

UNDERSTANDING CAREGIVER PERCEPTIONS ON SCHOOL PARTNERSHIPS

By

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## ABSTRACT

Caregivers play an integral role in a child's academic development, including their literacy development (Compton-Lilly et al., 2019; Cunningham, 2021; Edwards, 2004; Edwards, 2016; Smith, 2020; Volk, 2021). One way caregivers have supported their children's literacy development is by assisting them with school activities at home. While some caregivers are willing to assist, schools must recognize that not all caregivers know what specific activities support the development of literacy skills. This partnership between home and school becomes especially important when Michigan schools are in the midst of a state-wide literacy policy aimed at improving students' achievement levels on the state standardized assessments (Weyer, 2018).

This study examined the perspective of the caregiver on this partnership during the implementation of a state-wide literacy policy. Overall, this study sought to understand the degree to which current school outreach to caregivers was aligned to current research on caregiver engagement. The study used the caregivers' own words (Lumby, 2007), whenever possible. This study further investigated caregivers' perceptions of the school's outreach during the 2021-22 school year. Additionally, the study sought to discover caregivers' desires for future partnerships with schools to continue to support their child in early literacy development. Lastly, this study analyzed the availability of resources, as reported by caregivers and found on school websites, as well as how aligned those resources were to current research on caregiver engagement.

To undertake this endeavor, this qualitative study utilized an online survey focused on four distinct areas within a state undergoing a state-wide literacy policy. The four areas were chosen for their diversity in race, ethnicity, location, religious practices, population of

immigrants, and population of migrant season farm workers. Following the survey, a subset of the caregivers were interviewed. After the interviews, a review of early literacy materials was conducted using the school's websites. The review included at least one elementary school from each of the focal areas in the survey and interviews. Additionally, twenty-nine other schools, chosen through random interval sampling, were included in the review.

The findings of this study shed light on the partial alignment between the current research and the school outreach to caregivers, specifically in relation to literacy activities focused on student literacy development. Using the frameworks of parental involvement (Epstein et al., 2019), intentionality (Edwards, 2016), and efficacy (Bandura, 1977), this study discovered resources offered to caregivers do not always align with intentionality. Current communication methods do not align with parental involvement framework's tenet of two-way communication. Lastly, the supports offered to caregivers do not always favor efficacious behavior in caregivers.

Implications for this work have wide-reaching opportunities for change in the culture of both policymaking and education. Policymakers can use these findings to understand the importance of including the voice of all policy actors. Teacher educators can view these findings to ensure they teach their teacher candidates how to communicate with caregivers. This includes having difficult conversations. School leadership can support current teachers with stronger engagement with caregivers by using the findings in this study and learning to listen to the caregivers and their concerns. Lastly, caregivers can also learn they are their child's advocate, and they will have to do their part to work with the child.

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This work is dedicated to all of the caregivers but especially my own. This work would not be possible if it weren't for you.

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## CHAPTER 1 – INTRODUCTION

### Statement of Problem

Caregivers<sup>1</sup> make significant contributions to the academic development of their child.<sup>2</sup> Caregivers have been referred to as the child's first teacher (Epstein et al., 2019). Epstein and colleagues (2019) declared there was no greater agreement in education today than the need for schools to partner with caregivers to support children's academic development. This partnership goes beyond classroom newsletters, parent/teacher conferences, and one-time events held outside of the school day (Edwards, 2016; Epstein et al., 2019; Henderson et al., 2007).

With the increasing emphasis in education policies (e.g., National Reading Panel, No Child Left Behind, state-level 3<sup>rd</sup> grade reading laws) that children master concrete literacy skills, it becomes vital for schools to partner with caregivers. Research has indicated that caregivers can support children's acquisition of concrete literacy skills (Kim & Reilly, 2021), demonstrate the authentic use of those skills (O'Brien et al., 2014), and reinforce the importance of acquiring these skills (Volk, 2021). Essentially, schools ask caregivers to serve as auxiliary teachers at home by supplementing the instruction occurring within the classroom. Utilizing caregivers throughout a child's academic journey is so crucial that policymakers have included caregiver involvement in their educational mandates (see Read by Grade Three, 2016).

