



# Evaluation of the Rupani Foundation's Informed Parents Program

Authors \_\_\_\_\_

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# Executive Summary

*Parenting behaviors have been shown to impact child development, and there is evidence that parenting programs can improve child outcomes.*

- Goodson, 2014

There is a variety of parenting programs available. However, the underlying theory of change for many programs is the same--to change parental behavior in a way that supports optimal child development. We evaluated The Rupani Foundation's Informed Parents (IP) program to determine if the program changed parental behavior and relatedly could impact child development outcomes. The IP program is an approximately 2.5 year program that includes parent-child interactive, educational meetings as well as parent-only informative monthly meetings. The theory of change for the IP program is if parents are given the information and opportunity to learn and model important parenting behaviors, they will continue to do those behaviors at home, which will impact child development.

We conducted a retrospective evaluation utilizing qualitative and quantitative data previously collected by The Rupani Foundation. **We asked three research questions:**

1. *Is the Informed Parents program curriculum based on well accepted behavioral change theory and grounded in evidence?*
2. *Is the Informed Parents program implemented and delivered as intended?*
3. *Is there a change in parenting behaviors that can be attributed to the Informed Parents program?*

We used a participatory evaluation approach and employed both qualitative and quantitative methods to answer these questions. We reviewed the curriculum and applied evidence-based behavioral change theory to determine whether the IP program met accepted standards, reviewed survey data and parent and teacher assessment data to determine fidelity of implementation, and conducted statistical analysis of pre/post program survey data to measure program impact.

**Overall, we found that the IP program is an evidence-based curriculum that had an impact in changing parental behavior to support early childhood development, which could potentially impact child development outcomes.**

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## Background

**The brain is responsible for every aspect of human life—physical, cognitive, social, and emotional—and decades of research from a variety of disciplines demonstrate that the first 3 years of life are the most critical and vulnerable period in human development** (Moore et. al, 2016).

There are many positive and negative experiences that can shape brain development. However, the interaction and attachment between caregiver and child is one of the most important. Therefore, training and supporting parents to optimize parent-child interactions is recognized as an important path to supporting healthy brain development in young children.

Conversely, harmful parenting behaviors can have a negative impact on child development resulting in difficulty maintaining healthy relationships, poor resiliency, maladaptive social behaviors, and low/delayed cognitive development (Black et. al, 2017). Overwhelming research on the effects of poverty, access to quality childcare, parental educational level, and parental mental health demonstrate that external factors can impact parental capacity to engage in positive parenting. (Hall et. al, 1985) Parenting programs can have a significant impact by increasing support and capacity of parents and caregivers to engage in positive parenting behaviors, which can reduce or eliminate negative parenting behaviors.

## Program Overview

The Informed Parents (IP) program is a parenting program designed to serve multi-ethnic families in Harris County, Texas and Fort Bend County, Texas. The program is delivered in apartment complexes by the staff of the Rupani Foundation, and had 219 families enrolled in 2020. The Rupani Foundation is a non-profit, community-based organization that was established in 2016 to improve the lives of marginalized populations by sharing knowledge and supporting skill-building of early childhood development practices.

The Informed Parents program furthers the mission of the Rupani Foundation by offering a group-based parenting program that targets refugees, immigrants, and low-income families in the convenience of their apartment complex. The IP program recruits pregnant mothers and enrolls children from birth to age 3, and it consists of monthly parent-only sessions and weekly parent-child interactive sessions. In addition to the sessions, parents receive written materials and videos to watch at home via the program's YouTube station.

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# 219

Families enrolled  
in 2020

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## Methodology and Evaluation Questions

We use a participatory evaluation approach to evaluate the program. Participatory evaluation is defined as, “evaluation in which trained evaluators work in partnership with program stakeholders to produce evaluative knowledge” (Cousins & Chouinard, 2012). This evaluative knowledge is generated from a systematic, methodological inquiry that yields information on a program’s worth, merit, impact, and significance. The participatory lens considers the desired goals or outcomes of the program stakeholders, as well as their value judgements. As such, our evaluation is designed to assess the underlying theory of change of the Informed Parents program. We propose the following research question: if the IP program provides parents with evidence-based information and they are given an opportunity to learn and model important parenting behaviors, will parents continue positive parenting behaviors at home, and potentially impact child developmental outcomes?

To answer this question, we consider the following sub-questions:

1. Is the Informed Parents program curriculum based on well accepted behavioral change theory and grounded in evidence?
2. Is the Informed Parents program implemented and delivered as intended?
3. Is there a change in parenting behaviors that can be attributed to the Informed Parents program?

We use a mixed-methods methodological approach to answer the evaluation questions. For the qualitative portion, we conducted a document review and analysis of the curriculum, teacher evaluations, and child assessments. In addition, we reviewed several video recordings of classes and parent testimonials about the program. Due to the small sample size of responses for the program surveys, we conducted a descriptive statistical analysis to compare the pre and post survey data collected for a sample of participants who successfully completed the program.



# RESEARCH QUESTION 1:

***Is the Informed Parents program curriculum based on well accepted behavioral change theory and grounded in evidence?***

## **Curriculum Objectives and Content**

Parenting programs based on social learning theory have been recognized as the “gold standard” for improving child health outcomes (Sanders, 2014). Social learning theorists believe that behavior is learned from the environment through observational learning. There are several established evidence-based components of parenting curricula that align with social learning theory and incorporate important behavioral, developmental and cognitive principles (Sanders, 2014). Evidence based parenting programs often include teaching parents the importance of language, attachment, reducing harmful parenting behaviors, and increasing positive parenting behaviors through videos, observational recordings, or group/play time (National Center for Parent, Family and Community Engagement, 2015).

Our review of the Rupani Foundation’s Informed Parents (IP) program examines whether the content is in line with the established social learning theory and behavioral, developmental and cognitive principles. The stated goal of the IP program is to support the social/emotional, physical, cognitive and language development of infants and toddlers.

**According to the IP program curriculum materials, the learning objectives for the children participants are:**

- **Social-Emotional Development:** To learn about self and others - trusts familiar, caring adults, regulates own behavior, plays with other children, learns to be a member of a group, and uses personal care skills.
- **Physical Development:** To learn about moving - demonstrates basic gross motor skills, demonstrates basic fine motor skills.
- **Cognitive Development:** To learn about the world - sustains attention, understands how objects can be used, shows a beginning understanding of cause and effect, shows a beginning understanding that things can be grouped, uses problem solving strategies, engages in pretend play.
- **Language Development:** To learn about communicating - develops receptive language, develops expressive language, participates in conversations, understands and uses words, enjoys books and being read to, shows an awareness of pictures and print, experiments with drawing and writing.

