

Evaluating Family-Based Practices:

Parenting Experiences Scale

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Comments from parents such as, “It’s nice to work with someone who understands how complicated *my* life is”; “I know when I make a decision about my child, my home visitor will respect it”; “Now, I feel like I can help my child learn”; and “I enjoy being with my child so much” are great to hear. These types of comments let early interventionists know they are

using family-centered practices that result in supporting and enhancing parents’ feelings of competence and confidence. And while comments like these are certainly gratifying, early intervention programs still must assess parents’ perceptions systematically in order to determine whether such sentiments are occurring for all families in the program or for only a few. The *Parenting Experiences Scale* (Trivette & Dunst, 2003) described in this article allows program administrators to quickly assess parents’ perceptions of experiences regarding family-centered practices and of their own parenting competence, confidence, and enjoyment. In addition to describing this scale, this article provides information about why it is important to assess program practices and how a program might use this scale to gather information from families. Further, it provides two examples of how program directors and staff could use the information gathered to improve program practices.

Program evaluation is an important activity in high quality early childhood programs (Harbin & Salisbury, 2000). However, deciding *what* to assess and *how* to assess it are questions that programs sometimes find difficult to answer. Two concepts that are important for early intervention programs to assess are family-centered practices and parenting

competence. Both the Individuals with Disabilities Education Act (IDEA, 1997) and the *DEC Recommended Practices in Early Intervention/Early Childhood Special Education* (Sandall, McLean, & Smith, 2000) specify that one desired outcome of early intervention is that parents of children receiving early intervention services perceive themselves as capable of supporting their children’s growth and development. Specifically, DEC’s



family-based recommended practices also suggest a set of practices that, when used consistently with families, are likely to enhance the families' capacity to meet the needs of their infants and toddlers with disabilities (Trivette & Dunst, 2000).

For a number of years we have been trying to help early intervention staff address assessment by developing simple tools that obtain information used to improve program practices. Among these are various scales that measure the essential elements of family-centered helpgiving practices and three components of parenting: parenting competence, parenting confidence, and parenting enjoyment. Family-centered helpgiving practices are the tools staff use to build a relationship with families and to encourage parents to be active participants in supporting their child's development. Parenting competence refers to parents' perceptions about their abilities to care for their child on a daily basis. Parenting confidence refers to parents' beliefs that they are capable of carrying out their parenting roles. Parenting enjoyment refers to parents' assessment of their affective closeness to their child. The *Parenting Experiences Scale* (Trivette & Dunst, 2003) coalesces the results of our efforts to measure these constructs into one simple scale that can be used for the purpose of program evaluation.

Building on What We Know From Research

The influences that family-centered helpgiving practices have on parent and family functioning has been a focus of our research for some 15 years (Dunst & Trivette, 1996; Trivette & Dunst, 1998). Our more recent work (Trivette & Dunst, 2000) has focused on the direct and indirect influences of family-centered practices on parenting abilities and functioning. The findings from recent studies (Dunst, 1999; Trivette & Dunst, 2000) demonstrate that family-centered helpgiving practices are associated with parents' beliefs about their abilities to obtain desired resources and supports for their children and families. For example, stronger beliefs by staff members about parents' abilities to get resources and supports were related to parents' positive judgments about their parenting competence and confidence, as well as parents' enjoyment in carrying out parenting responsibilities. When staff used more family-centered helpgiving practices, such as helping parents get the resources they wanted for their children, parents were more confident in their ability to obtain resources in the future. These findings indicate that the ways in which early intervention practitioners (e.g., teachers, therapists, case managers, social workers) interact with families influence to what extent parents view themselves as effective. The *Parenting Experiences Scale* (Trivette & Dunst, 2003) includes items that measure the constructs

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research shows are important practices and beliefs relating to parents' judgments about their parenting abilities.

The Parenting Experiences Scale

The *Parenting Experiences Scale* (Trivette & Dunst, 2003) is a one-page scale that assesses parents' perceptions in four areas: three of which relate to their experiences in early intervention programs, while one relates to their own parenting abilities. The full scale is provided in Table 1. The first section asks about the amount of contact between the family and the early intervention staff. The second section asks parents about their perceptions of how they are treated by staff from the early intervention program. The third section explores how parents feel in terms of their role as parents, and the last section examines the extent to which families feel they can influence the resources and supports they receive from the program.

