including Dunst et al. (2007) from early intervention programs targeted children ages 0 to 3 and their families as well as early childhood programs. Further, Head Start’s definition of family engagement closely reflects many principles from Dunst and his colleagues’ work (2007), including “goal-directed relationships between family and staff that are mutual, culturally responsive” (“Family Engagement as Parent Involvement 2.0,” n.d., p. 1). More importantly, Head Start places great focus on establishing relationships with families that is based on respect and trust (“Head Start Relationship-Based Competencies,” n.d.). Head Start’s relationship-based competencies (n.d.) reflects many ideas from family-centered practices and describes how each component of relationship-based competencies can be conceptualized in their PFCE framework such as positive, goal-oriented relationships and self-awareness and culturally responsive relationships.

Predictors of Family Engagement

Due to well-established relationships between family engagement and child learning, social scientists and educators alike have examined factors that may hinder family engagement (e.g., Lamb-Parker et al., 2001; Mendez, 2010; Sime & Sheridan, 2014). However, studies exploring predictors of family engagement among early childhood population is relatively scarce (Arnold et al., 2008). When researchers in helping professions study predictors of family engagement, factors can generally be categorized as structural and logistic in nature (e.g., time, scheduling conflicts, transportation issues), socio-demographic characteristics that are stable (e.g., child factors such as child’s gender and behaviors, and family characteristics such as parent education and income level), and attitudinal or perceptual factors which some
researchers may refer to as dynamic variables (e.g., parent attitudes, parent efficacy, and parent-teacher relationships).

**Barriers Pertaining to Low-Income Families**

It has been known that socioeconomic status (SES) plays a part in family involvement and that families from low SES do not engage as much as their high SES counterparts (Arnold et al., 2008). Lamb-Parker et al. (2001) studied a mixture of structural and perceptional factors that affect parent involvement in two Urban Head Start programs. The survey used in this study was developed to address the issues facing Head Start populations, and was administered to mothers enrolled in urban Head Start. The questionnaire included many life circumstances that parents in poverty may experience, including “often feeling sad, down, depressed,” and “having inflexible work or school hours,” in addition to situations experienced by a wider population (e.g., “having a baby or toddler at home”). The findings from this study showed that highly involved mothers reported significantly less possible barriers to participation than those mothers who were participating fewer based on staff-rated levels of involvement. The self-report of actual barriers experienced, work schedule issues and having a small child at home, were significantly related to staff-ratings of parent involvement. Of note, while the family engagement data collected in this study included both self-report and objective report (e.g., staff ratings, including attendance record), it did not capture the multidimensionality of family engagement as proposed by Fantuzzo et al. (2000, 2004), and mainly focused on examining family engagement related to school-based educational activities.

Mendez, Carpenter, LaForett, and Cohen (2009) examined the predictors of family engagement among Head Start families by examining family variables,
specifically, parenting profiles such as parental psychological resources (i.e., parent-report of depressive symptoms, their perceptions of internal locus of control) and parenting practices related to the intervention for this study (i.e., reading to their child and doing educational activities covered in the intervention at home). The parenting intervention occurred once a month for nine months covering a variety of educational topics such as introducing play to children and helping them with numbers. Although accommodations (e.g., transportation, childcare) were provided to caregivers with a hope to increase family engagement, many families reported experiencing structural barriers, including conflict with work schedules as a factor that impacted their low engagement with the intervention. The “work schedule” conflict as a barrier may reflect that families from low-income backgrounds may have less flexibility with work schedules, as reported by other researchers (e.g., Dyk, 2004). A closer examination of the parenting profiles indicated that those parents who reported depressive symptoms and low internal control exhibited significantly lower engagement in home-based educational activities than other parenting profiles, while parents with high locus of control and resiliency were found to be highly involved in school. This further highlights the adverse effects of poverty and its direct impacts on family engagement.

The barriers to family engagement that low-income families, such as Head Start families, may experience are complex, including the lack of confidence and the lack of resources compared to affluent families (Peters, Seeds, Goldstein, & Coleman, 2008). Sime and Sheridan (2014) specifically examined home-school connections among disadvantaged families in Scotland using focus group. The parents in this study reported that despite their own level of educational attainment being low, they have high
expectations for their children to have the “best opportunities” (p. 333). Additionally, the parents also reported that they need support due to their lack of experience in regards to how to support their children. Importantly, the parents from this study by Sime and Sheridan (2014) expressed that when they observed their engagement made a difference in their child’s education, they were more willing to engage and work collaboratively with professionals. Such positive cycle of family engagement is critical, and this study highlights the importance of professionals’ efforts to work closely with families by building effective home-school connections.

Kingston et al. (2013) conducted a study to examine whether parent involvement mediates family and neighborhood socioeconomic disadvantages on school readiness among preschoolers in urban communities. Parent involvement was measured based on teacher report of parent involvement in their child’s education and parent involvement in communicating with teachers. School readiness included both cognitive-academic skills (i.e., motor, language, and conceptual skills) and social-emotional-behavioral skills (i.e., adaptive skills and externalizing behaviors). Their findings indicated that parent involvement played a significant role in moderating family and neighborhood socioeconomic status on school readiness. For single-parent homes, parent involvement was associated with lower externalizing behaviors, which revealed that parent involvement worked as a protective factor for disadvantaged conditions for low-income, single-parent homes. Further, the results indicated that parent involvement moderated the impacts of family and neighborhood SES variables on children’s social-emotional-behavioral school readiness.
Factors Pertaining to Schools and Professionals

Some researchers studied variables related to professionals’ abilities to build partnerships and their impacts on family engagement. Tucker and Schwartz (2013) examined barriers to parent involvement and family-school collaboration among families of children with Autism Spectrum Disorder (ASD). Parents in this study reported that they felt that the school professionals did not view parental input as valuable and saw this as a barrier to effective school-family collaboration. More importantly, the parents in this study also reported that open and honest communication is a highly valued method of school-family collaboration. Tucker and Schwartz (2013) emphasized the roles of professionals in building partnerships with families and voiced that “fostering successful parental participation is intentional, planned and ultimately the responsibility of the educational agency” (p. 11).

A study by Bokony, Whiteside-Mansell, and Swindle (2013) also examined the importance of family-teacher relationships on family engagement. Specifically, the authors looked at the impacts of increased parent-teacher communication on family engagement among low-income families. The authors utilized interventions designed to help childcare workers to conduct assessment, provide families with helpful information regarding parenting and also connect them with the needed resources. The intervention included the Family Map Inventory for Early Childhood (Family Map; Whiteside-Mansell, Bradley, Conners, & Bokony, 2007) and Teaching Important Parenting Skills: Tips for Great Kids! (TIPS; Bokony, Butler, & Shaw-Bailey, 2011). In this study, professionals in early childhood settings were randomly assigned to either an intervention group that received training on the Family Map and the TIPS or a comparison group without these trainings. Data were gathered as to see whether the intervention group would utilize the
Family Map and the TIPS and also to determine the impacts of these approaches on parent-teacher communication. Their findings indicated that the intervention group reported more communication with parents and also reported that the parents asked them for more help than the comparison group. Similarly, parents in the intervention group reported that they have received more help from the professionals in regards to family and parenting information and resources. Overall, this study shows that equipping professionals with tools to enhance relationships such as communication skills brings a positive outcome in a reciprocal manner, where both parties felt benefited from increased communication.

Importantly, when discussing working with Head Start families, Azar, Miller, and Stevenson (2013) assert that the first element of family engagement begins with the establishment of relationships between family and professionals. The authors further explain that when such collaborative relationships begin to flourish, professionals can then begin to put effort into helping foster family engagement. This notion emphasizes the importance of establishing working relationships as a prerequisite for family engagement and foresees the challenges that the professionals may encounter in engaging families due to lack of mutual and trusting relationships.