**The goals of the IP program for parents and caretakers are:**

- Mobilize all caretakers to become active agents of change in the child's holistic development.
- Provide timely information about holistic child development to parents to become informed as the child's first teacher.
- Create a safe and positive parenting environment at home.
- Alleviate stress from parenting and promote a peaceful environment.
- Engage parents in regular literary activities with their children.
- Identify critical areas of needs through regular assessments and ongoing screening.

The IP program provides learning and educational information to parents using a curriculum developed by the Rupani Foundation. The theory of change for the IP program is if parents are given the information and opportunity to learn and model important parenting behaviors, they will continue to do those behaviors at home, which will impact child development. Thus, the primary focus is on parent-child interaction. The facilitator hosts weekly parent-child group meetings with infants and toddlers, which gives parents an opportunity to see positive parenting behaviors and positive discipline modeled by facilitators. The facilitators use the Parents Interacting with Infants (PIWI) approach to guide parent child interactions and child socializations during group time. The PIWI approach is a well-established program endorsed by the Administration of Children and Families. Facilitators also conduct home visits for the first six months of the child's life to

train mothers and family members on monthly developmental milestones. In addition, parents are given books, toys, learning materials and handouts containing developmental information and suggested activities for parents to create a stimulating environment at home through monthly session.

The IP program integrates content through its program, designed learning objectives, and activities to match the developmental stage of the child. The curriculum is broken into modules, which cover social and emotional development through caregiver-child interactions.

Developmental milestones are a core component of the IP curriculum. The Rupani Foundation has a rubric that is divided into developmental stages from birth to 36 months. The rubric provides a list of activities and behaviors a parent should expect for language, intellectual, social and motor development of their child. For example, a recommended activity for fourteen to twenty-four month old children is for the parent to read simple stories to their child and encourage the child to imitate sounds. The handouts for this development period advise parents to look for certain child behavior such as “use words and gestures to express needs and wants”, “take things apart and put them together again”, enjoy and respond to affection, pick up objects, run, climb and walk up and down stairs”. The IP program is designed to support the development of each language, intellectual, social and motor milestone by structuring the group parent-child sessions to focus on the developmental stage of the child.

The IP program incorporates the following child-centered learning categories in its curriculum:

- **Artistic and music development**
  - Drawing/coloring
  - Painting
  - Craft (playdoh)
  - Origami work
  - Collage work
  - Music sounds
  - Dance
  - Poems
- **Language and literacy development**
  - Listening
  - Speaking-serve and return interactions
  - Reading
  - Writing
- **Early exploration (concept of Science and Math)**
  - Math (numeracy, shapes, size)
  - Dimensions (length and weight)
  - Ordering
  - Pattern
  - Numbers counting
  - Quantity
  - Sequences
  - Early Exploration Science
- **Child care and Social development**
  - Personal and social development
  - Knowledge and understanding of environment
  - Creative development
- **Brain development activities (organized by developmental age)**



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There are many opportunities for parents and children to learn each child-centered learning objective. The parent-child group sessions cover one or more of the core categories listed above, and parents have an opportunity to see each interaction modeled as well as engage with their child. Following these sessions, parents receive handouts containing an explanation of the core content.

## Curriculum Analysis Findings

Our document review of all curriculum materials includes a review of handouts, program guide, and class videos. We found that the program is grounded in social learning theory and contains the evidence-based content necessary to support parents in optimizing brain development, as well as additional elements to prepare young children for school.





## RESEARCH QUESTION 2:

*Is the Informed Parents program implemented and delivered as intended?*

### Fidelity of Implementation Evaluation

#### Background

Fidelity of implementation is the degree to which an intervention is being delivered as designed or intended (Breitenstein et al., 2010). Program implementation and fidelity to the original model or design can potentially influence whether the program has an impact. For instance, research shows that fidelity of implementation is important for achieving positive outcomes in parenting programs (Durlak & DuPre, 2008; Halle, Metz, & Martinez-Beck, 2013). Moreover, lack of fidelity in program implementation can undermine potential program benefits for children and their families (Hasson, 2010; Fixsen et al., 2013).

Numerous measures for evaluation of fidelity of implementation exist. These measures include acceptability, adherence, competence, feasibility, quality of delivery, and penetration (Breitenstein et al., 2010; Olofsson et al., 2016; Proctor et al., 2010). The Rupani Foundation used assessments

to measure adherence to their quality of delivery protocols. Adherence is the degree of alignment between class delivery and program protocol (Breitenstein et al., 2010). Research demonstrates a relationship between group leader adherence and parent attendance and engagement (Hill & Owens, 2013). Additionally, adherence may improve over time until it eventually levels out, which could be due to numerous factors such as practitioner or parent comfort and group dynamics (Breitenstein et al., 2010). Quality of delivery is an important measure for fidelity of implementation. Quality of delivery refers to the manner in which a program is delivered. As indicators of the quality of delivery measure, the Rupani Foundation measured adherence to the curriculum, content delivery, and classroom environment. We were also able to evaluate facilitator competence from provided documents.

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## Adherence to curriculum

The IP program has facilitator guides to foster consistency in the parent-child and parent-only classes, which contain activities to promote child socialization and encourage parent-child interactions.

Facilitators (also called teachers) perform self-assessments after every class. This assessment includes length of class time, curriculum covered, activities performed, and the behavior of the children. In conducting qualitative analysis of the teacher assessments to measure adherence to the curriculum guide, we found that several themes emerged. The classes appeared to be grouped into two types of classes: infants and toddlers. For infants, the primary focus was on developmental milestones and parent-infant interactions, such as infant massage. Meanwhile, the toddler classes contain school-readiness content such as letters, colors and shapes, and thematic classes. The classes started with calendar time, then a song related to the letter, color or topic of the day. Then a book would be read to emphasize the letter or topic of the day, and the facilitator would either integrate sounds, shapes or colors along with the “letter of the day”. Consistent learning categories were reading, singing, motor skills (fine or gross) and some form of art (painting, crafts, drawing, or coloring). Another category of classes taught were thematic classes. In thematic classes, teachers would select weather, fireman, doctor, senses, etc. and have various

associated activities, such as board games, dress up, puzzles and kitchen sets. Classes were administered in a particular order to build upon prior lessons or class topics. Overall, the IP curriculum includes 62 thematic classes that are delivered over a two and a half to three year period of time. The program is designed to enroll children in infancy and then children graduate at approximately 3 years old. Additionally, participant attendance is recorded in an attendance register.