Policymakers have deemed the caregiver/school partnership as essential by including components of this partnership within a policy. One example would be the requirement of

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<sup>1</sup> The term *caregiver* will be used exclusively throughout this dissertation as it is a more inclusive term to represent an adult who meets the needs of a child. The term was chosen over other terms like *parent*, *guardian*, etc. because it does not privilege a biological relationship or a legal relationship between the child and the adult.

<sup>2</sup> The term *child* will be used throughout this dissertation because it represents the relationship between a caregiver and a young person. I have chosen this over the term *student*, as this term implies a teacher-student relationship. There are some exceptions as in when the child is referred to as a student during an interview (?) or when referring to a population of young people in the school (student body).

caregiver notification regarding their child’s literacy development. To date, 28 states, plus Washington DC (Weyer, 2018) have implemented legislation that requires schools to identify children in need of reading support to ensure they are prepared for the state assessment in third grade. At a minimum, all states with a policy require notification of caregivers of their child’s progress (ExcelinEd Policy, 2021). Within such state-wide literacy policies, schools must engage with caregivers around supporting children’s literacy development both at school and in the home (see Read by Grade Three, 2016, subsection 3b, vi). While there are several elements within the policy, this study focuses exclusively on caregiver engagement.

While these policies are designed to support children’s academic development, schools often receive minimal support and direction about how to best comply with mandates (Compton-Lilly, 2013; Weyer, 2018). For instance, one element of Michigan’s third grade reading policy is the “Read at Home” plan—a required element in the child’s individualized reading intervention plan (IRIP) (Strunk et al., 2021). Strunk and colleagues (2021) found that educators across all levels of teaching experience were unsure how to create a Read at Home plan to maximize caregiver engagement. Teachers should customize individualized reading intervention plans for children to work on skills beyond the classroom (e.g., at home) to support their growth and achievement with literacy skills. Often teachers draw from benchmark assessment results to determine with which skills the child may need support and create activities to support those skills.

### **Overview of the Present Study**

Due to the nature of a bottom-up, loosely coupled implementation of the literacy policy, schools are sharing resources that they feel would be beneficial to a child’s literacy development. With the increasing importance of caregiver engagement, it is essential to explore how caregivers

perceive the resources and support offered by the school. To date, little work has examined policy implementation from caregivers' perspectives (Gabriel, 2020). In this three-part study, I initially focused on caregivers' perceptions of the resources provided by their child's school, and then I examined resources supplied to caregivers to support their child's literacy development. To conduct this study, I focused on how caregivers perceived (1) the partnership their child's school regarding their child's literacy development, (2) their desire for future partnership from the school, and (3) the availability of resources and support offered as reported by the caregivers. The overarching research question that guided this study is: *To what extent is caregivers' reported and desired partnership with schools, around early literacy, aligned to current theories and research on caregiver engagement?*

To answer this overarching question, I designed a three-part study. In the first part, I surveyed the caregivers regarding their perceptions about the current partnerships during the 2021-2022 school year and their desire for future partnership with the child's current school. Further, I asked caregivers to self-report their level of comfort with the activities schools sent home with the child. Lastly, I invited caregivers to offer suggestions for how schools could reach out to caregivers with regard to the role of teacher at home.<sup>3</sup> In part two, I conducted unstructured interviews (Kruger & Casey, 2015) with caregivers from three different areas of Michigan during the Read by Grade Three (RBG3) state-wide literacy policy implementation. The specific areas within the state were chosen for their demographic composition, in an effort to diversify the caregivers whose voices would be represented. It was important to capture the caregiver's perspective utilizing the caregivers' voices (Lumby, 2007), so I utilized the interview

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<sup>3</sup> The term *teacher at home* refers to the task of teaching and extending literacy development activities beyond the school day or school building. Caregivers are being asked to work on these literacy task to support their child's literacy development, in addition to the work done with the teacher during the school day.

transcript for direct quotes whenever possible. The following research questions together guided the first two parts of the study:

1. *What do caregivers report about the partnership with schools around early literacy activities?*
2. *How do caregivers want schools to connect with them to support early literacy?*