### Problem Statement

A significant number of studies have consistently shown positive impacts of family engagement on children (e.g., Arnold et al., 2008; Fantuzzo et al., 2004; Galindo & Sheldon, 2012; Jeynes, 2005; McWayne et al., 2004). Consequently, national educational policies have emphasized the importance of family involvement in young children’s learning (Fantuzzo et al., 2004). However, prior studies on family involvement among families participating in early intervention and early childhood education
programs have shown lower than desired family engagement and less family-centered practices (e.g., Bruder & Dunst, 2015) despite the federal mandates for family involvement in early childhood programs such as the Head Start (U.S. Department of Health and Human Services, 2015). While an increasing number of studies pursue to identify factors that promote higher family engagement, some educators focus on factors that help support families to build their capacity. Several scholars (see Dunst & Trivette, 2010; Dunst et al, 2002; Dunst et al., 2007) assert that family-centered practices lay a foundation for strengthening partnerships between families and professionals, and these practices have been shown to bring positive child and family outcomes. Additionally, family-centered practices are recommended practices in early intervention and early childhood education programs. Dunst (2002), however, points out that most programs do not adhere to the principles of family-centered practices despite their claims. Further, Bruder and Dunst (2015) argue for the importance of families’ perceptions in promoting family engagement. Taking these family-centered approaches in early childhood education, the current study investigated the family engagement of Head Start families and their perceptions toward Head Start professionals’ family-centered practices. No study has examined the relationships between families’ perceptions of family-centered practices among Head Start families and how these perceptions are related to the level of family engagement using a multidimensional measure of family engagement. This study will contribute to the understanding of the levels of perceived family engagement to the Head Start program and how they may be impacted by their perceptions of Head Start professionals’ family-centered practices that emphasize family-professional partnerships and family capacity-building. The findings
would further facilitate discussions regarding how to better promote family-centered practices by Head Start personnel.
Figure 1-1. The Ecological Systems Theory (Bronfenbrenner, 1978)
CHAPTER 2
METHODOLOGY

The purpose of this study was to examine the relationships between families' perceptions of professionals' family-centered practices and the level of family engagement among Head Start families. Participants were also asked to rate their satisfaction with Head Start, and whether they felt that they have made positive changes due to being enrolled in Head Start. The following research questions, instruments, data collection procedures, and statistical analysis plan guided this effort.

Research Questions

The following research questions guided the research design and were addressed using questionnaire data from the study sample:

1. Is there a relationship between families' perceptions of professionals' family-centered practices (as measured by FCP) and the level of family engagement (as measured by three subscales of FIQ)? Specifically, do families' perceptions of professionals' family-centered practices predict the level of family engagement among Head Start families?

2. Is there a relationship between program satisfaction (as measured by two ordinal scales) and the level of family engagement (as measured by three subscales of FIQ)?

3. Is there a relationship between program satisfaction (as measured by two ordinal scales) and the families’ perceptions of professionals’ family-centered practices (as measured by FCP)?

Participants

Head Start provides early childhood education to children from low-income households and who are ages 3 and 4 before the September 1\textsuperscript{st}. Families from below the poverty guidelines, children from homeless families, families receiving public assistance are eligible for Head Start programs ("Poverty Guidelines and Determining Eligibility for Participation in Head Start Programs," 2017).
The sample included in this study was Head Start families from a mid-sized school district in North Central Florida. This school district uses a center-based service delivery to serve Head Start children and their families. A total of 57 Head Start families completed the survey packet, which included a consent form to participate in this study, a demographic survey, the Family-Centered Practices (Short Form; Dunst et al, 2006), and the Family Involvement Questionnaire (FIQ; Fantuzzo, et al., 2000). In order to ensure study participants’ familiarity with Head Start personnel, participants with less than one month in Head Start were excluded from the data analysis. Further, non-native speakers of English were excluded for data analysis due to norms for the FIQ were based on English Speaking participants (Perry, Fantuzzo, & Munis, 2002).

Out of 57 families who completed the survey packet, nine participants were excluded from data analysis due to having missing items on the questionnaires (n = 5); having been in Head Start for less than a month (n = 2); non-English speaker (n = 1); or data being an extreme outlier (n = 1). Thus, the final dataset included 48 participants.

Participant demographic information was obtained through a demographic survey completed by each participant. Of the 48 participants, 85.4% were mother, 10.4% were father, and 4.2% were grandmother. In regards to ethnicity, 68.8% identified themselves as African American or Black, 25% as Caucasian, and 6.3% as Hispanic. Regarding the length of their Head Start enrollment, 60.4% reported 6 moths to 1 year, 25% reported 1 year or longer, and 14.6% reported 1 to 6 months in Head Start. In terms of age, the mean age of participants was 32 (SD = 8.9). The majority (60.4%) of participants described themselves as single (never married), with 16.7% describing themselves as married, 12.5% as divorced, 4.2% as separated, 4.2% as living with a partner, and 2.1%
as widowed. Highest education level of the participants varied, ranging from 41.7% with high school completion, 31.3% with some college but no degree, 14.6% with less than high school, and 12.5% of participants having associate’s degree or higher education. Employment status includes 41.7% not currently employed, 41.7% working 21 hours or longer, and 16.7% working less than 20 hours. See Table 2-1 for a summary of participant demographic information. Lastly, when asked who else lived in their home besides their child, 10.4% reported living only with their child, 14.6% reported living with a child in Head Start and one or more adults, and 75% reported multiple children and multiple adults in the house. See Table 2-2 for a summary of number of individuals living in the house.

**Measures**

**Family Engagement**

Family engagement was measured using the Family Involvement Questionnaire (FIQ; Fantuzzo, et al., 2000). The FIQ is a multidimensional instrument of family involvement, with 42 likert-scale items (*Rarely, Sometimes, Often, Always*) to capture three dimensions of family involvement: School-Based Involvement (SBI), Home-Based Involvement (HBI), and Home-School Conferencing (HSC). The theoretical orientations used to develop this instrument include Bronfenbrenner’s ecological systems theory (1986) and Epstein’s six types of parent involvement (Epstein, 2001), including parenting, communicating, volunteering, learning at home, decision making, and collaborating with community.

The original study of the FIQ (Fantuzzo et al., 2000) was completed with parents and teachers in preschools through kindergartens in urban settings involving 641 parents, including 80% from low-income households. The majority of participants were
females (94%), with 43% unemployed and 47% single. Researchers of this study first identified schools within this school district that had a full array of early childhood programs and made sure to include all regions of this urban district. Researchers then invited the teachers of the identified schools and asked to randomly select children in their classroom for the study purpose. Research assistants then distributed the study packets to these randomly selected children’s parents, which included demographic survey and the FIQ. The response rate reported in the study was 65%. Out of the distributed packets, Head Start families made up of 77% of the overall participants.

Regarding the psychometric properties of the FIQ (Fantuzzo et al., 2000), internal consistency reliabilities using Cronbach’s alphas have been reported adequate for all three subscales: SBI, HBI, and HSC (Cronbach’s r = .85, .85, and .81, respectively). Further, concurrent validity has been demonstrated using three subscales of the FIQ and reported volunteer experiences by parents in Head Start (Fantuzzo, Tighe, & Perry, 1999). In addition, predictive validity has been demonstrated for academic and behavioral gains based on data from the fall and the spring among Head Start children (Fantuzzo et al., 2004).

The FIQ is composed of three subscales. The School-Based Involvement (SBI) subscale is composed of items that reflect types of activities and behaviors that caregivers may engage in school setting, such as “I volunteer in my child’s classroom,” “I participate in parent and family social activities with the teacher,” and “I go on class trips with my child.” The Home-Based Involvement (HBI) subscale addresses types of parenting activities and behaviors that caregivers engage at home to promote children’s learning. Sample items from Home-Based Involvement subscale include: “I spend time
working with my child on number of skills,” “I spend time working with my child on reading/writing skills,” and “I praise my child for school work in front of the teacher.” Lastly, the Home-School Conferencing (HSC) subscale reflects communications between caregivers and teachers concerning a child’s learning and progress. The sample items from Home-School Conferencing category include: “I talk with my child’s teacher about classroom rules,” “I talk to my child’s teacher about his/her difficulties at school,” and “I talk to my child’s teacher about my child’s accomplishments” (Fantuzzo et al., 2000).

The original study of the FIQ (Fantuzzo et al., 2000) reported a number of significant findings. For example, more educated parents were more involved in school-based activities and conferencing with school than less educated parents. In addition, married parents were found to engage in more home-based learning activities with their children and also had a higher frequency in conferencing with school. Finally, when group differences were examined among early childhood programs, Head Start families were more involved in school-based activities than other preschool programs.

The FIQ has been used and validated with Head Start families from diverse backgrounds (e.g., Fantuzzo et al., 2004; McWayne et al., 2008; McWayne, Manz, & Ginsburg-Block, 2015; Waanders et al., 2007).

**Family-Centered Practices**

The measure used to examine families’ perceptions of Head Start personnel’s family-centered practices in the current study was the Family-Centered Practices Scale (Short Form; Dunst et al, 2006). For the purpose of this instrument, Dunst et al. (2002) define family-centered as “a particular set of beliefs, principles, values, and practices for supporting and strengthening family capacity to enhance and promote child
development and learning” (Dunst, 2002, p. 139), and “an approach to working with families that honors and respects their values and choices and which includes the provisions of supports necessary to strengthen family functioning (Dunst et al., 2007, p.370).

