EXECUTIVE SUMMARY

BIE FAMILY AND CHILD EDUCATION (FACE) PROGRAM
2019 Report

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by:
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EXECUTIVE SUMMARY

In 1990, the Bureau of Indian Education (BIE) initiated the Family and Child Education (FACE) program, an integrated model for an American Indian early childhood education/parental involvement program. The FACE program primarily serves families with children prenatal to 5 years of age by providing early childhood, parenting and adult education services. The goals of the FACE program are to:

- Support parents/primary caregivers in their role as their child's first and most influential teacher.
- Strengthen family-school-community connections.
- Increase parent participation in their child's learning and expectations for academic achievement.
- Support and celebrate the unique cultural and linguistic diversity of each American Indian community served by the program.
- Promote school readiness and lifelong learning.

Program Design and Implementation

The FACE program is implemented through a collaborative effort of the BIE, Parents as Teachers National Center (PAT), and the National Center for Families Learning (NCFL). Programs are located at BIE schools. PAT provides the home-based model and NCFL provides the center-based model. Home-based and center-based models have been integrated and infused with American Indian language and culture to achieve the FACE model. To help sites implement and continually improve their FACE programs, PAT and NCFL provide intensive technical assistance through one or two on-visits to each site as well as routine calls, regional meetings, webinars, on-line meetings and on-line training.

FACE services are typically offered to participants four days a week. The fifth day is set aside for team and individual planning, record-keeping, participating in professional development, and providing make-up services.

Home-based services are delivered by parent educators primarily to families with children ranging from prenatal to 3 years of age, although they also serve children from 3 through 5 if their family cannot participate in center-based or other preschool services. Parent educators are trained and certified to use the PAT *Foundational, Model Implementation* and *Foundational 2 Curriculum–3 Years through Kindergarten* curricula in planning services for families. The PAT model includes four components: Personal Visits, FACE Family Circles, Screenings and Resource Network. This approach and the curricula help to organize discussions around family well-being, child development, protective factors, and parenting behavior. The blend of personal visit plans and guided planning tools allow parent educators enough flexibility to individualize services for families while maintaining consistency required to produce desired outcomes. Services are delivered through weekly or bi-weekly personal visits that are usually 60-90 minutes in duration, monthly FACE Family Circles, periodic screening of overall health and development of the child, and referrals to school and community services. On average, home-based services were provided for 117 days in PY19.
Center-based services most often are offered four days a week using a four-component model based on the comprehensive family literacy model developed by NCFL that first appeared in the Adult and Family Literacy Act in 1998 and subsequently in No Child Left Behind and Every Student Succeeds Act. The components are Early Childhood Education (preschool for 3- to 5-year-olds), Adult Education, Parent and Child Together Time® (PACT Time), and Parent Time. FACE preschoolers participate with an adult in BIE-funded elementary school facilities; the number of preschoolers who can be served is defined by the availability of space at these schools. Adults can participate in center-based services full-time, part-time or flex-time. Full- and part-time participation includes attendance in adult education as well as PACT Time and Parent Time. Flex-time attendance includes the minimum weekly requirement of at least two hours of parent engagement (in PACT Time and Parent Time) but does not require participation in adult education. During PY19, center-based services were offered an average 126 days on-site.

Home- and center-based staffs collaborate to provide comprehensive services to all FACE families and to support family transitions, such as children transitioning to preschool or kindergarten, and adults transitioning to employment or other educational programs. The center-based staff also supports teachers and parents in elementary school K-3 classrooms where parents engage in PACT Time with their child.

**FACE Participation**

Initially piloted at six schools, FACE has been implemented at 65 BIE-funded schools for periods ranging from 1 to 29 years. FACE has served 52,373 participants, including 27,972 children and 24,401 adults in approximately 22,700 American Indian families. Over time, 60% of adults and children participated in only the home-based component, 21% participated in only the center-based component, and 19% participated in the full FACE model (receiving both home- and center-based services). Twenty-two percent of all home-based children have transitioned into center-based preschool. Forty-five percent of center-based children had previously participated in home-based services.