Contact With Intervention Staff

The first section of the *Parenting Experiences Scale* (Trivette & Dunst, 2003) contains two questions that ask parents about the amount of contact early intervention staff have with their child and family. The questions separate staff contacts with the child from staff contacts with the parent. The questions provide an early intervention program and/or an individual early interventionist with

two important pieces of information. First, they provide a context from which to review the parent's responses to the remainder of the scale. For example, if the parent reports having had many contacts on both dimensions and yet reports feeling that he or she seldom receives helpful information and resources, the corrective action would be quite different than if a parent reported only one or two contacts. Second, the contact information, while seemingly quantitative in nature, still relies on the family's impression of the amount of contact. This information could identify a potential mismatch in the early interventionist's perception of the amount of contact with the family and the child and that of the family. The assumption is not that someone is wrong, rather that a corrective action must be implemented to help those perceptions mesh.

Family-Centered Helpgiving

The eight statements in the second section are family-centered helpgiving items that we have used in numerous research and evaluation projects (e.g., Dunst & Trivette, 2001a; Dunst & Trivette, 2001b). Our previous work demonstrates that effective family-centered practices contain both relational and participatory components (Dunst & Trivette, 1996). The relational component includes practices that help build a relationship between staff members and families (e.g., "treated me with dignity and respect"). The participatory component includes practices that provide families

Table 1
Parenting Experiences Scale

Carl J. Dunst Carol M. Trivette

Please circle how many times a staff member from your child's early intervention program has worked directly with your child in the past three months.							
Not At All	1 – 2 Times	3 – 4 Times	5 – 6 Times	7 – 8 Times	9 – 10 Times	11 – 12 Times	More Than 12 Times

Please circle how many times a staff member from your child's early intervention program has worked with you to help you promote your child's learning and development during the past three months.							
Not At All	1 – 2 Times	3 – 4 Times	5 – 6 Times	7 – 8 Times	9 – 10 Times	11 – 12 Times	More Than 12 Times

Thinking about all your contacts with you child's early intervention program staff, how often have the staff interacted with you in the following ways:	Never	Some of the Time	About Half the Time	Most of the Time	All the time
Treated me with dignity and respect	1	2	3	4	5
Gave me information to make my own choices	1	2	3	4	5
Said nice things about how I parent my child	1	2	3	4	5
Responded to my concerns and desires	1	2	3	4	5
Respected my personal and cultural beliefs	1	2	3	4	5
Pointed out something my child or I did well	1	2	3	4	5
Helped me learn how to get resources for my child	1	2	3	4	5
Worked with me in a way that fit my schedule	1	2	3	4	5

Parents often have different feelings and thoughts about being a parent. Please indicate the extent to which each of the following statements is true for you.					
How true is each of the following for you:	Not at All True	A Little True	Sometimes True	Mostly True	Always True
I have fun with my child(ren)	1	2	3	4	5
I feel good about myself as a parent	1	2	3	4	5
I provide my child(ren) activities that help them learn	1	2	3	4	5
I enjoy doing things with my child(ren)	1	2	3	4	5
I feel I am doing the right things as a parent	1	2	3	4	5
I am the best parent I can be	1	2	3	4	5

Thinking about your involvement in your child's early intervention program, how much influence can you have in terms of getting information and supports you want from the early intervention program.										
No Influence At All	Influence About Half the Time									Influence All the Time
0	10	20	30	40	50	60	70	80	90	100

with opportunities to be active decision makers and are individualized, flexible, and responsive to family concerns (e.g., “Gave me information to make my own choices”). The *Parenting Experiences Scale* includes an equal number of items assessing the two components. The first, third, fifth, and sixth items address the relational component. The participatory items include the second, fourth, seventh, and eighth.

Parenting Ability

Our interest in parenting competence and confidence is derived from previous research demonstrating the impact of different parenting styles on child behavior and development (Dunst, Trivette, & Jodry, 1996), and how different professional styles of interaction strengthen or attenuate a sense of parenting competence (Dunst, 1999). After a review of the characteristics of parenting competence (Trivette & Dunst, 2002), we began to develop the “Everyday Parenting Scale” (Dunst & Masiello, 2003) to measure various components of parenting found in the research literature to be important to the development of young children.