Although the ages of the children in attendance was not noted on the teacher assessment form, it seemed that the children in the thematic classes may be older than the children in the fundamental basic content. A challenge for evaluating adherence to the curriculum for these classes was the open-ended nature of the teacher assessment form, which varied based on what each facilitator noted was important to them for the classes. Therefore, it is difficult to conclusively determine whether all facilitators adhered to the curriculum based on information provided in the teacher assessment form.

Another component of the teacher assessment was describing behavior problems. Most facilitators left those questions blank or noted that there were no behavior problems. However, two facilitators noted child behavior challenges in the class and how they modeled positive discipline.

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*“I did experience a behavior problem; one child was running in the class. I used positive correction and said, ‘We walk inside the class, but when we get outside you can run.’”*

- Teacher A

*“I did experience a problem. One child was pushing another child. I informed the child that they have to be kind to each other. They have to respect each other.”*

- Teacher B



## Content delivery

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The Rupani Foundation created a classroom monitoring and support tool that measures how the facilitator delivers the content, interaction with parents, and delivery of the core curriculum. The ratings ranged from Not Observed (0), Yet to Progress (1), Started progress (2), Progressing (3), and Competent (4). On a monthly basis, the facilitators were observed by the program director and rated using this scale to measure adherence. There is also a section for the observer to make additional comments/suggestions for the facilitator or observations about the parents.

We examined assessments conducted in 2017-2018. Overwhelmingly, facilitators were rated a 3 on each measure of interaction with parents, content delivery, and delivery of core curriculum. A few exceptions were a Not Observed rating for the calendar activity and alphabet sounds for three classes, and a 2 rating for children using indoor voice, participating actively, and not working with materials in five classes. The 2 ratings were for three classes held at the Westward location, one class at Atwell, and one class at Stancliff. The only 4's were observed at the Bellaire location—one class for the calendar activity and alphabet sounds, and one class for almost every category.

## Positive feedback from supervisor on content delivery

*“Day by day kids are becoming more confident and social. They are involved in all activities. Teacher is doing really good. Good job!”—Stancliff*

*“New teacher did very well.”—Atwell*

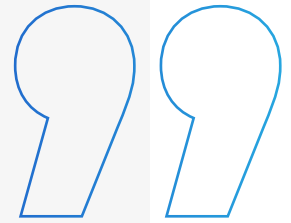
*“The mothers who never attended school are learning with their children”—Westward*

*“The kids are very energetic and learning very fast. Very happy to see them growing and learning”—Atwell*

*“Every activity has been designed according to the age, and very relevant for this group.”—Bellaire*

*“All kids were involved in activities. It was an amazing thing to see these kids learning and growing with the program”—Stancliff*

*“Mothers are learning the alphabet and they are helping with all gross motor activities, which is very encouraging”—Atwell*



## Opportunities for facilitator improvement

*“Material manipulation should be properly monitored. Material work policy should be one at a time so that children learn the way of taking care of materials”*

*“Mothers need more encouragement to help their children with activities”*

*“Some mothers are not facilitating their children with material manipulation. I would recommend teachers involve mothers more positively”*

*“Some mothers are hesitant to take part in activities because they did not go to school”*



***The data provided from the classroom monitoring tool used by the program supervisor to observe facilitator suggests that facilitators adhered to curriculum and delivered content as originally intended.***

Parent participation or engagement is the level of participation in the group sessions (Breitenstein et al., 2010). The vast majority of class sessions achieved a rating of 3 for parent participation in classroom activities. Many parenting programs experience challenges in maintaining parental engagement throughout the program (Mytton et al., 2014). To achieve positive outcomes, parents must actively engage in the program, not just attend classes (Davis, McDonald, & Axford, 2012).

Based on the documentation provided, the IP program maintains parental engagement throughout its classes. An opportunity to strengthen data collected is to document parental attendance. Attendance records which parents attend each session of the program. Attendance is very important, because if parents do not attend sessions it can be a barrier to program implementation (Olofsson, Skoog, & Tillfors, 2016). The overall program attrition rate for children enrolled is 22.3%, but it is unclear how that relates to parent attendance/participation.

## **Classroom Environment**

The Rupani Foundation used weekly checklists for facilitators to complete that measured the cleanliness of the environment, and availability of learning materials such as books and art supplies. The facilitators rated each item as either “Yes, meets pre-set standards” or “No, does not meet pre-set standard”. Additionally, a monthly form was used to measure for cleanliness, and this form included a checklist for whether the facilitator had conducted mother sessions, quarterly teachers/mentor workshops, and quarterly parent workshop. Assessments were conducted at Bellaire, Winding Trails and Stancliff locations during 2017-2018, and every assessment was marked with either a YES or n/a. Therefore, facilitators maintained fidelity to the pre-set standards of cleanliness of the environment and availability of learning materials.

## **Facilitator Competence**

The IP program includes several opportunities of direct observation of facilitator to measure facilitator competence. Competence is defined as the facilitation, capability in delivery, and procedural skills of practitioners within the program. Prior research on similar parenting programs, demonstrated positive correlations between facilitator’s competence and parent satisfaction. Furthermore, competence levels are usually relatively consistent throughout programs (Breitenstein et al. 2010).

Most of the weekly and monthly observer checklists included a space for the observer to provide feedback to the facilitator about their performance. All comments were positive about facilitator performance. Therefore, we conclude facilitators are competent to delivery IP program.



## RESEARCH QUESTION 3:

*Is there a change in parenting behaviors that can be attributed to the Informed Parents program?*

The Rupani Foundation created a baseline and exit surveys to assess the impact of the IP program on parental behaviors. The subsequent sections provide analysis and visualization of the data collected through these surveys.

