Parent Mentorship and Self-Efficacy: An Inductive Research Study

Lisa Kerzner-Sirois

Doctoral Thesis Submitted in Partial Fulfillment of the Doctorate of Education (Ed.D) from
Northeastern University

Professor Christopher Unger, Advisor

October 2012
Abstract

This study focuses on the problem of parents who lack positive parenting skills as linked to academic, social, emotional, and behavioral risk factors in children and adolescents (Webster-Stratton, 1998). High-risk parents who do not possess effective social and emotional tools and skills are unable to model and transfer these to skills to their own children. Given that the family and parent represent the first source of social learning and efficacy for children, children of the parents who lack these skills are not afforded the kind of affirmation supportive of their social development. This investigation explores the ways in which a collaborative parent-mentoring model can influence parenting skills and self-efficacy perceptions among high-risk parent populations. A basic qualitative inductive analysis is used to investigate how a Parent Partner’s mentoring program impacts the development of parenting skills as perceived by the parents and parent mentors participating in the program. Data collection includes parent interviews, a parent mentor focus group, parent mentoring observations conducted by the researcher, as well as a program documentation review. The findings suggest the need to consider further research in the area of parent mentoring as a means of successfully engaging high-risk parent populations and promoting positive parenting and family outcomes. In addition, these types of collective support models may have success in helping to sustain and further progress.

*Keywords: parenting, risk-factors, social learning, efficacy, mentoring*
TABLE OF CONTENTS

LIST OF TABLES.................................................................................................................. XX

CHAPTER I: INTRODUCTION...........................................................................................................
  Problem Statement and Significance of the Problem
  Practical Goals
  Intellectual Goals
  Research Question
  Theoretical Framework

CHAPTER II: LITERATURE REVIEW
  High Risk Parenting Practices and Impact on Children
  Best Parenting Practices and Positive Youth Development
  Parenting Intervention Strategies
  Adult Modeling

CHAPTER III: METHODOLOGY
  Research Questions
  Research Design
  Validity and Credibility
  Protection of Human Subjects and Ethical Considerations

CHAPTER IV: RESEARCH FINDINGS
  Study Context
  Coding for Themes
  Summary of the Findings

CHAPTER V: DISCUSSION OF THE RESEARCH FINDINGS
  Revisiting the Problem of Practice
  Review of Methodology
  Discussion of the Findings in Relation to the Theoretical Framework and Literature
  Review
  Conclusion
  Next Steps
  References
Appendices
  Appendix A
  Appendix B
  Appendix C
  Appendix D
  Appendix E
  Appendix F
  Appendix G
  Appendix H
  Appendix I
LIST OF TABLES

Table 1: Themes from parent interviews.
Table 2: Themes from mentor focus group.
Table 3: Themes from the mentoring observation.
Table 4: Themes from the document review.
Table 5: Major themes from across data.
Table 6: Themes identified by participants related to next steps.
Chapter I: Introduction

Problem of Practice and Significance

Academic, social, emotional, and behavioral risk factors for children and adolescents have been directly linked to parental risk factors such as low economic status, low educational level, high levels of stress, single-parent status, lack of support, a history of ongoing depression and mental illness, criminal activity, and substance abuse (Webster-Stratton, 1998). Research shows that for many families in this country, these stressors are becoming more prevalent. National statistics indicate that teen birth rates among 15- to 19-year-olds have increased for the first time in 14 years, reaching 42 per 1,000 teens (Kids Count, 2010). In 2007, 32 percent of children in the United States were living with one parent, a percentage that has nearly tripled since 1970 (Kids Count, 2010). According to the U.S. Census Bureau, in 2010 the nation’s poverty rate spiked to 15.1, reflecting the highest level since 1993 (Fletcher, 2011). The total number of people living below the poverty line (which in 2010 was an income of $22,314 for a family of four) is now at the highest level in the 52 years since statistics have been collected (Fletcher, 2011).

Interventions aimed at improving parenting confidence and skills appear to help prevent and mitigate many of the associated stressors and negative outcomes from these external factors (Webster-Stratton, 1998). The social-cognitive theory of human development identifies learning as a social process involving the modeling and feedback of others through life experiences (Bandura, 1989a). Within this learning framework, perceived self-efficacy, or beliefs about the ability to control daily life circumstances, is considered the primary force shaping and driving thoughts and actions (Bandura, 1993). Research in this field has linked an “optimistic sense of personal efficacy” with overall well-being and higher levels of educational and career
obtainment (Bandura, 1989a). Self-efficacy beliefs are shown to help sustain confidence in the face of personal and environmental challenges (Bandura, 1993). A positive sense of self-efficacy appears to offer protection from extreme stress, anxiety, and depression by providing the cognitive fortitude to manage and preserve during hardships and crisis (Bandura, 1993).

Adolescents with a strong sense of self-efficacy manage academic demands better, engage in and sustain positive social relationships, and are better able to resist negative peer pressures and anti-social influences (Bandura, Barbaranelli, Vittorio Caprara, & Pastorelli, 1996). Children who possess self-confidence about their ability to control their own learning, demonstrate greater mastery over a variety of academic subjects, as well as, higher levels of overall academic motivation and achievement (Pastorelli et al., 2001).

The family and parent represent the first source of social learning and efficacy affirmation for a child. An efficacious parent responds by offering consistent nurturing, constructive limit setting, opportunities for shared problem solving, and a variety of “mastery experiences” that enable a child to acquire essential emotional, social, and behavioral competencies (Pastorelli, et al., 2001). When experiences together are reinforcing and positive role modeling and feedback are provided by a parent, a child can begin to develop healthy self-regulation strategies and learn to manage on-going academic, social, and behavioral challenges (Pastorelli, et al., 2001). For parents whom themselves lack these social and emotional skills, however, they are often unable to model and transfer them to their children.

In a study involving clinically depressed mothers, perceived self-efficacy was the strongest predictor of the quality of care provided to their infants, after controlling for social, marital, and severity of depression variables (A. Bandura, Caprara, Barbaranelli, Gerbino, & Pastorelli, 2003). Research shows that children and adolescents at highest risk for developing
conduct disorders, are exposed to parenting characterized as: “inconsistent and erratic”, “highly critical, “lacking in warmth”, “disengaged from children’s school experiences”, and “providing little modeling and guidance in pro-social behaviors (Webster-Stratton, 1998, p. 183)”. In a Head Start study in which 74% of parents demonstrated four or more of the risk factors as noted above, 35% of the children scored within the clinical range for significant behavioral problems both in the classroom and at home (Webster-Stratton, 1998).

**Practical and Intellectual Goals of the Study**

This study explores a parent-to-parent mentoring program and it’s influence on social learning and self-efficacy perceptions among the high-risk parent participants. Utilizing an inductive research methodology, practical and intellectual applications for this mentoring model are constructed through the perspectives of participating parents, mentors, and key stakeholders (Thomas, 2006). Characterized as an “emergent” qualitative approach, transcripts from the parent interviews, mentor focus group, mentoring observation, and Program documents are studied and analyzed by the researcher. Through the coding processes, meanings and themes are identified and related to parent mentoring and the concepts of social learning and self-efficacy (Bogdan & Biklen, 1982).

**Practical Goals.** Many of the training and educational interventions involving disadvantaged families have proven ineffective in sustaining improvements to parenting practices or child functioning outcomes (Webster-Stratton, 1998). Barriers have included difficulty recruiting parents, high dropout rates, transportation difficulties, and inconvenient times for families to attend. In addition, the format of many parent training models are prescriptive and fail to allow for parent collaboration and individualized input (Webster-Stratton, 1998). The insular and often isolated circumstances of many high-risk families’ poses unique
challenges for accessing professional and community supports. As a result, the most effective parent intervention strategies have been those offering flexibility and are adaptable to the individual needs and circumstances of parents and families (Phaneuf & McIntyre, 2011).

The practical goals of this study are to offer a means of addressing some of these barriers by considering the strategies of a parent-mentoring model. Through detailed descriptions of contexts, events, activities, and intervention processes, the goal is to be able to transfer these applications when working with similar populations and contexts.

**Intellectual Goals.** This study explores the cognitive and emotional efficacy perceptions of high-risk parents as related to their mentoring experiences. In gathering data through participant feedback and observation, the intellectual goals of this investigation are to identify common beliefs and values related to these collaborative relationships, learning processes, and outcomes. By furthering these understandings, the study aims to broaden the view about parenting interventions and offer new perspectives on meaningful social learning influences and frameworks that can be applied with similar high-risk parents and family populations.

**Theoretical Framework**

The social learning and self-efficacy frameworks are utilized to guide this study’s data inquiry and analysis. In understanding the self-perpetuation of social, emotional, and behavioral risk factors from parents to children, these theories provide the interactive lens for viewing the transfer of knowledge and behavior. Through its investigation of a parent mentoring organization, these reciprocal learning theories are applied in the coding and analysis of participant values, beliefs, and attitudes.

**Social Learning Theory.** The literature on social learning theory conceptualizes the transfer of cognitive and behavioral skills through social modeling, life experience, and feedback
from others (Woodward, 1982). Within these interactive learning frameworks, the parent is considered a child’s primary teacher. For parents who lacked these positive parental interactions during their own social and emotional development, their children’s risks of anti-social behaviors, emotional dysregulation, and academic difficulties increase (Woodward, 1982).

Originating from the fields of evolution and psychology, the social learning theory suggests that the social environment shapes behaviors (Woodward, 1982). Within this view of learning and development, behavior is a reciprocal cycle influenced by cognitive and social perceptions and experiences (Bandura, 1978). Knowledge about the world is derived and affirmed from the responses and outcomes received from others (Bandura, 1978). Interpersonal concepts and perceptions derive largely from our direct interactions and the responses of others. Within the family, the parent represents the first role model and coach from whom a child formulates and internalizes these interactive concepts and social behavior patterns (Rosenthal, 1978). One’s value system is then tested and reinforced through on-going experiences (Bandura, 1978). Throughout life, these social, emotional, and behavioral perceptions are affirmed and perpetuating through the interactions in which we engage and the responses we receive (Bandura, 1978).

Self-efficacy Theory. Within the social learning paradigm, the role of self-efficacy is central (Bandura, 1978). Perceptions of self-efficacy or self-confidence serve to regulation and guide actions and motivate future-oriented goals (Gist, 1991). The development of effective self-regulation, or the ability to control impulses and stay on task, is directly linked to positive emotional modeling and consistent behavioral interventions provided by a parent (Bandura, 1978). Without reliable routines and supportive guidance from a parent, one may not develop an affirming internal compass to help overcome adversity and persist in meeting new challenges.
Self-efficacy supports “beliefs about one’s capabilities to mobilize the motivation, cognitive resources, and courses of action needed to meet given situational demands” (Chen, Gully, & Eden, 2001, p. 62).

When self-efficacious beliefs are not established in childhood, self-defeating thoughts and negative predictions about the future begin to take their place (Bandura, 1989a). As this happens, the ability to successfully manage challenges and effectively cope with daily problems becomes increasingly difficult and can lead to feelings of depression and anxiety (Bandura, 1989a). Ultimately, these self-defeating thoughts are manifest in behavior patterns and self-perpetuating cycles of avoidance and failure (Schunk, 1991).

Self-efficacy provides the cognitive foundations necessary to set and achieve personal, professional, and educational goals. “Personal accomplishments require not only skills but the self-beliefs to use them well” (Bandura, 1993, p. 119). Positive self-efficacy is established as achievements are gained, and personal satisfaction and confidence are reinforced; helping to sustain a positive behavior pattern (Bandura, 1993). Within this self-sustaining social and cognitive process, goal setting has been identified as a primary tool utilized by future-oriented individuals and those possessing confidence to achieve personal aspirations (Bandura, 1993). In building efficacy, self-driven goals have been shown to enhance personal commitment and elicit the greatest sense of achievement (Schunk, 1991). Through goal achievement, success that results from hard work and effort helps to instill and perpetuate feelings of self-worth and confidence. In addition, feelings of mastery are increased as the degree of difficulty one attributes to a challenge increases (Schunk, 1991).

Summary. The parent-to-parent mentorship program in this investigation provides an opportunity to consider examples of social learning and offers practical and intellectual
applications for applying these concepts to the problem of practice (Taylor, Russ-Eft, & Chan, 2005). The core concepts of the mentoring intervention (including goal setting, opportunities for hands-on practice and experience, and reinforcement through on-going mentor feedback) align with the theories of social learning and self-efficacy (Taylor, et al., 2005).

Chapter II: Literature Review

This literature review covers areas of the parenting research associated with children’s social, academic, and behavioral learning and self-efficacy. Research on positive parenting and effective practices related to a child’s successful emotional development are discussed. Collaborative treatment interventions incorporating social learning and efficacy building are also reviewed as related to the mentoring model under investigation. Finally, the short and long-term effectiveness of these approaches in sustaining parent engagement and influencing parenting behaviors are presented.

High Risk Parenting Practices and Impact on Children

Parents play a key role in shaping a child’s cognitive, emotional, and social development (A. Bandura, Barbaranelli, C., Vittorio Caprara, G., and Pastorelli, C., 1996). By providing direct learning experiences and guidance, parents contribute significantly to a child’s overall motivation and performance outcomes (Bandura, et al., 1996). Through the self-efficacy beliefs and behaviors of parents, the collective efficacy of the family is created and provides the learning foundations for children (Caprara, Pastorelli, Regalia, Scabini, & Bandura, 2005). A child’s academic and career aspirations are directly linked to modeling and positive reinforcements of parents. (Bandura & Locke, 2003). A child’s emotional well-being, pro-social choices, and vulnerability to stress and depression are all mediated by these parental inputs (Bandura & Locke, 2003).
Negative parenting behaviors and response to stressors contribute adversely to the efficacy perceptions and behaviors of children and adolescents (McKee, Harvey, Danforth, Ulaszek, & Friedman, 2004). For example permissive parenting practices, defined as making few demands, not enforcing rules, inconsistency, and giving in easily to a child, can undermine a child’s ability to establish internal boundaries and self-regulation skills (McKee, et al., 2004). Authoritarian parenting, characterized by punitive, forceful, and overly harsh disciplinary practices, may distort a child’s judgments about appropriate and inappropriate behavior management strategies and create poor self-concepts.

Parental stress levels and coping behaviors in managing daily routines, child rearing challenges, and marital relationships, can also play a part in disrupting the family functioning and negatively impacting a child’s efficacy outcomes (McKee, et al., 2004). In a small study examining a parent training intervention targeted at correcting behavior problems in children, parents’ coping approaches and disciplinary choices were correlated with children’s’ behavioral presentations pre and post-treatment (McKee, et al., 2004). A transactional model of stress and coping was utilized to identify and measure connections between parental stress perceptions, and the parenting approaches employed (McKee, et al., 2004).

The results of this study offer cognitive and behavioral indicators relevant in the investigation of parenting efficacy in this proposal. For example, “emotion-focused” coping style is characterized by one’s attempt to reduce negative feelings and stress by seeking positive social supports (McKee, et al., 2004). Whereas one who is “problem-focused” in appraising and approaching stress, attempts to identify and influence the external sources of the problem through concrete strategies and pro-active behaviors (McKee, et al., 2004). Both correlated with positive self-efficacy beliefs. Coping strategies that demonstrate less control-oriented
perceptions include the “avoidance-focused” and the “negative emotion-focused” (McKee, et al., 2004).

In the former, one disengages both mentally and physically by avoiding the perceived stressor, while individuals described as “negative emotion-focused” appear overwhelmed by negative emotions and copes by venting their feelings without taking action (McKee, et al., 2004). “Bidirectional” relationships between behavior problems in children and parenting strategies have been identified in studies examining early interventions for childhood conduct disturbances (Phaneuf & McIntyre, 2011). Specifically when looking at stress and overall family functioning, there exists a reciprocal influence between children’s’ behaviors and parenting stress levels (Phaneuf & McIntyre, 2011). Within this investigation, attention will focus on how parents’ understand and identify their responses to stress and how these appear connected to the family’s overall behavior patterns and observed efficacy outcomes.

Children raised with family risk factors such as “low income, low educational level, high levels of stress, single-parent status, lack of support, and a history of ongoing depression, criminal activity, substance abuse, or psychiatric illness” are at higher risk of developing conduct disorders (Webster-Stratton, 1998, p. 183). Parenting practices related to these life circumstances include inconsistent discipline, highly critical feedback, abusive approaches, lack of nurturing activities, and disengagement from their child’s academic and school responsibilities (Webster-Stratton, 1998). Conduct disorders displayed in pre-school aged children, are more likely to develop into serious behavioral difficulties in later childhood and adolescents (Conners, Edwards, & Grant, 2007). Longitudinal studies following children from two years of age, suggest that approximately 50% of the children with behavioral disturbances at this age continue
to have some behavioral difficulties in school and throughout their adolescent years (Conners, et al., 2007).