The Family-Centered Practices Scale measures families’ perceptions of professionals’ adherence to the principles of family-centered practices in two categories: relational practices and participatory practices (Dunst et al., 2006). Relational helpgiving practices include those skills often associated with good clinical practice (e.g., active listening, being compassionate and respectful) and help families identify their existing strengths. Participatory helpgiving includes practices that “are individualized, flexible, and responsive to family concerns and priorities, and which involve informed choices and family involvement in achieving desired goals and outcomes” (p.370). The Family-Centered Practices Scale Short Form contains 8 items (4 items each for each category), on a 5-point likert scale (Never, Very Little, Some of the Time, Most of the Time, All of the Time). Sample items on the Family-Centered Practices Scale (Short form) include whether respondents feel professionals “really listens to my concerns or requests,” “tries hard to understand my child(ren) and family’s situation,” “provides me information I need to make good choices,” and “helps me be an active part of getting desired resources and support.”

The psychometric properties of the Family-Centered Practices Scale (Short form) have been reported using Carmine’s theta, ranging from .78 to .95 for items for relational helpgiving and .85 to .93 for items for participatory helpgiving. In regards to factor loadings, “in all but one case for both the relational and participatory indicators,
the factor loadings were .60 or higher” (Dunst et al., 2006, p. 14). In the present study, the Family-Centered Practices Scale (FCP; Short form) was adapted from a 5-point likert scale (Never, Very Little, Some of the Time, Most of the Time, All of the Time) to a 4-point likert scale (Rarely, Sometimes, Often, Always) to maintain consistency with the FIQ response format.

**Family Program Satisfaction**

The participants of this study were also asked to report their program satisfaction with Head Start and whether Head Start brought positive changes to their lives, on a 4-point likert scale (Not at all, a little, moderate, and very much). Specifically, the participants were asked to respond to the following two items: “I am satisfied with this year’s Head Start program” and “I have made more positive changes in my life as a result of being in Head Start.”

**Demographic Survey**

Finally, the participants were asked to complete a brief demographic survey, which included the following items: the length of enrollment in Head Start, respondents’ age, race and ethnicity, marital status, highest educational attainment, their relationship with the child in Head Start, a number of individuals living in the same household, and a number of work hours if they are currently employed.

**Procedures**

The Head Start director in a mid-sized school district in North Central Florida was contacted upon the approval from the Institutional Review Board (IRB) at the University of Florida. After receiving permission from the Head Start director of the school district, this researcher visited the Head Start office to discuss the best approaches for recruiting participants with the Head Start staff. This researcher then visited the Head
Start centers during participant orientations on four different days at the end of the school year. These participant orientations were held for those families returning to Head Start in the following school year. The researcher visited two different locations, rural and urban parts of the school district to include both rural and urban Head Start families.

During each participant orientation, families were asked to complete a survey packet, which included a consent form to participate in this study, the Family Involvement Questionnaire (FIQ), the Family-Centered Practices Scale (FCP; Short form, adapted), and a demographic questionnaire. This researcher explained the consent form to each family and offered to help should they seek clarifications, questions, or help with each survey. Some families asked questions about the logistics of the study (e.g., how long this may take) but no participants asked the researcher to read the items on the questionnaires to them.

**Data Analysis**

Descriptive statistics (e.g., the mean, standard deviation) were computed for the Family Involvement Questionnaire (FIQ), the Family-Centered Practices Scale (FCP), and the demographics. In addition, because items regarding program satisfaction (i.e., overall program satisfaction and whether participants felt they have made positive changes due to Head Start) were ordinal variables, frequencies and percentages were provided for these variables. Descriptive statistics were conducted to identify missing values on the surveys and also to examine any unusual values, means or standard deviations. This was achieved by checking the histograms and boxplots of the scores. Based on the output of a boxplot for the Family-Centered Practices Scale (FCP; Short form; Dunst et al., 2006), an extreme outlier was detected for one response. Outliers are
values that are either much smaller or larger compared to the majority of responses and can be problematic and could lead to distortions of the group results (Cousineau & Chartier, 2010). Thus, the extreme outlier was removed from further data analyses. Score reliabilities were then examined using Cronbach’s alpha to establish internal consistency of the FIQ and the FCP. Finally, participants with complete dataset for all independent and dependent variables were included in the final sample (n = 48).

In order to address each research question, a correlation matrix was first performed to determine any relationships among variables of interest. As recommended by Lomax and Hahs-Vaughn (2012), Spearman’s rho was chosen as the correlation matrix because variables in this study included ordinal variables (i.e., program satisfaction and positive changes made). Second, multivariate analyses followed to address each research question. Specifically, a series of simple linear regressions was used to address the first research question, which examined the predictive ability of family-centered practices on the three subscales of family engagement. Multiple regression analyses then followed to further help examine whether demographic variables (parent education and employment) were related to the level of family engagement and family-centered practices. Next, data from correlation matrices were used to address research questions 2 and 3. Post-hoc analyses were performed to see any significant differences among groups (parent education and employment) in regards to family-centered practices, family engagement, and program satisfaction.

In order to compare differences between groups for parent education and employment status, collapsed groups were created for employment status and parent education. Specifically, employment status was divided into two groups: unemployed
and employed. Parent education constituted two levels: high school diploma or less and some college or higher. Post-hoc analyses were conducted to compare such group differences using the Mann-Whitney U Test, which is a test used to compare differences involving categorical variables (parent education and employment status) and continuous variables (scores on the Family-Centered Practices and the Family Involvement Questionnaire). Kendall’s tau b was also used to determine the strength of associations among two ordinal items (program satisfaction and positive change) and categorical demographic variables (parent education and employment).
Table 2-1. Overall sample participant demographics: frequencies and percentages.

<table>
<thead>
<tr>
<th>Demographic Variables</th>
<th>Frequency</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship with child</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td>41</td>
<td>85.4%</td>
</tr>
<tr>
<td>Father</td>
<td>5</td>
<td>10.4%</td>
</tr>
<tr>
<td>Grandmother</td>
<td>2</td>
<td>4.2%</td>
</tr>
<tr>
<td>Ethnicity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black or African American</td>
<td>33</td>
<td>68.8%</td>
</tr>
<tr>
<td>White/Non-Hispanic</td>
<td>12</td>
<td>25%</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>3</td>
<td>6.3%</td>
</tr>
<tr>
<td>Length of Head Start enrollment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 to 6 months</td>
<td>7</td>
<td>14.6%</td>
</tr>
<tr>
<td>6 months to 1 year</td>
<td>29</td>
<td>60.4%</td>
</tr>
<tr>
<td>1 year or longer</td>
<td>12</td>
<td>25%</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>29</td>
<td>60.4%</td>
</tr>
<tr>
<td>Married</td>
<td>8</td>
<td>16.7%</td>
</tr>
<tr>
<td>Divorced</td>
<td>6</td>
<td>12.5%</td>
</tr>
<tr>
<td>Living with a partner</td>
<td>2</td>
<td>4.2%</td>
</tr>
<tr>
<td>Separated</td>
<td>2</td>
<td>4.2%</td>
</tr>
<tr>
<td>Widowed</td>
<td>1</td>
<td>2.1%</td>
</tr>
<tr>
<td>Highest Level of Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than High School</td>
<td>7</td>
<td>14.6%</td>
</tr>
<tr>
<td>High School Diploma</td>
<td>20</td>
<td>41.7%</td>
</tr>
<tr>
<td>Some College but no Degree</td>
<td>15</td>
<td>31.3%</td>
</tr>
<tr>
<td>Associate’s Degree or Higher</td>
<td>6</td>
<td>12.5%</td>
</tr>
<tr>
<td>Employment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Currently not Employed</td>
<td>20</td>
<td>41.7%</td>
</tr>
<tr>
<td>Work less than 20 hours</td>
<td>8</td>
<td>16.7%</td>
</tr>
<tr>
<td>Work more than 20 hours</td>
<td>20</td>
<td>41.7%</td>
</tr>
<tr>
<td>Participants’ Age in Years (n = 45)</td>
<td>Mean</td>
<td>Standard Deviation</td>
</tr>
<tr>
<td></td>
<td>31.56</td>
<td>8.92</td>
</tr>
<tr>
<td>Prefer not to report (n = 3)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: N=48
<table>
<thead>
<tr>
<th>Number of individuals in the house</th>
<th>Frequency</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nobody else</td>
<td>5</td>
<td>10.4%</td>
</tr>
<tr>
<td>One more child</td>
<td>8</td>
<td>16.7%</td>
</tr>
<tr>
<td>One more child and one adult</td>
<td>3</td>
<td>6.3%</td>
</tr>
<tr>
<td>One more child and two adults</td>
<td>1</td>
<td>2.1%</td>
</tr>
<tr>
<td>Two more children</td>
<td>5</td>
<td>10.4%</td>
</tr>
<tr>
<td>Two more children and one adult</td>
<td>5</td>
<td>10.4%</td>
</tr>
<tr>
<td>Two more children and two adults</td>
<td>1</td>
<td>2.1%</td>
</tr>
<tr>
<td>Two more children and &gt;3 adults</td>
<td>1</td>
<td>2.1%</td>
</tr>
<tr>
<td>&gt;3 children</td>
<td>8</td>
<td>16.7%</td>
</tr>
<tr>
<td>&gt;3 children and one adult</td>
<td>2</td>
<td>4.2%</td>
</tr>
<tr>
<td>&gt;3 children and two adults</td>
<td>2</td>
<td>4.2%</td>
</tr>
<tr>
<td>One more adult</td>
<td>2</td>
<td>4.2%</td>
</tr>
<tr>
<td>Two adults</td>
<td>1</td>
<td>2.1%</td>
</tr>
<tr>
<td>&gt;3 adults</td>
<td>4</td>
<td>8.3%</td>
</tr>
</tbody>
</table>

