



Families and Schools TOGETHER INC.™

Using Home Visits to Recruit Hard-to-Reach Parents

Pat Davenport, CEO



The Need

- U.S. highest rate of teen age pregnancy in western world
- 1 million babies born to adolescents each year
- Infants at risk for cognitive & emotional developmental delays
- Minority adolescents have nearly twice birth rate of white teenagers



Deadly Combination

High Family Stress + High Social Isolation

= Strongest Single Predictor of Child abuse and Neglect

Add stress of *Welfare To Work Movement*

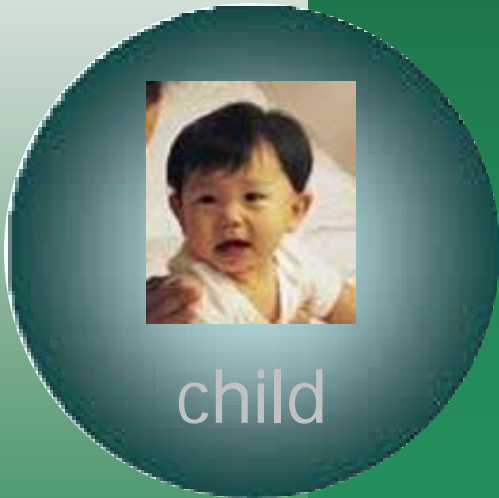


Baby FAST Theory

- Social ecological theory of child development
- Social capital theory of society
- Family stress theory/Family systems theory
- Family life cycle stages/ages and stages
- Small groups theory/belonging and bonding
- Community development theory
- New Brain Research



Social Ecology of Child Development





Social Ecology of Child Development



child



family



Social Ecology of Child Development



child



family



childcare providers



Social Ecology of Child Development



child



family



childcare providers



neighborhood



Social Ecology of Child Development



child



family



childcare providers



neighborhood



A Mothers Eyes Are a Babies Skies





To be tuned into a child, a father/mother needs support





“Relationships are
to child development
what location is to real
estate.”

James Comer, M.D.
Psychiatrist,
Yale University



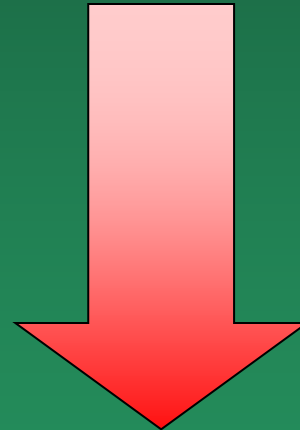
If a new parent is

Depressed

Conflicted

Isolated

Stressed



**RISK TO BABY:
child abuse and neglect**



If a new parent is



**Happy
Connected
Supported
Feels Effective**



Positive outcomes for the baby's development: emotionally, cognitively, physically





Baby FAST Program Design Elements

- Multifamily groups
- Experiential Learning
- Multi-generational/includes entire family
- 2 ½ hrs. week for 8 weeks, 2yrs. monthly meetings
- Enhances Home Visitation Programs



The FAST Team

Value: Nothing about us, without us

- FAST Team (minimum of 4 members):
 - school
 - community-based agency
 - drug & alcohol agency
 - parent
 - volunteers
- Recruit up to 10 members
- Ethnicity/Gender Matching



Serves 3 generations of families

- infants (0-3)
- Teen mothers
- Teen fathers
- One supportive adult (preferably new baby's grandmother)



Multi-family Groups

Builds Relationships of new parent with:

- * Other new parents
- * Their Baby
- * Their Parent or adult mentor
- * Child-Serving Community Agencies



Recruitment Process

- Respectful Process
- Word Matching
- Outreach – Place & Time
- Incentives
- Not a medical model
- Try it one time