Negative parenting practices during early adulthood also affect adolescent perceptions of self-confidence and the strategies developed to effectively manage independent responsibilities (Frank, Plunkett, & Otten, 2010). Adolescents’ who identify their parents’ as using psychological control tactics to manage social conduct and discipline, describe manipulative techniques such as love withdrawal and guilt (Frank, et al., 2010). These reported parenting behaviors were associated with an adolescent’s negative self-images and low motivation towards pro-social activities outside of the home (Frank, et al., 2010). Through the parent-child relationship and family system, children learn emotional norms and socially acceptable behaviors, that can then be generalized to other interpersonal contexts (Suveg, Jacob, & Payne, 2010). Poor emotional regulation in childhood has been linked to social problems in youth.

Research on parental influences of social competence in children and adolescents show an association with the emotional regulation skills of parents (Suveg, et al., 2010). Utilizing an “interpersonal sensitivity” scale, one such study measured and identified parental emotional efficacy perceptions through self-reported levels of self-depreciation, self-doubt, and discomfort during interpersonal interactions (Suveg, et al., 2010). Parents then scored their children’s perceived psychosocial competence and emotional regulation over the past 6 months. Survey items related to children’s rejection by peers, social isolation, age-appropriateness of social behaviors, as well as, appropriate expression of emotions through empathy, self-awareness, flexibility, and mood fluctuations (Suveg, et al., 2010).

Results reveal a correlational relationship between a mother’s self reported social discomfort and the perceived social responses from her child (Suveg, et al., 2010). The
discussions suggest that a mother is often the primary caregiver within the family and as such may have a stronger modeling influence on the emotional and social behaviors adopted by her children. The sample for this study will include mostly mothers, and can utilize this supporting data to strengthen analysis of its results. In addition, the interpersonal competency measures utilized in the above study offer guides for the current proposal. The questions used to identify social and emotional efficacy perceptions and behaviors can help to structure the interviews and focus groups with parents and mentors, as well as, direct the descriptive data generated from observations.

**Best Parenting Practices And Positive Youth Development**

According to the theories of social learning, efficacy beliefs are developed and shaped during childhood and adolescents (Frank, et al., 2010). A home environment that supports open communication, manages conflict in positive ways, and demonstrates appropriate levels of parental monitoring is linked to children’s improved self management of social, emotional, and academic challenges (Caprara, et al., 2005). One primary way that parents are believed to contribute to this process is through their social persuasion influences (Frank, et al., 2010). Interpersonal efficacy beliefs and behaviors are internalized by children through the affirming messages conveyed by parents (Frank, et al., 2010). Supportive displays of parental concern have been linked to increased feelings of self-esteem, self-worth, and the development of social competence in adolescents’ (Frank, et al., 2010).

Parents serve as facilitators of family relationships through their support and modeling of healthy communication between members (Caprara, et al., 2005). Youth perceptions of self-worth and ability are strengthened when parents demonstrate acceptance, warmth, nurturing, and affection (Frank, et al., 2010). Several studies have utilized the theories of social learning to
explore the influences of family efficacy on adolescents’ satisfaction with their parental relationships and their level of engagement in pro-social activities outside of the home. In one, data from 158 adolescents’ aged 13-20 years was analyzed for correlations between perceived positive parental support and monitoring, and adolescents’ self-efficacious academic and social conduct (Frank, et al., 2010).

Adolescents’ perceptions of their parents’ emotional recognition and warmth towards them, were elicited through survey questions such as, “This parent has made me feel that he/she would be there if I need him/her” (Frank, et al., 2010, p. 741). Parental monitoring and knowledge levels were identified through adolescents’ self-reported beliefs about whether their parents’ knew: where they were and what they were doing when they were out of the house, who their friends and parents were, and how they were spending their money (Frank, et al., 2010).

The results of this study reveal that higher levels of perceived parental support correlated with adolescents’ positive self-esteem and self-efficacy beliefs (Frank, et al., 2010). In addition, both self-efficacy and self-esteem perceptions related positively to beliefs about parental knowledge and monitoring levels. Furthermore, adolescents’ who reported feelings of control to managing failures proactively (self-efficacy beliefs), also reported having positive beliefs about themselves (positive self-esteem). The capacity of parents to stay informed about their children’s activities outside of the home relies on their ability to maintain reciprocal dialogues with them through non-judgmental listening and supportive feedback (Caprara, et al., 2005).

Open communication with parents’ was studied through youth reported perceptions about their families’ ability to reach resolution without conflict, talk about personal problems even when things are tense, to share points of view and reach understandings about difficult issues, and offer constructive feedback to each other about attitudes and social practices (Caprara, et al.,
This study demonstrates that adolescents’ provided with opportunities to practice self-determination within the home through positive parenting interactions, also have decreased delinquent behaviors in their communities and schools (Caprara, et al., 2005).

The studies reviewed above, present youth perceptions about parental approaches to monitoring, supportive listening, and open communication. The results indicate correlations between satisfaction with parental relationships and improved youth self-efficacy outcomes. The current proposal intends to investigate efficacious parental and family functioning from the perspectives of parents and mentors. In gathering and analyzing the data necessary to address this investigation, similar questions can be explored in interviews and evaluated during observations. These can help to identify the communication practices between parents’ and family members and the potential efficacy outcomes associated.

Social learning theory also has relevance within the literature on academic functioning. Perceived self-efficacy directly influences academic motivation and performance when other factors including past performance are controlled (Bandura & Locke, 2003). Self-efficacy beliefs provide children with the internal incentives to regulate their own learning and the innate confidence to persevere when things become difficult. Future educational and career aspirations are driven by one’s self-appraised capabilities to manage challenges and perceived potential for achieving success (Bandura, et al., 1996). Studies have confirmed links between self-efficacy, ability to focus on learning, and effective utilization of learning strategies (Schunk, 1991).

Parents’ academic perceptions have been studied for their influence on the intellectual development and educational beliefs of their children (Bandura, et al., 1996). Causal relationships have been identified between a parents’ perceived learning and academic aspirations, and their children’s academic progress and level of achievement (Bandura, et al., 2005).
Efficacy in children ranging in age from 11-14 years was studied using three self-assessed factors: perceived academic self-efficacy, perceived social self-efficacy, and perceived self-regulatory efficacy (Bandura, et al., 1996).

Youth’s academic efficacy was assessed through measures identifying perceived ability to manage learning, to master academic subjects, and to fulfill personal, parent, and teacher expectations (A. Bandura, Barbaranelli, C., Vittorio Caprara, G., and Pastorelli, C., 1996). Social efficacy items evaluated one’s perceived peer relationships, self-assertiveness, and leisure-time activities. Ability to resist peer pressure and engagement in high-risk activities comprised the regulatory efficacy factors (Bandura, et al., 1996). In addition, the researchers also collected data on youth’s social and emotional behaviors as reported by other peers and parents. Pro-social conduct was captured through one’s reported degree of helpfulness, sharing, kindness, and cooperativeness (Bandura, et al., 1996). Feelings and behaviors associated with depression were self-assessed by youth and compared with reports completed by teachers and peers.

Parental academic efficacy was assessed using items identifying parents’ self-reported perceptions about ability to promote their children’s interest in school, motivate them in pursuing academic goals, assist them in their schoolwork, and help them stay out of trouble in school (Bandura, et al., 1996). In their discussion of the results, the researchers identify these diverse and far reaching areas of influence through which parental behaviors and beliefs can impact educational efficacy outcomes for their children. The findings lend support to the social learning literature relating the learning successes of children to their parents’ own beliefs and behaviors around achievement and motivation (Bandura, et al., 1996).

The findings of this study demonstrate that parental academic efficacy impact children through positive interactions that promote regulation and improved focus. When parents hold
high academic aspirations for themselves and their children, children are less inclined to engage in negative activities and conduct that detract from their learning (Bandura, Barbaranelli, Vittorio-Caprara, & Pastorelli, 2001). Parents’ academic efficacy also correlates with increased participation in classroom and school activities; also a predicative influence on children’s own educational and social efficacy beliefs (Bandura, et al., 1996).

This study discusses the important influences of perceived self-efficacy, as a stronger predicator of academic achievement than perceived and actual knowledge and intellectual ability (Bandura, et al., 2001). It supports the need for future research to consider the importance of psychosocial factors on the developmental of effective learning behaviors and beliefs. (Bandura, et al., 1996). Parents’ academic efficacy was shown to have an influence on these outcomes without providing direct assistance to their children through schoolwork. These results demonstrates that parents’ can transfer educational aspirations and effective learning skills without having achieved these goals themselves (Bandura, et al., 1996).

Successful mentoring interventions with parents’ can model and support these academic values and practices within the family. Parenting perceptions related to education and school involvement can be discussed during interviews and compared with historical accounts collected through school progress and teacher reports. The data supports the relevance of self-efficacy factors such as self-control, motivation, goal setting, and pro-social behavior on school success. In terms of the practical implications for school professionals, these finding highlight the primary role that self-efficacy and regulatory capabilities play in advancing children’s learning above their prior knowledge or intellectual ability (Bandura, et al., 1996). Increasing parent awareness and engagement in promoting these efficacy tools can be encouraged through home-schools partnerships that affirm positive family values and practices.
Parenting Intervention Strategies

Some efforts to build and sustain successful parenting strategies have focused on improving parents’ tolerance skills, and reframing their perceptions about children’s needs and abilities (Garza, Watts, & Kinsworthy, 2007). The quality of these outcomes revolve largely around the ability of parents to build and support positive relationships with their children. These include creating nonjudgmental, and nurturing environments for children to learn and develop (Garza, et al., 2007). “Filial” therapeutic models in which parents are involved in experiential and play centered instruction with their children, have demonstrated success in helping parents to develop these positive parenting perceptions and relationships with their children.

Filial therapy models focus on strategies that will reframe the parent’s pre-existing perceptions and approaches in relating to their child (Garza, et al., 2007). This treatment has been effective in improving children’s’ emotional regulation difficulties resulting from trauma and abuse experiences, as well as, oppositional behaviors and grief responses. Parents from a wide range of presenting problems have also reported improved pre and post-test scores after filial therapy in areas related to acceptance of own emotion, acceptance of child’s emotion, effective use of social supports, and decreased distress symptoms (Topham, Wampler, Titus, & Rolling, 2011). Filial therapy research has indicated that by increasing parental empathy and validating parenting skills, parents are better equipped to support and guide the emotional and behavioral developmental needs of their children (Topham, et al., 2011).

One of the main goals in working with parents using the filial therapy approach is to promote appropriate and realistic expectations for children’s behaviors and emotions (Garza, et al., 2007). With the therapist serving as the model, the initial phase (ranging from one to four
sessions) includes demonstration and role playing of four specific skills areas for parents’: structured play, empathetic listening, limit setting, and imaginary play (Topham, et al., 2011). Over the next five to seven sessions, the parent and child actively practiced these skills with the therapist as observer. Feedback and discussions with the parent follow each interaction. Between sessions, parents are asked to plan weekly play times to continue practicing skills with their children (Topham, et al., 2011). In the final two sessions of treatment, the therapist helps the parent to generalize the skills beyond the play scenarios.

These techniques have proven effective in increasing parenting confidence and perceived ability (Garza, et al., 2007). The emotional coaching and on-going therapist feedback is integral to parents’ development of empathetic listening and use of consistent and appropriate limit setting with children (Topham, et al., 2011). These outcomes are consistent with the theoretic frameworks identified in social learning. The therapist-parent relationship in filial therapy serves as the means for influencing positive parenting perceptions and behaviors. The collaborative and shared learning approaches align with those central to the development of self-efficacy.

In the above study, parents who at pre-test reported: the lowest scores for emotional regulation, the highest levels of psychological distress, and the least satisfaction with social supports, demonstrated the greatest treatment progress in these variables at post-test (Topham, et al., 2011). Based on these results, filial interventions appear to have important implications for impacting parents’ management of their own stress levels and responses (Topham, et al., 2011). One explanation provided by researchers is through the emotional and behavioral coaching with their children, parents’ own emotional regulation perceptions and coping strategies are positively influenced (Topham, et al., 2011).
The social learning paradigm describes emotional regulation as the external functioning of perceived control over thoughts and actions (Bandura, 1989b). Through the therapist-parent relationship on which filial therapy focuses, parents’ appear able to demonstrate these efficacy attributes in parenting practices with their children. Filial therapy utilizes the parent as the primary agent of change for children, with the therapist focused on identifying and reinforcing parent strengths and progress (Topham, et al., 2011).

Collective efficacy is established when individuals work together to solve problems and provide mutual support in improving the quality of their lives (Fernández-Ballesteros, Díez-Nicolás, Caprara, Barbaranelli, & Bandura, 2002). The filial intervention process discussed in this section aligns with the social learning paradigms and demonstrates meaningful individual and collective efficacy outcomes for parents’. This investigation will focus on a mentorship model and utilize a collaborative action research framework to explore the influences on these efficacy areas.

**Adult Modeling**

Modeling techniques have demonstrated effective job performance outcomes when implemented in skills training programs (Taylor, et al., 2005). Based on an investigation of social learning approaches on worker performance and job efficacy, a met-analysis of 117 studies was performed (Taylor, et al., 2005). During their analysis, researchers attempted to identify and determine correlations between the types of modeling techniques utilized, and the learning effects. A worker’s skill development and the transfer of knowledge from trainer to trainee were greatest when practice scenarios were generated from trainee’s own personal interests and goals. Trainer feedback during practices and while the worker performed on-the-
job, were also consistently correlated with improved skill development and sustainment of skills over time (Taylor, et al., 2005).

Successful modeling interventions with parents have aimed at reducing their self-defeating responses to stress such as, negative feelings, avoidance, hostility, disengagement, and depression (McKee, et al., 2004). Negative coping responses to daily stressors such as parenting challenges, marital conflicts, and mental illness are shown to adversely influence parenting practices and developmental outcomes for their children (McKee, et al., 2004). Maladaptive coping styles may also decrease a parent’s ability to engage in treatment or to embrace the strategies offered. Modeling interventions designed to build up the protective efficacy tools of parents have demonstrated improved parenting choices, skills, engagement in positive support networks, and increased school participation with children (Webster-Stratton, 1998).

Interventions that include collaborative support, have successfully maintained the participation of high-risk parents. Whereas traditional parent training programs involving hierarchical professional-client relationships, have reported high parent drop-out rates (Webster-Stratton, 1998). For isolated and “insular” parents, accessibility to the intervention positively correlated with improved attendance and long-term improvements in function. The “Partners” parent-training program, utilized for treating conduct behaviors in young children, was studied for its applications as a community-based parenting prevention program (Webster-Stratton, 1998). The researcher utilized a randomized sample of 210 parents and their children drawn from eight Head Start centers. The sample represented economically disadvantaged families with higher than average risk factors (Webster-Stratton, 1998). Parents were randomly assigned to a control and experimental group, with the experimental group enrolled in a collaborative parenting skills training program.
Within the collaborative parent partnership model, administrators, teachers, family case workers, and parents work together to recruit, implement, and provide on-going evaluation of the program (Webster-Stratton, 1998). The relationships between trainers and parents’ are modeled around the principles of friendship; with many of the group’s leaders, former Head Start parents themselves to provide models and mentors with similar cultural and socioeconomic backgrounds and experiences. During the group, the trainer engages with parents through reflective and non-judgmental listening and shared problem-solving (Webster-Stratton, 1998). In order to build trust the group invites open-communication, with discussions shaped and directed by parents’ own personal experiences, goals, and relevant problems. Social learning principles shape the group’s format, which is based on challenging pre-existing parenting perceptions, formulating alternative beliefs, and engaging in affirming experiences (Conners, et al., 2007).

Learning is promoted through modeling, role-playing activities, and supportive feedback. Trainers help parents to consider contributing environmental circumstances and find effective ways to manage thoughts and actions. Parents are guided in using concrete strategies to replace negative self-talk and self-defeating thoughts with calming, positive statements (Webster-Stratton, 1998). Trainers reflect on parents’ strengths and successes in managing difficult life situations. New and affirming experiences within the group promote parents’ re-framing of emotions and promote confidence to approach future circumstances differently (Webster-Stratton, 1998).

The results of this study reveal positive parent engagement, clinically significant parenting responses to the intervention, and sustained results over time (Webster-Stratton, 1998). Researchers attributed these results to the collaborative methods utilized in the program’s planning and implementation phases. The initial willingness of parents’ to participate in the
program was high, with 65% of those eligible enrolling in the study (Webster-Stratton, 1998). In addition, attrition rates among experimental group parents’ was very low, with only 12% attending fewer than four of the twelve sessions. Treatment satisfaction surveys completed by participants in the training intervention revealed high engagement in the model. Eight-nine percent of these parents reported “positive” to “very positive” satisfaction, with more than 85% wanting the program to continue longer, and 95% saying that they would “highly recommend” it to other parents (Webster-Stratton, 1998).

Post treatment home observations with mothers who participated in the treatment groups, identified efficacious parenting practices with children. These were characterized by fewer critical remarks, less physically negative discipline strategies, and more positive, appropriate, and consistent parenting approaches (Webster-Stratton, 1998). Observational data also noted fewer negative behaviors, less non-compliance, and increased pro-social skills among the children of treatment group parents’.

