

# As Evaluation Tool



This paper documents pre/post change in Family Map risks in two large Head Start programs. Risks examined were unintended injury and related risks (e.g., monitoring and maternal depression).

Whiteside-Mansell, L., Johnson, D., Aitken, M. E., Bokony, P. A., Conners-Burrow, N.A, & McKelvey, L. (2010).
Head Start and Unintended Injury: The Use of the Family Map Interview to Document Risk. *Early Childhood Education Journal*, 38, 33-41.

Much is known about how to provide safe environments for preschool children (3-5 years-of-age); however, many preschool children still experience preventable injuries. This study examined the use of an assessment tool used to identify children at risk for unintended injury in two large, federally funded Head Start programs during home visits. Families of preschool children in two multi-center Head Start programs (N = 499 and N = 228) were screened by teachers for risks related to safety in their home and parenting environment during mandatory Head Start home visits in the fall and spring. The safety screening tool was part of an established, broader interview assessment called the Family Map, which was designed to help Head Start programs meet mandatory performance standards related to the identification of risk and strengths in the family.

Study results indicated that a large number of preschool children from low-income backgrounds were at risk for a variety of risks related to unintentional injury. Further, in some areas Head Start families increased safety related parenting behaviors by the second assessment with different areas noted in the two programs. This study demonstrated that, beyond the use of the tool to identify families in need of intervention services, it can be used by childcare providers to effectively monitor family need and for program self-assessment.

The Family Map is currently being used by the AR Maternal, Infant, and Early Childhood Home Visiting program (MIECHV) statewide evaluation. Preliminary indicate that the Family Map is useful in supporting intervention activities and evaluating outcomes.

- McKelvey, L., Whiteside-Mansell, L., Fitzgerald, S., Fitts, S., Burrnett, C., Greenwood, T., Pillow-Price, K. (March, 2015). Examining Intervention Effects: Changes in Risks and Strengths in the Home Literacy Environment of Arkansas HIPPY Families. Paper presented at the Society for Research on Child Development Biennial Meeting, Philadelphia, PA.
- McKelvey, L.M., Whiteside-Mansell, L., Conners-Burrow, N.A., Swindle, T., & Bokony, P.A. (2014, July). Risks and Strengths in the Home Environment of Expectant Families in Home Visiting Programs. Poster presented to the Head Start Research Conference, Washington D.C.

# Prenatal Preliminary analysis presented at national conferences examine the link between the risks identified in on the prenatal Family Map Inventories and early parenting.

Whiteside-Mansell, L, McKelvey, L. M., Fitzgerald, S., & Thomas, D. (2016, May). Stability from prenatal to postnatal of the home environment. Submitted to the International Congress of Infant Studies, New Orleans, USA.

This study examines the usefulness of screening the prenatal home environment in areas associated with poor child development. During the prenatal assessment the mother's care of herself is the target (i.e., her nutrition, seat belt use) of the screen. After the birth of the child, the child is the target (i.e., infant nutrition, infant car seat use).

Participants enrolled in a state-level evaluation of home visiting programs in the US during pregnancy in two types of program (PAT and HFA). Participants were included in this study if they were assessed after the child was born (N = 246). We report on assessments during the first months of infancy. Most families identified as white (52%) and was a first child for 37%. Most of the prenatal assessments were in the second (26%) or third trimester (60%).

The Family Map Inventory (FMI) was used to assess the home environment at both times. The average number of days between assessments was 146 days (SD 82 days) with the infant home environment assessed at about 60 days of infant age (SD 73). In simple bivariate examinations of the data, maternal indicators assessed prenatally generally decreased into infancy. For example, more prenatal women reported recent food insecurity than was reported after the birth of the child.

In general, the home environment improved after the birth of the child in the home visiting programs. In only four of the sixteen areas, the home environment was stable in the level of risk for children compared to the risk indicator assessed before the birth. The improvement in the number of families with risk indicators maybe an indicator of program success using the pre and postnatal screening tool.