In the third part of this study, I conducted a content analysis of the literacy resources publicly available to caregivers. These resources were available through school websites and were meant to support caregivers as they assist their child with acquiring literacy skills at home. Using a random interval sample and a purposeful sample from my interview participants' school districts, I explore what resources, if any, were provided for caregivers and if any support was offered to caregivers on how to use those resources. Through this investigation, I discovered four categories of information: (1) password protected portals that contained student specific information (i.e., attendance record and scores on assignments; (2) a handbook often containing rules and regulations; (3) forms for caregivers (e.g., various permission forms, food service and transportation forms, etc.); and (4) miscellaneous resources connected to the state-wide literacy policy (e.g., links to MDE's informational page, early literacy-related skill activities, district-level informational presentations). Additionally, I determined how accessible these items were for caregivers by examining how many clicks it took to gain access to the resource (Zeldman, 2001). The following research question guided the final part of the study: *What resources do caregivers report are readily accessible around early literacy?*

## CHAPTER 2 – CONCEPTUAL FRAMEWORK AND LITERATURE REVIEW

The following chapter explains the conceptual framework upon which this study is built, the relevant research on caregiver engagement in the literacy lives of children, and research on caregiver-school partnerships. In addition, I provide a brief overview of one state-wide literacy policy and its implementation. The primary focus of this chapter is on caregivers, the different subgroups, the importance of hearing from caregivers about current and future engagement with school, and the impediments that schools and caregivers need to negotiate to achieve solid partnerships. Lastly, I examine the difference between involvement and engagement and how each component supports the journey toward partnership.

### **Conceptual Framework**

Caregivers are an integral component of their children's education (Cunningham, 2021; Edwards, 2016; Epstein et al., 2019; Henderson et al., 2007; Herrera et al., 2020; Hong, 2011). I frame my dissertation around caregiver efficacy (Bandura, 1977) and caregiver/school partnerships (Epstein et al., 2019). Examining the data through these two theories will support different perspectives for engaging with caregivers and foreground caregivers' own beliefs regarding their perceived impact upon their child's literacy development. Additionally, Edwards' (2016) theory of curriculum-based caregiver engagement informs my dissertation. This theory highlights the importance of intentionally engaging with caregivers concerning a child's literacy development. Together, these three theories center the voices of caregivers and guide my analysis caregiver-school partnerships in the context of the implementation of a state-wide literacy policy.

## **Bandura's Theory of Self-Efficacy**

A significant component of whether a person can achieve a task is believing in their ability to do, and caregiver's need to believe they are able to support their child at home with early literacy development. This belief is referred to as a person's self-efficacy, a term coined by the cognitive psychologist Albert Bandura (1977). This theory offers four tenets from which we can analyze a caregiver's participation in their children's literacy development. Self-efficacy is individualized to each person so that each caregiver may have different levels of self-efficacy (Bandura, 1977). The first tenet is *mastery of experience*, meaning the person has found some level of success with the activity and knows they can accomplish the task (Bandura, 1977). Rasinski and Stevenson (2005) reinforced this idea in their study of caregivers' level of support, where they found student achievement in literacy increased when caregivers were structurally supported in their work with the child at home. Second, a person's self-efficacy includes learning from *vicarious experiences* (Bandura, 1977). For example, knowing that someone like yourself (e.g., another working caregiver) can complete the task can support your belief that you can also do the same task. The third tenet is *social persuasion* (Bandura, 1977). When a person receives positive feedback on their performance, it strengthens their belief that they will be successful with the task. Rasinski and Stevenson (2005) also found this to be true when they offered feedback to caregivers as they executed routines meant to support a child's literacy development. Lastly, a person's *emotional and physiological status* also play a vital role in self-efficacy (Bandura, 1977). For instance, Yeung and colleagues (2002) found that mothers' level of distress was directly connected to their child's reading achievement. Taken together, this framework suggests that a caregiver's self-efficacy may play a role in whether that caregiver will engage in literacy activities at home with their child.



## Epstein's Parental Involvement

The parental involvement framework by Epstein and colleagues (2019) illustrates the different ways caregivers can participate in their child's schooling. The framework defines various engagement types by the caregiver's actions (e.g., parenting, volunteering, community engagement). This framework focuses on systems such as schools or communities as opposed to individuals. Therefore, this framework is particularly supportive in understanding a policy that affects the community yet relies on schools and/or families to implement it.

According to Epstein and colleagues (2019), there are six types of engagement. The first type is *parenting*, which involves the reciprocal relationship between school and families, where the school understands and supports the family and the caregiver understands their role in supporting their children as students (Epstein et al., 2019). The second type of engagement is *volunteering*. This type of engagement invites families into the school to participate in various events, such as parent/teacher organization meetings, open houses, and classroom celebrations (Epstein et al., 2019).