In further analyzing these treatment outcomes, participants’ demographic data was examined and the characteristics of high-risk parents’ was correlated with their response to the intervention. Among the mothers in the sample, 71% showed a 30% reduction in use of critical statements with their children, while 29% did not demonstrate any effects in this variable (Webster-Stratton, 1998). Of those parents who did not demonstrate a positive response, 40% reported a history of substance abuse, as compared with 17% of the mothers who showed positive change in their observed parenting approaches. Psychiatric illness also appeared to be a mediating factor between positive responders and non-responders. Response to the program was not, however, affected by a parent’s reported educational level, minority status, depression level,
number of negative life experiences, availability of informal support networks, and history of physical or sexual abuse (Webster-Stratton, 1998).

As the social learning theory suggests, positive efficacy relies on expectations of control to manage life circumstances and difficulties. The essential goal behind collaborative intervention models is to motivate and empower participants to develop personally meaningful and relevant strategies that can then be generalized beyond the group (Webster-Stratton, 1998). The positive reinforcements and validating feedback provided by the trainer in these parenting groups, was designed to promote parenting perceptions of optimism and strengthen parents ability to effectively manage the needs of children and families (Webster-Stratton, 1998). The researchers hypothesized that a partnership between parents and trainers would lead to increased parent engagement, participation, and buy-in (Webster-Stratton, 1998).

Summary

These results have implications for practitioners designing programs for traditionally hard to recruit, retain, and reach parent populations. This study will examine how a collaborative parent-to-parent mentoring model applies these social learning frameworks to effectively engage high-risk parents and promote positive parenting and family outcomes. Improving the lives and futures of struggling children within this country today, may depend on these types of collaborative learning approaches that can help to breaking negative social and behavioral cycles and sustain change and success.

Chapter III: Research Design

Research Question

This study investigates the following research question: “In what ways does a collaborative parent mentoring intervention with high-risk parents’ impact parenting skills and
efficacy perceptions through social learning interventions, as perceived by parents, mentors, and organization stakeholders?”

**Methodology**

The qualitative inductive research approach chosen for this study aligns with the social learning philosophies framing the investigation. Inductive research is designed to develop a model for organizing and summarizing descriptive and observational data related to broad social concepts (Bogdan & Biklen, 1982). Through an inductive data collection and analysis process, the researcher utilizes participant perspectives and feedback to identify and link emergent themes and help to explain and understand the problem of practice (Thomas, 2006). Rather than the researcher as expert, this investigation style focuses on stakeholders’ experiences and the meanings that they assign.

These inductive practices model the collaborative mentoring approaches of the program under investigation. Just as parent mentoring focuses on “laboring together” to solve problems and create mutual support systems, inductive research facilitates the opportunity for the researcher to work together with participants from the ground up in assigning collective meanings and generating frameworks for understanding the problem (Thomas, 2006). The research format supports a collaborative study in which the members of this mentoring program can actively engage in the inquiry, analysis, interpretation of issues identified (Thomas, 2006). The purposes for using an inductive approach is, “to condense extensive and varied raw text data into a brief, summary format; to establish clear links between the research objectives and the summary findings derived from the raw data, and to develop a model or theory about the underlying structure of experiences or processes which are evident (Thomas, 2006, p. 2).” As a means of building collective understandings about the mentoring interventions and the
organization’s practices, this process also provides participants with the opportunity to consider next step options for improving future practice and supports to parents and mentors.

**Site and participants.** The sample for this proposal was drawn from current and former participants of a non-profit parent-mentoring program, Parent Partners, Inc. As a qualitative approach, inductive research utilizes a “purposeful” selection of the stakeholders directly involved in or affected by the problem or issue under investigation (Bogdan & Biklen, 1982).

For this investigation, all past and present parents, mentors, and program members were invited to participate in the sample. Multiple locations serve as sites for this investigation. These include parent’s homes and various community locations used during the mentoring observations.

Comprehensive lists maintained by the program were utilized to generate the list of potential participants and ensure that all key stakeholders were given the opportunity to participate in the study. Letters explaining the study and the role of participants were e-mailed to all identified stakeholders. In order to encourage participation, current and former mentors, as well as the program’s executive director, placed follow-up calls to parents’. The final sample included three parents and seven mentor participants.

**Data collection.** In inductive research, themes and knowledge emerge from the ground up rather than from a pre-determined hypothesis or theory (Thomas, 2006). Within the data collection process, the researcher attempts to elicit and clarify participant meanings about concepts and issues under investigation (Thomas, 2006). In this study, the researcher employed her social work skills and training as a means to promote trust and open communication with participants during the interviews and focus group, and for building consensus and developing common themes as part of the analysis phase.
The data was obtained from multiple sources using observational and first-hand accounts (Maxwell, 2005). This strategy of data triangulation helps to reduce the risk of researcher bias and provides a broader understanding of the issues being investigated (Maxwell, 2005). The final data was compiled from three individual parent interviews, one mentor focus group, one mentoring observation, and a program document review. The data collection period was between the months of June and July. An interpretive inquiry method was utilized to collect the data (Maxwell, 2005). This was comprised of both narrative and observational accounts with audio transcripts and field notes providing detailed descriptions of activities, times, places, purpose, and researcher’s perceptions (Maxwell, 2005). Notes and audio recordings also help to insure that the data transcripts accurately captured and reflect participants own words and language.

**Parent interviews.** The total parent sample for this study was drawn from 19 current and past participants. Although the goal had been to perform 15 parent interviews, three were ultimately conducted from those who responded. Interviews were led by the researcher, in a face-to-face, one-on-one format (Creswell, 2009). The locations of parent interviews were chosen at the convenience of the parent and included a parent’s home, the Head Start site where the child attended school, and a YMCA during the child’s swimming lesson.

Aligning with the collaborative research approach, open-ended questions were utilized to elicit participant views and opinions (Creswell, 2009). These interviews included “carefully defined questions” specific to the mentoring relationships, goals, parenting beliefs and practices (Maxwell, 2005). (See Appendix A) Topics focused on perceptions about the effectiveness of the mentoring tools and processes, the impact of mentoring on parenting practices related to family and social relationships, education and school involvement, and outlook for the future.
**Parent mentor focus group.** One mentor focus group was conducted for this study with seven participants. All 19 current and past mentors had been invited to voluntarily participate in a focus group. Open-ended questions for the focus group were framed around the same topic areas covered during the parent interviews, attempting to identify similarities and differences in themes and perceptions between the two groups. (See Appendix B) An off-site, neutral location was utilized for this group.

**Observations.** At the voluntary consent of the parent and mentor, one mentoring observational was conducted during this study. The location for the observation was a Frosty Freeze ice cream stand where the parent, mentor, and child regularly met after swim lessons. The observational protocol used (See Appendix C) captures the researcher’s reflections and observations, as well as, the dialogue and behaviors related to social learning, self-efficacy, and mentoring (Maxwell, 2005).

Notes included detailed descriptions of the context, parenting strategies, communication techniques, observed modeling strategies, and activities relevant to parenting goals. Descriptive notes were focused on the context, dialogues, and events, while reflective data allow for the researcher’s personal thoughts, impressions, feelings, and hunches gleaned from the observed session (Creswell, 2009).

**Document review.** The final phase of data collection involved Program documentation relevant to mentoring policies and procedures, mission statements, goals, and descriptive materials. These included the tools used for developing and tracking mentoring activities and parenting goals, parent and mentor surveys, and mentor training materials. (Appendix D-J) This data enabled the researcher to obtain the language and words of the Program and its participants in considering the historical materials developed in a thoughtful and meaningful way (Creswell,
2009). These documents also provide the reader with an orientation to the key program characteristics and allow for further analysis of the alignment between participant perceptions and the Program’s overarching goals and practices.

**Data analysis.** A qualitative analysis was conducted for this study supported by the open-ended and collaborative inquiry strategies employed during its data collection. As part of this process, data has been analyze in an on-going way after each interview and observation (Maxwell, 2005). In keeping with the inductive frameworks of the research model, participants’ were engaged along the way by the researcher through cross-checking and debriefing about the accuracy and validity of data transcriptions (Thomas, 2006). During the initial data review stages the researcher carefully re-read and/or listened to interview recordings and observational notes (Maxwell, 2005). During this first stage review, potential concepts and themes related to mentoring strategies and parenting outcomes were identified (Maxwell, 2005).

The qualitative coding analysis chosen for this study was also “inductive”, utilizing “open-coding” strategies supportive of the process-oriented research question and evolving data collection methods (Maxwell, 2005). This coding analysis involved substantive categorization of the data determined through ongoing interactions with stakeholders and utilizing participants’ own words and the researcher’s observational descriptions (Maxwell, 2005). Rather than beginning with broad codes and re-sorting into categories, this analysis linked connections from the data to assess meaningful mentoring influences and dynamics (Maxwell, 2005). The focus was on identifying concepts from participant statements and observed events in constructing and formulating a coherent understanding of the question under investigation (Maxwell, 2005).

**Coding.** The coding process included first and second cycle methods (Saldana, 2009). The first cycle strategies were employed during the initial data analysis stage and included both
In Vivo and Values methods (Saldana, 2009). The “In Vivo” codes provided items indicative of “participant language, perspectives, and worldviews” (Saldana, 2009, p. 48). In Vivo level analysis also provided a tool for the researcher to identify participants own meaning, views, and actions to explain how the issues, problems and themes being explored were perceived and applied (Saldana, 2009).

The Value Codes were used to label items specific to participant’s “values”, “attitudes, and “beliefs” (Saldana, 2009). Values codes were assigned to those statements or observed behaviors that indicated importance attributed to a concept, idea, or person (Saldana, 2009). While attitude codes signified a participant’s feelings about a topic areas. Belief codes combined the two and helped to incorporate social perspectives and worldviews within the interpretations (Saldana, 2009). Once these individual codes were assigned, the next step in this first cycle was for the researcher to create broader categories by reflecting on common meanings and interactions across the data collected and concepts identified (Saldana, 2009).

Second cycle coding offered the researcher an advanced way of reorganizing and reanalyzing the data coded during the first cycle (Saldana, 2009). In this stage, the goal of the researcher was to develop a smaller and more select list of categories and themes. Axial coding was one of the second cycle methods employed in this study to “reassemble” the first cycle themes. Utilizing the emergent themes and concepts, axial codes were used to help formulate and build broader meanings by bringing the initial cycle codes together and identifying more inclusive correlations among them (Saldana, 2009). This second level analysis also incorporated data triangulation by employing coding “saturation” across data collection methods, at which point the analysis did not reveal any new information or themes (Saldana, 2009).
As a means for effectively examining the theories of social learning and efficacy within the data, theoretical coding was also incorporated in the second cycle analysis. Here the first cycle codes were assembled and reviewed in order to identify any theoretical concepts across contexts and participant feedback (Saldana, 2009).

**Validity and Credibility**

In considering the threats to the validity and credibility of this study, the researcher attempted to account for the accuracy of participant descriptions, perceptions, interpretations, and explanations by cross-checking and reflecting back to participants after each encounter (Maxwell, 2005). These strategies were also used during the data analysis phase to rule out possible alternative explanations for the relationships and connections identified (Maxwell, 2005). In attempting to insure that parent feedback was shared openly and honestly, the researcher utilized the mentors and the Program’s executive director to gain trust and access to these participant interviews.

The single researcher model employed in this study posed potential threats of researcher bias during the data collection and analysis (Maxwell, 2005). Through its collaborative research model, the study design helped to address and correct for this threat by involving participants and program stakeholders during the inquiry and analysis phases (Thomas, 2006). Outcomes generated from inductive qualitative research can only be applied to the particular people and contexts included in the study, therefore the transferability of these results are limited to the specific details, descriptions, activities, and events provided (Thomas, 2006). Finally, in order to minimize threats to data trustworthiness, an “audit trail” was been maintained of the procedures followed, and time lines for data collection, field notes, and audio tapes (Creswell, 2009).
Protection of Human Subjects and Ethical Considerations

Inductive research poses unique ethical considerations for the informed inclusion of participants (Thomas, 2006). As some of the participants in this research sample were active participants in mentoring services, efforts were made to insure that all were fully informed before agreeing to participate. Informed consent agreements were provided and signed by all participants’ prior to the start of data collection and included statements pertaining to voluntary participation, confidentiality, and the freedom to withdraw at anytime (Creswell, 2009).

Due to the vulnerable life circumstances of many parent participants in this study the potential for areas of harm were increased. As a result, safeguards around confidentiality and the protection of identity and personal information were a priority. All personal information gathered was securely stored, and not be shared with others without the participant’s consent (Creswell, 2009). In addition, pseudonyms were used to replace the real names of parent participants and mentors to further protect confidentiality. Finally, the data collected from participants during the study was returned at the conclusion of the research.

Chapter IV: Report of Research Findings

This chapter will discuss the key findings from the research collected through interviews, a focus group, direct observation, and document reviews of the Parent Partner’s mentoring organization. The first section provides a brief overview of the study’s context, followed by a description of the coding processes, and sections highlighting the emerging themes relative to the research question and theoretical frameworks.

Study Context

The Parent Partners mentoring program is currently in its third year of operation. Its founder and executive director, Elizabeth Stearns, developed the idea for a parent-to-parent
mentoring model when working with youth at risk following the incarceration of a parent. As Elizabeth explained, the problems that she encountered in attempting to help these children was the overall lack of positive adult role modeling and support available to them at home. The central frameworks for this mentoring program is to matching older, experienced mother’s as volunteer mentors with younger, at-risk mothers and children. The Program currently operates in the Little Compton, Tiverton, Middle Town, Portsmouth, and Newport, Rhode Island areas.

Since its inception, over thirty mothers have been supported through these collaborative mentoring relationships. There are currently ten mothers and mentor volunteers participating actively in the Program. Parents (currently all mothers) are mostly been referred by area schools, mental health providers, youth protective service organizations, and by other parents participating in the Program. The majority are single mothers, with significant risk experiences such as domestic violence, foster care, sexual abuse, drug addiction, incarceration, school dropout, unemployment, poverty, and isolation from positive support systems. The volunteer mentors have almost all been recruited through friends of the executive director. They are comprised of mature, mostly Caucasian women from middle and upper middle-income families whose own children are grown.

Operating as a non-profit organization, Parent Partners is currently receiving its funding through small business and individual donations. This researcher has served as a member of the organization’s executive board since May 2011. There are currently seven executive board members and five outreach board members comprising the organization’s leadership team.

The final sample for this research study was considerably smaller than initially targeted. Several factors appear to have effected this lower than expected participation rate. One possible explanation was that during the summer months, the formal Parent Partner’s group activities
were suspended, decreasing the opportunities for parent recruitment. In addition, mentoring sessions between parents and mentors were less frequent due to children’s summer schedules, further reducing the researcher’s access to participants.

Coding for Themes

Themes were coded in relationship to the research question and the theoretical framework comprised of social learning and self-efficacy theory. As discussed in a previous section, the first cycle codes included “In Vivo” data that captured “participant language, perspectives, and worldviews (Saldana, 2009, p. 48).” While the Value Codes identified participant statements and behaviors significant to their beliefs, attitudes, and values as related to the problem under investigation (Saldana, 2009). In the second cycle coding processes, the researcher attempted to build broader meanings and themes from the data using Axial and Theoretical Coding methods (Saldana, 2009).

Parent Interview Themes

Through the coding process as described above, several themes were identified through close review and analysis of parent interview transcripts. Table 1 presents these themes as identified, and each of the themes as identified are discussed below.

Table 1

*Themes identified in the Parent Interviews*

- Social isolation from positive natural supports.
- Mentors demonstrate mutual respect and understanding towards parents.
- Personal goal setting is important to the mentoring process and parent success.
- Mentor role modeling and positive support help parent to break negative cycles.
Parenting skills are influenced by the hands-on role of mentors.

The mentor helps parents manage their children’s school and learning needs by directly supporting them through the process.

Working together with the mentor and other parents, helps build confidence and sustain progress.

**Social isolation from positive natural supports.** These parent participants described themselves and their lives as being socially isolated from positive natural supports. Kati explained, “I grew up in Japan and I did not have support from my mother and grandmother.” “They always said, You can’t do that.” Now “we (my son and I) don’t have anyone here to do things with.” Kati also shared that since she did not have a car, she had been cut-off from accessing counseling appointments and extracurricular activities for her son.

In Joanne also described feeling cut-off from others:

> I don’t go out so I don’t really have people to talk to that have kids that could show me different ways to do things. I was looking to get help with maintaining stability in the household with the kids. Because they were out of control, doing whatever they wanted to do. Mentors are obviously much older than us, in most cases they’ve been through more stuff. They have different techniques that you can use.

Nina left her family in Providence three years ago and moved to Newport alone with her three children.

> My plans were to be out there. I wanted a better atmosphere away from the negativity. But when I got back to the house, I wasn’t doing anything. I was kinda in a shell that I
didn’t want to get out of. What appealed to me was basically, ‘we’re older parents helping younger parents.’ So just knowing that they were older parents that had children that had gone through elementary, middle, and high school. If I have a question about something they will know. Like with my own mother, there were questions that I couldn’t ask her. I was the oldest of five children and I didn’t finish high school. And I was like maybe I can get some skills from people who have went through it with their own children. Who could help me with certain things.