Note: N=48
CHAPTER 3
RESULTS

This study explored the relationships between Head Start families’ perceptions of professionals’ family-centered practices and the level of family engagement using a multidimensional measure of family engagement. Specifically, this study sought to determine whether families’ perceptions of professionals’ family-centered practices would predict the levels of family engagement. This study also explored whether families’ satisfaction with Head Start would correlate with the level of family engagement and whether relationships existed between program satisfaction and family ratings of professionals’ family-centered practices.

This chapter is organized into four sections. The first section describes data screening and accuracy of data used for later statistical analyses. The second section describes preliminary statistical analysis including descriptive statistics and reliabilities of measures used. Then, correlational analyses were conducted to determine any significant relationships among variables of interests. Multivariate analyses were then followed to answer each research question.

Data Screening and Accuracy

First, raw data (n = 57) were screened for study eligibility. Specifically, those respondents who reported having been enrolled in Head Start for less than a month (n = 2) were removed due to their familiarity with the Head Start being too brief. In addition, one respondent who spoke only Spanish (n = 1) was removed because one questionnaire (i.e., the FIQ) was only normed using English Speakers.

Second, the remaining raw data from the questionnaires (n = 54) were screened for any missing values. Upon inspection, a number of missing values were found,
including participants who did not report age \((n = 3)\) and participants with multiple missing values on the Family Centered Practices Scale and the Family Involvement Questionnaire \((n = 5)\). Participants who did not report their age were preserved for later data analyses due to age being a non-central variable in this study. However, participants with missing values on the questionnaires were excluded from further data analyses. The first complete dataset of 49 respondents were then entered into computer statistical software to conduct statistical analyses. To ensure the accuracy of the data entry, this researcher compared the data entries with the raw data (e.g., demographic survey, etc.) and also computed frequencies for each variable.

**Descriptive Statistics and Score Reliabilities of Measures**

Descriptive statistics for the Family Involvement Questionnaire (FIQ) and the Family Centered Practices Scale (FCP; Short form, adapted) were computed. Then, frequencies and percentages are reported for two ordinal variables, program satisfaction and family report of whether they felt that they made positive changes due to Head Start.

**Descriptive Statistics**

The Family Involvement Questionnaire (FIQ) is composed of 42 items; however, only 36 items fit into the three subscales and are used for analyses (Perry et al., 2002). To score the FIQ, scores for each scale were first summed for each participant. Then, the summed scores were converted to T-scores based on the table in the FIQ manual (Perry et al., 2002). After obtaining the T-scores, means and standard deviations for the T-scores were calculated. A total T-score of 49 indicates an average score, with a standard deviation of 10. The higher the score is, the higher their participation is in the scale. Secondly, the scores from the Family-Centered Practices Scale (FCP: short form,
adapted) were analyzed. Scores from each scale (i.e., relational and participatory practices) were summed for each participant to determine the final scores for each subscale as well as the overall FCP total score. After a boxplot from the descriptive statistics, an extreme outlier was detected for the FCP scale. Outliers are problematic because they are extreme values compared to the majority of responses and could lead to distortions of the group results (ineau & Chartier, 2010); consequently this outlier was removed from further analyses. Thus, a final dataset of 48 were maintained for later analyses. Table 3-1 presents descriptive statistics for the Family Involvement Questionnaire (FIQ) and the Family-Centered Practices Scale (FCP).

Further, Tables 3-2 and 3-3 show descriptive statistics of the FIQ, and the FCP as a function of parent education and employment status. Parent education was collapsed into two levels: high school diploma or less and some college or higher. Regarding employment, employment status was divided into two groups: unemployed or employed.

Next, frequencies and percentages were computed for two ordinal variables, program satisfaction and positive changes due to Head Start enrollment. Table 3-4 shows these data pertaining program satisfaction and self-report of positive changes due to Head Start.

**Score Reliabilities of Study Measures**

To compute reliabilities of the measures used, Cronbach’s alpha was calculated for each subscale for the FIQ and the FCP. Each subscale on the FIQ demonstrated high internal consistency, with Cronbach’s alpha of .92 for School-Based Involvement (SBI), .85 for Home-Based Involvement (HBI), and .87 for Home-School Conferencing (HSC) in the present study. Comparably, on the FCP, Cronbach’s alpha coefficient for
the overall FCP (FCP-Total) was .92, for relational indicators of FCP (FCP-RI) was .84 and Cronbach’s alpha for participatory indicators (FCP-PI) was .86. Table 3-5 describes Cronbach’s alpha for each of these scales.

**Correlational Analyses**

Correlational analyses were conducted to examine the relationships among variables of interest. The variables included in the correlational analyses were the three subscales of the FIQ (SBI, HBI, and HSC); the overall FCP and its two subscales, relational indicators (FCP RI) and participatory indicators (FCP PI); two ordinal scales, program satisfaction (PS) and positive changes due to Head Start (PC); and two demographic variables, parent education (EDU) and employment status (EMP). Because variables of interest included ordinal variables (i.e., PS and PC), as suggested by Lomax and Hahs-Vaughn (2012), Spearman’s rho was used to conduct correlational analyses. Table 3-6 is a summary of these correlational analyses.

**Multivariate Analyses**

**Research Question 1**

The first question addressed whether scores on the Family-Centered Practices Scale (FCP) were related to the Family Involvement Questionnaire (FIQ), and if so, whether the FCP would predict the scores on the each subscale of the FIQ. Based on the correlational analyses, statistically significant positive relationships were found between FCP-Total and SBI (r = .349, p < 0.05) and HBI (r = .434, p < 0.01). Further, positive correlations between FCP-RI and all three of the FIQ were found, including SBI (r = .369, p < 0.01), HBI (r = .478, p < 0.01), and HSC (r = .307, p < 0.05). Lastly, positive relationships between FCP-PI and two of the FIQ were found, including SBI (r = .348, p < 0.05) and HBI (r = .389, p < 0.01).
**Regression analyses**

Because Spearman’s rho showed a high correlation between FCP-RI and FCP-PI (r = 9.11, p < 0.01) and this can lead to multicollinearity, FCP-Total instead of each subscale (i.e., FCP-RI and FCP-PI) was used for regression analyses. A total of six linear regressions were conducted for FCP-Total and the subscales of the FIQ that showed correlations with the FCP-Total.

**School-based involvement (SBI).** A linear regression was conducted for the FCP-Total as a predictor and the SBI as an outcome variable. Statistical assumptions of regression model were then tested. Specifically, there was independence of residuals, as assessed by a Durbin-Watson statistic of 2.08. Further, homoscedasticity was met by visual inspection of a plot of standardized residuals and standardized predictive values. In addition, visual inspection of a normal probability plot revealed that residuals were normally distributed. A linear regression of FCP-Total and SBI indicated that the family-centered practices statistically significantly predicted school-based involvement, $F(1, 46) = 5.77, p < 0.05$, accounting for 11% of the variation in school-based involvement with adjusted $R^2$ of 9%. Table 3-7 describes a summary of this linear regression.

A multiple regression analysis was then performed to determine whether FCP-Total and parent education together predict SBI. Independence of residuals was found, as assessed by a Durbin-Watson statistics of 2.040. Further, assumptions for multiple regression were met (e.g., linearity, homoscedasticity, and an absence of multicollinearity). However, adding parent education to FCP-Total did not statistically predict SBI, $F(2, 45) = 3.120, p = .054$. Regression coefficients and standard errors for this analysis can be found in Table 3-8.
Another multiple regression was run to determine whether FCP-Total and employment status predicts SBI. Assumptions for a multiple regression were all met. This multiple regression model did not statistically significantly predict SBI, $F(2, 45) = 3.126, p = .0.54$, adjusted $R^2 = .083$. Thus, adding employment status did not contribute to the prediction of SBI. Regression coefficients and standard errors for this regression can be found in Table 3-9.