The third type of engagement is *communication*, where two parties (school and family) co-construct ways they will communicate (Epstein et al., 2019). Each party has shared decision making responsibilities and ownership when communicating with each other. The fourth type of engagement is *decision-making*, which involves caregivers developing as leaders in the school and sharing in the decision-making at the school level (Epstein et al., 2019).

The final two types of engagement have been at the forefront of the COVID-19 pandemic, when many schools shifted to virtual instruction at home during the 2020-2021 and 2021-2022 school years. *Learning at home* is where schools request families to complete school-based activities at home by providing them with support to teach their children (Epstein et al.,

2019), and *collaboration with the community* includes the larger community in which the school and the family are members. This form of engagement is used to integrate community resources to better support schools and families in their shared effort to guide child development (Epstein et al., 2019).

### **Edwards' Curriculum-Based Caregiver Engagement**

The final framework that guides this study is Edwards' (2016) theory of curriculum-based caregiver engagement. This theory focuses on intentionally utilizing families to support child development via targeted curriculum-based activities. Edwards (2016) explained the success of such intentionality when it was used at a professional development school; “[l]everaging families’ strengths and supporting their abilities to practice and develop children’s skills outside of school hours can enable schools and families to become partners in children’s education” (Edwards, 2016, p.79). Through this intentionality and targeting the engagement at each level (differentiated for the curriculum needs), the school saw success with child achievement levels and the level of family engagement. While Epstein and colleagues’ (2019) framework describes what to do, Edwards’ (2016) theory describes how to engage families in a way that would be mutually beneficial to all stakeholders (i.e., caregivers, schools, and children).

### **The Intersection of the Three Frameworks**

The intersection of these three theories demonstrates that an effective caregiver-school partnership involves more than simply caregiver involvement in schools and/or caregiver *presence* at school events. Bandura’s self-efficacy theory (1977) examines the individual whereas both Epstein et al. (2019) and Edwards’ (2016) theories discuss the individual’s participation in a larger group and the impact that participation has on relationships and a child’s achievement.

Because this study considers the implementation of a reading policy, all three frameworks are necessary to understand the data collection, analysis, and findings. Table 1 illustrates how I used each framework to examine the data to determine whether the implementation of the reading policy was aligned to theories of caregiver engagement.

Table 1

*Connecting Research Questions with the Theories*

Connections with Theoretical Caregiver Engagement Elements	Leveraging Research Question-Theory Connections
<i>Bandura (1977) Self-Efficacy</i>	
Caregivers believe they can accomplish the task at hand.	Investigating whether caregivers feel they <i>can</i> adequately support their child
Caregivers are physiologically/emotionally healthy or able.	The supports provided by the school-are they aligned to increasing a caregiver's efficacy
<i>Epstein et al. (2019) Parental Involvement</i>	
Traditionally engaged either in minimal connections or volunteer support	Investigating if caregivers are engaging a level other than volunteering and parenting
Engage caregivers in decision-making processes and two-way communication avenues	Are there open lines of communication related to literacy development
Engage caregivers to support learning-at-home	To what extent is learning at home working (or not working) for caregivers and their children
<i>Edwards (2016) Intentionality &amp; Curriculum-Based</i>	
Schools make intentional requests of caregivers to work with children at home.	Investigate whether prior requests or future suggested engagement (by caregivers) shows signs of intentionality or connection to curriculum requirements

Table 1 (cont'd.)

Connections with Theoretical Caregiver Engagement Elements	Leveraging Research Question-Theory Connections
Engagement around curriculum requirements/needs will yield higher child achievement results.	Determine if any connection to curriculum exists

## Literature Review

To understand caregiver-school partnerships, it is essential to examine the body of work done previously in this field. As such, this literature review examines caregiver-school partnerships from multiple perspectives to understand caregivers' perceptions of Michigan's state-wide Read by Grade literacy policy. I begin by providing a brief overview of this state-wide policy. Second, I examine literature related to caregiver engagement with particular attention to different types of families present within schools. Third, I offer literature pertaining to the factors impact caregiver engagement in schools. Lastly, the review will examine the barriers inhibiting caregivers' engagement with schools.