**Mentors demonstrate mutual respect and understanding towards parents.** Themes of mutual respect and common understandings were repeated throughout these interviews as parents described the value of their mentoring relationships. Nina explained: “I am treated like with understanding and I’m not being treated like a child.” “And that’s important to me because the world I use to be in, my thinking or way of doing stuff was never good enough.” According to Kati, “Mary doesn’t judge.” She is “like a friend” and “more like family than mentor.” Joanne explains that she connects with her mentor, “by being able to talk about different things that are happening in my day and weeks.” Regarding mentor matching and the qualities that these parents think are important, Joanne identified basic human commonalities, “everybody has troubles in handling their own issues”. “And they came up with their own ideas on how to manage and get through tough times.” So this helps because “you’re on the same level as them, you’re seeing stuff from the same point of view.”

These parents also shared beliefs that the mentor cared and was there to help them succeed. This appeared to be a factor attributed to their longevity in the program. Nina explained how Parent Partners compared with other programs in which she had participated:
The mentor sessions are really relaxing and no pressure at all. It’s not like your being investigated or something. Because I had that with some programs down in Providence. I wanted to get into it to help me with some stuff. But it wasn’t moving me forward. It was actually leaving me where I had been before. Because they would come to your house and have visits and check-up on you. It wasn’t like, what’s going on with you? Or, what do you want? It was always just like checking on your living conditions. Its not something that I want youz coming over waiting for me to mess up or something. With this program, if my house did look messy they would be like, you know maybe we need to set-up some ground rules for the kids. It wasn’t like, oh my God, your living situation is a mess and we need to report you.

**Personal goal setting is important to the mentoring process and parent success.**

Here, Nina described her involvement in the goal setting process:

There was a lot of stuff on the wish list and basically it all came from me. It was like what is it that you want to do for your children and for yourself? We put down a couple of things and you know we didn’t just write it down. It was like, this is your first thing? Let’s get on top of it. It moved pretty fast too. It was like, you want books for your kids? Let’s go get you a library card. It was really quick being checked off.

In addition to getting more books for her kids, Nina included obtaining her GED and getting her three girls into modeling on her wish list. Joanne identified the goals of involving her kids in more activities and going back to school. Kati focused on getting her son into counseling to address his ADHD, to be able to do more things as a family, and to go back to school.
Within these discussions about personal goals, each parent appeared to highlight their beliefs about the importance of being better role models and providing better opportunities for their own children. As Kati explained:

I come from Japan where there is no support for people. If you fall down you have to get up yourself. I think that it is nice in this country you have things to help people when their down.

Joanne described her reasons for going back to school:

Can’t be a CNA forever. The pay is just not there. Just got to get a better job because the kids are going to look when they get older and there are going to be questions like, what does your mom do? And then when their older they can say that their mom’s a nurse, successful. So maybe they will want to follow in the footsteps. Maybe not necessarily being a nurse, but going to college and getting an education with actually being paid at a decent rate and to be able to afford to live.

Nina explained how the goals helped focus her in accomplishing the things that were important to her and her family. “Like if I say that I’m going to sign the girls up for the YMCA, she will be like, did you do that yet?” “You know she reminds me about certain things that I said I was going to do for the following week.” “I need structure so bad.” “I can remember that I did that last week.” “Instead of just thinking that I was home watching TV, I did something that was good for my kids and myself.”

**Mentor role modeling and positive support help parent to break negative cycles.** In relating their mentoring experiences, these parents valued the positive feedback given by mentors. Kati explained, “my mentor says, you can.” She reflected further on how she believed this support and modeling helped to break negative cycles: “For my son, he takes after me about
not believing he can do things”. “Mary is not like that so she can show him how to feel differently”. “So that my son can feel differently than I do.”

Nina verbalized her struggles with self-defeating thoughts and the value of positive feedback in her progress: “My mentor is really into building my self-esteem.” “She helps make sure that I’m not thinking wrong.” “She’s like, no you’re not doing anything wrong.” “Which is good because sometimes I feel like I’m not doing the right thing.”

Mentors also worked through difficult times with parents often providing effective strategies and coping techniques. Nina shared her beliefs about her mentor’s role in helping her to recognize feelings of stress and to manage them more effectively:

When my house gets messy and I can’t handle it. I get stressed out. And I know it has nothing to do with my kids making a mess. I will call her (my mentor). I have even called her crying that I can’t handle it. She definitely will help me breath. She even helped me to take a yoga class, just to relax. And I need that so that I can learn how to relax. I want to learn how to control my emotions to be able to be in control for my children and to lead by example.

**Parenting skills are influenced by the hands-on role of mentors.** These mothers attributed the hands-on roles of mentors in supporting their families through day-to-day parenting challenges with promoting their personal and parenting skills. Through the mentoring relationship, many described their exposure to new experiences, activities, and ways of approaching daily struggles. Kati credited her mentor with helping her son to join sports and with being more socially active:

She likes sports which is good for my son. She helps him try sports. She takes him because I don’t have a car. She has always said that it is no problem to do this. She has
the energy to take us places like the beach which is good for my son. We don’t have anyone here to do things with.

Joanne valued the mentor’s concern for her children:

She’s very good with the kids. Talks about different activities that I could do to maybe help the kids. Look forward to things and helps keep them on track of behaving. Use that as something that will help them want to do better. She suggested joining the YMCA which has been an excellent help. And I applied for financial aid and now have been a member for quite a while. And the kids are happier they have someplace to go.

The mentor also goes with me on appointments for Jessie and Karla (her daughters). It’s important to tell the psychiatrist how she is acting in different areas and how she’s acting with different people. Because she does act different with different people.

For Nina, the mentor helped overcome fears and promoted her involvement in things within the community:

I definitely wanted to know what is out there that was beneficial to my kids and they brought that up to speed. And I don’t read the newspaper and when its about helping my kids you know, I’m all for it. And that’s what they were there to do. To help me do lots with my kids. Like the kite festival on Ocean Drive. They were like, the next time we meet we should bring the kids. Or, there’s something going on at the library that would be fun for the kids and so on. And she would bring tons of activities to do with them. I like it because that helps me to come up with some stuff too.

These parents also valued the natural supports offered by mentors. For example, Joanne discussed how the mentor came after work to help her learn to prepare nutritious meals for her
four children: “I don’t cook very often, but Ms. Stephanie she cooks all the time and helps
prepare meals for the kids.”

In Nina’s home, the mentor guided her through the bedtime challenges:

   She says, don’t let them watch TV late at night. And like the lights. At one point my
twins became terrified of the dark. And my mentor gave me advise and strategies to use
with them to help them. Like going to the library and getting books on tape and playing
those. And just sitting with them on the bed and talking to them about not being scared
and stuff like that really helped.

   The roles that mentors played in shaping parents social and emotional behaviors were
also evident through these parent interviews. Joanne shared her views and approaches to conflict
management with her children since the mentor’s involvement: “Having each one of them sit
down and be able to talk to each other about what they like and what they don’t like”.
“Discussing with each.” “You’re never going to find out if you don’t sit down and tell the other
person what’s bothering you.” She described how these attitudes and skills contributed to their
improved behaviors: “Being calm and the way you treat the kids and everything”. “Different
techniques you can use”. “Helps the kids not go wild and to express their own opinions.”

   For Kati, her son’s high energy level often caused her stress and made it difficult for her
to respond to him in a positive way. She described how she came to recognize her limitations
and the value of positive supports: “Mary listens to him when I can’t”. “Because I’m tired”.
“He talks all the time and she can listen one day a week when she comes”.

   **The mentor helps parents manage their children’s school and learning needs by
directly supporting them through the process.** For parents who themselves have not had
academic success or positive school experiences, managing their children’s educational lives can
feel overwhelming. Nina explained how she believed the mentor helped her to navigate a difficult situation at her daughter’s school:

Like kids will be kids and they will get in trouble and at one point you have to go in and have it out with the school. And at one point, I was getting so frustrated. I had my mentor saying the school system is here to help you and never attack them. They gave me the best advice ever about how to approach them. That as long as the school system feels that you are concerned for your child and involved in your child’s education, their not going to ignore you and the problems that you are trying to voice out. So just having them on my back and helping to direct me in how to handle that situation was very helpful.

Parent-teacher conferences can also be an intimidating process for parents. Nina shared her feelings about how the mentor modeled and coached her through it:

They would come with me to the school and that is even better because sometimes I would not know what to say. But she would say, we need to bring this up and ask what we can do at home to help. But then I would have forgotten what to say when I got there. But just by having her there, I would come home and know what to do.

Mentor role modeling and support also played a part in helping these parents to overcome barriers in advancing their own educational and career goals. Joanne described how the mentor helped her get through the first steps:

I saw the flier for CCRI (Community College of Rhode Island). So there was an invitation for open enrollment and what to do to enroll. Ms. Stephanie went with me and I wasn’t sure what to do, whether to take nursing. I ended up enrolling and taking the necessary test and all that.
Nina also attributed her progress to the mentor’s involvement:

So getting into the GED program was really the beginning of it all. Because I don’t really like to be around other people too much. I feel claustrophobic sometimes and I definitely if I’m not feeling the atmosphere around me, I’m turning around and going the other way. But she came with me, and that definitely pulled me forward and helped me to do what I had to do.

**Working together with the mentor and other parents, helps build confidence and sustain progress.** Part of the Parent Partners program is a monthly event held for parents. These have included healthy cooking and meal planning demonstrations, bowling nights for the children, as well as, an “Amazing Mom’s” series featuring mothers who share their stories of success in overcoming adversity. When asked about the value of connecting with other parents, Joanne identified feelings of hope and inspiration: “because you could see the progress that they made.” “Because that is where you want to be.” “Because you could be one of the speakers.”

Nina believed the gatherings served to empower parents: “When we’re all together we learn from each other.” “When we go around the table, we all have a different solution for a problem.” “And sometimes instead of a mentor, a parent will actually be giving advice and a solution for how to go about a situation.” Nina also valued the role of helping other parents: “Sometimes Ms. Elizabeth (the executive director) asks me to follow-up with a parent about some resources or information that I have.” “I’m good at that stuff.”

Nina attributed her motivation in part to being able to share in her accomplishments with others: “I actually had one person to be proud of me.” “So just knowing if I did accomplish something, I had someone.” “I couldn’t feel sorry that I could have my family and friends who I thought should be here and feeling happy for me.” She also feels pride in herself through the
recognition given to her: “That their like, here is this young woman with three children that’s been through all this and she’s still standing here in front of me, trying to make it somewhere with her children.” “And that’s amazing.”

**Mentor Focus Groups Themes**

Data triangulation is one mechanism used by this study to improve the validity, reliability, and trustworthiness of its results (Maxwell, 2005). The open-ended questions (Appendix B) asked during the mentor focus group enable the researcher to compare and contrast themes, concepts, values, perceptions, and ideas with those elicited during the parent interviews. Nina (also a parent in the program) was present for the mentor focus group, as she was in the process of transitioning into a parent liaison/interpreter role within the organization. Table 2 highlights the themes identified from the mentor focus group.

Table 2

*Parent Mentor Themes*

- Mentors provide natural supports to parents through their own life experiences.
- Mentoring relationships with high-risk parents begin with the basics of a friendship-mutual respect and understanding.
- Parent-driven goals create a shared commitment and starting point for a meaningful mentoring relationship.
- Positive feedback and modeling is central to the mentoring and social learning process.
- Mentors help parents gain academic efficacy by providing direct support, modeling, and feedback during pivotal events and experiences.
Mentors promote collective efficacy skills by promoting healthy natural support systems for parents.

Mentors provide natural supports to parents through their own life experiences.

Mentors relay a common belief that the expertise they offer to parents is drawn from their own life experiences. The motivation to serve as a mentor appears to stem from their value of the program and the desire to help. As Norma explains, “I’ve been a mentor for five minutes.” A recently retired community health nurse, Norma joined the program after being approached by the executive director to help provide support to a mom living in her community. She summaries her motivations this way: “I thought the whole idea of the program was phenomenal.” “I just wanted to have some role in it.” “I didn’t feel that I could mentor so much”. “But I just wanted to offer some kind of support.”

Teri started as a technical support volunteer for the program. She became a tutor for a parent and then evolved into a mentor. “And I now have such a relationship with her, that she will call me to tell me about the new job that she got.” She adds, “I don’t really feel so much like a mentor.” Justine highlights her views on the essential tools of mentoring in this way: “Having raised four boys and big families and stuff we have some training through osmosis and stuff because that’s what we’re doing right?” “I mean taking talents and learned experiences and stuff and sharing them.” “So I had plenty of that.”

Julie summarizes her mentoring credentials as a former educator and owner of a tutoring center, as well as, a parent of three adults. Like Teri, Julie started in the program as a parent tutor, and stepped-in when the previous mentor had to leave the program due to family problems. She has now been working with the parent for over one year.
Mentoring relationships with high-risk parents begin with the basics of a friendship—mutual respect and understanding. The theme of isolation from family and friends remains a central one during these mentor discussions. When describing their mentoring relationships, mentors highlight their feelings of respect and admiration for parents. Here, Justine recounts the mentee’s story and her impressions: “I often heard, I want to do it differently, that’s why I’m living in East Providence, so far from my family.” “And I thought that was very brave.” “You hear the history and you would say this is hard man what you’ve done.” “I would just praise her all the time.” I would have caved a longtime ago if I was her, so I had a healthy respect for her strength.”

Mary describes similar sentiments during her first meeting with Kati (now two years into the relationships): “I had a great deal of respect.” “That she was willing to take the first step” “Because there is a lot of shame and isolation.” “Because you know going into this, you’re not just getting something out of this, she was giving.”

Julie illustrates her beliefs about taking it slow in order to establish trust:

Know each other’s background so that you know where each other is at. My children are all grown now, but I surely remember what it was like to bring them up. And it takes me back to some of the ideas, or the things that we did together, some of the struggles that I had as a parent and I can relate to being a parent now. I think that requires a lot of trust. I think you need that to grow.

As Marianne describes it, the essential commonality between parents and mentors is, “..that the parent wants to succeed and the mentor wants them to succeed.” “And that seems to be the most important common goal more so than if they’re ethnically or culturally the same, or
share the same morals.” “It’s everybody wanting that person to succeed and working in that
direction, seems to be what really makes this work.”

Mary describes her mentoring connection this way: “We couldn’t be more different”.
“We’re culturally different”. “My girl’s from Japan.” “And I think that we have bonded.” “I
don’t think that we have a lot in common, but I think that there is a little boy that I think we both
want to see do well.” “And how we can achieve it.” Mentors seem to be explaining the value of
having a basic concern for each other and for the children rather than a common background as
the primary quality in the development of the mentoring relationship. Justine summarizes the
group’s beliefs this way:

Just like any of our relationships, that’s human nature. That’s why I don’t think that we
are any different than the parents that we are mentoring, basically the same. The same
needs. That someone cares. That someone cares about our kids. That it’s ok to make
mistakes. But what do you need? What do you need out of life? When your kids get
big, what do you want? To let them think about what comes next, and to be able to
dream.

**Parent-driven goals create a shared commitment and starting point for a**
**meaningful mentoring relationship.** Justine describes her views on the importance of the goal
setting process: “We meet them where they’re at.” “They fill out the wish list.” “I didn’t impose
any of this.” “We worked off her wish list and tackled them one at a time.” Mentors also
identify the value of the goals in providing initial success and buy-in, while offering them a less
threatening entry point into a parent’s life. Justine describes her beliefs this way:

Committing to the three things you want to work on and then you check things off so
there is some closure, when you’ve accomplished it. Then it was a back door way into
some of these other things that we started discussing. Which I think is the beauty of the program. Is they’ve got to put some skin into the game and want to do it.

Nina describes the goals as a way to define and focus the relationship: “I think that when you’ve built a friendship you do things based on that, like going out to dinner and stuff.” “But when it comes to the mentoring, you have to be specific and laid-out and stick to the wish list and stuff like that.”

Positive feedback and modeling is central to the mentoring and social learning process. Justine shares her beliefs about the value of mentor feedback within the relationship: “I think the messaging is key.” “Because as you say you need to keep hearing these things because you just didn’t have that belief because you hadn’t heard it.” “I think the messaging just comes naturally from the relationship and from the type of person that wants to become involved in this.” “It kind of goes hand-in-hand with the natural inclinations that are there.” For Teri this process unfolds when she and the parent work on a budget together, “I kind of mentioned to her that you know if you stick a little money in the bank whenever you can, to do that.” “But mostly just often times if there is so little self-esteem in their ability to do things, letting them know that you’ve already accomplished a lot.”

The messaging and feedback described by these mentors also seems to represent a means for modeling significant attitudes and behaviors to parents around achieving goals and setting priorities. Justine describes helping the parent with her goal of getting a better job:

She was right in the middle of a jobs program and that was really, how are you doing? Are you getting your homework done? You’ve got to get to school. I’ll come pick you up, let’s go. And follow-through and consistency. If you try and it doesn’t work that’s not a problem, but you’ve got to follow-through.
Mentors help parents gain academic efficacy by providing direct support, modeling, and feedback during pivotal events and experiences. Mary models this support through her dialogue with Kati and her son around his school performance:

We often talk to him and how he’s doing in school. Did you have any bad things or good things happen at school this week? And she can say, well he’s had some good things. And so she can have someone to tell those things to. Because she doesn’t have anyone else that cares about those things. So I want to get a feel for how she dealt with it. And she knows that I’m going to come right in after her and tell him the same thing, too. You know you made a bad choice, right? You know why, right? So he’s going to get it from more than one direction. And I think that that’s a good thing. He knows that that he has people that care about what I’m doing, what choices I’m making.