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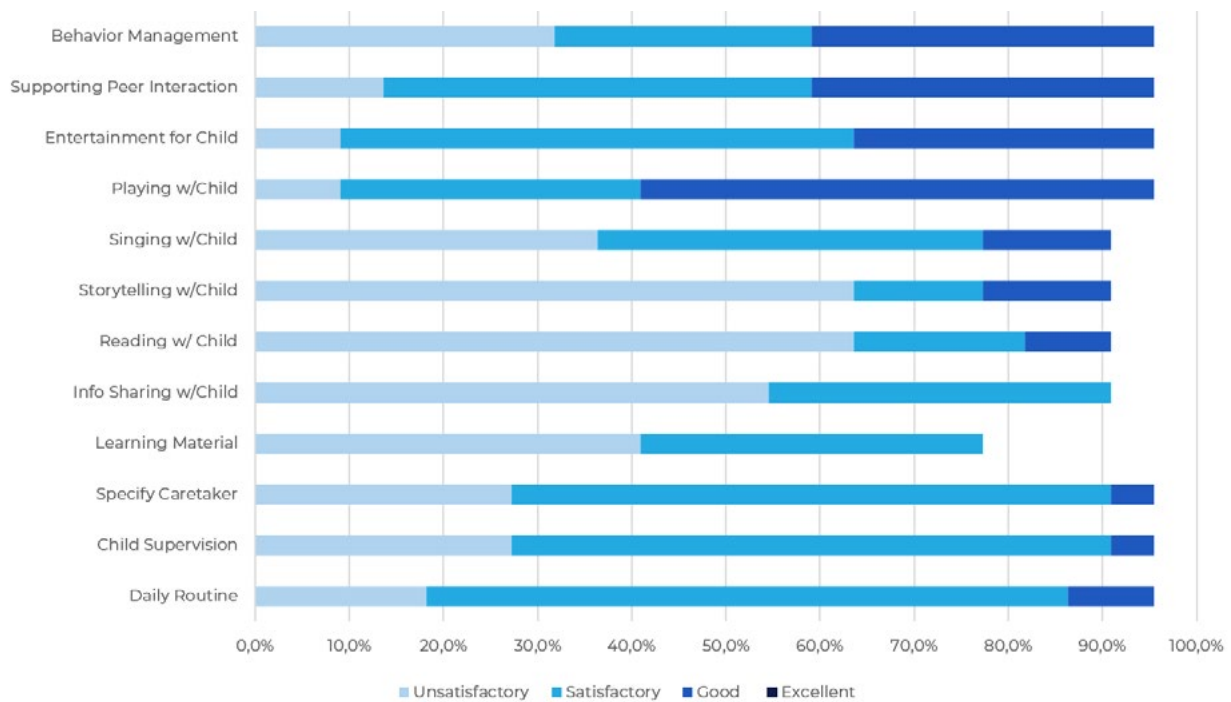
### Impact Analysis of Informed Parents Program

At enrollment, every program participant completes a baseline survey that includes a self-measurement rating for various early childhood development (ECD) practices including behavior management, supporting peer interaction, entertainment for child, playing with child, singing with child, storytelling with child, reading with child, information sharing with child, access to learning materials, specified caretaker,

child supervision and daily routine. This self-measurement enables the Rupani Foundation to understand the role of ECD practices within households at the start of the IP program. At the end of the IP program, which is typically when the child turns 3 years old, the Rupani Foundation conducts an exit survey to determine the impact of the IP program on these ECD practices.

Figure 1 presents the baseline data from the parental self-assessment of ECD practices, and Figure 2 presents the exit survey data once the child graduates from the program.

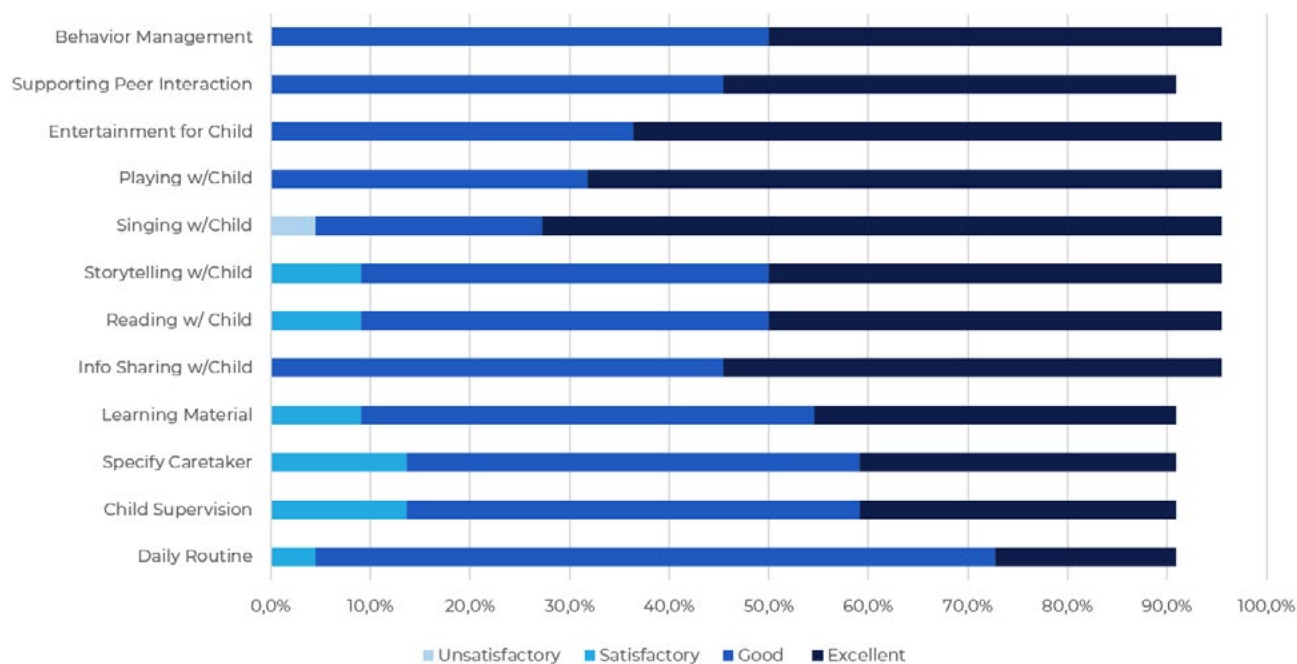
**Figure 1: Baseline survey self-measurement of ECD practices occurring within households**



Upon entry into the IP program, participants tend to view the ECD practices occurring within their own household as unsatisfactory or satisfactory. Storytelling w/ child (64 percent), reading w/ child (64 percent) and info sharing (55 percent) were the largest ECD behaviors that parents found to be unsatisfactory. On average, 76 percent of participants rated themselves in the range of unsatisfactory to satisfactory across the various ECD practices, 17 percent of the self-assessments were self-rated as good, and 0 percent were self-rated as excellent. The remaining 7 percent average response was attributed to nonresponse.