Program Incentives

REMOVE BARRIERS

- Meal
- Transportation
- Child Care
- Elder Care

PROMOTE ATTENDANCE

- Meal
- Social Support
- Lotto
- Partners



Uses Experiential Learning





Fathers Are a Core Part of the Program





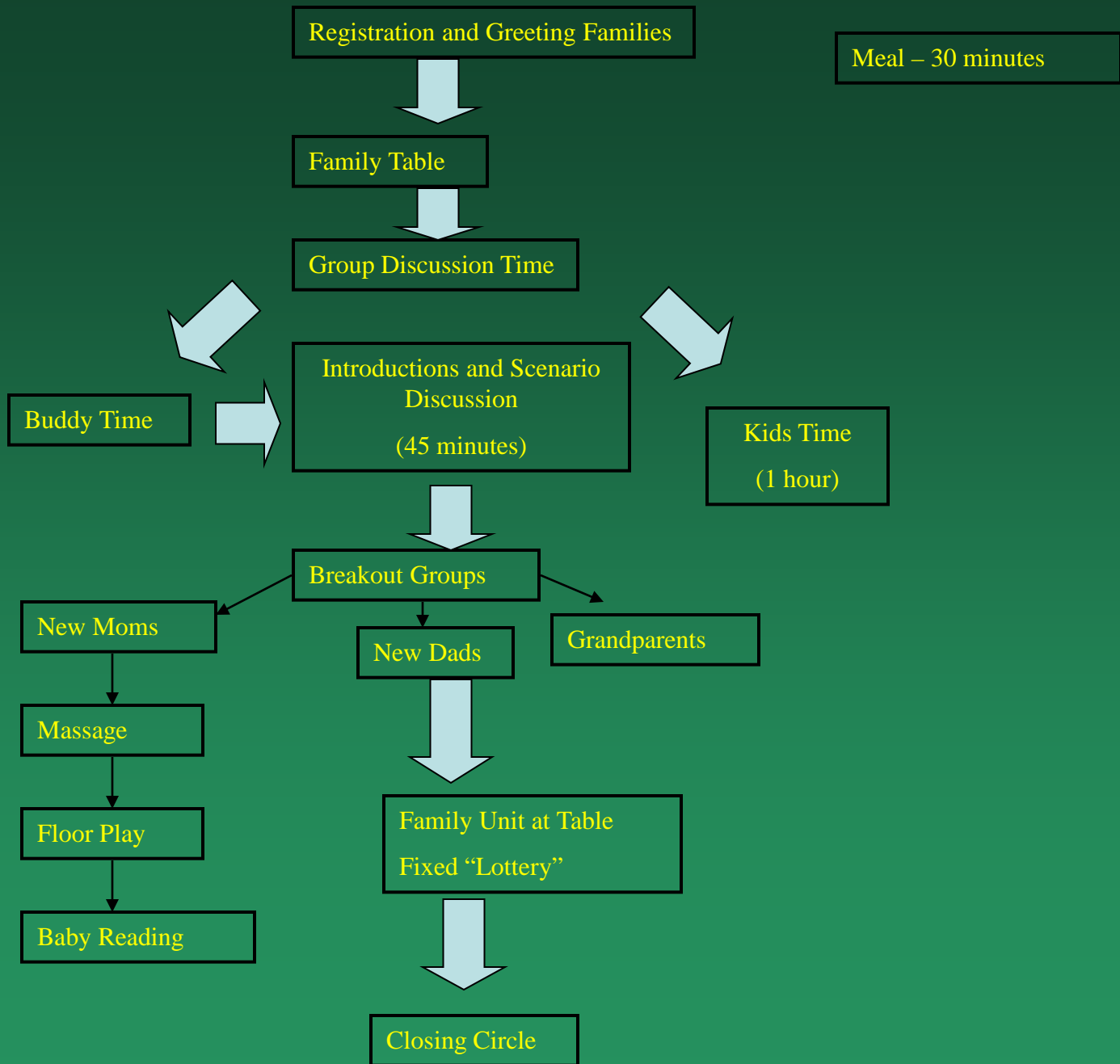
Includes Grandparents





Respects parents as primary prevention agents







Choices Activity





Music & FAST Song





Scenario Discussion Groups





New Parent's Nurturing Group





New Parent's Group with Infant Massage



Scientifically
proven to
support
healthy brain
development
in the infant



Infant Massage



Proven to
improve
infant mental
health and
strengthen
parent/child
bond



Floor Play for babies 1-2 yrs.





Dialogical reading for babies 2-3 yrs.