**Home-based involvement (HBI).** Next, a liner regression was computed for FCP-Total as a predictor and HBI as an outcome variable. Statistical assumptions for this analysis were met (e.g., independence of residuals with a Durbin-Watson statistic of 2.50), homoscedasticity, normal distribution of residuals). A linear regression of FCP-Total and HBI revealed that the family-centered practices statistically significantly predicted home-based involvement, $F(1,46) = 7.97, p < 0.01$, accounting for 14% of the variation in home-based involvement with adjusted $R^2$ of 12% (Table 3-10).

A multiple regression was then run to help determine the model with additional demographic variable, parent education. Specifically, parent education was added to the model to determine whether parent education and FCP-Total together would predict HBI. Statistical assumptions were all met for this analysis. The multiple regression model statistically significantly predicted HBI, $F(2, 45) = 5.127, p < 0.01$, adjusted $R^2 = .149$. Thus, an addition of parent education as a predictor statistically significantly contributed to the equation. Table 3-11 shows a summary of this regression analysis.

An additional multiple regression was computed to determine whether adding employment status to the equation would contribute to the prediction of HBI. However, an assumption of normal distribution of residuals was violated based on the inspection
of histogram. Due to demographic variable, employment status, was not a central variable, a further analysis of this multiple regression was discontinued.

**Home-school conferencing (HSC).** Regarding home-school conferencing (HSC), there was no statistically significant correlation between FCP-Total and HSC \((r = .267)\), and thus, no linear regressions were performed for these variables.

**Post hoc analyses**

The Man-Whitney U test was selected to compare group differences for FIQ and FCP. Specifically, two groups for parent education (high school or less vs. some college or higher) and employment status (employed and unemployed) were used. This test is a rank-based nonparametric test, which compares two groups on a continuous or ordinal variable.

**Family-centered practices scale.** Man-Whitney U Tests revealed median FCP scores were not significantly different between FCP and parent education \((U = 330.500, z = 1.125, p = .26)\) or employment status \((U = 287.000, z = .169, p = .866)\).

**Family involvement questionnaire.** Mann-Whitney U tests for the three subscales of the FIQ revealed median FIQ scores were not statistically different between SBI and parent education \((U = 331.000, z = .988, p = .323)\), HBI and parent education \((U = 368.000, z = 1.772, p = .76)\) or HSC and parent education \((U = 340.500, z = 1.187, p = .235)\). Further, Mann-Whitney U Tests showed no significant differences of median scores between employment status and SBI \((U = 315.500, z = .743, p = .457)\), HBI \((U = 267.500, z = -.264, p = .792)\) or HSC \((U = 221.500, z = -1.226, p = .220)\). Table 3-12 presents a summary of group median values of Mann-Whitney U tests.
Research Question 2

The second question focused on the relationships between families’ self-reported program satisfaction with Head Start and family ratings of family engagement.

Spearman's rho correlation

This question was examined using Spearman’s rho, a non-parametric correlation method, due to two of the variables (i.e., program satisfaction and positive changes due to Head Start) were ordinal variables. Interestingly, with this sample, no relationships were found between program satisfaction and family ratings of their current family engagement. Specifically, no relations were reported for program satisfaction with School-Based Involvement ($r = .218$), with Home-Based Involvement ($r = .228$), or with Home-School Conferencing ($r = .232$). On the other hand, when relationships between the item regarding whether participants felt that they have made positive changes due to Head Start and a variable pertaining to the level of family engagement were examined, there was a moderately positive relation between self-report of positive changes and Home-School Conferencing ($r = .285$, $p < 0.05$) but not other types of family engagement ($SBI, r = .08; HBI, r = .126$).

Post hoc analyses

Post hoc analyses were conducted to examine whether there were relationships between demographic variables (parent education and employment status) and program satisfaction and positive changes due to Head Start enrollment. Kendall’s tau-b was used to determine the strength of associations among these variables because two items (i.e., program satisfaction and positive change) were ordinal variables. Results indicated that there were no significant associations among program satisfaction,
positive changes due to Head Start enrollment, and two demographic variables (parent education and employment status). Table 3-13 is a summary of Kendall’s tau-b.

**Research Question 3**

The third question addressed whether families’ program satisfaction would correlate with family ratings of professionals’ family-centered practices. Based on the correlational analysis using Spearman’s rho, a significant relationship was found between relational indicators of FCP and program satisfaction ($r = .310$, $P < .05$), but not with positive changes due to Head Start ($r = .279$, $p = .055$). On the contrary, participatory indicators of FCP were not significantly related to program satisfaction ($r = .281$, $p = .053$) or positive changes due to being enrolled in Head Start ($r = .235$, $p = .108$). Further, the total score of FCP was not statistically related to program satisfaction ($r = .277$, $p = .057$) or positive changes due to Head Start enrollment ($r = .259$, $p = .075$).

**Summary**

This study examined the relationships between families’ perceptions of professionals’ family centered practices and their level of family engagement using a multidimensional tool of family engagement. The results indicated that families’ perceptions of professionals’ family-centered practices predicted the level of school-based and home-based engagement. Further, family-centered practices and parent education together were predictors of home-based involvement but not school-based involvement. With this sample group, there were no significant relationships between program satisfaction and the level of family engagement. However, there was a statistically positive relationship between relational indicators of the family-centered practices and Head Start program satisfaction. Further, a positive relation was found
between home-school conferencing and an item regarding family report of positive changes due to being enrolled in Head Start. No other statistically significant differences were found between whether families felt that they have made positive changes due to Head Start enrollment and the level of family engagement or the family ratings of the family-centered practices. Post-hoc analyses did not show group differences for parent education (those parents with high school or less education and those with some college or higher) or employment status (those employed and those unemployed) when such group differences were computed for family engagement, family ratings of professionals’ family-centered practices, or program satisfaction.
Table 3-1. Descriptive statistics of FIQ and FCP.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>SD</th>
<th>Minimum</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>SBI</td>
<td>52.94</td>
<td>11.38</td>
<td>29</td>
<td>73</td>
</tr>
<tr>
<td>HBI</td>
<td>54.54</td>
<td>10.12</td>
<td>33</td>
<td>67</td>
</tr>
<tr>
<td>HSC</td>
<td>58.42</td>
<td>9.89</td>
<td>35</td>
<td>73</td>
</tr>
<tr>
<td>FCP-Total</td>
<td>29.81</td>
<td>3.37</td>
<td>21</td>
<td>32</td>
</tr>
<tr>
<td>FCP-RI</td>
<td>15.04</td>
<td>1.53</td>
<td>11</td>
<td>16</td>
</tr>
<tr>
<td>FCP-PI</td>
<td>14.79</td>
<td>1.87</td>
<td>10</td>
<td>16</td>
</tr>
</tbody>
</table>

N=48

Table 3-2. FIQ and FCP scores as a function of parent education.

<table>
<thead>
<tr>
<th>Variable</th>
<th>High School or Less (n = 27)</th>
<th>Some College or Higher (n = 21)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>SBI</td>
<td>51.48</td>
<td>11.29</td>
</tr>
<tr>
<td>HBI</td>
<td>52.37</td>
<td>10.47</td>
</tr>
<tr>
<td>HSC</td>
<td>56.89</td>
<td>10.93</td>
</tr>
<tr>
<td>FCP-Total</td>
<td>29.41</td>
<td>3.47</td>
</tr>
<tr>
<td>FCP-RI</td>
<td>14.78</td>
<td>1.69</td>
</tr>
<tr>
<td>FCP-PI</td>
<td>14.63</td>
<td>1.88</td>
</tr>
</tbody>
</table>

N=48

Table 3-3. FIQ and FCP scores as a function of employment.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Not Employed (n = 20)</th>
<th>Employed (n = 28)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>SBI</td>
<td>51.50</td>
<td>10.83</td>
</tr>
<tr>
<td>HBI</td>
<td>55.50</td>
<td>8.98</td>
</tr>
<tr>
<td>HSC</td>
<td>60.80</td>
<td>7.47</td>
</tr>
<tr>
<td>FCP-Total</td>
<td>29.75</td>
<td>3.43</td>
</tr>
<tr>
<td>FCP-RI</td>
<td>15.15</td>
<td>1.46</td>
</tr>
<tr>
<td>FCP-PI</td>
<td>14.65</td>
<td>1.92</td>
</tr>
</tbody>
</table>

N=48

Table 3-4. Descriptive statistics of program satisfaction and positive change.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequencies</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Satisfaction (PS)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>1</td>
<td>2.1</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>2.1</td>
</tr>
<tr>
<td>3</td>
<td>8</td>
<td>16.7</td>
</tr>
<tr>
<td>4</td>
<td>38</td>
<td>79.2</td>
</tr>
<tr>
<td>Positive Change (PC)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>3</td>
<td>6.3</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>4.2</td>
</tr>
<tr>
<td>3</td>
<td>13</td>
<td>27.1</td>
</tr>
<tr>
<td>4</td>
<td>30</td>
<td>62.5</td>
</tr>
</tbody>
</table>

N=48
Table 3-5. Internal consistency score reliability statistics for FIQ and FCP.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Cronbach’s alpha</th>
<th>Number of items</th>
</tr>
</thead>
<tbody>
<tr>
<td>SBI</td>
<td>.92</td>
<td>12</td>
</tr>
<tr>
<td>HBI</td>
<td>.85</td>
<td>13</td>
</tr>
<tr>
<td>HSC</td>
<td>.87</td>
<td>11</td>
</tr>
<tr>
<td>FCP-Total</td>
<td>.92</td>
<td>8</td>
</tr>
<tr>
<td>FCP-RI</td>
<td>.84</td>
<td>4</td>
</tr>
<tr>
<td>FCP-PI</td>
<td>.86</td>
<td>4</td>
</tr>
</tbody>
</table>

N=48

Table 3-6. Correlations among variables.