**Figure 2: Exit survey self-assessment of ECD practices occurring within households**



At the end of the IP program, exit-survey results display an improvement in the self-assessment of ECD practices occurring within the household. Across each practice, the self-assessments shifted to ratings of good and excellent. Notably, storytelling, reading and info sharing dramatically changed from most responses being unsatisfactory in the baseline survey to no

program participants rating those ECD behaviors as unsatisfactory in the exit survey. Across ECD practices, 47 percent of self-assessments were excellent and 41 percent were good, demonstrating an improvement from satisfactory in the baseline (5% exit-survey compared to 33% in baseline) to these higher ratings of good and excellent.

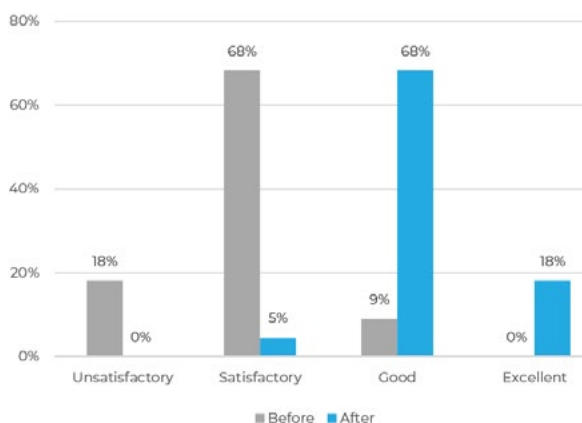
## Impact of IP Program on Individual ECD practices

The following figures illustrate the self-assessment of each ECD practice before and after the IP program. Notably, all ECD practices improved. In analyzing the impact of the IP program, the data is limited to participants who completed a baseline survey at the onset of the program and an exit survey. Out of a total of 72 families that have graduated from the program in 2020, 22 families completed both the baseline and exit surveys. Thus, this data set is comprised of the self-assessment data of 22 participants.

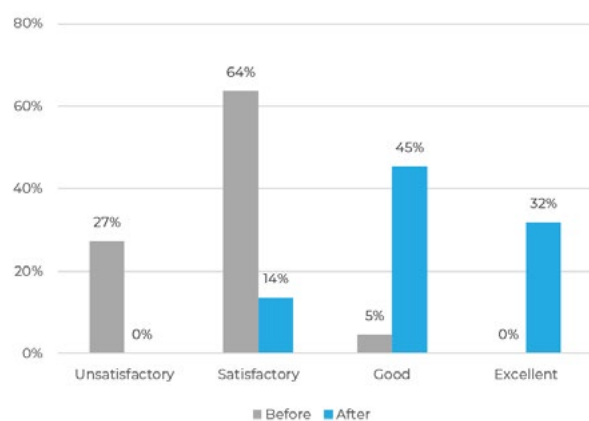
### Safety and Security Practices

The category of safety and security practices includes the ECD practices of daily routine and child supervision. Figure 3 shows a comparison of the baseline and exit survey responses for daily routine practices and Figure 4 shows comparisons for child supervision. In both figures, the percentage of parents who rated daily routine and child supervision as being unsatisfactory reduced to zero in the exit-survey and the percentage of parents who rated those aspects of parenting as excellent went from zero at baseline to 18% and 32% respectively in the exit survey.

**Figure 3: Daily Routine**



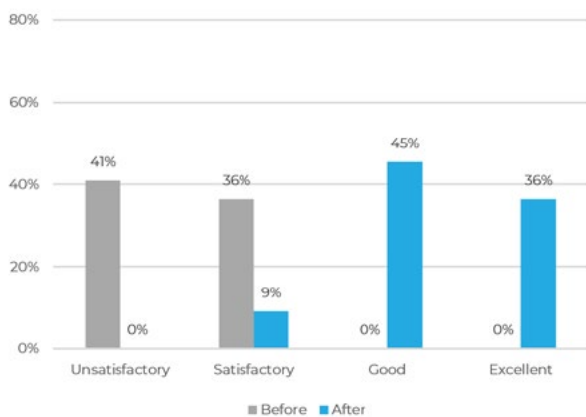
**Figure 4: Child Supervision**



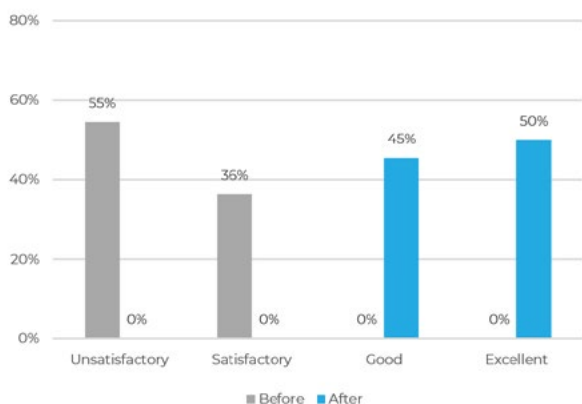
## Child Learning Opportunities

The category of child learning opportunities includes the ECD practices of having available learning materials, information sharing with child, and reading with child. Figures 5, 6 and 7 show the baseline and exit survey responses for parent self-assessment of these practices. For each of these, approximately 50% of parents were unsatisfied with at least one of these learning opportunities at baseline. However, by the end of the program 0% of parents were unsatisfied, and the majority of parents rated learning opportunities for their child as either good or excellent.