Grandmothers/mentors support group





Fathers' Support Group





Group Meal





Family Lottery





Rain & Closing Circle





50% Consumer & 50% Professionals

- Peer Teen Mother of Infant
- Grandmother of a Teen Mother
- Young Father of an Infant
- Father Specialist
- Occupational Therapists (Instructs infant massage)
- Social Worker Therapist
- Public Health Nurse (Recruitment & Infant Care)



Outcomes

Increase

- Healthy Child Development
- Healthy Parent-Mother Communication
- Social Networks both formal and informal

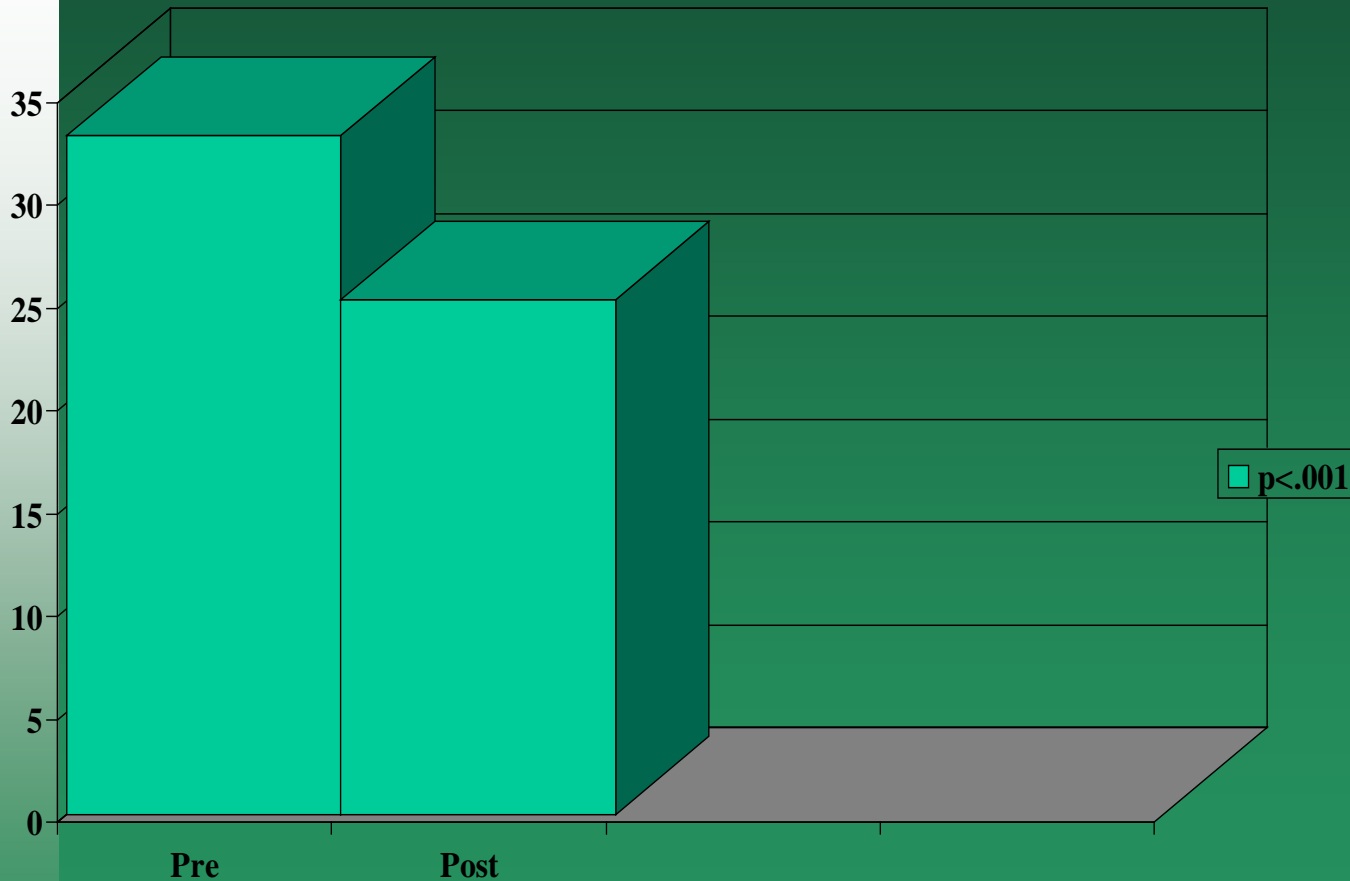
Reduce

- Child Abuse and Neglect
- Stress/conflict
- Adolescent school drop-out



Teen Mothers' Report on Changes in Parental Distress

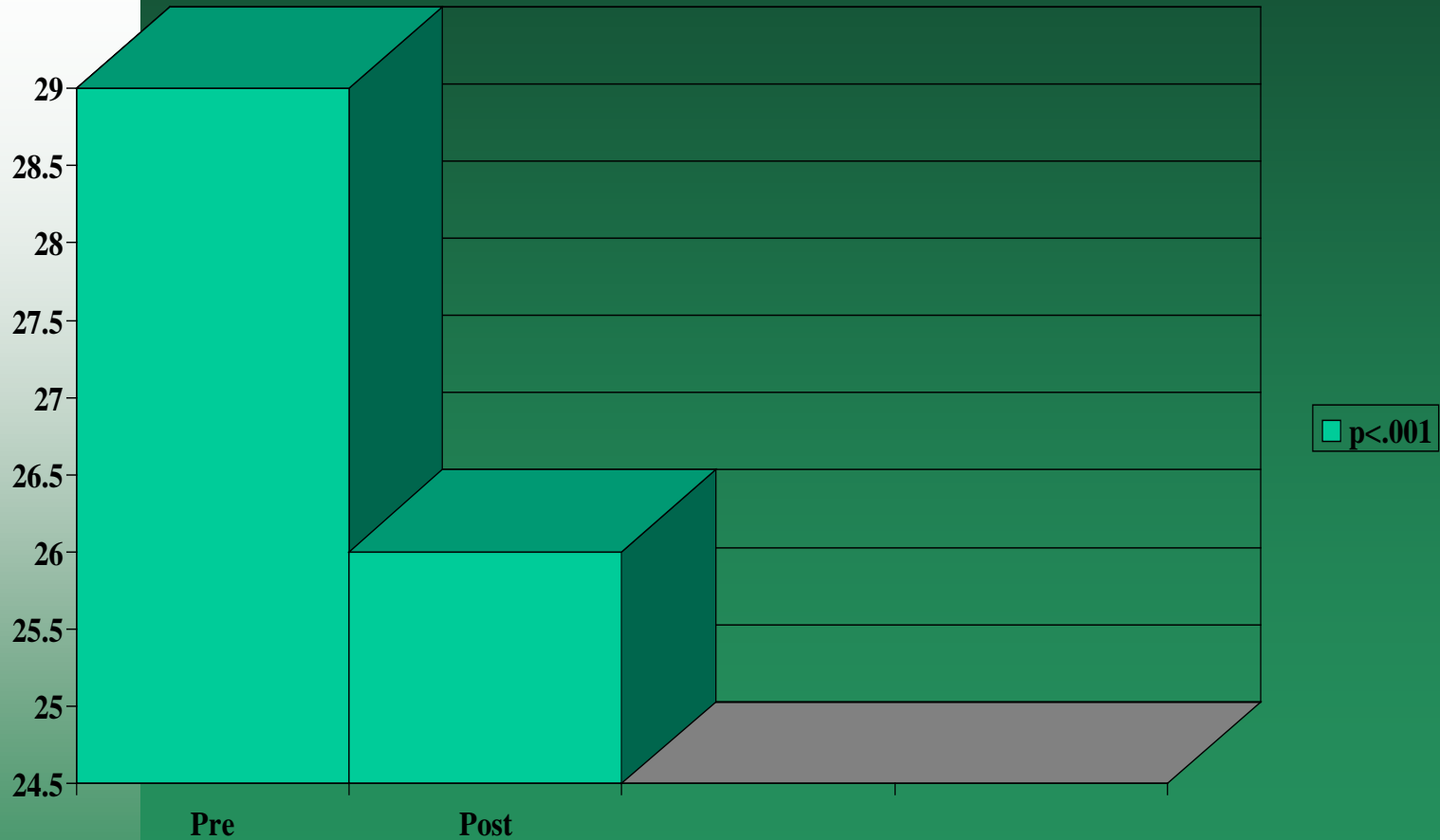
Missouri Initiative





Grandmothers' Reports on Changes of Teen Mothers' Moodiness (SIPA)