| Par | enting Belief Behavior         | Percent of Prenatal<br>Risk in the Home<br>Environment | Percent of Risk in<br>the Infant Home<br>Environment | McNemar<br>Significance<br>test | N   | Interpretation |
|-----|--------------------------------|--|--|---------------------------------|-----|----------------|
| 1.  | Food quality of consumption    | 75.1%  | 79.1%  | Ns                              | 115 | Stable         |
| 2.  | Food insecurity                | 34.6%  | 23.2%  | .00                             | 237 | Reduced        |
| 3.  | Lack of daily routines         | 35.1%  | 34.7%  | Ns                              | 245 | Stable         |
| 4.  | Too much TV time               | 45.4%  | 85.8%  | .00                             | 240 | Increase       |
| 5.  | Lack of materials for learning | 48.9%  | 48.5%  | Ns                              | 237 | Stable         |
| 6.  | Housing Instability            | 42.3%  | 16.9%  | .00                             | 248 | Reduced        |
| 7.  | Neighborhood dangers           | 28.7%  | 26.2%  | .00                             | 244 | Reduced        |
| 8.  | Family conflict                | 16.7%  | 9.3%   | .00                             | 246 | Reduced        |
| 9.  | Lack of family cohesion        | 35.4%  | 28.5%  | .07                             | 246 | Reduced        |
| 10. | Depression                     | 47.8%  | 38.8%  | .01                             | 245 | Reduced        |
| 11. | Anxiety                        | 40.0%  | 28.2%  | .00                             | 245 | Reduced        |
| 12. | Hostility                      | 61.6%  | 45.3%  | .00                             | 245 | Reduced        |
| 13. | Substance use/exposure         | 93.1%  | 71.4%  | .00                             | 248 | Reduced        |
| 14. | Second hand smoke exposure     | 10.1%  | 9.2%   | Ns                              | 238 | Stable         |
| 15. | Lack of fire safety plans      | 46.1%  | 36.3%  | .00                             | 245 | Reduced        |
| 16. | Lack of vehicle safety habits  | 15.9%  | 7.9%   | .00                             | 239 | Reduced        |

## Home environment as assessed by the Family Map Inventories at prenatal and postnatal

Whiteside-Mansell, L, McKelvey, L., & Conners-Burrow, N. (May 29 – June 2, 2016). Prenatal Attitude Screening by Home Visitors or Educators: Potential for Child Abuse and Neglect. Submitted to the biannual meeting of the World Association for Infant Mental Health, Prague, Czech Republic.

#### Introduction

Women's experiences before and during pregnancy are linked to postnatal parenting behavior. For example, women are more likely to abuse their child when they experienced abuse as a child or delayed prenatal care. However, the link of malleable risks to child maltreatment is less studied. We examine the validity of a tool being used by home visitors to identify risks during pregnancy.

### Methods

Participants enrolled in a state-level evaluation of home visiting programs in the US during pregnancy. Participants were included in this study if they were assessed after the child was born (N = 243). We report on assessments at 6 weeks and 6 months. Most families identified as white (52%) and was a first child for 37%.

The Family Map Inventory (FMI) was used as the prenatal screening tool (PN-FMI) and to assess parenting stress after the birth (Infant-Toddler FMI; IT- FMI; Whiteside-Mansell et al., 2012). The PN- and IT-FMIs are easy to use and un-intrusive (i.e., doesn't directly ask about abuse history). The Adult-Adolescent Parenting Inventory (AAPI-2; Bavolek, 1990) permit the identification of high-risk parenting attitudes and child rearing practices (e.g., inappropriate expectations, corporal punishment).

### Results

PN-FMI scales (Unrealistic expectations of child behavior and Beliefs related to Discipline) prenatally assessed were predictive of postnatal AAPI and parenting stress (controlling for trimester, child age, and number of children in home). Appropriate disciple beliefs were positively related to the AAPI and negatively to parenting stress at both assessments in the first year of life. Unrealistic expectations of child behavior were associated with early AAPI.

#### Conclusions

Prenatal screening for unrealistic or inappropriate attitudes was useful in the identification of families with infants who may be at risk during the newborn period. The FMI is easy to use and has been used to tailor individualize intervention efforts and evaluate results.

|  | Standardized Beta Coefficient    |           |                           |           |  |  |  |  |
|--|----------------------------------|-----------|---------------------------|-----------|--|--|--|--|
|  | 6 week Infant Assessment         |           | 6 month Infant Assessment |           |  |  |  |  |
|  | Adult-Adolescent                 | FMI       | Adult-Adolescent          | FMI       |  |  |  |  |
|  | Parenting Inventory <sup>a</sup> | Parenting | Parenting                 | Parenting |  |  |  |  |
|  |                                  | Stress    | Inventory <sup>a</sup>    | Stress    |  |  |  |  |
| FMI  | 15*                              | 07        | 09                        | 10        |  |  |  |  |
| Expectations of<br>Child Behavior                    |                                  |           |                           |           |  |  |  |  |
| FMI Beliefs<br>related to<br>Discipline <sup>a</sup> | .36***                           | 28***     | .37***                    | 34**      |  |  |  |  |
| Adjust R2  | .14                              | .05       | .15                       | .07       |  |  |  |  |
| Ν  | 228                              | 218       | 112                       | 125       |  |  |  |  |

Note: Controlling for Trimester assessed, number of children in the home, and child age at follow up assessment; <sup>a</sup> higher more positive