The six parenting items included in the third section of the *Parenting Experiences Scale* (Trivette & Dunst, 2003) were selected from this longer scale. Both scales measure three components of parenting: parenting competence, parenting confidence, and parenting enjoyment. We have operationalized these three constructs in the following way:

■ The participatory component includes practices that provide families with opportunities to be active decision makers and are individualized, flexible, and responsive to family concerns

- Parenting competence is defined as self-efficacy beliefs about one’s capability to perform or accomplish daily parenting tasks and roles. This subscale is designed to capture parents’ “... beliefs in their abilities to fulfill different levels of task demands within the psychological domain” (Bandura, 1997, p. 97).
- Parenting confidence reflects self-judgments about one’s feelings concerning parenting roles and responsibilities. The confidence subscale assesses parents’ attributions regarding their parenting capabilities.
- Parenting enjoyment is the self-assessment of one’s affective relationship with one’s child(ren). The enjoyment subscale includes indicators of different aspects of parent and parent/child psychological closeness and attachment (Dunst & Masiello, 2003).

Parenting Efficacy

The fourth section of the *Scale* has one item that assesses parents’ sense of their own ability to access

the resources they need from the program staff. This item measures what a person can do, not what a person will do, because the word *can* is a judgment of capability rather than an indicator of intention (Bandura, 2001). This self-efficacy item focuses on what influence parents think they can have in getting information and support from the early intervention program that serves their children.

The *Parenting Experiences Scale* (Trivette & Dunst, 2003) is a short scale, with fewer than 20 questions, that reliably assesses a number of constructs important to early intervention programs. Our development of this scale is only the first important step of the evaluation process. Of equal importance is the distribution of the *Scale* to families so that the information it provides can be gathered. The remainder of this article provides information about how a program might go about gathering this information, what might be done with the information once it is obtained, and how the information received might be used to improve program practices.

How to Proceed

Program evaluation is often viewed as hard to do. Not to worry: It really is not difficult when you have an appropriate scale. The next step is to decide how you are going to collect the information. It is important to get the survey out to families; encourage them to complete it; and provide an easy, confidential way for

them to return it to the program. Programs often follow the steps below when requesting parents to provide feedback regarding their program practices and the outcomes of these practices:

- Identify families who have been in the program long enough to really assess their experiences with the program. For example, some programs that do weekly home visits choose to survey families who have been with the program at least three months.
- Include a cover letter explaining why the program is collecting this information, what will happen to the information, and how the families' confidentiality will be protected.
- Translate the letter and survey into the appropriate languages so that it may be read and understood by all families in the program.
- For each family, assemble a packet containing the cover letter, the *Scale*, and a stamped, self-addressed envelope for return of the survey.
- Instruct staff to tell each family that a survey will soon be mailed to them. Staff members should ask each family to complete the survey and return it to the program, stressing how important it is to receive a survey from every family in the program.
- Staff who know that it might be difficult for a parent to read the survey should encourage

the parent to ask a family member or friend to help them complete the survey. Staff should not complete the survey with families.

Once the information is received by the program, the brevity of the *Scale* makes it quick and easy to enter the information into a data file for analysis. Though one can complete rather sophisticated data analysis with the information from the *Scale*, it is possible to generate very meaningful data to guide program improvement using less complicated statistics such as distribution analysis, *t*-tests, and correlations. Following are two examples of how programs might use information from such analyses to make program improvements.

The first program offers both home-based and center-based services. Using the *Parenting Experiences Scale* (Trivette & Dunst, 2003) as part of their evaluation, the program asks parents to indicate whether they receive their services in the home or in the classroom setting. Upon inspection of the *t*-test analysis, the staff find that there is a difference in the assessment of participatory helping between those families who receive home-based intervention and those families who receive classroom-based intervention. The parents who receive services in the home have higher participatory scores than those who receive services in the classroom. This suggests that less participatory helping occurs with families whose child receives classroom-based services.



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With this information, the program staff decide to focus on ways to increase opportunities for families who receive services mainly in the classroom to be active participants in their child's experiences. Staff begin to develop strategies to increase their ability to recognize and respond quickly to parents' concerns as well as strategies for increasing parents' opportunities to make choices for their children within the classroom setting. In order to increase parents' opportunities to influence what their children experience in the classroom, families are asked to complete a very short form about what new or different things (e.g., cars, paints, songs, etc.) they observed their children expressing interest in during the past week. With this information, teachers are able to ensure that these new activities are made available to the children in the classroom.

In another program, staff want to document the extent to which parents involved in their program feel confident in their parenting skills. The criteria for success are that 85% of the families completing the *Parenting Experiences Scale* (Trivette & Dunst, 2003) report that they always (i.e., "Always True") feel good about themselves as parents and feel they are the best parents they can be. When this program examines the distribution results from the survey at the end of the year, they find that only 75% of the parents report that the previous two statements are always true for them. The staff considers the 10% discrepancy

between this result and their goal of 85% to be unacceptable.