Missouri Initiative





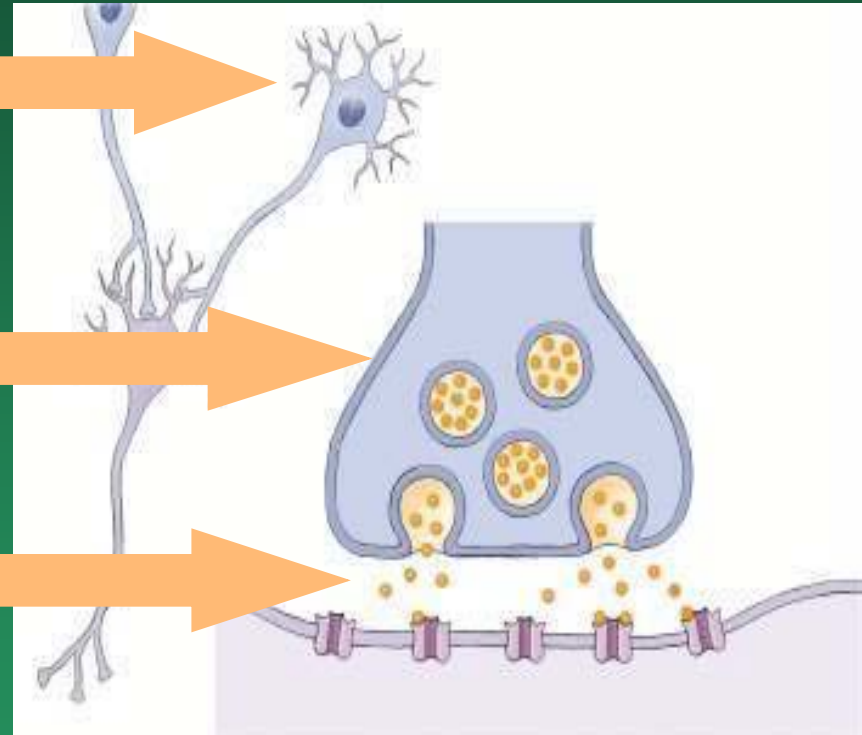
Baby FAST Builds Support





Basic Brain Functioning

- Dendrites
- Close up of dendrite
- Neuro-transmitters
(such as serotonin)





Increased Serotonin

- promotes feelings of well being
- helps us sleep
- elevates the pain threshold
- helps protect the heart



Decreased Serotonin

- Irritability
- Violence and aggression
- Depression
- Feelings of hopelessness



What Lowers Serotonin?

- TV viewing
- High stress
- Low social status
- Puberty
- Fighting/violence

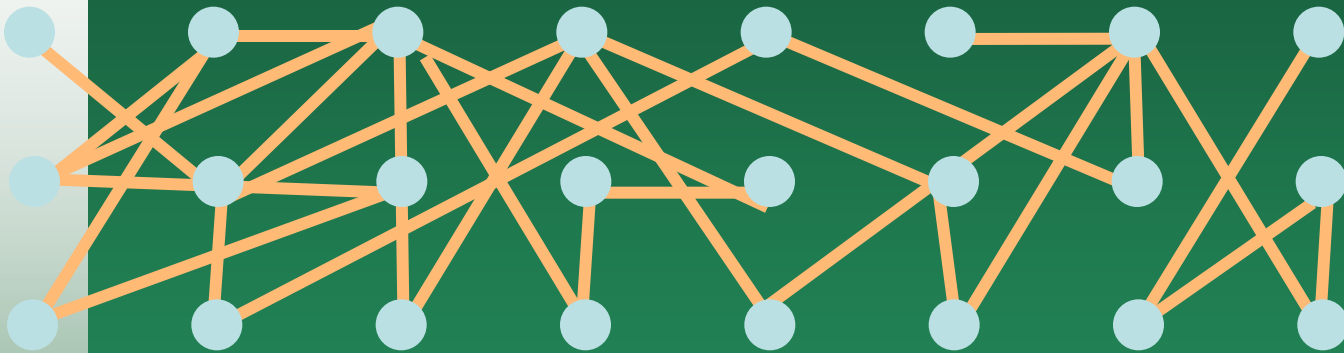


What Raises Serotonin?