### A Brief Overview of a State-wide Literacy Policy

In the past eighteen years, multiple states proposed, enacted, and implemented laws to provide the necessary support for early literacy learners and their caregivers (DellaVecchia, 2020). In several states' literacy laws, schools were further required to provide read-at-home support<sup>4</sup> to the caregiver of a child not meeting expectations in reading. Additionally, these same policies required both communication *with* caregivers and *support for* caregivers to execute the

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<sup>4</sup> *Read-at-home support* refers to a guide for caregivers that offers them assistance with how to execute early literacy skill practice or how to read with their child at home to support early literacy development. These supports have become an important element in most third grade reading policies.

read-at-home plans (e.g., Read by Grade Three, 2016). This study was conducted during the 2021-22 school year when Michigan had fully implemented its state-wide literacy policy.

Many achievement-based policies (e.g., state-wide literacy policies) are controversial (Wisely, 2019). These types of achievement-based policies are particularly troubling because of the ever-present educational achievement gap (Coleman et al., 1966), opportunity gap (Milner, 2021), or educational debt (Ladson-Billings, 2007) that exists within the United States. These policies, while well-intended, often disproportionately affect children of color (DellaVecchia, 2020). Specifically, the increased pressure and fear around grade retention negatively impacts caregivers and children of color (Aikens & Barbarin, 2008).

### **Importance of Caregiver Voice in the School Partnership**

As stated previously, caregivers' voices are often left out of conversations about literacy policies, and the population has largely been ignored in the early literacy research (Gabriel, 2020; Lumby, 2007). Studies have been done to include caregivers in their child's schooling (Aikens & Barbarin, 2008; Burkham et al., 2004; Joe & Davis, 2009; Davis-Kean, 2005; Willson & Hughes, 2009), but very few share the voice of the caregiver (Lumby, 2007). Herrera and colleagues asserted schools should seek to build partnerships with caregivers that "create an ecology within the school that values all knowledge and voices" (2020, p. 16). Additionally, schools should move beyond the unidirectional model of caregiver engagement which positions the school as the expert (Herrera et al., 2020). Instead, schools could be working toward a reciprocal relationship where caregiver knowledge of the child is privileged as equally as the knowledge of the academic content. I now share special considerations that school should consider as they work towards reciprocal relationships with caregivers from traditionally marginalized populations.

## **Caregiver Engagement in Historically Underrepresented Populations**

Historically, schools have held events or engaged with caregivers in a manner that could be referred to as status quo (e.g., doing the traditional caregiver-teacher conferences, literacy or Title I event nights, open houses within the first weeks of school). These types of caregiver engagement events have remained unchanged except for during the Covid-19 pandemic when conferences and literacy nights were held virtually (Adams, 2021). By continuing to use long-established forms of caregiver engagement, schools may inadvertently exclude historically underrepresented populations, widen achievement and access gaps (Coleman et al., 1966; Milner, 2021), and increase the educational debt (Ladson-Billings, 2007). In this section, I examine the literature on various populations of caregivers, noting similarities and differences in their needs. It is important to note that the subgroups of caregivers are not mutually exclusive, and several caregivers could find themselves in several different subgroups.

### ***Caregivers Who Identify as Black or African American***

Like any caregiver group, caregivers who identify as Black or African American are diverse in their needs and desires regarding schooling. As Lawrence-Lightfoot (2003) asserted, some caregivers still feel the *ghosts* of the past when they are within a certain proximity of a school building. These ghosts arise from the traumas and feelings associated with their past schooling experiences.

Cunningham (2021) argued that Black caregivers' engagement with school is often measured against White, middle-class notions of what caregiver engagement should be. While the Cunningham (2021) study engaged caregivers with supporting children in mathematics at the elementary level, these findings are applicable to literacy as well. The use of "collective Black identity" (Cunningham, 2021, p. 34) is conveyed in multiple references to "the village" that

caregivers rely on when raising a child (Karabo, 2017). In the current study, all caregiver participants who identified as Black used this collective noun (i.e., the village) during the one-on-one interviews I conducted. According to Lawrence-Lightfoot (2003), schools have the task of balancing the needs of the community and the child while caregivers consider solely the child's needs. Caregivers who identify as Black/African American try to leverage the community to support the needs of their child.