In PY19, 48 programs implemented FACE. PY19 participants include 2,157 adults and 2,154 children from 1,852 families served at 48 sites. Table 1 indicates the components in which PY19 adults and children participated.

<table>
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<tr>
<th></th>
<th>Only Center-based</th>
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<td>Children</td>
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Table 1. Number and Percentage of Participants by FACE Services Received During PY19
Early Detection and Screening for FACE Children

Maintaining health records that include prenatal information and periodic screenings provide the means for early prevention, detection, and intervention, thereby increasing the chance for normal development for every child. At enrollment, the FACE program identifies issues and concerns in the areas of prenatal care and birth, environmental safety, immunization and insurance, general health, dental health, and special needs (Individualized Education Program/Individualized Family Service Plan—IEP/IFSP). Findings for PY19 are reported.

Prenatal Care and Birth

- For approximately one-fourth of the FACE children (363 children), their mother’s pregnancy was a high-risk pregnancy.

- Eleven percent of FACE children (203 children) were exposed to neurotoxins before birth, similar to PY18. Of these children, 35% were exposed to more than one neurotoxin. Fifty-six percent of the 203 children were exposed to nicotine and other toxins found in tobacco products because their mothers smoked during pregnancy, 27% were exposed to marijuana, 18% were exposed to alcohol, and 17% were exposed to amphetamines. A few children were exposed to various other drugs in utero.

- Approximately one-fourth of children (477 children) exhibited special conditions at birth. Of these children, 83% were jaundiced at birth. Twenty-two percent were reported to have various other conditions, including issues with heart irregularities and other systems, such as circulatory, respiratory, and muscular-skeletal. A few children had digestive/gastro-intestinal, immune system and/or infection issues. Other conditions included premature birth and drug withdrawal resulting from mother's drug use.

- Parents were asked to report on breastfeeding if their child was 12 months or younger. Breastfeeding is promoted for children’s health and well-being at the start of life. Of the responding parents, 67% reported their child was breastfed.

Environmental/Safety Concerns

- Seventy-two percent of the children lived in homes with at least one smoke detector on each floor where the family resides. Sixty-eight percent of children lived in homes that were reported as childproofed, and 50% lived in homes where the family has a plan and supplies for emergencies.

- Children’s safety while sleeping is promoted through practices such as placing children on their backs to sleep, avoiding soft bedding to prevent suffocation, and awareness of potential dangers when infants share beds. For children up to the age of 12 months, 74% were always placed on her/his back to sleep, 23% were sometimes placed on his/her back, and 3% never were. Thirty-six percent of children up to the age of 12 months never shared a bed, 35% sometimes shared a bed, and 39% always shared a bed.
Parents reported that 10% of children (166 children) were exposed to second-hand smoke—a decrease of 2 percentage points compared with PY17-PY18. This is much lower than the 40% of children aged 3-11 who experience second-hand smoke, as reported by the Center for Disease Control and Prevention (CDC). However, the differences in ages of children for the FACE and CDC comparison should be noted. Of the FACE children exposed to second-hand smoke, 92% were exposed sometimes, but 8% were always exposed.

Parents reported that 89% of the children used an approved car seat according to State law. This is similar to PY18 and a 9 percentage-point decrease compared with PY17. Appropriate use of car seats for children is a focus in parenting education in FACE.

Thirty-nine percent of children were screened for lead poisoning. For the children whose test results were available, three children’s levels were reported as somewhat high.

Immunization and Insurance

- Immunizations are up to date for 94% of PY19 FACE children—a dramatic increase since PY01 when fewer than half of children were current. Nationally, 70% of children aged 19-35 months are current with their immunizations. By comparison, 93% of PY19 FACE children in this age group are current with the recommended immunizations.