<table>
<thead>
<tr>
<th></th>
<th>SBI</th>
<th>HBI</th>
<th>HSC</th>
<th>FCP-Total</th>
<th>FCP-RI</th>
<th>FCP-PI</th>
<th>PS</th>
<th>PC</th>
<th>EDU</th>
<th>EMP</th>
</tr>
</thead>
<tbody>
<tr>
<td>SBI</td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HBI</td>
<td>.657**</td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HSC</td>
<td>.631**</td>
<td>.621**</td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FCP-Total</td>
<td>.349*</td>
<td>.434**</td>
<td>.267</td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FCP-RI</td>
<td>.369**</td>
<td>.478**</td>
<td>.307*</td>
<td>.976**</td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FCP-PI</td>
<td>.348*</td>
<td>.389**</td>
<td>.233</td>
<td>.956**</td>
<td>.911**</td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PS</td>
<td>.218</td>
<td>.228</td>
<td>.232</td>
<td>.277</td>
<td>.310*</td>
<td>.281</td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PC</td>
<td>.081</td>
<td>.126</td>
<td>.285*</td>
<td>.259</td>
<td>.279</td>
<td>.235</td>
<td>.621**</td>
<td>1.000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EDU</td>
<td>.144</td>
<td>.258</td>
<td>.173</td>
<td>.164</td>
<td>.217</td>
<td>.094</td>
<td>.253</td>
<td>.186</td>
<td>1.000</td>
<td></td>
</tr>
<tr>
<td>EMP</td>
<td>.108</td>
<td>-.038</td>
<td>-.179</td>
<td>.025</td>
<td>-.027</td>
<td>.086</td>
<td>-.110</td>
<td>-.043</td>
<td>.064</td>
<td>1.000</td>
</tr>
</tbody>
</table>

*significant at .05 level (2-tailed) **significant at .01 level (2-tailed)

Table 3-7. Summary of linear regression analysis for SBI as an outcome variable.

<table>
<thead>
<tr>
<th>Predictor Variable</th>
<th>B</th>
<th>SE B</th>
<th>β</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>FCP-Total</td>
<td>1.128</td>
<td>.469</td>
<td>.334</td>
<td>2.402</td>
<td>.02</td>
</tr>
</tbody>
</table>

Note. B = unstandardized regression coefficient; SE B = Standard error of the coefficient; β = standardized coefficient

Table 3-8. Summary of multiple regression analysis for SBI as an outcome variable and FCP and education as predictors.

<table>
<thead>
<tr>
<th>Predictor Variable</th>
<th>B</th>
<th>SE B</th>
<th>β</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>17.394</td>
<td>14.400</td>
<td></td>
<td>1.208</td>
<td>.233</td>
</tr>
<tr>
<td>FCP-Total</td>
<td>1.080</td>
<td>.476</td>
<td>.320</td>
<td>2.267</td>
<td>.028</td>
</tr>
<tr>
<td>Education</td>
<td>2.328</td>
<td>3.201</td>
<td>.103</td>
<td>.727</td>
<td>.471</td>
</tr>
</tbody>
</table>

Note. B = unstandardized regression coefficient; SE B = Standard error of the coefficient; β = standardized coefficient
Table 3-9. Summary of multiple regression analysis for SBI as an outcome variable and FCP and employment as predictors.

<table>
<thead>
<tr>
<th>Predictor Variable</th>
<th>B</th>
<th>SE B</th>
<th>( \beta )</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>15.769</td>
<td>14.955</td>
<td>1.054</td>
<td>.297</td>
<td></td>
</tr>
<tr>
<td>FCP-Total</td>
<td>1.122</td>
<td>.472</td>
<td>.332</td>
<td>2.378</td>
<td>.022</td>
</tr>
<tr>
<td>Employment</td>
<td>2.344</td>
<td>3.190</td>
<td>.103</td>
<td>.735</td>
<td>.466</td>
</tr>
</tbody>
</table>

Note. B = unstandardized regression coefficient; SE B = Standard error of the coefficient; \( \beta \) = standardized coefficient

Table 3-10. Summary of linear regression analysis for HBI as an outcome variable.

<table>
<thead>
<tr>
<th>Predictor Variable</th>
<th>B</th>
<th>SE B</th>
<th>( \beta )</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>FCP-Total</td>
<td>1.155</td>
<td>.409</td>
<td>.384</td>
<td>2.823</td>
<td>.007</td>
</tr>
</tbody>
</table>

Note. B = unstandardized regression coefficient; SE B = Standard error of the coefficient; \( \beta \) = standardized coefficient

Table 3-11. Summary of multiple regression analysis for HBI as a criterion variable and FCP and education as predictors.

<table>
<thead>
<tr>
<th>Predictor Variable</th>
<th>B</th>
<th>SE B</th>
<th>( \beta )</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>16.835</td>
<td>12.337</td>
<td>1.365</td>
<td>.179</td>
<td></td>
</tr>
<tr>
<td>FCP-Total</td>
<td>1.073</td>
<td>.408</td>
<td>.357</td>
<td>2.630</td>
<td>.012</td>
</tr>
<tr>
<td>Education</td>
<td>3.969</td>
<td>2.743</td>
<td>.197</td>
<td>1.447</td>
<td>.155</td>
</tr>
</tbody>
</table>

Note. B = unstandardized regression coefficient; SE B = Standard error of the coefficient; \( \beta \) = standardized coefficient

Table 3-12. Median values of FCP and FIQ for parent education and employment.

<table>
<thead>
<tr>
<th></th>
<th>Parent Education</th>
<th>Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>HS or less</td>
<td>College or higher</td>
</tr>
<tr>
<td>FCP-Total</td>
<td>22.76</td>
<td>26.74</td>
</tr>
<tr>
<td>SBI</td>
<td>22.74</td>
<td>26.76</td>
</tr>
<tr>
<td>HBI</td>
<td>21.37</td>
<td>28.52</td>
</tr>
<tr>
<td>HSC</td>
<td>22.38</td>
<td>27.21</td>
</tr>
</tbody>
</table>

N = 48
Table 3-13. Kendall’s tau-b correlations among variables.

<table>
<thead>
<tr>
<th></th>
<th>PS</th>
<th>PS</th>
<th>EDU</th>
<th>EMP</th>
</tr>
</thead>
<tbody>
<tr>
<td>PS</td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PC</td>
<td>.601*</td>
<td>1.000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EDU</td>
<td>.249</td>
<td>.178</td>
<td>1.000</td>
<td></td>
</tr>
<tr>
<td>EMP</td>
<td>-.108</td>
<td>-.041</td>
<td>.064</td>
<td>1.000</td>
</tr>
</tbody>
</table>

*significant at .05 level (2-tailed) **significant at .01 level (2-tailed)
CHAPTER 4
DISCUSSION

A number of empirical studies show the benefits of family engagement on child learning (e.g., Arnold et al., 2008; Fantuzzo et al., 2004; Galindo & Sheldon, 2012; Jeynes, 2005; McWayne et al., 2004). Such findings have repeatedly shown the importance of families’ role in promoting child learning. Efforts to engage families to bring the optimal outcomes for children are longstanding, and have long been part of the federal laws regulating education, including the Individuals with Disabilities Education Act (IDEA). However, a number of studies show lower than desired family engagement, particularly among low-income families (Arnold et al., 2008; Bruder & Dunst, 2015). Many hypotheses to explain why low-income families may not engage as much as affluent families have been suggested; however, limited research on family engagement among low-income families suggests that despite lower engagement relative to their more privileged peers, low-income families have similar aspirations for their children as affluent counterparts and what is best for their children (Sime & Sheridan, 2014). To try to identify factors that promote or hinder family engagement, a number of authors have reported that those models that emphasize collaborations with families and help families expand their capacity would work better in bringing the optimal outcomes not only for children but also for their families (Dunst et al., 2007). In evaluating adherence to family-centered practices, Dunst (2005) highlights the importance of asking the participating families to report their experiences with the program and its staff and using such feedback as the indicators of adherence to the family support principles.
The purpose of this study was to explore the relationships between families’ perceptions of professionals’ family-centered practices and the level of family engagement reported on a multidimensional measure of family engagement. This study also examined whether program satisfaction impact family engagement, and whether program satisfaction was related to family ratings of professionals’ family-centered practices. This study is the first study that used the Family-Centered Practices Scale (Dunst et al., 2006) with Head Start families. Thus, Head Start families’ perceptions of professionals’ family-centeredness were investigated for the first time. This is particularly important as Head Start has recently increased its emphasis on building relationships between families and professionals to achieve better child and family outcomes.