- Positive touch
- Social status
- Social connections
- Certain foods

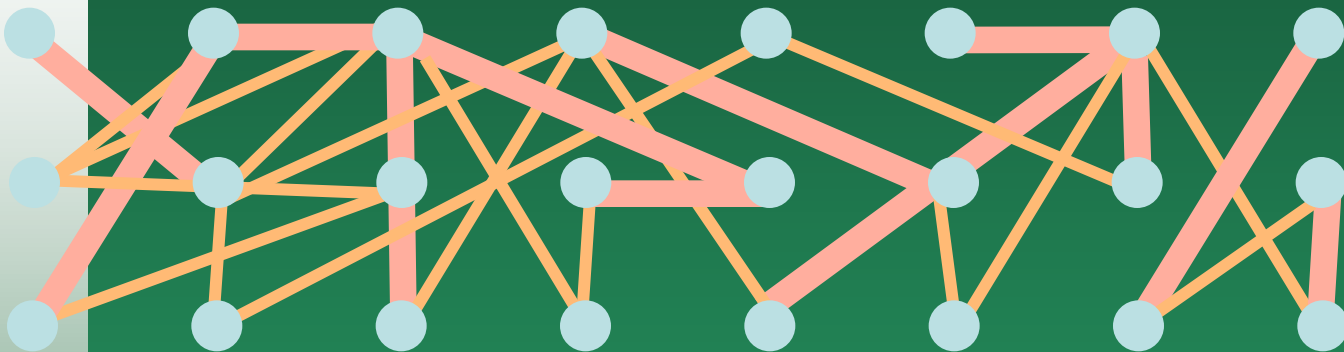


Neural Pruning in Brain Types



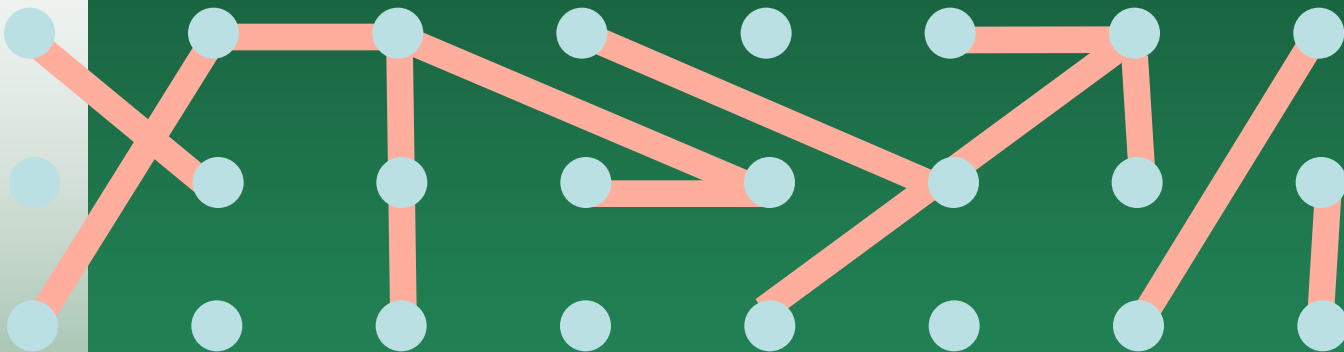


Neural Pruning in Brain Types





Neural Pruning in Brain Types





Ages of Neurological Pruning

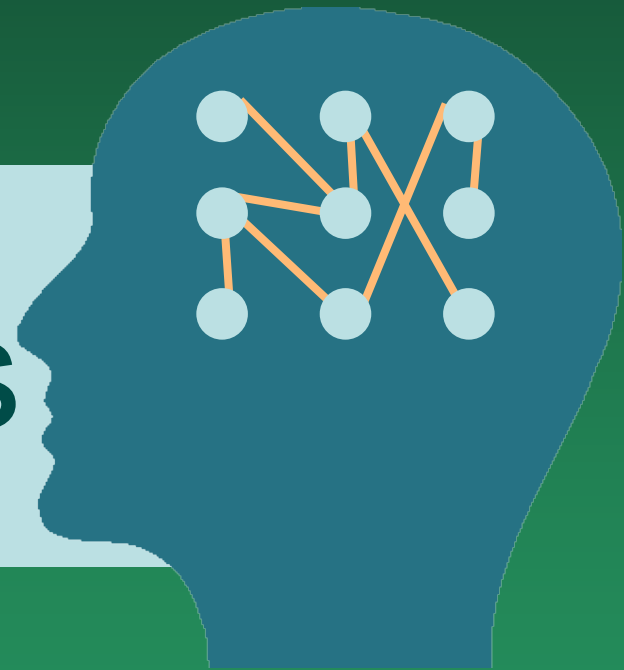
3 years





Ages of Neurological Pruning

15 years





Lessons of New Brain Research

- Need for early intervention
- Strengthen neuro-transmitters through positive touch and social interaction
- Repetition of positive behaviors to prevent pruning