- At least 95% of the FACE children are covered by a health insurance plan, similar to PY18.

General Health

- Parents reported a major medical condition for almost 12% (217) of FACE children. These conditions were primarily asthma and prematurity/low birth weight; however, other conditions varied greatly and included feeding difficulties in early childhood, hearing impairment, heart defects or disease, and obesity.

- Allergies were reported for 14% of PY19 children, the same percentage as in PY18.

- At least one emergency room visit was made for 13% of FACE children. Of these children, 60% were taken to an emergency room due to an illness, 15% sustained an injury and 1% were taken for poisoning. One-fourth of children taken to the emergency room were there for various other reasons, including ear/eye/nose/throat issues, accidents, skin problems or rashes, breathing issues, seizures, allergies, and urinary tract infections.

Developmental Screening

- Screening records indicate that 91% of FACE children received some type of developmental screening in PY19. Twenty-six percent of these children were identified with concerns. Almost half of these children (or 12% of all screened children) were referred for early intervention services. At the end of PY19, concerns remained for 9% of screened children, similar to prior years.
• Fifteen percent of all screened children (22% of screened center-based children and 12% of screened home-based children) were identified with language/communication concerns, the most frequently identified concern over time.

• Seventy-one percent of home-based children and 13% of center-based children were assessed for social-emotional development in PY19. Of these children, 5% were identified with social-emotional delays or concerns; at the time of the second assessment, only three children had continuing concerns, suggesting successful intervention. Fifty-four percent of children who were identified with delays or concerns were less than 24 months of age (a large increase from 35% in PY18).

• Three percent of all PY19 FACE children had an IEP or IFSP, a decrease of 2-3 percentage points compared with the previous seven years when 5-6% of children had either an IEP or an IFSP. Of the children who were ready to exit FACE preschool and enter kindergarten, 10% had an IEP/IFSP, similar to the previous two years. Speech or language impairment is the most frequently identified type of concern, reported for almost 65% of these children.

Cognitive Outcomes for FACE Children

Center-based staff members and parents are trained to implement the Dialogic Reading strategy that is designed to increase the vocabulary and language comprehension of young children. FACE preschool children are assessed with the Expressive One-Word Picture Vocabulary Test (EOWPVT) to measure growth in expressive vocabulary. Teachers administer the assessment in the fall, at midterm, and in the spring. Scores are standardized to a mean of 100 (which is equivalent to the 50th national NCE or percentile) and a standard deviation of 15. Findings for PY19 EOWPVT assessments provided by 46 FACE programs include the following:

• The average first score for 582 children entering preschool was 96, 4 standard scores lower than the national average of 100 and equivalent to the 39th national percentile (see Figure 1).

Figure 1. Average First PY19 EOWPVT Standard Score, Scores Overall, and Matched Pre-Post Scores Overall and by Testing Cycles
• FACE preschoolers significantly and meaningfully increased their performance at post-test. Among the 432 children with pre- and post- scores in PY19, the average pre-test score of 97 (equivalent to the 42nd national percentile) significantly and meaningfully increased to an average post-test score of 104 (equivalent to the 61st national percentile and four standard scores above the national average).

• Seventy percent of FACE programs had average post-test scores that were at or above the national average standard score of 100.

• FACE center-based preschoolers who attended preschool the entire year demonstrated larger gains than those who attended fall-midterm or midterm-spring. The fall-spring children averaged 98 at pre-test and 107 at post-test, rendering them at the 68th national percentile at the end of the school year. Children who attended fall-midterm demonstrated an average standard score gain of 4, with a post-test score of 98, near the national average of 100. Those who attended midterm-spring increased 4 standard scores, with a post-test score of 97.

• Thirty-eight percent of preschoolers who had both a pre- and post-test were found to have low attendance, 24% had moderate attendance, and 38% had high attendance. Children who demonstrated low attendance scored significantly and meaningfully lower at pre-test and post-test than did children with moderate and high attendance. Low attendance children nonetheless made large gains during their preschool year, increasing from a standard score of 94 to a standard score of 101, which is slightly above the national average.