### ***Caregivers Who Identify as Immigrants***

Caregivers who identify as immigrants are also diverse in their needs and abilities to engage with schools. Herrera and colleagues (2020) found that teachers believed the role of caregivers is to provide support with homework completion. This belief could be problematic for caregivers identifying as immigrants due to the cultural and linguistic barriers, especially when the language of instruction for the child differs from the caregiver's primary language. Immigrant caregivers, who are multilingual speakers themselves, are often left out of the school-based events due to their linguistic differences (Housel, 2021).

Rather than approaching cultural and linguistic differences from a deficit perspective, schools could recognize these differences and optimize the larger community (i.e., translation services, settlement support, etc.) to create a welcoming network for new and incoming families (Herrera et al., 2020). In their research, Hong (2011) argued that caregivers who are already engaged with the school can be a support for incoming caregivers—helping to connect newly arriving caregivers and the school. This supportive network aids caregivers to become a vested partner in the greater school community (Hong, 2011). Additionally, Housel (2021) shared their experience as a veteran teacher of adult immigrants who are also multilingual learners. Schools

can offer professional development to teachers regarding how to engage with immigrant families concerning supporting their child's education (Housel, 2021).

### ***Caregivers Serving as Migrant Seasonal Farm Workers***

Within the immigrant community there is a separate group of caregivers who find work supporting the agricultural industry. The migrant seasonal farm workers (MSFWs) in the state where the study took place move from areas in the southern part of the country northward as the growing season begins. Most of the MSFWs bring family with them, including school-aged children, and a portion of the MSFWs elect to permanently resettle (Larson, 2013). Typically, MSFWs' school-aged children would not be in the same school for an entire school year. For instance, in Smith's (2020) study, the teachers at the Head Start school only worked from May to November with children. Smith (2020) found communication and engagement expectations needed to be shifted for this group of caregivers. MSFWs traveled North for work and spent long hours working in fields or on farms. The schools in Smith's (2020) study met with caregivers on weekends or out in the fields/on the farms when it was necessary. Additionally, MSFWs' employers did not have the resources to allow their workers to take paid time off, so when they had to leave for a school function it resulted in a reduction of the caregiver's paycheck. Thus, schools need to consider the impact requests have on caregivers since many cannot take off work to engage with school.

### ***Caregivers Who are Financially Under Resourced***

This subgroup of caregivers exists in nearly every school (see MI School Data, 2022; U.S. News & World Report, 2022). Similar to the MSFWs, caregivers who are financially under resourced may not be able to take time off work or may work more than one job to afford housing and groceries. In addition to not being able to engage at the school level, caregivers who



are financially under resourced may not be able to provide early literacy resources to their child. In this case study, McClain (2000) described how one financially under resourced caregiver fought to support their child despite not having access to the same print material that a resourced caregiver might have.

Caregivers, especially ones from a historically underrepresented backgrounds, can serve as mentors for teachers since many teachers identify as White, middle-class women. (Wilson et al., 2021). Due to differences in culture and socio-economic backgrounds, teachers may find it difficult to understand the actions and beliefs of children and caregivers living in under resourced areas (Wilson et al., 2021). Robinson (2017) found that caregivers living in under resourced areas want to partner with schools but may be unsure how to engage. These caregivers wait until the schools initiate the engagement, and then will participate if the time and financial means afford them the opportunity (Robinson, 2017). Schools must consider what they can ask of these caregivers and how they can support caregivers during engagement endeavors.

### **Factors Influencing Caregiver Engagement**

Research has shown that a child's home environment can affect their reading outcomes (Aikens & Barbarin, 2008; McClain, 2000; Van Steensel et al., 2011). In this section, I examine two factors that might influence caregiver-school partnerships: the home literacy environment (e.g., number of books, caregivers working one-on-one with their child, caregivers reading with their child, etc.) (Aikens & Barbarin, 2008; McClain, 2000; Neuman & Celano, 2006; Volk, 2021) and caregivers' socioeconomic status (Aikens & Barbarin, 2008; Davis-Kean, 2005; Joe & Davis, 2009; Yeung et al., 2002).

### ***The Home Literacy Environment***

Several studies have examined the effects of the home literacy environment on children's reading outcomes. Aiken and Barbarin (2008) found that the number of books the child had access to in their home significantly increased their reading achievement. McClain (2000) contended that even if a caregiver was unable to read, the caregiver created a print-rich and "high literacy press" environment for the child, with the outcome being that the child could read well beyond grade level (McClain, 2000, p. 24). This allowed the child to interact with print materials (e.g., bills, assistance checks, grocery shopping, etc.) on behalf of the caregiver (McClain, 2000).