Within these mentoring relationships, the mentor appeared to serve as a surrogate for other natural supports. Justine recounted attending school conferences together with the parent: “I think it was more not having a comfort level in the classroom.” “No (previous) role modeling.” “No friend, neighbor that was doing that.” “So she was the first.” “So just going to the conferences and following-up on the list of things that they gave her.” Nina describes the mentor as someone who could guide her in ways that her family could not: “Just knowing that they are older parents that had children that had gone through elementary, middle, and high school. “If I have a question about something they will know.” “Like my own mother, there were questions that I couldn’t ask her.” “I was the oldest of five children and I didn’t finish high school.”

Working together with the mentor and other parents, helps build confidence and sustain progress. Mentors identify the establishment of a natural support system for parents as
being one part of this collective empowerment process. Justine explains: “I was intrigued by using natural resources in the community to match natural needs.” “We all need social supports.” “And those especially who are without the social supports that they left because that’s not the role modeling they want or need.”

For Mary, mentoring has evolved into a positive social and emotional support system for the parent and her son (which includes the mentor’s husband and grown sons): “If I wasn’t doing what I’m doing, she wouldn’t be doing the things that she’s doing, that is helping to make him a more secure child.” “So I try to reinforce that we love him and that we’ll be there for him.” “If he has fears, to address them with us so that we can keep him feeling safe.” “..there is a support system there that he has never had.”

Teri adds, “It’s a program that does empower the families and the moms to support themselves.” “To get whatever they need to get past their obstacles so that then they can be much better functioning for themselves and their kids.” “So it kind of gets them out of that cycle of need.” The goal of achieving self-sufficiency is highlighted through Nina’s views on successfully completing the program:

Once the mentee feels that she’s graduated then she steps away. That you feel you have pretty much graduated from the program and can do it on your own and basically walk away and you’ve got things handled. Because if the goals are being set and you’ve accomplished them then you can pretty much step away. It might take six months, it might take a year.

In considering the length of time needed to develop a trusting collaboration, there was some disagreement among these participants. Justine expressed her beliefs that a defined time period is important for both the parent and the mentor: The parent is “motivated to want to
improve”, and has, “to voluntarily agree to participate and commit for six months.” For the mentor it is a way to attract participation, she explained, “I think that that’s an attractive piece for people today.” “All of their commitments are sliced into little parts.” “So it’s almost a reverse psychology for people.” “Oh six months, I can do that.” “And then you end up staying.”

The mentoring experiences of some participants, however, seemed to indicate the value of maintaining longer-term relationships. Nina’s explained that more time together is necessary in order for high-risk parents to build trust:

That’s why the six months is hard. That seems a little short. You have to build that trust first before you can say ok this is what’s really going on with me. It’s good to have enough time to know what’s going on with the mentee and mentor. Because a lot of these parents have a lot that they are going through and you wouldn’t be able to know the whole story. So they can open up and feel that there is enough trust.

**Mentoring Observation Themes**

A first-hand observation of a mentoring session was the third data collection tool utilized in this study to explore the mentoring processes and identify reoccurring themes of social learning and efficacy. This researcher had access to one mentoring session between Mary and Kati. As part of their usual mentoring arrangements during the summer months, this observation took place with the parent, child (Justin), and mentor at a Frosty Freeze stand at 6:30pm.

Table 3 highlights the themes identified.

<table>
<thead>
<tr>
<th>Themes identified through parent mentor observations</th>
</tr>
</thead>
</table>
The relationship between the parent, mentor, and child appears very close and mutually supportive. From their discussions, it is evident that many experiences have been shared together as related to the mentoring goals established.

The relationship between the parent, mentor, and child appears very close and mutually supportive. Through the initial exchanges between Mary and Kati it appeared that these were well established routines and this was a relationship characteristic of a close friendship. For example, Mary teased Kati about always choosing a different flavor ice cream, “Why don’t you just get chocolate.” She then added, “There’s another place that we should try together.” “I’ve heard it has great Mango ice cream.”

The dialogue between the mentor, parent, and child also signified a closeness normally reserved for family members. Mary appeared to take on the role of a surrogate grandparent in her relationship with Justin. In addressing or answering him, Mary used the endearment “honey”. Mary explained that her husband also spends time with Justin and that he thinks of the child as a grandson. This theme of a natural support was further illustrated when the subject of Thanksgiving came up. Mary shared details with Kati about her own son, whom it appeared Kati knew from past family gatherings and activities together. Plans were made for Kati and Justin to attend this year’s holiday.

Many experiences shared together related to mentoring goals and promoting mentoring practices. This observation also provided descriptions of the many mentoring experiences shared together. The three talked about the different sports that Justin had tried, such as baseball and basketball, before finally settling on swimming lessons. Mary modeled
empathic parenting skills with Justin during the observation: “That’s ok. It’s good you tried.”

“Now that you’re taking swimming lessons, I didn’t have to stay in the water with you the whole time last weekend, like I did last year.” Mary’s statements of concern and validation also targeted Justin’s academic efforts: “What did you do today in math and science?” “Is your teacher reading you any more from that series, The Lion, the Witch and the Wardrobe?” “We said we were going to see the movies.” “I don’t know if I can rent them for my TV anymore.”

Mary also engaged in a conversation with Justin about making good choices: “Do you remember our past conversations about not following your friends if you know it’s not right?”

Mary next recounted a discussion around smoking, which is of particular concern because of a heart defect that Justin has: “Do you remember promising me that you would never smoke?” Justin’s reply indicates that this is a recurring discussion: “I promised you a million times.” Mary demonstrates that she has also provided Justin with strategies for managing these potentially challenging social situations: “Do you remember what we told you that you could say if your friends ask you to smoke?” “That you have a bad heart.” “That you’re saving your heart.”

**Document Review Themes**

In the final data collection and analysis phase of this study, a review of the Parent Partners’ missions, goals, mentoring materials and measurement tools was performed to explore how these documents align with the expressed and observed experiences of mentors and parents. Appendix D-J provides the organizational plan for Parent Partners, Inc., as well as, the tools and operational approaches outlined for delivering its mentoring services.

Table 4 highlights the specific themes identified in the document review as related to the research question and investigation.
Table 4

Themes identified through a review of program documents

- The problem of practice.
- The role of mentors as natural supports to high-risk parents.
- Social learning practices of role-modeling and positive feedback.
- Improving parenting and academic efficacy outcomes.
- Collaborative relationship built on mutual respect and understanding.
- Importance of establishing parent driven goals and facilitating targeted experiences with mentors in achieving them.
- The role of collective efficacy in building and sustaining success for parents and families.

The problem of practice. The Parent Partner’s description of its problem of practice aligns with this investigation and the research question: “There are too many single parent families with insufficient knowledge/support to parent well and raise children effectively and the number is growing particularly in families of poverty.”

The role of mentors as natural supports. In addressing the problem, Parent Partners confirms the importance of building in natural supports:

Experienced veteran parents, who have already raised children, who have navigated the challenges of advocating for their children in schools, who have addressed the nutritional and activity needs of growing children and have weathering the inevitable successes and failures of parenthood are keenly interested in sharing their experiences, expertise and common wisdom as volunteer mentors to these young, single parent families.
Social learning practices of role-modeling and positive feedback. The Program’s mission statement also aligns with the concepts of social learning and efficacy, “To promote quality parenting and life skills through role-modeling and positive encouragement.”

Parenting and academic efficacy outcomes. The goals of improving parenting and academic efficacy through the mentoring relationship are described:

Providing supplemental mentoring and support for these low income single parent families can lead to improved school choices and performance for their children, improved parenting skills, better nutritional habits within these families and an overall increase in the confidence and performance of these parents and families.

The areas of support targeted through mentoring in helping parents to achieve their family’s academic goals and efficacy outcomes are further outlined here: “To encourage parent “comfort level” at school.” “To involve parents in their children’s school.” “To create awareness of school “community” and to increase communication between parent and school.” “To have children see parents involved in their school.”

Collaborative relationships built on mutual respect and understanding. Throughout the Program plan and mentor training materials, the theme of building a supportive collaboration between parents and mentors is highlighted. The following excerpt describes the process for developing and achieving goals together: “In this collaborative spirit, a non-threatening, non-traditional relationship for help is established. The goal is to complete the tasks through the formation of a positive, collaborative relationship between mentor, parent and program staff.”

The guidelines outlined in the mentor handbook align with the themes of mutual respect, collective efficacy, and the basic qualities of friendship identified by parent and mentor respondents as important to building a positive mentoring relationship: “Help the parent
improve self-esteem as a friend who provides positive support.” Brainstorm possible solutions to problems and help your parent choose the right plan.” “An effective partner’s involvement should focus on empowering the parent to set and achieve goals for themselves and their children.” “Accept parents as they are. Cultural, individual, and religious differences need to be respected. Try not to judge.”

**Importance of establishing parent driven goals and facilitating targeted experiences with mentors in achieving them.** Feedback from parents and mentors consistently highlighted the importance of the parent-driven goals in building parent success and mutual commitment, as well as, providing access to meaningful mentoring experiences. The Program plan supports the processes of establishing goals and developing plans with parents as central to the social learning outcomes: “Parents create a wish list of personal and familial changes they aspire to achieve and the mentor helps the parent turn wishes into goals.” “The goals are broken down into tasks and together the parent and the mentor set a plan to complete the tasks during subsequent meetings.” The Wish List and Action Step tools (Appendix G and H), also appear to effectively support and align with these stated objectives.

**The role of collective efficacy in building and sustaining success for parents and families.** Here the importance of the collaboration between the mentor and parent in maintaining success for the family is explained: “The outcome is that through the *Parent Partners* model, we strengthen the fabric of families for present and future generations and dramatically improve the health and academic performance of their children.” In its description of the monthly parent meetings, the Program plan highlights the themes of building collective efficacy also identified by parents and mentors during the interviews and focus group:
To provide professional and/or peer discussion on life and parenting skills. To create a relaxed atmosphere to discuss personal and parenting issues. To create a sense of Program community and forge Program/mentoring relationships. To respond to parents’ sense of isolation. To respond to parents’ need for adult conversation and time without kids. To broaden parents’ local experiences. To practice social skills.

Summary of Findings

These findings suggest that parent-to-parent mentoring interventions can have success in sustaining the participation of high-risk, socially isolated parents. Traditional parent training programs involving hierarchical professional-client relationships have reported high drop-out rates (Webster-Stratton, 1998). Through their collaborative, trust-building mentoring relationships, these participants actively engaged with mentors in managing challenging family situations and advancing themselves through career and educational goal achievements. Examples shared during the interviews, focus group, and observation, revealed positive outcomes for these families over time; as demonstrated by improved parenting and coping strategies, open communication within the family, and increased parent involvement in their children’s school.

Chapter V: Discussion of Research Findings

Revisiting the Problem of Practice

This study considers the problems facing high-risk parents in effectively meeting the social, emotional, behavioral, and academic challenges of their children. A parent’s socioeconomic status including low income, low educational level, high levels of stress, single-parent household, lack of social supports, a history of ongoing depression and mental illness, criminal activity, and substance abuse have been linked to increased risks for children and
adolescents (Webster-Stratton, 1998). Although some of these conditions are more difficult to influence and reverse, interventions aimed at increasing parenting skills and efficacy appear to have significant influences on positive parent and family outcomes (Webster-Stratton, 1998).

Social learning theory supports the idea that people are resilient and can gain new cognitive and behavioral skills throughout life. Within this social learning process, efficacy perceptions evolve through the availability of positive modeling, and reinforcing experiences and feedback (Vittorio-Caprara, Regalia, Scabini, Barbaranelli, & Bandura, 2004). Parenting interventions designed around the principles of social learning, support the development of a collaboration with the parent to establish personally meaningful goals and skills that can be generalized to other parenting and social contexts (Webster-Stratton, 1998).

**Review of Methodology**

The inductive qualitative research design chosen for this study involves a collaborative process between the researcher and the participants of the Parent Partners mentoring program. This investigation explores the question of in what ways does a parent mentoring intervention with high-risk parents’ impact parenting skills and efficacy perceptions, as perceived by parents, mentors, and organization stakeholders. Observational and open-ended data collection tools are employed by the researcher to engage parents, mentors, and key stakeholders in developing common understandings and themes related to social learning and efficacy.

In correcting for some of the threats to the validity of this study, the researcher attempted to strengthen the trustworthiness and credibility of participant feedback by cross-checking and reflecting back to respondents after each encounter (Maxwell, 2005). These strategies were also utilized during the data analysis phases to help rule out possible alternative explanations for the
relationships and connections identified. Triangulation was also employed to strengthen the reliability of the findings by collecting data from multiple sources and methods (Thomas, 2006).

The small sample size presented a major limitation to this investigation and its results. The single researcher model also posed potential threats of researcher bias during the data collection and analysis phases (Maxwell, 2005). As the outcomes generated from inductive qualitative research can only be applied to the particular people and contexts included in the study, the transferability of these results are further limited (Thomas, 2006).

This final chapter includes a discussion of the major findings in relation to the theoretical frameworks and literature review, followed by a conclusion section, and discussions of the study’s significance, and next steps.

Summary of Major Findings in relation to the Theoretical Framework and Literature Review

Table 5 includes the themes that emerged across data collection formats.

Table 5

Major Findings

- The importance of collaboration in sustaining parent participation.
- Relationship based on mutual respect and understanding.
- Collective efficacy as a foundation for social learning.
- The importance of goals within the mentoring process.
- The direct support of mentors promotes social learning practices through modeling, targeted experiences and feedback with parents and families.
- Attributes of social, emotional, and academic efficacy.
A readiness for change.

**The importance of collaboration in sustaining parent participation.** As the literature on successful interventions with high risk parents indicates, breaking negative social learning cycles within families and sustaining them may depend on collaborative learning approaches that focus on building meaningful relationships with parents’ (Webster-Stratton, 1998). These finding provided examples of participants gaining positive beliefs and skills in managing future challenges and situations. Nina described her confidence and optimism about handling her family’s needs:

I remember the first year. I was like, somebody’s gotta come with me. And now I can walk out the door and be confident to do things myself. I won’t feel insecure about doing the wrong thing. I don’t have to feel that what I’m asking is wrong. That’s how I used to always feel. Now I feel like…it is good to have a relationship with the school, the teachers, the people around you, the principal especially, because when things happen, bad things happen, those are the people that can help you. I don’t want to be at war with any of them. I want them to know that I’m fully one hundred percent there. And that’s what this program has helped me do.

In Joanne’s example, the mentor’s supportive, hands-on involvement appeared to be an important motivator for her to take the first step in signing up for a nursing program: “Ms. Stephanie (my mentor) went with me and I wasn’t sure what to do.” “Whether to do nursing.” “I ended up enrolling and taking the necessary test and all that.” Nina also described how her close relationship with the mentor was instrumental in achieving her goal of a GED: “I was the oldest of five children and I didn’t finish high school.” “I have trouble with my reading and
math.” “So getting into the GED program was really the beginning of it all.” “And she (my mentor) came with me, and that definitely pulled me forward and helped me to do what I had to do.”

The high-risk lives and experiences of these parent participants seemed responsive to the less formalized approaches of this mentoring model. This was also consistent with the literature in which results revealed positive parent engagement, clinically significant parenting responses to the intervention, and sustained results over time as attributed to the collaborative methods employed (Webster-Stratton, 1998). Nina explained how building a close and trusting relationship with the mentor was an important part of the process: “It’s good to know what is going on with the mentee and mentor, because a lot of these parents have a lot that they are going through and you wouldn’t be able to know the whole story.” “So that they can open up and feel that there is enough trust.” Mary expressed how the less formal structures of the mentoring relationship helped to foster an on-going commitment: “We stepped over the friendship thing.” “They’re part of our family now and I don’t think that that’s what this whole thing is suppose to be about.” “But I mean I’m into this for the long haul.” “I’m not going to abandon my girl.”

**Relationships of mutual respect and understanding.** In the research on social learning with high-risk parents, these informal collaborations were attributed to successful parent engagement and sustained participation. The relationships between trainers and parents’ was described as being modeled on the principles of friendship; with the group leaders matched on similar cultural and socioeconomic backgrounds and experiences to parents (Webster-Stratton, 1998). The findings in this study also demonstrated how shared respect and mutual understandings between the mentor and parent contributed to their successes in forming and
maintaining long-term relationships. In these examples, this appeared to hold more significance than similarities in backgrounds or culture.

Mary described her mentoring connection this way: “We couldn’t be more different”. “We’re culturally different”. “My girl’s from Japan.” “And I think that we have bonded.” “I don’t think that we have a lot in common, but I think that there is a little boy that I think we both want to see do well.” “And how we can achieve it.” By facilitating the development of a positive support system with the mentor, parent participants commonly attributed the foundations of trust and friendship to helping them gain and sustain confidence and motivation over time.