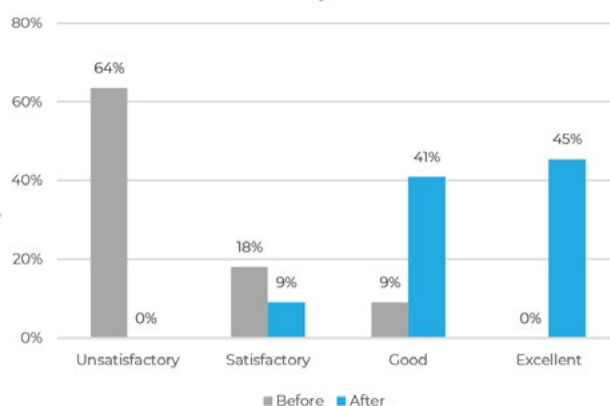
**Figure 5: Learning Materials**



**Figure 6: Info Sharing w/ Child**



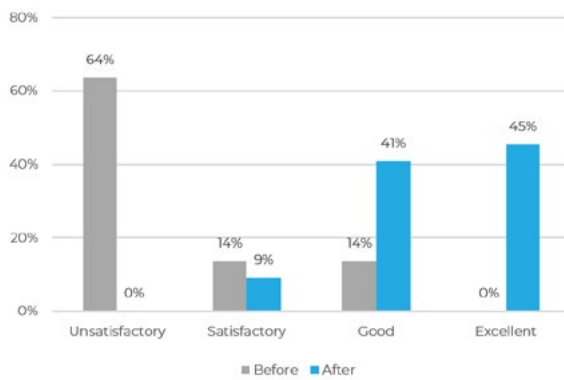
**Figure 7: Reading w/ Child**



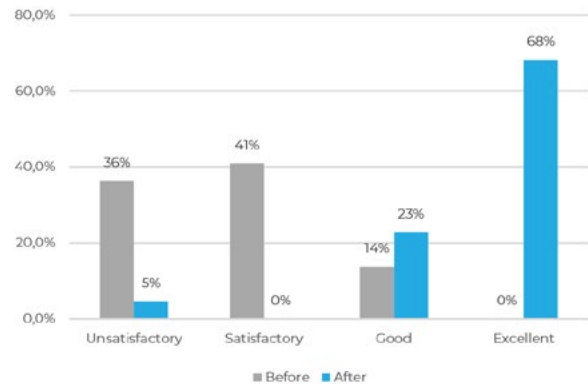
## Parent to Child Social Interactions

The category of parent to child social interaction includes the ECD practices of storytelling with child, singing with child, playing with child and entertainment for child. Figures 8, 9, 10 and 11 demonstrate a comparison of the baseline and exit survey responses for parent self-assessment of these practices. As depicted in the figures, ratings for all parent-social interactions improved from baseline to exit survey. Parent-child interactions have been shown to be critical for healthy brain development and an improvement in these practices could have a significant impact on child development and school readiness.

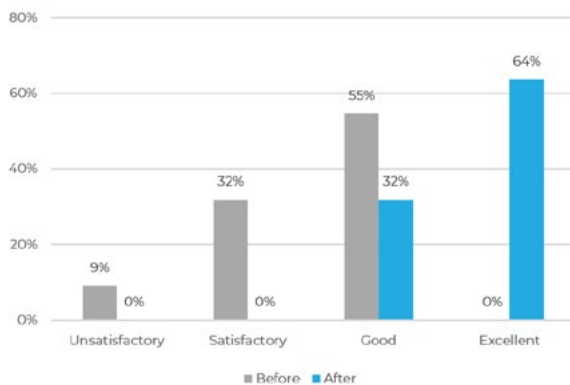
**Figure 8:**  
**Storytelling w/ Child**



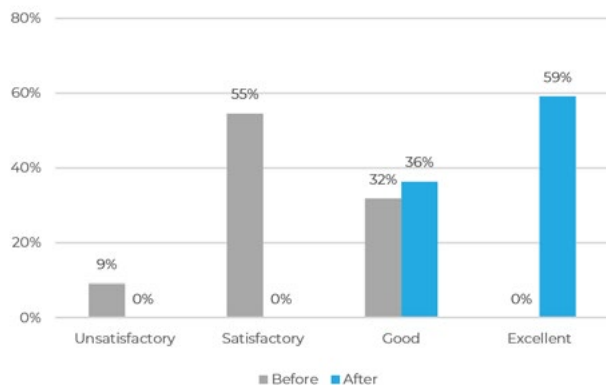
**Figure 9:**  
**Singing w/ Child**



**Figure 10:**  
**Playing w/ Child**



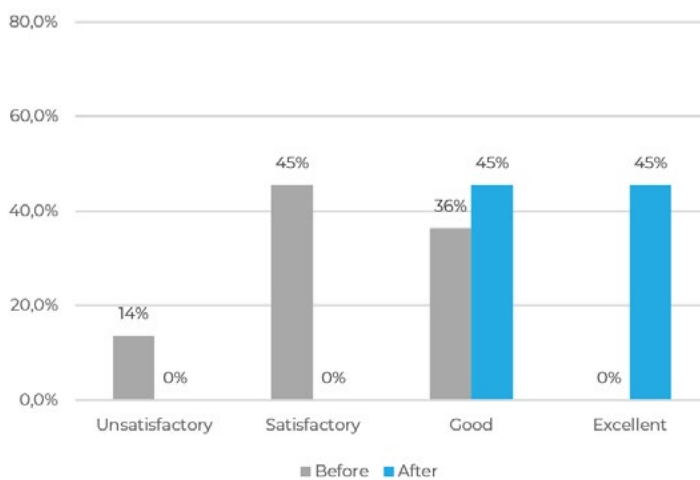
**Figure 11:**  
**Entertainment for Child**