• FACE center-based preschoolers with IEPs scored significantly below other preschoolers at pre-test, with an average standard score of 84. At post-test, children with IEPs increased their average score to 94, a significant and meaningful increase of two-thirds of a standard deviation—and moving toward the national average of 100.

Early childhood teachers also assess developmental progress of FACE preschoolers using Meisels’ Work Sampling System (WSS) for indicators of proficiency in each of eight domains.

• For each of the eight domains, both 3- and 4-year-old FACE preschoolers demonstrate statistically significant improvement in ratings.

• For each of the domains, most FACE preschoolers were rated in process or proficient (approximately 80% or more).

• FACE preschoolers with moderate attendance score similarly to those preschoolers in their age group with high attendance on every domain.

• At post-test, 3-year-old preschoolers with low attendance score significantly lower than preschoolers with high attendance on the language and literacy for English Language Learners (ELL), personal-social, social studies, arts, and physical development domains.
• For 4-year-olds at pre- and post-test, preschoolers with low attendance score significantly lower than do preschoolers with high attendance on every domain except the scientific thinking domain (on which they score similarly to preschoolers with high or moderate attendance).

PY19 parents indicate that FACE has a considerable impact on the cognitive development of their home- and center-based children.

• Seventy-eight percent of parents indicated that FACE participation has a *large* impact on increasing their child’s interest in learning; 21% reported *somewhat* of an impact.

• Approximately three-fourths of parents reported that FACE participation has a *large* impact on increasing their child's interest in reading, increasing their child's verbal/communication skills, increasing their child's self-confidence, and preparing their child for school. Approximately one-fourth reported *somewhat* of an impact.

• Two-thirds of parents reported a *large* impact on improving their child’s ability to get along with other children, while 31% reported *somewhat* of an impact.

**Home Literacy Practices**

In all components of FACE, literacy is emphasized—not only as a focus during service delivery, but with special emphasis on carry-over to the home.

• FACE has a direct impact on increasing the number of books in the home. The number of children's books in the home reported at the time of initial enrollment increased significantly by the end of a program year. In PY19, households with more than 50 children's books increased from 18% to 35%. Forty-three percent of FACE households had 20 or fewer children's books initially, but by the end of PY19 that percentage decreased to 20%.

• Slightly more than 65% of PY19 parents reported that FACE helped them *a lot* to increase their reading to their child; 27% indicated FACE helped *somewhat*.

• Nationally, 81% of children ages 3-5 who were not yet in kindergarten have parents who read to them three or more times in the past week. Seventy-three percent of FACE center-based parents read to their 3- to 5-year-old children *daily or almost daily*.

• Nationwide, 33% of pre-kindergarten children aged 3-5 have parents who tell them a story *three or more times in the past week*. Seventy-three percent of FACE parents tell stories to their child on a *daily or almost daily* basis.

• At the end of PY19, 80-85% of parents reported that, on average, their child reads or looks at books or magazines, talks about what he/she reads or sees in books and magazines and writes or draws at home on his/her own *daily or several times a day*. 
Parent Involvement in Children’s Education

The FACE program's focus on increasing parent involvement in children’s education is supported by a long history of research which indicates that a parent’s involvement in their child’s school increases literacy achievement—and matters most for children at greatest risk. The involvement of PY19 FACE parents in the education of their K-2nd grade children is compared with national involvement. FACE parents continue to be more involved in their child’s education than are parents nationally (see Figure 2).

Figure 2. Percentage of PY19 FACE Parents of K-2nd Grade Children and a National Comparison Group of Parents Reporting Involvement in Their Child’s Education

- Almost all (95%) of PY19 FACE parents with K-2 children attend classroom or school events, compared with a lower percentage of parents nationally (85%).