The results of this study indicate that when Head Start families perceived that the professionals were supporting them using the principles of family-centered practices, they were more engaged in school-based and home-based educational activities. Parent education and families’ perceptions of professionals’ family-centered practices also predicted the home-based engagement of the Head Start families. In addition, a positive relation between family report of relational indicators of family-centered practices and program satisfaction was found. Finally, when family reported positive changes because of Head Start enrollment, they were more engaged in conferencing with Head Start about their child and his or her progress.

Sample Characteristics

Head Start families from a mid-sized school district in suburban Florida participated in this study. In the 2015-2016 school year (“Office of Head Start – Head Start Services Snapshot,” n.d.), this county served 640 children; the majority (73.9%)
were Black or African American children and the primary language spoken at home was mostly English (93.6%). National Head Start data in the same school year indicate that 28.3% of participating children were Black or African American children, and the majority (70.9%) spoke English as their first language (“Office of Head Start – Head Start Services Snapshot National All Programs,” n.d.).

In the current study, the majority of the participants were mothers (85.4%) and single (60.4%). The biggest age group in this study was caregivers in their 20's (44%). Regarding race/ethnicity, the majority of participants (68.8%) described themselves as Black or African American. Comparing to the local and the national Head Start data, the sample of this study closely represents this school district regarding race/ethnicity and the primary language; however, it significantly differs from Head Start nationally in terms of race/ethnicity as Head Start children and families in this school district are overwhelmingly minorities (i.e., Black or African American).

With respect to responses on the questionnaires, mean scores of the Family Involvement Questionnaire (FIQ) showed higher mean scores of each FIQ subscale for families with some college or higher, although this was not statistically significantly different from families with high school or less education. Family ratings of professionals’ family-centeredness did not differ for parent education or employment status. Further, these demographic variables did not differentiate self-report of program satisfaction.

**Study Findings**

The present study offers significant findings regarding self-report of family engagement and its relationships with families’ perceptions of professionals’ family-centeredness among Head Start families.
Family-Centeredness and Family Engagement

The first question was concerned with whether family ratings of professionals’ family-centered practices were related to the level of current family engagement, and if so, whether they would predict the level of family engagement. With this sample, family ratings of professionals’ family-centered practices did predict the level of school-based and home-based activities. Interestingly, when parent education was added to the equation, family-centered practices and parent education together also predicted the home-based involvement on the multidimensional tool of family engagement.

In determining whether professionals are employing family-centered practices, Dunst (2005) delineates how such adherence to the practices can be evaluated based on families’ perceptions and the importance of using their perceptions as the indicators of adherence to the family support principles. A meta-analysis conducted by Dunst and his colleagues (2007) suggests that families perceive professionals as being more family-centered when families view support provided by professionals as more helpful.

The current study supports the use of family-centered practices based on family ratings and how such practices would help families engage more in not only school-based but also home-based activities. Moreover, the current study had relatively small sample size with only two levels of education (i.e., high school or less vs. some college or higher); however, the findings suggest that families with some college or higher educational backgrounds and their perceptions of professionals’ family-centeredness together predict how families engage in home-based learning activities. It is not particularly surprising that level of education played a part in predicting family engagement. A number of studies identify more educated parents are more involved in their child’s learning (e.g., Fantuzzo et al., 2000; Waanders et al., 2007). It is
noteworthy, however, that family ratings of professionals’ family-centered practices alone were predictors of both school-based and home-based activities, indicating that families’ perceptions of professionals’ family-centered practices have a potential to mediate family engagement among low-income families such as Head Start families, which tend to have lower educational attainment compared to families from non low-income backgrounds. Such findings are particularly encouraging due to a myriad of adverse effects of poverty on low-income families. When families perceive that professionals are adhering to the family support principles, such as employing good listening skills and helping families capitalize on their strengths, this can facilitate family engagement, which in turn can lead to more positive child and family outcomes. Most importantly, building relationships based on effective interpersonal skills do not necessarily require expensive resources as some other methods (e.g., extensive parent workshops, school events).

Post-hoc analyses performed along with the research question revealed that there were no significant group differences when parent education and employment status were taken into account, for the ways that families perceived professionals’ family-centered practices or how engaged in their child’s learning. The current study used two collapsed levels for parent education (those parents with high school or less education and those with some college or higher) and employment status (employed or unemployed). As described previously, there has been a positive link between parent education and family engagement. For example, Fantuzzo et al. (2000) found that more educated parents were more engaged in their child’s learning in the areas of school-based activities and communications with their child’s school. Because different studies
use different educational attainment to analyze group differences pertaining to caregiver’s education on family engagement, a closer look at parent education as a variable (e.g., looking at each attainment level rather than grouping into categories) might provide more in-depth look on how parent education impacts family engagement.

**Family Satisfaction and Family Engagement**

The second question addressed whether there was a statistically significant relationship between families’ self-report of Head Start satisfaction and their level of current family engagement. In this study, no significant relationships were found among these variables. It is noteworthy, however, that there was a positive relationship between home-school conferencing of family engagement and the positive changes that families felt they have made due to Head Start enrollment. According to Fantuzzo and his colleagues (Fantuzzo et al., 2000), home-school conferencing addresses activities pertaining to communication between teachers and families about child’s learning and progress. Another study, McWayne et al. (2008), found that those parents who were more satisfied with school contact engaged in more school-based involvement and home-school conferencing subscales on the FIQ. Thus, it is encouraging to see that those families who reported that they have made more positive changes due to Head Start were more engaged in communication with teachers about their child.

**Family Satisfaction and Family-Centeredness**

The third question addressed whether a relationship existed between families’ report of program satisfaction and their ratings of professionals’ family-centered practices. The results of this study show that relational indicators, skills associated with good clinical practices, on the family-centered practices scale were significantly related to Head Start program satisfaction. On the other hand, participatory indicators on the
family-centered practices were not significantly related to program satisfaction or positive changes due to Head Start.

The relational indicators of family-centered practices are attributes often associated with good clinical skills such as active listening techniques and having compassion for recipients of services. Dunst et al. (2007) provided a positive relation between relational indicators of family-centeredness and program satisfaction. The current study is consistent with their findings. It is intuitive that the more satisfied families are with the program, the more they view that professionals are interacting with them in a compassionate manner. This again supports the benefits of family-centered approach by Dunst and his colleagues (2007) and the use of families’ perceptions of professionals’ family-centeredness as an important outlet to measure adherence to family-support principles (Dunst, 2005).

Implications

The current study suggests that when families perceive that professionals are interacting in a compassionate manner and assisting them in building their capacities to promote their child learning, families engage more in educationally relevant activities at home and at school. Thus, allocating more time and resources to train professionals to become more family-centered in their practices should receive more attention. As Azar et al. (2013) stated, the first step to working with families is building working relationships with families; only then, professionals can put effort into assisting families to become more engaged in their child’s education. Thus, professionals must learn to become more responsive and strengthen their interpersonal skills for relationship building. This study suggests that investing in enhancing these professional skills could go a long way, including better partnerships with families and more positive child
outcomes, and they can potentially help close the learning and social-emotional gaps that exist between low-income children and their more privileged counterparts.

Dunst (2005) delineates the process in which programs and their staff may implement family support principles into practice. In his article, Dunst (2005) suggests that the first step is for each program to decide which support principles to adopt for their program. Subsequently, the program staff as well as the participants of the services, families, may have discussions about what those principles mean and how they may be translated into practice. Dunst (2005) also recommends that the programs create indicators, “for each principle that become the behavioral standards against which actual practices are judged” (p. 3). As these indicators are used daily to check whether the guiding principles are practiced, Dunst (2005) also suggests that the participating families be asked to provide feedback on their experiences in the forms of interviews, focus groups, or use of questionnaires. Dunst (2005) emphasizes the importance of use of families’ voices in determining adherence to adopted program principles as they are the recipients of the services who can evaluate whether those services meet certain criteria and expectations to impact their lives.