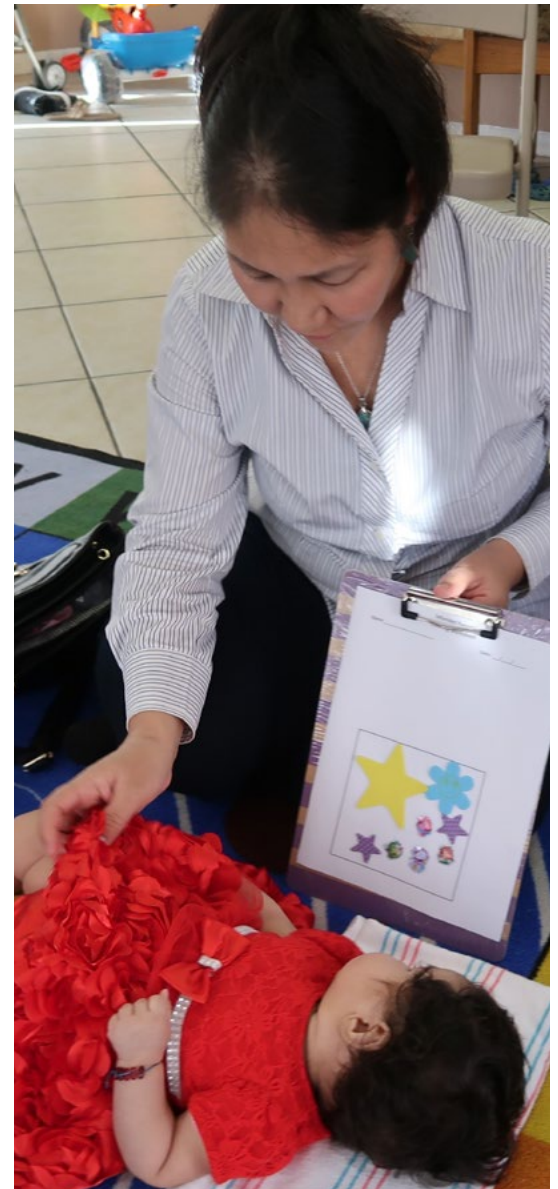
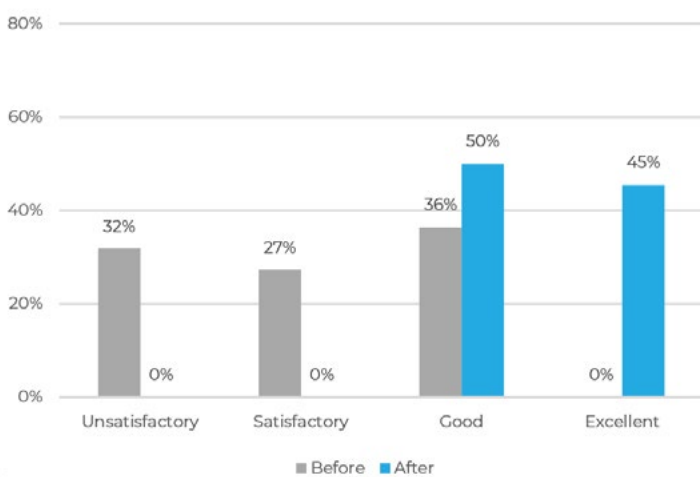
## Child Behavior and Socialization

The category of child behavior and socialization includes the ECD practices of supporting peer interaction and behavior management. Figures 12 and 13 show a comparison of the baseline and exit survey responses for parent self-assessment of these practices.

**Figure 12: Supporting Peer Interaction**



**Figure 13: Behavior Management**



Across the board, the comparison of the baseline and exit survey responses suggests that the IP program had an impact on measured ECD practices compared to baseline. Many of the assessed practices such as child routine, creating learning opportunities and storytelling/singing with child have demonstrated success in improving child outcomes and school readiness. Therefore, the IP program may have an impact on long-term child development and school readiness. As the program expands, we recommend collecting a larger sample of baseline and exit surveys in order to evaluate the statistical significance of the IP program, as well as revising tools to capture additional information on parenting behaviors and knowledge of ECD practices.

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## Impact of IP Program on Parental Knowledge

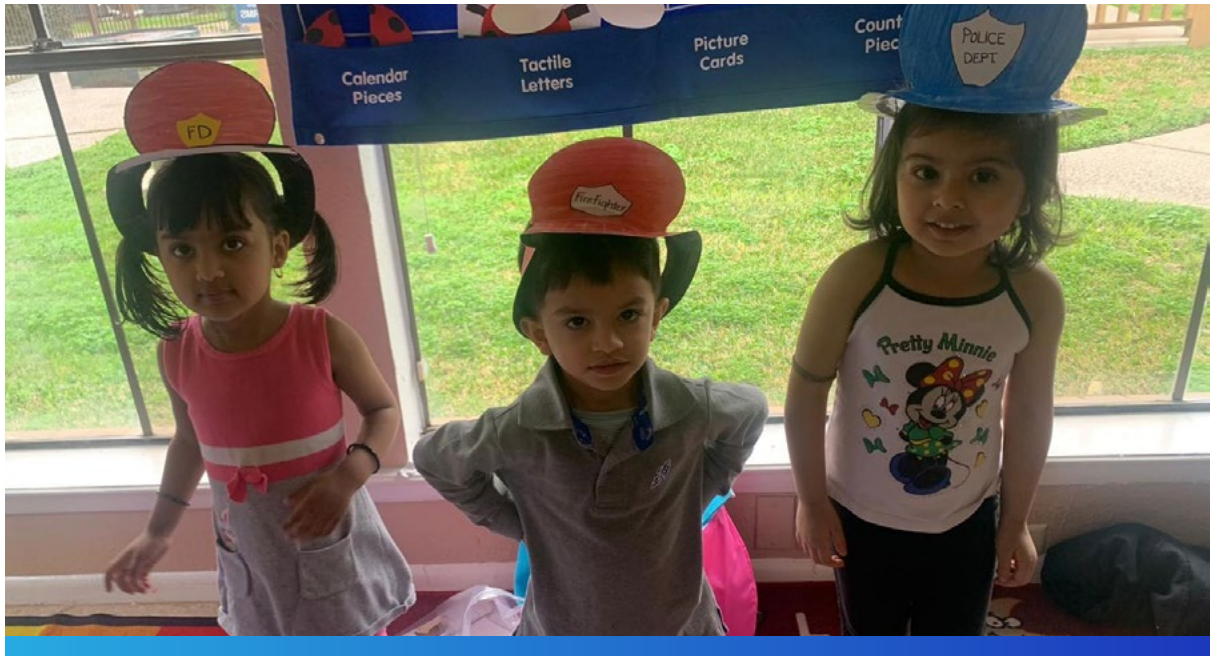
Several concepts measure aspects of the potential impact of the IP program on parents. Knowledge acquisition is the amount of information retained during program sessions (Garvey et al., 2006). The Rupani Foundation administered evaluation forms to parents after the monthly parent sessions to collect data on whether parents learned key concepts during the session. Questions on the assessment include “What is ECD?” “Why is ECD important scientifically?” “What do you know about holistic development?” “What is a developmental milestone?” and “Why are the first three years important for holistic development of child?” The responses to these questions serve the purpose of testing the understanding of the participating parents and collecting a qualitative measure of the teaching quality of the IP program. We performed qualitative analysis of survey responses to these questions and all parents could articulate a reasonable response to the aforementioned questions. The following

examples were collected from the parent assessment survey, and they show various responses to the question “Why are the first three years important for holistic development of child?”