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RECRUITMENT



TARGETED

Teacher



At-risk Check list



Call by School



Home Visit

UNIVERSAL

One Grade Level



Entire Class



Universal Invitation



- Flier/Invitations for Open House
- Phone Calls to Follow Up
- Host Open House: Complete
- Interest Survey
- Follow Up & Schedule Home Visit
- Conduct Home Visits

Recruitment Techniques

- 1. Introductions**
- 2. Hang Out**
- 3. Listen**
- 4. Word Match**
- 5. Find a shared perceived Connection**
- 6. Avoid Disagreement**
- 7. Not a medical model**
- 8. Try it one Time**

Review Exercise

What could have been done differently?

1. Introductions

What could have been done differently?

2. Hang Out

What could have been done differently?

3. Listen

What could have been done differently?

4. Word Match

What could have been done differently?

**5. Find a shared perceived
Connection**

**What could have been done
differently?**

6. Avoid Disagreement

**What could have been done
differently?**

7. Not a medical model

**What could have been done
differently?**

8. Try it one Time

**What could have been done
differently?**

RECRUITMENT

[20 minute discussion: 10:30 – 10:50]

How to get compliance with bad news. Based on cancer research; video taped doctors giving bad news to patients. Analyzed transcripts and found what worked to break denial.

1. Listen. Ask parent about child. Listen to their report; very focused, listening for parent to describe in their words things that match the technical term. Look for parent words that match school's terminology.

Give example:

2. Word match; pair parent's phrasing to teacher's phrasing in the report. Use parent's exact words.

Give example:

Ask: What do you (participants) think parents feel when their words are used? (Heard, validated, understood, etc)

Best interviewers are perceived as warm, genuine and authentic. People who can do this, make connections.

3. Find a shared perceived problem. A shared perceived problem is a shared understanding, an agreement and begins compliance. this happens when a connection is made between technical words and parent words.

Give example:

Summarize:

1. Listen
2. Word Match
3. Find a shared perceived connection

Parents have to be informed of all concerns on list. Need parent release of information.

Explain that recruitment is a two step process, beginning with the school. The school identifies the children; someone on the team (usually the parent liaison/or mental health team member) recruits the parents into FAST only after a release of information has been obtained by the school. Although variations of this process occur in different communities, it is important to teach recruiting in this way and let communities adapt to fit their needs and team talents. The school is the identifying partner and is the one who makes first contact with the parents.

Role Play/Recruitment Exercise

Ask team members to divide into multiples of two people. (Find a partner)
Try to have each school partner be an interviewer for this exercise. Pair each school team member with a mental health, substance abuse specialist, or parent team member.

First Exercise: School's Initial Contact (Parent notification) First Home Visit
[10 minute role play;5 minute processing: 10:50 – 11:05]
(First Step)

One person is a parent and one person is a school person (this should be a real school team member). Set the scene. The school team member is to make a face to face visit with parent to discuss the teacher's observations. Ask the school role to leave the room with one of the trainers. That trainer will then distribute Behavior Checklist with items marked by the teacher. Review the list, repeat the scenario explaining the recruitment process. The school team member needs to get a release of information signed that will allow a FAST team member to make a home visit for recruiting to the program.

Meanwhile, another trainer will use the Exercise #1 sheet and set the scene. A school team member will make a face to face visit with a parent to discuss their child's behavior. They are not selling the parent on the program, but need to get a release of information to allow someone else on the team to visit the parent and talk about the program. Read the instructions, then discuss. Allow up to 15 minutes for team members to reach exercise goal. Allow 5 minutes feedback time between the dyad to discuss what went well and how it felt in these roles.

To training participants: Discuss how recruitment must be non-hierarchical. Hang out as a human being. Find a common interest. Do not start with topic, be authentic. Use this time with the school partners to clarify questions about the initial contact and review their role in recruitment. Approach by introducing