- Seventy-four percent of PY19 FACE parents with K-2 children volunteer in the classroom or school or participate on school committees; 56% of parents nationally do so.

Outcomes for FACE Adults

Various achievements are documented by adults—the most frequently reported have consistently been related to parenting.

- The FACE program encourages home- and center-based adults to set explicit goals for themselves to help guide their participation in FACE. During PY19, 90% of FACE adults who set goals, completed at least one goal that they set. Home- and center-based parents most frequently set goals to improve parenting skills and to understand their child.

- Almost 95% or more of home- and center-based parents reported that FACE impacts their parenting skills somewhat or a lot in all areas that are measured. More than two-thirds of all parents believe FACE participation helped them a lot on all measures of impact.

- Slightly more than 80% of parents indicated that FACE helped them a lot to increase the amount of time they spend with their child.
Almost 80% of parents reported that they became *a lot* more involved in their child’s education and *a lot* more effectively interacted with their child because of their participation in FACE.

Approximately 75% percent of parents reported that FACE helped them *a lot* to become a better parent, to increase their understanding of child development and to increase their ability to speak up for their child.

Seventy percent of parents indicated that FACE helped them *a lot* in learning how to encourage their child’s interest in reading. Slightly more than two-thirds reported that FACE helped them *a lot* to increase their reading to their child.

In FACE adult education, teachers assess academic achievement with the *Comprehensive Adult Student Assessment System (CASAS)* or the *Test of Adult Basic Education (TABE)*. Adults also report impacts on their academic skills.

- Seventy-one percent of assessed adults demonstrated CASAS reading gains, and 70% demonstrated gains in mathematics. Thirty-five percent of adults increased their reading score at least one level, and 30% advanced at least one level in mathematics.

- At five programs, teachers assessed academic achievement using the TABE. All adults with pre- and post-reading (17 adults) and mathematics scores (17 adults) demonstrated statistically significant gains.

- Eighty-five percent of adult education participants reported improved academic skills for personal growth; 49% reported that they were helped *a lot* in this area. Sixty-five percent reported improved academic skills for advanced education; 34% reported that they were helped *a lot*.

- FACE staff reported that 40 adults completed their GED or high school diploma requirements during PY19. Since the inception of FACE, approximately 1,600 FACE adults obtained their GED or high school diploma.

Other achievements reported by adults include life-long learning, employment assistance, self-esteem, and physical fitness.

- That FACE promotes life-long learning is demonstrated by 71 home-based adults and 80 center-based adults who enrolled in college or vocational courses during the year. Nineteen percent of the PY19 adults who reported they planned to discontinue FACE participation at the end of the year also planned to enroll in college or vocational school after leaving the FACE program.

- During PY19, 372 adults became employed; 57% were home-based adults and 44% were center-based adults. Throughout the history of FACE, approximately 7,800 adults gained employment during their FACE participation.
Some FACE participants earn the required credentials to become employed in FACE. Thirty percent of PY19 FACE staff members were formerly participants in FACE.

As a result of FACE participation, most FACE adults reported feeling better about themselves, having more self-direction and self-discipline, having increased frequency of interactions with other adults, and gaining improved communication skills (85-94%).

Almost 70% of FACE adults reported that FACE participation helped improve their physical fitness.

**Integration of American Indian Language and Culture**

A goal of the FACE program is to support and celebrate the unique cultural and linguistic diversity of each American Indian community served by the program. Each year, the FACE program supports staff and participants in acquiring skill in their American Indian (AI) language and knowledge of their tribal culture. Over time, tribal members have obtained the qualifications to predominantly staff the FACE programs. AI language and culture are infused throughout the FACE program.

The FACE program prioritizes the hiring of tribal and community members. Eighty-five percent of all PY19 FACE staff positions are held by American Indians. Ninety-seven percent of parent educators, 75% of coordinators, 71% of adult education teachers, 79% of early childhood teachers, and 90% of early childhood co-teachers are American Indian.