***“Because all the developmental changes occur mostly in these three years”*** – Parent A

***“The early stage of the kids is very important for kids to learn and do activities so they can get many confidence”*** – Parent B

These survey responses indicate that parents understand basic concepts about the importance of ECD, but do not tell us whether the IP program contributed to that understanding or if mothers understood the importance prior to taking the parent session. Moving forward, it will be important to include an assessment of knowledge in the baseline survey so that the Rupani Foundation can measure the impact of the IP program on parental knowledge.



## Impact of IP Program on Child Development

Another method of evaluating whether the IP program led to parental behavior change is by measuring child development outcomes. The Rupani Foundation assessed developmental data on children participating in the program. The varying assessments cover an age range for the child or toddler, such as birth to 6 weeks, 5.5 months to 8 months, and 14 months to 24 months. Each developmental skill was rated on a 3 point scale, with 3 being “Mastered Skill” to 1 being “Emerging Skill” Collecting survey data at various stages of development allows the Rupani Foundation to understand the impact of the IP program on the development of an individual child.

Each survey evaluates developmental domains including language skills, cognitive skills, social skills, and motor skills. At younger ages, the assessment covers fewer skills within the developmental domain. The developmental domains correspond to what is expected of children at each age range. The child is assessed according to a scale of one to three to

evaluate their mastery of various skills. Evaluating the child at two different points in time creates the opportunity to map their development over time.

The impact of the Rupani Foundation’s developmental assessment of the child within the IP program is two-fold. While giving parents the chance to track their child’s development from one age range to the next, the parents were also informed of specific skills to address with their child as they progress to the next stage in development, and this aligns with the learning objectives for the program. Furthermore, parents and the IP program staff have an opportunity to identify areas of development that need to be strengthened throughout the program and reduce barriers to early identification of developmental delays. Developmental areas that need improvement receive a 2 rating. Although we did not have assessments over time for all children, we provide two examples of children who had multiple assessments to demonstrate potential impact of the program.

## Child A, age 2

**Child A is a 2-year-old, only child that lives in the Westward location with his mother and father.** His father has a master's degree and his mother has a ninth-grade education. The family completed a baseline survey, but did not complete an exit survey. The family participated in the IP program from July 2017, when Child A was between 14 months and 24 months of age, through August 2019, when Child A was between 24 months and 36 months of age.

In Child A's case, improvement was observed between assessments conducted at 14-24 months compared to 24-36 months. During the initial 12-24 month assessment, Child A was evaluated on 18 various developmental indicators. He received a rating of one for 6 percent of the indicators, a rating of two for 56 percent of the indicators and a rating of three for 39 percent of the indicators. When Child A was at the age of 24 months to 36 months, he was evaluated on 36 developmental indicators. His rating of three increased to 89 percent and his rating of two fell to 11 percent.

**In Child A's case, it is observed that the assessment of his development could have been positively impacted by his family's participation in the IP program.**

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## Child B, age 1

**Child B is a 1 year old, and a part of a family that participates in the IP program.**

His parent's response to various child assessment reports indicates that the family participated in the IP program from July 2019, when Child B was between birth and 6 weeks of age, through January 2020, when Child B was between 5.5 months and 8 months of age.

When Child B was assessed at birth to 6 weeks, he was evaluated on 7 various developmental indicators. He received a rating of three for 100 percent of the indicators. When Child B was at the age of 5.5 months to 8 months, he was evaluated on 17 developmental indicators. The developmental scales become more complex as the child grows, however Child B mastered 82 percent of the skills for his age range.

**Parents can benefit from the developmental assessments because they can see progress over time, which can reinforce their participation in the program, as well as alert parents of developmental delays.** Because the sample was very small, we cannot conclusively say the IP program had an impact on child development, however the potential for impact is possible.



## Conclusion

Our evaluation of the Rupani Foundations IP program serves to answer the following research question: **if the IP program provides parents with evidence-based information and they are given an opportunity to learn and model important parenting behaviors, will parents continue positive parenting behaviors at home and potentially impact child developmental outcomes?** To draw a conclusion on the lasting impact of the IP program on parenting behavior we conducted a systematic review of both quantitative and qualitative data to answer three sub-questions:

1. Is the Informed Parents program curriculum based on well accepted behavioral change theory and grounded in evidence?
2. Is the Informed Parents program implemented and delivered as intended?
3. Is there a change in parenting behaviors that can be attributed to the Informed Parents program?

**To answer the first question**, we use Curriculum Content Analysis of the IP program to review the handouts, program guides, and class videos. Our review suggests the program is grounded in social learning theory and contains the evidence-based content necessary to support parents in optimizing brain development, as well as additional elements to prepare young children for school.

**To answer the second question**, we use a Fidelity of Implementation Evaluation to measure the degree to which the IP program is delivered as originally intended. Specifically, we explore adherence to curriculum, content delivery, classroom environment and facilitator competence. A series of self-assessment and peer assessment forms evaluating the facilitators suggest strong content delivery, facilitator competence, and classroom environment. Meanwhile, it was difficult to draw a conclusion surrounding adherence to curriculum due to the lack of child age data on the post-session assessment forms, and qualitative nature of the teacher assessment forms.

**To answer the third question**, we used quantitative descriptive analysis of caretaker self-assessments of ECD practices. We compare their self-assessments at the beginning and the end of the IP program. Overwhelmingly, there was an improvement in the ECD practices present in the household of families that completed the program, suggesting a positive change in parenting behavior attributed to participation in the IP program.

In evaluating the Rupani Foundation according to the three sub-questions, we found that the IP program is a source of knowledge and support for caretakers to build positive parenting behaviors in their homes. The impact of the IP program was notable in those who completed the program for building the foundation for positive parenting behaviors and increasing the likelihood that these behaviors will continue beyond completion of the program. The IP program has the potential to make a significant impact in parenting behaviors and once the program expands and increases its number of participants, we recommend a randomized control trial that includes additional measures for parental behavior, knowledge and child outcomes as a next step in evaluation.

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