The program staff then begin to reflect on what they need to change about their practices to increase parents' confidence in their own parenting abilities. Two strategies they identify focus on the role staff play to encourage parents. One idea is simply to ensure that in every contact with every family staff point out what parents are doing well with their children. Another strategy is to help parents identify their own parenting strengths and determine whether they would be willing to share their expertise with other parents. Program staff decide the best way to implement this strategy is to systematically ask each family about the areas of parenting in which they believe they are competent and to encourage parents to share their strengths with others in both formal and informal ways. For example, one parent is asked to write a column in the program's newsletter about some of the strategies she used to successfully toilet train her daughter.

As seen in these two examples, this short, easy to administer scale provides interventionists with information about how parents in their programs experience family-centered practices and how families feel about their parenting abilities. With this information, staff are able to develop strategies for program improvement.

Conclusion

Both IDEA (1997) and the *DEC Recommended Practices in Early Intervention/Early Childhood Special Education* (Sandall et al., 2000) make clear that early intervention practices with families should be implemented in a manner that strengthens parents' capacity to feel confident and competent when parenting their child. What is needed is a means by which programs can evaluate the extent to which these family-centered practices and capacity-building outcomes are occurring with a large number of families being served by their programs. The *Parenting Experiences Scale* (Trivette & Dunst, 2003) offers programs a straightforward, one-page tool built on well researched items with established relationships among the constructs to assess both family-centered practices and parenting abilities. With information gathered from families, staff will be able to develop strategies to improve their family-centered practices in order to enhance parents' sense of competence and confidence.

Note

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References

- Bandura, A. (1997). *Self-efficacy: The exercise of control*. New York: Freeman.
- Bandura, A. (2001). *Guide for constructing self-efficacy scales*. Unpublished manuscript, Stanford University.
- Dunst, C. J. (1999). Placing parent education in conceptual and empirical context. *Topics in Early Childhood Special Education*, 19, 141-147.
- Dunst, C. J., & Masiello, T. L. (2003). *Influences of professional helping practices on parenting competence, confidence, and enjoyment*. Manuscript in preparation.

- Dunst, C. J., & Trivette, C. M. (1996). Empowerment, effective helping practices, and family-centered care. *Pediatric Nursing*, 22, 334-337, 343.
- Dunst, C. J., & Trivette, C. M. (2001a). *Benefits associated with family resource center practices*. Asheville, NC: Winterberry Press.
- Dunst, C. J., & Trivette, C. M. (2001b). *Parenting supports and resources, helping practices, and parenting competence*. Asheville, NC: Winterberry Press.
- Dunst, C. J., Trivette, C. M., & Jodry, W. (1996). Influences of social support on children with disabilities and their families. In M. Guralnick (Ed.), *The effectiveness of early intervention* (pp. 499-522). Baltimore: Paul H. Brookes.
- Harbin, G., & Salisbury, C. (2000). Policies, procedures, and systems change. In S. Sandall, M. E. McLean, & B. J. Smith (Eds.), *DEC recommended practices in early intervention/early childhood special education* (pp. 65-76). Longmont, CO: Sopris West.
- Individuals with Disabilities Education Act (IDEA). (1997). 20 U.S.C. §1431(a)(4).
- Sandall, S., McLean, M. E., & Smith, B. J. (Eds.). (2000). *DEC recommended practices in early intervention/early childhood special education*. Longmont, CO: Sopris West.
- Trivette, C. M., & Dunst, C. J. (1998, December). *Family-centered helping practices*. Paper presented at the 14th Annual Division for Early Childhood International Conference on Children With Special Needs, Chicago, IL.
- Trivette, C. M., & Dunst, C. J. (2000). Recommended practices in family-based practices. In S. Sandall, M. E. McLean, & B. J. Smith (Eds.), *DEC recommended practices in early intervention/early childhood special education* (pp. 39-46). Longmont, CO: Sopris West.
- Trivette, C. M., & Dunst, C. J. (2002, December). *Parent ability scale: A tool for determining program effectiveness*. Presentation made at the 18th Annual Division for Early Childhood International Conference on Young Children With Special Needs and Their Families, San Diego, CA.
- Trivette, C. M., & Dunst, C. J. (2003). *Parenting experiences scale*. Morganton, NC: Orelena Hawks Puckett Institute.

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