Limitations and Future Research

Several factors limit the extent to which this study can be generalized. The first limitation in this regard is the size and nature of the sample. Specifically, the sample size was relatively small (n = 48) in the current study. Further, this study was conducted in a mid-sized school district with a high percentage of minority participants as compared to the national Head Start; thus, the results of this study may not be generalizable to the national Head Start population. Moreover, the study participants in this study were unique in that they were recruited during their participant orientations.
Thus, sampling bias may have occurred with the sample of this study where those participants who came to the program’s orientation were more likely to engage in their child’s learning at home and at school.

The second limitation to the current study is the method used to gather information on family engagement. The results of this study rely on self-reporting questionnaires completed by Head Start families. Although these questions have been empirically validated for use with families in early childhood education programs, there is no way for the researcher to know that what participants reported reflect their true family engagement behaviors. As described by McWayne et al. (2004), having a direct measure of family engagement such as teacher ratings of family engagement or direct observations of family engagement might be helpful in addition to self-report of family engagement, to compare similarities or differences in report of family engagement. Further, although the FIQ has been previously used with Head Start families, there might have been some families in the current study who did not understand some items despite this researcher’s effort to ensure their understanding (e.g., stayed in the room should they needed clarifications, questions, or assistance). With the current sample, no family asked the examiner to read the survey items for them.

Despite these limitations described, this study is unique in and offers significant findings pertaining to family engagement and families’ perceptions of professionals’ family-centered practices among Head Start families; it is the first study that examined perceptual variables related to family-centered practices in low-income families participating in an early childhood education program.
Additional research is needed for family engagement among low-income families and their engagement behaviors in regards to child learning. The current study used survey method to explore the topic. Future studies may use focus groups or qualitative interviews to further gain understanding of what promotes and hinders family engagement including factors related to professionals and programs. Essentially, family-centered practices require professionals’ abilities to truly listen and to affirm families’ existing capacities; there should be studies that truly listen to families’ input regarding their experiences in early childhood education. Thus, future research with focus groups will provide more ideas as to what families need and want, as well as the factors associated with professionals and programs that help them reach their educational goals for their child. Further, the present study is the first study that used the Family-Centered Practices scale (Dunst et al, 2006) with Head Start families. Thus, a future study may use this instrument with more diverse Head Start families to validate the instrument.

Bruder and Dunst (2015) also reported the discrepancy between what is recommended that professionals should do to support families and what is actually happening as professionals interact with the families. Such gaps between research and practice are alarming and need more thorough scientific attention and inquiry. Thus, future research should focus more on what can be done to help professionals become more family-centered. Tucker and Schwartz (2013) among many others alike (Hoover-Dempsey et al., 2005) noted that it is a responsibility on the part of professionals to help families become more engaged in their child learning. They further argue that such effort by professionals must be intentional and with good planning. Perhaps, as noted
by Castro et al. (2004), there are more things that professionals can do to promote family engagement. For example, Castro and colleagues suggest that having a high quality classroom recommended for early childhood programs (e.g., arrangement of the classroom, interaction, program structure, etc.) encourage parents to become more engaged in Head Start. In addition, although little empirical data might exist for outreach efforts and its impacts on family engagement (Hindman & Morrison, 2011), encouraging study findings by Galindo and Sheldon (2012) show positive associations between school outreach (e.g., teacher-parent conferences, written notes sent home regarding child) and family engagement. This further supports that family engagement requires systemic, intentional efforts made by school personnel. In such engagement process, it is crucial to ask families to occasionally provide feedback on the school efforts and their experiences.

Future research can also examine what professionals can do to increase home-based engagement. Fantuzzo et al. (2004) and Galindo and Sheldon (2012) addressed the importance of what occurs at home in regards to learning, and providing support for home-based activities can impact families capacity and empower them more in their child learning. Mcwayne et al. (2004) call for creativity and new approaches when it comes to family engagement because traditional volunteering or helping in school may not be feasible for working parents. They call for broader engagement, especially for home-based activities. Epstein (n.d.) offers some insight into what professionals can do to support home-learning activities. For example, she describes that schools can send home “calendars with activities for parents and students at home” and also “summer learning packets or activities” (p. 4). Epstein also argues that these learning activities
include independent learning activity but also encompass “interactive activities shared with others at home or in the community, linking schoolwork to real life” (p. 4). Such broader perspective seems particularly encouraging for young learners and more enjoyable as the learning is more interactive compared to seatwork associated with homework. Home-based educational activities may be particularly important and critical, given the fact that work related conflicts are often reported as barriers to becoming more involved in their child’s education by low-income families (Dyke, 2004). In the same token, Castro et al. (2004) call for a need for Head Start to find solutions to accommodate needs of working parents. The authors reason this by reporting that working parents are not as engaged in Head Start, especially in school-based activities such as volunteering.

Further, future research should consider cultural and ethnic differences in preferences for participation, as well as other demographic factors. Specifically, Jeynes (2003) discusses the need to examine what aspects of family involvement are beneficial for different ethnic groups. For example, he describes how families from some ethnic backgrounds outperform others despite not being involved in traditional school-based volunteerism (e.g., Asians do better and have higher expectations but not involved in school-based involvement). As Epstein (1992) and Hoover-Dempsey et al. (2005) have argued, professionals must be able to adapt to needs of today’s diverse families. Perhaps, family-centered practices can be a good place to start for professionals to utilize with any diverse family due to its principles to meet each family’s specific needs with compassion and respect, and to help expand their existing strengths to promote their child’s learning.
Conclusion

Families play a vital role in guiding their child’s learning. Family engagement research has consistently shown the benefits of family engagement on child learning. The current study supports census among educational researchers that systemic efforts made at professionals could significantly impact the level of family engagement, especially when families perceive that professionals support families using family-centered practices and build effective partnerships. Future research should continue to explore factors associated with higher engagement among families enrolled in early childhood education, especially from low-income households, and apply such knowledge to prepare professionals to better serve low-income families who may be otherwise at-risk for many adverse impacts of poverty.
APPENDIX
DEMOGRAPHIC SURVEY

DEMOGRAPHIC SURVEY

Instructions: Please check the response which describes the person completing this questionnaire:

1. How long has your child been in Head Start?
   □ less than 1 month  □ 1 - 6 months
   □ 6 months - 1 year  □ 1 year or longer

2. What is your relationship with your child?
   □ Mother  □ Father  □ Grandmother  □ Grandfather
   □ Uncle  □ Aunt  □ Other: Please specify______________________

3. What is your age? __________

4. What is your race/ethnicity?
   □ American Indian or Alaska Native  □ Asian/Pacific Islander
   □ Black or African American  □ Hispanic or Latino
   □ Multi-racial  □ White/Non-Hispanic
   □ Native Hawaiian or Other Pacific Islander
   □ Other: __________________

5. What is your marital status?
   □ Single (never married)  □ Married  □ Separated
   □ Widowed  □ Divorced  □ Living with a partner

6. Who lives with you and your child? (please check all that apply)
   □ Nobody else
   □ 1 more child  □ 2 more children  □ 3 or more children
   □ 1 adult  □ 2 adults  □ 3 or more adults

8. What is the highest degree or level of education you have completed?
   □ Less than high school  □ High school graduate (equivalency)
   □ Some college but no degree  □ Associate’s degree
   □ Bachelor’s degree  □ Graduate or professional degree

9. How many hours a week do you work outside of home? ____________ hours a week

Please go on to the next page
Instructions: Please circle one answer that best describes your feelings.

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>A little</th>
<th>Moderate</th>
<th>Very much</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I am satisfied with this year's Head Start program.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2. I have made more positive changes in my life as a result of being in Head Start.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

3. What do you like the best about the Head Start? (Comments)

4. What would you like to change about the Head Start? (Comments)

5. What changes do you see in your child as a result of participating in the Head Start? (Comments)

6. Do you participate in the Head Start as much as you like? (Please circle Yes or No)

   Yes  No (Please see Q7)

7. If your answer is No, what makes it more difficult for you to participate in the Head Start? (Comments)

Thank you for your participation!


Akiko Goen was born and raised in Hyogo, Japan. She first came to the United States as a high school exchange student. She earned a bachelor’s degree in psychology in 2000 and earned her master’s degree in psychology in 2004. Akiko began her Ph.D. training at the University of Florida in 2009 and completed a yearlong internship through the School Board of Alachua County in the 2016-2017 school year. Akiko earned her Ph.D. from the University of Florida in the summer of 2017.