For Nina, the mentor filled the void of absent family members and friends: “I actually had one person to be proud of me.” “So just knowing if I did accomplish something, I had someone.” Mary also became integral to Kati’s family life: “If I wasn’t doing what I’m doing, she wouldn’t be doing the things that she’s doing that is helping to make him (her son) a more secure child.” “...there is a support system there that he has never had.”

**Collective efficacy as a foundation for social learning.** Collective efficacy appeared to be valued by participants as a means of promoting empowerment for parents. The examples provided in this study were consistent with the principles described in the literature as individuals working together to solve problems and provide mutual support in improving the quality of their lives (Fernández-Ballesteros, et al., 2002). Throughout these discussions, parents related the ways in which working together with others had helped inspire them to change and to solve their individual problems more effectively. Joanne’s feelings about the Amazing Moms speaker series demonstrated this: “I liked mostly the monthly parent meetings, the speaker.” “Because you could see the progress that they made.” “Because that’s where you want to be.” “It takes time.” “Because you could be one of the speakers.”
Through the monthly parent meetings, participants appeared to have the opportunity to contribute ideas and share advice with each other. Nina illustrated how this helped her to build more confidence: “When we’re all together, we learn from each other.” “When we go around the table, we all have a different solution for a problem.” “And sometimes instead of a mentor, a parent will actually be giving advice.”

**The importance of goals within the mentoring process.** Participants also identified parent-driven goals as central to establishing mentoring collaborations and shared commitment. Within the literature, collaborative interventions are characterized by open-communication and discussions shaped and directed by parents’ own personal experiences and relevant problems (Webster-Stratton, 1998). In these interviews and focus group discussions, participants commonly pointed to the goals as an initial way for parents’ to experience success and to identifying the mentor as someone who could help. Jen explained how goals influence the mentoring process: “They’ve got to put some skin into the game and want to do it.” “Committing to the three things you want to work on and then you check things off so there is some closure when you’ve accomplished it.”

The research on workplace mentoring models demonstrated that the transfer of knowledge and skills was greatest when it was generated by the trainee’s own personal interests and goals (Taylor, et al., 2005). Within this study, the parent’s “wish list” appeared to represent the individual and family interests and goals. As Nina described: “There was a lot of stuff on the wish list and basically it all came from me.” “We put down a couple of things and you know we didn’t just write it down.” “It was like, this is your first thing?” “Let’s get on top of it.” “It was really quick being checked off.”
The literature on social learning theory conceptualizes the transfer of cognitive and behavioral skills through social modeling, life experience, and feedback from others (Woodward, 1982). These findings provided examples of how the goals were instrumental in providing a means for mentors to access meaningful life experiences with the parent, family, and involved community members. Through their collaborations and experiences together in achieving goals, mentors could then engage in social learning practices with parents. Justine summarized the process this way: “It was a back door way into some of these other things that we started discussing.” “Which I think is the beauty of the program.” Working on a parent’s goals appeared to provide mentors with opportunities to model significant attitudes and behaviors. Here, Justine demonstrated how she modeled and coached a parent in achieving her goal of getting a better job:

She was right in the middle of a jobs program and that was really, how are you doing? Are you getting your homework done? You’ve got to get to school. I’ll come pick you up, let’s go. And follow-through and consistency. If you try and it doesn’t work that’s not a problem, but you’ve got to follow-through.

The parent-driven goals also appeared to hold value for respondents as a means of empowering parents to control the direction and longevity of the mentoring relationship. The literature review on parenting skills training models indicates that the more prescriptive and leader-driven curricula, were associated with higher drop-out rates and fewer positive outcomes (Webster-Stratton, 1998). This study confirmed the benefits of allowing the parents to shape the process. Nina described how the self-directed program helps promote the parent’s confidence: “Once the mentee feels that she’s graduated then she steps away.” “That you pretty much feel
that you have graduated from the program and can do it on your own and basically walk away and you’ve got things handled.”

**The natural support of mentors as related to social, emotional, and academic parenting efficacy.** Through their direct hands-on help and support, mentors appeared to fill the role of absent mothers or grandmothers for these parents and their children. As explained in the literature on social learning theory, targeted and shared learning experiences can serve to improve parents’ tolerance skills, and help to reframe their perceptions about children’s needs and abilities (Garza, et al., 2007). Through these parent-to-parent mentoring relationships, mentors appeared to help parents build and sustain successful parenting understandings and strategies. Nina explained how the mentor’s direct guidance and support at bedtime helped influence her parenting choices: “At one point my twins became terrified of the dark.” “And my mentor gave me advice and strategies to use with them to help them.” “And just sitting with them on the bed and talking to them about not being scared and stuff like that really helped.”

As described in the literature, home environments that support open communication, manage conflict in positive ways, and demonstrate appropriate levels of parental monitoring are linked to children’s improved self management of social, emotional, and academic challenges (Caprara, et al., 2005). By being available and involved in the family’s day-to-day routines and struggles, these mentors appeared to help influence parents’ approaches and interactions with their children in positive ways. Joanne described how the mentor helped her understand the importance of positive conflict management and communication with her children: “Being calm in the way that you treat the kids and everything.” “Different techniques you can use.” “Helps the kids to not go wild and to express their own opinions.”
A parent’s coping responses to daily stressors, including parenting challenges, marital conflicts, and mental illness have also been attributed to negative effects on parenting practices and developmental outcomes for children (McKee, et al., 2004). The direct support and reinforcing feedback from mentors appeared to help mitigate and reverse some of these adverse effects for parents. Nina provided examples of the mentor’s role in helping her to manage and gain control of her emotions: “When my house gets messy and I can’t handle it.” “I get stresses out.” “And I know it has nothing to do with my kids making a mess.” “She (my mentor) definitely helps me breath.” “She even helped me take a yoga class, just to relax.” “And I need that so that I can learn how to relax.” “And that’s good because I want to be in control of my emotions.” “To be able to be in control for my children and to lead by example.”

The literature describes successful modeling interventions as those that reduce the internal, pre-existing responses of parents to stress such as, negative feelings, avoidance, hostility, disengagement, and depression (McKee, et al., 2004). These parents provided examples of the mentor’s influence on their negative and self-defeating thought patterns. Kati recounted that, “my mentor says you can.” She described how this helped to prevent her own negative thought patterns from being transferred to her son: “For my son, he takes after me about not believing he can do things.” “Mary is not like that so she can show him how to feel differently.” “So that my son can feel differently than I do.” Nina explained: “My mentor is really into building my self-esteem.” “She helps make sure that I’m not thinking wrong.” “She’s like no you’re not doing anything wrong.” “Which is good because sometimes I feel like I’m not doing the right thing.”

Parental academic efficacy is identified in the literature as a parent’s ability to promote their children’s interest in school, motivate them in pursuing academic goals, assist them in their
schoolwork, and help them stay out of trouble (Bandura, et al., 1996). These results revealed examples of the mentor helping parents’ to become more proactive in managing their children’s educational and school needs. When her daughter got in trouble at school, Nina described how the mentor helped her learn to resolve the situation in a positive way: “I was getting so frustrated.” “My mentor gave me the best advice about how to approach the situation.” “The school system is here to help you and never attack them.” “Just having her on my back and helping to direct me on how to handle the situation.” “Because I could have been so furious and gone there and exploded.” “What I’m learning from her, I’m passing on to my own family.” “Telling them don’t go that route, just keep calling them and asking how your child’s doing.”

The literature explains that building parents’ academic efficacy through social learning frameworks includes providing targeted support around academic values and practices within the family (A. Bandura, Caprara, Barbaranelli, Regalia, & Scabini, 2011). Justine described helping the parent to feel confidence by accompanying her to school conferences. She explained that this direct support assisted the parent in overcoming emotional barriers preventing her from being more involved in her daughter’s school: “The mother did not have a comfort level in the classroom.” “She was the first to go through this.” “So just going to the conferences and following up on the list of things that they gave her was helpful.”

The social learning literature explains that a parent’s awareness and engagement in developing academic efficacy tools can be increased and encouraged through home-school partnerships (Bandura, et al., 1996). Research demonstrates that parents’ can transfer educational aspirations and effective learning skills to children without having achieved the goals themselves (A. Bandura, et al., 2011). Nina shared an example during her interview of how the mentor helping her develop and following through with strategies to address her daughter’s
learning needs: “She’s a little behind in her grade level.” “They will bring and find activity books that can help her learn.” “They would come with me to the school and that is even better because sometimes I would not know what to say.” “But just by having her there, I would come home and know what to do.” “This year my daughter was awarded the most improved student.”

A readiness for change. In discussing the characteristics related to successful recruitment and sustainment of parent participation, the literature attributes a parent’s initial willingness to positive intervention outcomes (Webster-Stratton, 1998). One study correlated the collaborative methods utilized in the planning and implementation of these intervention with the willingness of parents’ to participate (65% of those eligible enrolling in the study) (Webster-Stratton, 1998). In describing their choices to join Parent Partner’s, these participants appeared to hold a common belief that the program would provide support in helping them to overcome difficulties and achieve goals. Nina explained, “My plans were to be out of there.” “I wanted a better atmosphere away from the negativity.” The Parent Partners program was a way to, “get some skills from people who have went through it with their own children.” “Who could help me with certain things.” Jackie described participating in the Program as a way of receiving support to go back to school and to better her life: “Can’t be a CNA forever.” “..because the kids are going to look when they get older..” “So maybe they will want to follow in my footsteps.” “…going to college and getting an education.”

In further analyzing the impact of collaborative interventions models with high-risk parents’, the above study examined how the participants’ individual risk factors correlated with their responses to the intervention. The results revealed that of those parents who did not demonstrate a positive response, 40% reported a history of substance abuse (Webster-Stratton, 1998). Psychiatric illness also appeared to be a mediating factor affecting positive outcomes for
these parents. Parents’ response was not, however, affected by educational level, minority status, depression level, number of negative life experiences, availability of informal support networks, and history of physical or sexual abuse (Webster-Stratton, 1998).

In understanding and applying the positive outcomes demonstrated by the parent participants in this study, it may also be necessary to consider their overall emotional readiness and stability upon joining the Program. Kati described positive beliefs about accepting support from others: “I come from Japan where there is no support for people.” “If you fall down you have to get up yourself.” “I think it is nice in this country you have things to help people when their down.” Joanne also appeared to recognize her social isolation as a barrier to improving her life: “I don’t go out so I don’t really have people to talk to that have kids that could show me different ways to do things.” “I was looking to get help with maintaining stability in the household with the kids.”

Limitations

The small and purposeful sample utilized for this study dramatically limits the results in being generalized or transferred to other populations and contexts. As only three parents contributed during the data collection period, these discussions can only help to explain and understand their specific mentoring relationships and outcomes as related to their individual and family characteristics and circumstances. Without a larger sample, it is not possible to reliably link parents’ feedback or experiences to the social learning and efficacy themes identified. More data is needed in order to better understand whether these results were unique to these participants’ backgrounds, attitudes, and beliefs. It is also not possible without longitudinal data to reliably correlate the progressions in behaviors and attitudes revealed by these parents with the mentoring interventions provided. For example, as these parents had been with the Parent
Partner’s program for more than one year, their reflections and descriptions relating back to earlier times cannot be considered trustworthy or reliable.

Future research is needed in order to better understand the importance of a parent’s initial readiness in influencing their overall response to the mentoring relationships and experiences shared. This research could have practical applications for shaping parent screening and referral protocols. Future studies would also provide practitioners with better understandings about when to utilize these natural support interventions with high-risk parents and to facilitate effective collaborations around services and resources available. Finally, additional qualitative and quantitative data such as parent efficacy surveys and goal obtainment scales would strengthen the applications of these mentoring interventions to other parent groups and contexts. This data would provide practitioners with clearer understanding about the social learning and efficacy processes integral in shaping parenting attitudes and behaviors. These could also offer Parent Partner’s with practical frameworks around which to model best practice in delivering mentoring supports to parents and families.

Significance

In considering the significance of these findings and applying them to the problem of practice, it appears that mentoring interventions have the potential to address one of the primary risk factors associated with high-risk parent populations, namely their social isolation. These collaborative relationships and the natural support systems that they generated appeared to lay the foundations for these parents to build confidence and sustain progress. The positive support and trust of a mentor appeared to assist these parents in achieving their personal and parenting goals. In the process, parents experienced successes and gained a sense of social connectedness and confidence to manage on-going individual and family challenges.
These relationships also appeared to be mutually beneficial. The mentors in this study expressed a desire to share their life and parenting experiences with other parents in need, while at-risk parents identified seeking trustworthy support and guidance. This model of bringing together the natural supports of experienced parents with parents at risk has applications in any community across the country. These resources are available everywhere and are largely untapped. Through collaborations with schools and other community-based organizations serving parents and children, parent mentoring can offer a meaningful intervention for high-risk families. The long-range goal of Parent Partner’s is to create a Parent Corp chapter in these areas where poverty is high and families are isolated.

The mentors in this study expressed a desire to share their life and parenting experiences with other parents in need, while at-risk parents identified seeking trustworthy support and guidance. This model of bringing together the natural supports of experienced parents with parents at risk has applications in any community across the country. These resources are available everywhere and are largely untapped. Through collaborations with schools and other community-based organizations serving parents and children, parent mentoring can offer a meaningful intervention for high-risk families. The long-range goal of Parent Partner’s is to create a Parent Corp chapter in these areas where poverty is high and families are isolated.

The literature demonstrates that collaborative modeling interventions can have success in building up parents’ protective efficacy tools leading to sustainable improvements in parenting choices, skills, engagement in positive support networks, and increased school participation with children (Webster-Stratton, 1998). In considering these findings and their potential significance, one only has to look at the impact on the success and achievements of the children. As noted in the above discussions, all three of the families in this study had a school-aged child receive the
most improved student of the year award during their involvement in the Parent Partner’s program.

**Conclusion**

These findings suggest that parent-to-parent mentoring interventions can have success in sustaining the participation of high-risk, socially isolated parents. Through the collaborative, trust-building processes, these participants actively engaged with mentors in managing challenging family situations and advancing themselves through career and educational achievements. Examples shared during the interviews, focus group, and observation revealed positive outcomes for these families over time. Improved parenting and coping strategies were demonstrated through positive behavior management approaches, open communication within the family, and increased parent involvement in their children’s school and learning.

Acting as surrogate mothers and grandmothers, these mentors collaborated with parents during meaningful and significant life experiences involving their children, schools, and communities. Through these interactions, mentors modeled for parents, and provided them with direct, hands-on guidance and targeted feedback specifically aimed at changing maladaptive perceptions and behavior patterns. The results provided examples of improved parenting confidence to manage family conflicts, academic challenges, and daily routines, as well as, individual career and educational goals.

Although there is concern in the literature and in practice about managing boundaries and avoiding dependency within these relationships with parents, the experiences shared by these participants seemed to support the value of utilizing less formalized and prescriptive models in overcoming certain high-risk social, emotional, and academic barriers. The positive support and consistent roles of mentors appeared to promote opportunities for shared learning and reinforcing
experiences together. As the literature suggests, the essential goal behind collaborative intervention models is to empower parents by working together in developing personally meaningful and relevant strategies that can then be generalized to other contexts (Webster-Stratton, 1998). From these results, it appears that parent-to-parent mentoring can offer one means for achieving these outcomes.
Next Steps

These participants were asked during the interviews and focus group to share ideas and recommendations for the future of the Parent Partner’s program. In this section, participant feedback is discussed and related to the Program plan and next steps for best practice. Table 6 highlights the themes identified through these data collection and document review processes as related to the next steps for the Program.

Table 6

*Participant feedback regarding the Parent Mentoring program*

- Utilizing each other as collective resources for building capacity and on-going learning.
- Broadening mentor recruitment efforts.
- More program support around identifying resources for parents.
- Providing mentor trainings in areas identified in the Program plan.
- Maintaining Program outcome data as required for obtaining grant funding.

**Utilizing each other as collective resources for building capacity and on-going learning.** As a means of moving the program forward and supporting on-going mentor needs, the theme of capacity-building and collective efficacy were identified by the group. Norma and Julie shared the idea of mentors providing natural supports to each other: For Norma, “Mentors need to come together as resources because probably a veteran mentor should be my resource if I’m new.” Julie seconded this sentiment and added, “It would be useful to come together.” “the parents come together, too.” “It is good to get together maybe once a month just to share ideas and discuss issues.”
Building on this theme of collective efficacy, Nina offered the idea of bringing parent participants together for shared mentoring sessions: “And that would be good because then you’d have the children playing together and the parents and mentors talking like having a group session.”

**Broadening mentor recruitment efforts.** To date, mentor recruitment and matching has been managed solely by the Program’s executive director. As described by mentors, “she knows a lot of people that she can tap on the shoulder and tap for resources.” “And she really knows the community.” In looking to the future, mentors raised the need to move the program beyond the initial “friends of Elizabeth” stage. “I think Elizabeth has a force.” “She knew my circumstances, who I was, and what I did through the years.” The mentor recruitment process as outlined in the Program plan does accurately reflect these current practices: “Volunteers will be recruited through social networking and speaking events at local community organizations.” “Early work by *Parent Partners* indicates large and active interest by prospective parents to serve in this mentoring role.”