In the home-based component, all programs reported integrating AI language and culture in Family Circles and all but two programs do so in personal visits.

In the center-based component, all programs integrate language and culture in preschool. All but two programs reported that they integrate language and culture in adult education and Parent Time. Seven programs did not integrate language and culture in PACT Time.

In 80% of the 37 FACE schools that have a culture teacher, the FACE staff coordinates with the culture teacher at least a few times a year.

At the end of the year, parents rated the frequency with which they talk, read or tell stories to their child in their AI language. Forty-four percent of parents reported that they talk, read, or tell stories to their child almost daily or more frequently. Fifteen percent of parents reported that they do so once or twice a week, and 12% of parents do so a few times a month. Twenty-nine percent never or almost never talk, read, or tell stories in their AI language.

At the end of the year almost two-thirds of adults indicated that participation in FACE helped increase their use of their AI language.

Adults’ self-ratings significantly increased in the areas of speaking, reading and understanding during their participation in the FACE program. No significant difference occurred in their self-rating in the area of writing their AI language.
FACE Sites in Program Year 2018-2019

Alamo Navajo Community School, Magdalena, NM
American Horse School, Allen, SD
Aneth Community School, Montezuma Creek, UT
Atsa Biyaazh Alternative School (Shiprock), Shiprock, NM
Baca/Dlo'ay zhí Community School, Prewitt, NM
Beclabito Day School, Shiprock, NM
Blackwater Community School, Coolidge, AZ
Bread Springs Day School, Gallup, NM
Casa Blanca Community School, Bapchule, AZ
Chi Chi'l Tah-Jones Ranch Community School, Vanderwagen, NM
Chief Leschi School, Puyallup, WA
Cove Day School, Red Valley, AZ
Dunseith Indian Day School, Dunseith, ND
Dzilth-Na-O-Dith-Hle, Bloomfield, NM
Enemy Swim Day School, Waubay, SD
Fond du Lac Ojibwe School, Cloquet, MN
Gila Crossing Community School, Laveen, AZ
Greasewood Springs Community School, Ganado, AZ
Hanaadli Community School, Bloomfield, NM
Hannahville Indian School, Wilson, MI
John F. Kennedy Day School, White River, AZ
Kayenta Boarding School, Kayenta, AZ
Kha’p’ó Community School, Española, NM (formerly Santa Clara)
Kin Dah Lichi’i Olta’, Ganado, AZ
Lac Courte Oreilles Ojibwe School, Hayward, WI
Leupp Schools, Winslow, AZ
Little Singer Community School, Winslow, AZ
Little Wound School, Kyle, SD
Many Farms Community School, Chinle, AZ (formerly Chinle Boarding School)
Mariano Lake Community School, Crownpoint, NM
Naatsisaan Community School, Navajo Mountain, UT
Na’Neelzhiiin Ji’Ohta Day School (Torreon), Cuba, NM
Nazlini Community School, Inc., Ganado, AZ
Oneida Nation Elementary School, Oneida, WI
Pearl River Elementary School, Philadelphia, MS
Pine Ridge School, Pine Ridge, SD
Pueblo Pintado Community School, Cuba, NM
Ramah Navajo School, Pine Hill, NM
Rough Rock Community School, Chinle, AZ
Salt River Elementary School, Scottsdale, AZ
St. Francis Indian School, St. Francis, SD
Tate Topa Tribal School, Fort Totten, ND
Theodore Jamerson Elementary School, Bismark, ND
T’iis Nazbas Community School, Teec Nos Pos, AZ
T’iis Ts'ozí Bi’Olta' Community School (Crownpoint), Crownpoint, NM
To'Hajiilee-He Community School (Canoncito), Laguna, NM
Tse ’i’ ahí’ Community School, Crownpoint, NM
Wingate Elementary School, Fort Wingate, NM