Participants shared in the belief that more parent mentors would be available and willing to participate as volunteer mentors if they were aware of the Program. Current mentors pointed to programs such as Big Brothers and Big Sisters as examples of other informal mentoring programs that continue to maintain and recruit members. In describing next steps for recruitment, both parents and mentors commonly identified the need to delegate more responsibilities and expand staff roles beyond the executive director in order to meet and manage continued program growth.

**More support around identifying resources for parents.** Participants share in the concern that more services and access to resources are needed in effectively supporting the needs
and goals of parent participants. Joanne suggested making resources available to participants for reliable and safe childcare: “Like if you need someone to watch your kids or something.” “Fund raising.” “Some people have more kids than others shall we say.” “Like I have four kids.” “Maybe payment of some sort.” “It’s all about money with people, whoever’s watching the kids.” Nina believed more support was needed for the executive director to meet the demands of the program: “I just think there should be more help.” “Because it’s expanding and the more that it is expanding, the more hectic Elizabeth seems.”

Mary would like more help with identifying and securing resources for her mentee: “There are two or three things with my girl that she could use.” “Somebody for resources.” “For example, my girl wants to go somewhere else for school and I don’t really know how to do that.” “How to make financial aide, so that she could call someone to ask.” The members of the group shared in the belief that the executive director needs more help in order for the program to deliver on its promised services to parents. Mary explained: “I think that Elizabeth is wonderful, but I think that this has gotten too big for her.” “She can’t do it all.” “Because Elizabeth has to look into everything herself right now.”

The projections outlined in the Program plan for 2011 and 2012, indicate that Parent Partner’s growth and staffing hours have not been achieved:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Parents (Grandparents) in Program</td>
<td>12</td>
<td>25</td>
<td>35</td>
<td>50</td>
</tr>
<tr>
<td>TOTAL children served in Program</td>
<td>30</td>
<td>63</td>
<td>86</td>
<td>120</td>
</tr>
<tr>
<td>Volunteer Mentors</td>
<td>9</td>
<td>25</td>
<td>35</td>
<td>50</td>
</tr>
<tr>
<td>Volunteer Tutors &amp; Support Staff</td>
<td>5</td>
<td>5</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Parent Partner Staffing (Full &amp; Part Time)</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

To date, the program is serving ten parents with ten active volunteer mentors. The executive director remains the only staff person and is currently uncompensated for her time.
Providing mentor trainings in areas identified in the program plan. The idea of establishing a mentor orientation and on-going trainings was a shared theme among these mentors. Despite their common emphasis on non-prescriptive life experiences to drive the mentoring process, participants explained that in order to ensure future duplication of the mentoring model and a standard of practice, some training is necessary. Justine shared her perspectives: “So I think that there is still a lot of training that is needed even though we are natural resources.” “The training is key so that the message is consistent and the relationship develops as it is meant to develop.” Others expressed the importance of establishing continuity in utilizing the mentoring tools. Norma explained it this way, “I think in terms of the growth of the program, there needs to be more of this structured wish list.”

The Program plan outlines these objectives for mentor trainings: “Parent Partner believes that through a thorough, simple training process experienced parents can be equipped with the tools and techniques to make them very effective adult mentors.” “These training sessions include abuse identification, cultural sensitivity, life coaching skills, and early learning techniques.” As indicated from the above mentor feedback, these trainings have not been consistently offered.

The mentor handbook (Appendix F) currently serves as an orientation tool given to mentors when they are initially partnered with a parent. The handbook offers general mentoring guidelines, many based on traditional mentoring models involving a child and adult. As a result, the content falls short of adequately promoting the Program’s objectives and supporting the unique concerns of parent-to-parent mentoring. Mentor suggestions for establishing group forums to share their ideas and experiences, and to offer mentor-to-mentor support to new mentors joining the Program; appear to provide some viable next step approaches for
supplementing the handbook and for providing mentors with more targeted guidance and training.

Maintaining program outcome data for obtaining grant funding. The tracking of goals and outcomes within the Parent Partners program has been inconsistent up to this point, as evidenced by participant feedback and the lack of documentation available for this review. Although participant feedback consistently valued the importance of the Wish List and the action steps taken with parents around their goals, these tools are not being utilized or completed during mentoring services.

In its stated goals for establishing and providing the necessary outcome documentation, the Program plan offers clear objectives:

Measure student achievement/school readiness. Measure child health statistics of mentored families. Measure general well being of mentored families (confidence, satisfaction, other measures). Survey program families to determine overall impact of mentoring/coaching/advocacy services; collect anecdotal information regarding well being of families and children in the program. Measure satisfaction, competency and success of mentor parents. Evaluate effectiveness of mentors through direct observation, survey work during and after mentoring activities, feedback on training materials and sessions. Measure satisfaction of mentor experience through direct observation, direct query and survey work to improve approach and retain experienced mentors.

As indicated in Appendix I and J, Parent Partners has developed a parent efficacy questionnaire and mentor survey tool to be completion at the start of mentoring services and at six months intervals. The next steps for ensuring the completion of these data tools will require on-going mentor training and oversight. Utilizing the collective efforts of Program members as
commonly suggested by these participants, may assist with this process until additional future funding and staffing can be obtained.

In sharing these results and participant feedback with the Program’s executive director and executive board members, many of these steps have already been taken. For example, the first mentor night has been held. The agenda included sharing stories and experiences as well as reviewing the Wish List and outcome forms. The group identified an interest in meeting quarterly and including formal trainings as part of the future meetings. In addition, steps towards achieving the outreach objectives of the Program are also underway. Through her on-going relationships with the Newport school district and school administration, the executive director has been offered an office at one of the elementary schools. This collaborative opportunity will help to promote referrals to the Program from the school and improve the flow of communication between the mentoring teams and the school staff.

In realizing its goal of becoming a national model for addressing the needs of high-risk parents and families, Parent Partners must continue to look inwards at strengthening its collaborative mentoring practices; as well as outwards in forming more alliances with community stakeholders also integral in supporting high-risk parents and children, such as schools and youth service providers. Sustaining growth and maintaining effective mentoring supports will also rely on expanding mentor recruitment efforts and being able to obtain additional grant funding.
References


Fletcher, M. A. (2011). National poverty rate hits 17-year high. from The Arizona Republic:


Appendix A

Parent Interview

1. Please tell me why you joined Parent Partners Program?
2. Can you please describe your relationship with your mentor? Do you feel that you have a strong connection with your mentor?
3. Do you think you were well matched with your mentor? Why/Why Not?
4. What traits or interests do you and your mentor have in common?
5. Do believe that it is important/necessary to have things in common with your mentor? What commonalities, if any, do you believe are most important to share?
6. What goals did you choose to work on together? Why did you choose these goals?
7. In what ways has your mentor helped you to achieve your goals (finding needed resources for your family, participation in school events/activities with your child(ren), increased/strengthened social networks? Can you provide examples?
8. In what ways has working with a mentor been helpful to you in starting/and or reaching your goals? If not, what could be done differently?
9. In what ways do you feel that working with a mentor has impacted your relationships with your family/children? Your overall parenting approaches, home/social life, and educational experiences? Have you seen any progress in your child(ren) education, behaviors? Could you provide examples?
10. In what ways has working with a mentor impacted your feelings of confidence in regards to managing your career, educational, and family goals? Are you doing things now that you would not have done without a mentor? Please provide examples.
11. How effective were the mentoring tools (wish list, weekly sessions, monthly parent group meetings) to you? Why/why not? Please provide examples for each.
12. How effective was your mentor professionally in working with you and supporting your goals/needs? Please provide examples.
13. Do you have ideas, changes, concerns that you would like to share about the program?
Appendix B

Mentor Focus Group

1. Why did you choose to become a parent mentor?
2. Can you please describe your relationship with your mentees? Do you feel that you have a strong connection with your mentee? In what ways do you feel you are alike/different?
3. Do you think you were well matched with your mentee? Why/Why Not?
4. What traits or interests do you and your mentee have in common?
5. Do believe that it is important/necessary to have things in common with your parent mentee? What commonalities, if any, do you believe are most important?
6. Please discuss the main goals chosen by parent mentees?
7. In what ways have you helped parent mentees achieve their goals (finding needed resources for their family, supported their participation in school events/activities with child(ren), increased/strengthened social networks? Can you provide examples?
8. In what ways has your mentoring work with parent mentees impacted their feelings of confidence in regards to managing career, education, and family goals? Do you believe that parents are doing things now that they would not have without the support of mentoring? Please provide examples.
9. In what ways did you feel/not feel prepared to support/manage mentees issues/goals effectively?
10. What personal/professional experiences/strengths do you feel are most helpful in supporting parents as a mentor?
11. How effective were the mentoring tools (wish list, weekly sessions, monthly parent group meetings) in helping you support mentees goals? Please provide examples for each.
12. Have you seen positive changes/progress in mentees parenting approaches, child(ren) educational experiences and behaviors, parent’s school involvement, home life?
13. Do you have ideas, changes, concerns that you would like to share about the program?
Appendix C

Observation Protocol

Researcher will focus on evidence of mentor modeling, feedback, mentee communication style, problem-solving, mentoring activities relevant to established goals.

Context of observation (time, date, place, participants involved):

Descriptive Notes (portraits of the participants, reconstruction of significant dialogue, description of the physical setting, memos regarding particular events/activities):

Reflective Notes (the researcher’s personal thoughts, speculations relevant to social learning/efficacy, overall feelings/impressions about session, problems, ideas):
Parent Partners
Organization Plan

Matching Parents to Parents to Improve the Lives of Our Communities, Their Families and Their Children

Winter 2010
Little Compton, RI

A small group of thoughtful and committed citizens can change the world. Indeed it is the only thing that ever has. - Margaret Mead

Parent Partners, Inc.  P.O. Box 460, Little Compton, RI  (401) 965-3465
**Executive Summary**

*Parent Partners* matches experienced parent volunteers with inexperienced low income parents, trains them and facilitates high impact mentoring to fundamentally change the way these families function.

**The mission of Parent Partners** is to promote quality parenting and life skills through role-modeling and positive encouragement. We improve children’s health, wellbeing and academic performance. We build the skills and confidence that enables young parents to reach their own personal, educational and career potential, which in turn improves the development of their children.

**The Problem** There are too many single parent families with insufficient knowledge/support to parent well and raise children effectively, particularly in families of poverty

- This leads to an achievement gap for their children in school and poor health in children including rising incidences of obesity, diabetes and other health problems
- The incidence of such families is on the rise in Rhode Island. Families living below the poverty line in Newport County are up 20%. Children being raised in single parent households are up 25%. The incidence of child obesity, and diabetes is up 200% nationally

**Growth** Having tested the model in 2010 in partnership with the Newport Public Schools and local social service agencies, *Parent Partners* is poised to expand the roll out of the Program in 2011 and 2012. Families and children enrolled in the Program during 2011 are projected to be 37 and 93 respectively, with 85 families and over 200 children in 2012.

**Funding** *Parent Partners* seeks to raise $80,000 for operating expenses in 2011 and $100,000 for operating expenses in 2012.

**Impact** With a staff of two growing to four, over 500 people will be active in the programs offered by *Parent Partners*,

- over 400 needy lives affected and
- over 150 volunteer mentor resources activated.

This is a very effective deployment of philanthropic resources focused on an unmet need, effectively leveraging volunteer resources, directed at improving lives and communities.
Synopsis of Problem and Proposed Solution

A Statement of the Problem: Single Parent Families Need Help

There are too many single parent families with insufficient knowledge/support to parent well and raise children effectively and the number is growing particularly in families of poverty

➢ This leads to an achievement gap for their children in school (between where they should be and the level at which they actually achieve)
➢ This leads to poor health in children including rising incidences of obesity, diabetes and other health problems
➢ This leads to a continued cycle of poor health, under achievement and sub-optimal family dynamics

The incidence of such families is on the rise in Newport County over the last decade (1990 to 2000):

➢ Families living below the poverty line: 24% up from 20%
➢ Children being raised in single parent households: 44% up from 35%
➢ Incidence of child obesity, diabetes: 5% up from 15%

An Untapped Resource: Experienced Parents Can Mentor

Our communities possess an untapped resource poised to reverse some of these trends. Experienced veteran parents, who have already raised children, who have navigated the challenges of advocating for their children in schools, who have addressed the nutritional and activity needs of growing children and have weathering the inevitable successes and failures of parenthood are keenly interested in sharing their experiences, expertise and common wisdom as volunteer mentors to these young, single parent families.

The Proposed Solution: Parent Partners Trains and Joins the Two

Parent Partners is an organization formed to provide the framework, mentoring skills, support infrastructure and matching process to join these crucial volunteer resources (experienced parent partners) to this much needed social problem (mentoring young parents). Working through the local school and social service agencies and tapping the plethora of experienced parents interested in serving their fellow families, Parent Partners is bringing resources together to improve the parenting of new parents, to reverse the growing achievement gap of their children and to eradicate the growing problems of childhood obesity, diabetes and other health concerns.

Supporting the Needs of Low Income Families Through Mentoring
The disruption of the nuclear family over the last several decades has led to many more single parent families, siblings raising siblings and other familial constructs that put additional pressure on those families to provide basic parenting and advocating practices on behalf of their children. In Newport County alone, the incidence of single parent families has risen more than 25% in recent years. Those figures have jumped 36% at the state level in Rhode Island. A disproportionate number of these families fall at or below the poverty line (up 20%). Accompanying these trends are the ever widening school achievement gap for these low income children and the increased health problems, such as diabetes and obesity, which have risen from 5% to 15% and disproportionately within the high poverty community.

Health and social service professionals believe that these trends can be halted and even reversed with a more intentional and focused system of grassroots education and coaching for new parents in these settings. Single parents hold the same aspirations for their children that other families hold: a good education, a college degree and healthy lifestyles. Providing supplemental mentoring and support for these low income single parent families can lead to improved school choices and performance for their children, improved parenting skills, better nutritional habits within these families and an overall increase in the confidence and performance of these parents and families.

In these same communities, numerous families exist that have successfully navigated the challenges of child rearing and have the interest in and capacity for coaching single parents and their families. They need to be recruited, matched with families in need, trained, supported and monitored. The combination of experienced individuals matched to an unmet social need forms a powerful and low cost solution to an intractable social problem. Parent Partners has designed just such a system to match resources to families in need.

**The Parent Partners Concept**

The mission of Parent Partners is to promote quality parenting and life skills through role-modeling and positive encouragement. We improve children’s health, wellbeing and academic performance. We build the skills and confidence that enables young parents to reach their own personal, educational and career potential, which in turn improves the development of their children.

Parent Partners is a non-profit, parent-to-parent, mentoring program. The organization identifies families in need, recruits experienced parents as mentors, trains them and matches...
parents to parents in a developmental partnership. Through weekly mentoring, volunteer experienced parents share their parenting experience with young families in need of support.

Collaborating with schools and social service agencies, Parent Partners invites parents in need to create a set of aspirational wishes/hopes. The parent is then partnered with an experienced parent as a volunteer-mentor and together they convert hopes and wishes into tangible individual goals. The goals are broken down into tasks and together the parent and the mentor set a plan to complete the tasks. In this collaborative spirit, a non-threatening, non-traditional relationship for help is established. The goal is to complete the tasks through the formation of a positive, collaborative relationship between mentor, parent and program staff.

The outcome is that through the Parent Partners model, we strengthen the fabric of families for present and future generations and dramatically improve the health and academic performance of their children.

**Detailed Parent Partner Program Description**

Parent Partners has designed a process to draw together single parents in need with experienced parent volunteers. We train and guide them, and support and monitor their progress toward building healthy habits and positive parenting patterns for themselves and their children.

**Single Parent Family Recruitment:** Parent Partners recruits needy families through referrals from local schools, doctors, social service agencies, and “word of mouth” from young families currently being served. Parent Partners plans outreach events at target schools to recruit families.

Parent Partner staff meet with interested parents informally to better understand their interests and to begin the matching process. Paperwork and release forms are completed and that family enters the Program (a required release form is signed allowing communication between Parent Partners and any schools, agencies, counselors, and doctors the family works with).

**Parent Volunteer Recruitment:** Volunteers will be recruited through social networking and speaking events at local community organizations. These speaking events will also broaden community awareness and serve as fundraising activities for the organization. Early work by Parent Partners indicates large and active interest by prospective parents to serve in this mentoring role. The interests, personalities

---

I went through the local public schools, had a baby at 16 years old, and now have four children. I was too nervous to enter the store to ask for a job because I did not want them to know I have a first grade reading level. You encouraged me, you went with me and I got the job. Now I am starting to read with my kids at night. Thank you for changing my life.

I raised three children and certainly saw my share of ups and downs. I am working with ... a single mother showing her how to talk to her children’s school, learn to cook healthier meals, find the youth sports programs and talk about raising kids. It feels so good to see how strong she is, how much she cares and is willing to learn. I didn’t realize how much I knew about these things.
and parenting styles of prospective mentors are assessed through initial application and interview to match mentors to parent’s needs with the intent of creating lasting relationships. Background checks are run on all mentors at this stage of the process. (Parent Partners reserves the right to dismiss a mentor at any time.)

**The Match:** *Parent Partner* staff introduce parent and mentor and facilitate this first meeting. Parents create a wish list of personal and familial changes they aspire to achieve and the mentor helps the parent turn wishes into goals. The goals are broken down into tasks and together the parent and the mentor set a plan to complete the tasks during subsequent meetings. Parent/Mentor meetings are scheduled for 2 hours every week for a period of three to six months. Progress is recorded and tracked through the use of a Progress Notebook managed by both the parent and mentor. *Parent Partners* staff also actively facilitate and monitor these relationships and the relative progress toward goals and development of the personal relationships between parents and mentors through periodic phone calls to both mentors and parents. Any changes in mentor assignments requested by parents are managed by *Parent Partner* staff.

**Mentor Training:** *Parent Partner* believes that through a thorough, simple training process experienced parents can be equipped with the tools and techniques to make them very effective adult mentors. These training sessions include abuse identification, cultural sensitivity, life coaching skills, and early learning techniques.

**Parent Partner Activities and Role:** Mentors & parents receive a range of support services from *Parent Partner* staff including regularly scheduled group meetings, individual meetings, training sessions, periodic reviews, progress evaluation, advocacy for additional family needs and relationship monitoring.
Additionally, *Parent Partner* manages all relationships with school and social service agencies, funders, community organizations and other interested parties. Examples of content sessions developed and facilitated by Parent Partners are below. The first is a collaboration with the Newport Public School District, while the second example reflects the work of *Parent Partners* in addressing the kinds of issues single parents are yearning to discuss to improve their parenting and quality of life.

### Parent Partner Workshops with the 21st Century After School Program hosted by Cranston-Calvert School, Newport, RI (jointly delivered by District and Parent Partner Staff)

**Attendance:** Parents looking for guidance

**Meeting Goals:**
1. To address professional oversight on specific issues parents in need have requested (how these issues get handled)
2. To encourage parent “comfort level” at school (parent rights)
3. To involve parents in their children’s school (how to get active)
4. To create awareness of school “community” and to increase communication between parent and school (to take ownership of their children’s schooling)
5. To have children see parents involved in their school (positive role modeling)

### Parent Partner Group Meeting

*(hosted by local businesses [e.g., Empire Tea and Coffee, Newport, RI]*)

**Attendance:** Parents and Mentors in the Parent Partner Network

**Meeting Goals:**
1. To provide professional and/or peer discussion on life and parenting skills
2. To create a relaxed atmosphere to discuss personal and parenting issues
3. To create a sense of Program community and forge Program/mentoring relationships
4. To respond to parents’ sense of isolation
5. To respond to parents’ need for adult conversation and time without kids
6. To broaden parents’ local experiences
7. To practice social skills

It is through the development of these ongoing events, meetings and forums that *Parent Partners* builds successful program elements, fosters a strong transfer of parenting skills through mentoring, and improves the healthy lives of parents and children in the program.

### Measuring Program Outcomes

*Parent Partners* in conjunction with the school and social service agencies intends to track family progress against specific programmatic goals as follows:

- Measure student achievement/school readiness
  - Gather data from school systems to track improved student achievement. Rely on existing data collection systems employed by local school systems.
Teacher input to student improvement socially, academically and emotionally will be gathered.

- Measure child health statistics of mentored families
  - Collect information about child and family health (i.e., incidence of health problems, mediation of existing health problems [obesity, diabetes, other]). Leverage partnership with social service agencies.

- Measure general well being of mentored families (confidence, satisfaction, other measures)
  - Individualized family developmental goal rubric will be instituted for each participating family, developed jointly by the family members, the mentor and Parent Partners staff. This rubric will provide a clear and direct representation of goals and track the success in meeting them.
  - Survey program families to determine overall impact of mentoring/coaching/advocacy services; collect anecdotal information regarding well being of families and children in the program.

- Measure satisfaction, competency and success of mentor parents.
  - Evaluate effectiveness of mentors through direct observation, survey work during and after mentoring activities, feedback on training materials and sessions.
  - Measure satisfaction of mentor experience through direct observation, direct query and survey work to improve approach and retain experienced mentors.

**Growth Plans for the Parent Partner Program**

Having tested the model in 2010, Parent Partners is poised to expand the roll out of the Program in 2011 and 2012. Families and children enrolled in the Program during 2011 are projected to be 37 and 93 respectively, more than doubling in 2012. The following table shows the number of lives impacted by Parent Partners, the number of volunteer mentors and the modest growth in staff over the next two year.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Parents (Grandparents) in Program</td>
<td>12</td>
<td>25</td>
<td>35</td>
<td>50</td>
</tr>
<tr>
<td>TOTAL children served in Program</td>
<td>30</td>
<td>63</td>
<td>86</td>
<td>120</td>
</tr>
<tr>
<td>Volunteer Mentors</td>
<td>9</td>
<td>25</td>
<td>35</td>
<td>50</td>
</tr>
<tr>
<td>Volunteer Tutors &amp; Support Staff</td>
<td>5</td>
<td>5</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Parent Partner Staffing (Full &amp; Part Time)</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

**Program Staffing**

In addition to the organization’s Executive Director, staffing is planned to include part-time fundraising support, additional senior organizational support and Program delivery capabilities. The staff grows from two to four over the next two years.
Planned Funding Sources and Approach

*Parent Partners* is actively soliciting private donations, business sponsorship and corporate grants, foundation grants, and state and federal funding and grants. The Executive Director manages all fund raising activities at this time. Part time support for this important function is planned in 2011.

A combination of grassroots outreach, organized events, direct solicitations and invited grant proposals will form the core activities required to raise sufficient funds to operate the organization. As the Financial Projections in Appendix A indicate, *Parent Partners* seeks to raise $80,000 for operating expenses in 2011 and $100,000 for operating expenses in 2012. Over 500 people will be active in the programs offered by *Parent Partners*, with over 400 needy lives affected and over 150 volunteer mentor resources activated. We believe that this is a very effective deployment of philanthropic resources directed at improving lives and communities.

Private donations will be solicited through direct appeals, mass electronic outreach activities, group events and other opportunities presented to *Parent Partners*. Broad-based community support will be pursued through local social service organizations, churches, and community centers seeking both funds and friends. Similar techniques will be used to attract support form local businesses, business leaders and prominent citizens who embrace the need to build closer ties across sectors of our communities and support those in need. We will utilize an organized “major gifts” approach to soliciting support from family foundations and local philanthropies through invited grant submissions and presentations of our plans and results. Major granting organizations and governmental bodies will also be pursued as appropriate, if our objectives align with their commitments to the communities that we serve. *Parent Partners* realizes that longer approval cycles are typical of governmental grants and larger local foundations and will allocate its scarce fundraising resources appropriately.
Appendix E
Mentor Application

Please forward signed documents with a photocopy of your driver’s license to:
Elizabeth Stearns  Director  POB 460, Little Compton, RI 02837

Name of Applicant: ___________________________________________ Date of Birth: _____________
Home Address: ______________________________________________________________________________

Home Phone: ___________________________ E-mail Address: __________________________________________

Business Name & Address: _____________________________________________________________________

Work Phone (ext.): _______________ Fax: ___________ E-mail Address: ________________________________

Current Position Title: ____________________________________________________________

Do you prefer working with:  Woman ☐  Man ☐  No preference ☐

Current job responsibilities: ______________________________________________________________________________________

Description of career background and skills: ____________________________________________________________________________

Have you ever worked with children before?  Yes ☐  No ☐  If yes, in what capacity?__________________________

Please describe any special interests that may be helpful in matching you and your mentee.
__________________________________________________________________________________________

Please briefly explain why you would like to become a mentor:_________________________________________
___________________________________________________________________________________________
How did you hear of our program? _____________________________________________________________

Additional information or comments ____________________________________________________________

__________________________________________________________

Appendix F

Parent Partner
A brief guide for parent mentors:

- Set your weekly meetings for the same day and time each week when possible.

- Show consistency in meeting with the parents. They may be used to people letting them down. Being there each week shows them respect and that they are important to you. It also role models responsible behavior. (if you cannot be there please let your parent knows and contact the Parent Partner staff and we will try to meet for you.)

- Help the parent improve self-esteem as a friend who provides positive support.

- Be a good listener/ a little sympathy goes along way.

- Be a troubleshooter. Brainstorm possible solutions to problems and help your parent choose the right plan.

- An effective partner’s involvement should focus on empowering the parent to set and achieve goals for themselves and their children.

- Use confidentiality, it is extremely important. Information is shared only w/ the PP Program and contacts approved by parent on their release form. If you feel the child or someone else is in danger contact PP staff and they will call DCYF for you.

- If you feel an issue is beyond your role as a mentor or you need support on an issue, please talk to the Parent Partner staff and we will contact the right professionals to guide us or refer your family to. It is better to err on the side of caution.

- You must set boundaries. Being the bank or chauffer will not create a healthy partnership. Be a friend and help resource the needs of your family.

- If your family asks you for money or material items your response should be that it is against the rules of the program but they can call the PP staff and request assistance.

- Just talking with your parent, is not a waste of Time! Many parents need a friend and that conversation may be a catalyst for change.
Accept parents as they are. Cultural, individual, and religious differences need to be respected. Try not to judge. Many roads can lead to the same place.

Don’t expect change to happen quickly. We all know it takes time to leave old habits behind.

Appendix G
Parent Initiation Letter and Wish List
"It takes a village to raise a child"

Dear Parents,

We invite you to join Parent Partners:

Who we are: We are volunteer parents whose children are grown and know that being a parent can be hard. We would like to share some of what we have learned with young families.

What we are not: We are not counselors, therapists, specialists, social workers or teachers.

How it works:

- Your first meeting will be for coffee with one of our staff so we can learn more about who you are and what you want from the program.
- You create a wish list for you and your family or we can help you during the meeting.
- You are matched with a volunteer parent who best suits you and your kids.
- Once a week you and your partner meet to work on your Wish List. You can meet at your house or we can find a location for you and your partner to meet.
- You decide when your partner meets your children. *(All our partners have been interviewed and had background checks)*
- Once a month we will have group meetings to talk about topics you decide are important. *(these meetings are designed to be fun and about your ideas)*
- You and your partner will meet once a week for the school year and make arrangements to meet during the summer.

What we promise: 1. To respect you and your child.
2. To respect your culture, religion and individuality.
3. To respect your privacy and keep our relationship confidential.

Welcome to Parent Partners! Our mission is to inspire positive parenting and to enhance life skills through weekly mentoring of young parents in need of support. We also strive to improve children’s wellbeing and academic performance and to build the confidence that enables young parents to reach their own personal, educational and career potential.

We are here to help you meet YOUR goals. Below, please tell us what you would like to accomplish. If you get stuck, look on the back of this page. We have provided examples of Parent Partner accomplishments to date to help you brainstorm.

<table>
<thead>
<tr>
<th>Education and Career Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family Life Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
</tbody>
</table>
## Parent Partnership Goal Examples

### Education and Career Goals

<table>
<thead>
<tr>
<th></th>
<th>Goal Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Work with the school to improve my children’s study habits and grades e.g. obtain a computer for home use; set up tutoring; become involved at my children’s school; and get my children involved in after-school activities.</td>
</tr>
<tr>
<td>2</td>
<td>Be a good role model for my children by advancing my education and career e.g. obtain my GED; prepare for job interviews.</td>
</tr>
<tr>
<td>3</td>
<td>Enroll in classes to improve my education and job skills.</td>
</tr>
</tbody>
</table>

### Family Life Goals

<table>
<thead>
<tr>
<th></th>
<th>Goal Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Have a regular schedule of homework and family time e.g. set up a family schedule and adhere to it; go to the library on a regular basis as a family; eat dinner together.</td>
</tr>
<tr>
<td>2</td>
<td>Be able to discipline my children when necessary e.g. understand appropriate behavior; get help from a counselor.</td>
</tr>
<tr>
<td>3</td>
<td>Help my children manage problems that they might have with others.</td>
</tr>
</tbody>
</table>

### Other

<table>
<thead>
<tr>
<th></th>
<th>Goal Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Improve my financial situation and be able to manage a household budget.</td>
</tr>
<tr>
<td>2</td>
<td>Manage disagreements so they do not escalate into large arguments.</td>
</tr>
<tr>
<td>3</td>
<td>Exercise and eat healthy.</td>
</tr>
</tbody>
</table>
Appendix H

PARENT PARTNERS
PARENT/MENTOR ACTION STEPS

<table>
<thead>
<tr>
<th>Parent’s Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mentor’s Name:</td>
<td></td>
</tr>
<tr>
<td>Date: From: To:</td>
<td></td>
</tr>
</tbody>
</table>

Wish: #

List the action steps or activities you need to complete your wish:

<table>
<thead>
<tr>
<th>#</th>
<th>Start Date</th>
<th>Actions/Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
<table>
<thead>
<tr>
<th>Events that held me back:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Total Actions Checked:</th>
<th>Date: To</th>
<th>From</th>
</tr>
</thead>
</table>

Signature

Parent Partners Appreciates All That You Do! Thank You
Appendix I

PARENT PARTNERS MENTOR SURVEY

Dear Mentors,

We are in the process of putting together a new mentor packet and thought we would ask the “experts” what they need and/or would have wanted to know. We would greatly appreciate you taking a few minutes to answer the following questions. There is space allotted for your ideas and we would love to hear them!

1A  Do you think you were well matched with your mentee?
   a. Yes because
   b. No because

1B  What traits or interests do you and your mentee have in common?
   a.  
   b.  
   c.  
   d.  

2.  Please check which trainings or workshops would have been helpful before you met your mentee?
   a. Abuse Training: how to identify it /how to protect yourself
   b. Life Coaching Skills
   c. RI Early Learning Standards: what children should know and be able to do as they enter kindergarten.
   d. Boundaries and Confidentiality
   e. The “system”; living on welfare.
   f. Understanding Social, Economic, and Cultural Differences
   g. The Incredible Years parent training intervention is a series of programs focused on strengthening parenting competencies (monitoring, positive discipline, confidence) and fostering parents' involvement in children's school experiences.

3.  Going forward what training or information would interest you?
   a. Abuse Training: how to identify it /how to protect yourself
   b. Life Coaching Skills
   c. RI Early Learning Standards: what children should know and be able to do as they enter kindergarten.
   d. Boundaries and Confidentiality
   e. The “system”; living on welfare.
   f. Understanding Social, Economic, and Cultural Differences
   g. The Incredible Years parent training intervention is a series of programs focused on strengthening parenting competencies (monitoring, positive discipline, confidence) and fostering parents' involvement in children's school experiences.
<table>
<thead>
<tr>
<th>4A</th>
<th>How often would you like to have training or workshops?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>☐ 2 a month ☐ 1 a month ☐ quarterly ☐ they don’t really interest me</td>
</tr>
<tr>
<td></td>
<td>____________________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4B</th>
<th>What days are best for you to attend trainings?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>☐ Mon. ☐ Tues ☐ Wed ☐ Thurs ☐ Fri ☐ Sat</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4C</th>
<th>Please list 3 days and times were you might be able to attend trainings or workshops.</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5.</th>
<th>Please list some of the main issues facing your mentee?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6.</th>
<th>Have there been any situations or conversations that made you uncomfortable or nervous?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7.</th>
<th>Name a setback your family has faced and how did you handled the situation?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8.</th>
<th>Would you like more information about the program as a whole? ☐ YES ☐ NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If so what would interest you?</td>
</tr>
<tr>
<td>a.</td>
<td>Monthly updates</td>
</tr>
<tr>
<td>b.</td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9.</th>
<th>Please add any additional ideas or thoughts that you feel will support our mentors!</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Mentor:</td>
<td>Mentee:</td>
</tr>
<tr>
<td>--------</td>
<td>--------</td>
</tr>
<tr>
<td>Start Date:</td>
<td>[Date you started mentoring]</td>
</tr>
<tr>
<td># of children</td>
<td>#</td>
</tr>
</tbody>
</table>
**Instructions:** Below are a number of statements that describe the current status and perception of a parent enrolled in the Parent Partners Mentor Program. For each statement, please circle the response that best describes how the statement applies to you. The following scale measures from 1 (Not at all true) to 10 (Very true).

<p>| | | | | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>My children attend school regularly.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>2.</td>
<td>My children arrive on time and prepared for the school day.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>3.</td>
<td>My children are in good academic standing.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>4.</td>
<td>My children are involved in extracurricular afterschool programs and/or sports.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>5.</td>
<td>My family eats dinner together.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>6.</td>
<td>My family values reading stories and reads together often.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>7.</td>
<td>We have a weekly family routine and do our best to stick to it.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>8.</td>
<td>I set aside leisure time with my family even when other things press for attention</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>9.</td>
<td>I feel my family life is under control.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>10.</td>
<td>I am able to make good decisions about what my child needs.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>11.</td>
<td>I am able to get information to understand my child and his/her development better.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>12.</td>
<td>I believe I can solve problems with my child when they happen.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>13.</td>
<td>I feel I am a good parent.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>