### ***Socioeconomic Status and Children's Reading Outcomes***

Multiple studies have shown that SES is a mediating factor in a child's reading achievement (Aikens & Barbarin, 2008; Davis-Kean, 2005; Joe & Davis, 2009; Yeung et al., 2002). For instance, studies have shown that African American males from wealthier backgrounds scored higher on reading achievement tests than those from less wealthier backgrounds (Davis-Kean, 2005; Joe & Davis, 2009). Furthermore, Davis-Kean (2005) examined to what extent SES factors and caregiver education impacted a child's achievement level. Davis-Kean (2005) found that socioeconomic factors indirectly impacted a child's academic achievement. It is also important to note that in Davis-Kean's (2005) study, participants were children ages 8-12 versus the participants in Yeung et al. (2002) study, who were ages 3-5. Despite participant age differences, both researchers found SES to impact a child's achievement. Additional studies investigated the impacts of SES through a specific lens such as retention and summer learning loss (Burkham et al., 2004; Willson & Hughes, 2009). Burkham et al. (2004) examined what activities and learning occurred during the summer months and how these were associated with the level of caregiver income. They found that SES played a significant role in

the types of activities that a child had access to during the summer months. Not surprisingly, children from the highest level of SES had access to most activities and learned the most over the summer. In contrast, the children from the lowest level of SES had the least access to activities and experienced the most negative effect on their achievement (Burkham et al., 2004). In addition, Willson and Hughes (2009) investigated the retention of first graders in the state of Texas during the implementation of another educational reform. They examined the effects of retention and what factors may have impacted retention. Willson and Hughes (2009) concluded that age and socioeconomic factors were mediating factors in a child's retention.

Taken together, this literature indicates that a caregivers' SES impacts a child's achievement. Thus, it would behoove policymakers and schools to consider a child's home environment and SES level when incorporating caregiver engagement requirements into educational policies.

### **Partnership vs. Engagement vs. Involvement**

Current literature uses several terms to describe caregiver-school interactions (e.g., partnership, engagement, involvement). The framework used to support this study aligns with conceptualizations of caregiver involvement. Epstein and colleagues (2019) defined caregiver involvement as a seven-part active role taken by both the school and the caregivers. Engagement occurs when caregivers' needs and abilities are considered and learning opportunities are offered outside of school (Goodall & Montgomery, 2014). Caregiver engagement also encompasses caregiver attitudes regarding school and schoolwork (Goodall & Montgomery, 2014).

Partnership involves a reciprocal relationship that encompasses two-way communication (Epstein et al., 2019), mutual respect between both parties (Hill & Taylor, 2004), and a focus on

a child's development (Edwards, 2016). Partnership is ideally what schools should aspire to create when working with caregivers.

### ***Building a Partnerships***

As schools endeavor to build a partnership with caregivers, schools and teachers need to initially understand how caregivers are situated within a larger community (Edwards, 2016). With the transient nature of contemporary society, the potential exists for teachers not to be members of the community in which they are teaching. One way for teachers to learn about the school community then is for school personnel to “take stock of [their] school” (Edwards, 2016, p. 19). In this activity, the school personnel consider what they are good at and need help with; they reflect upon how they already engage caregivers and the community; they generate ideas to further engage caregivers; and finally, they investigate the strengths of taking advantage of existing caregiver/child groups (Edwards, 2016). As Edwards (2016) discussed, schools must capitalize on every opportunity to engage caregivers within the school community, not just open houses and parent/teacher conferences.

When working to build caregiver-teacher partnerships, it is important to remember that caregivers have not always been welcomed into the school space (Compton-Lilly et al., 2019; Lawrence-Lightfoot, 2003). In some cases, judgment has been attached to caregivers and of the ways in which they participate (Herrera et al., 2020; Purcell-Gates, 1996; Taylor, 1983). Also, some caregivers have a negative perception of schools due to their own experiences as a child (Herrera et al., 2020; Lawrence-Lightfoot, 2003) or are apprehensive to engage with schools (Taylor, 1983). Therefore, schools may need to reframe caregiver contributions and roles (Herrera et al., 2020; Hong, 2011; Lawrence-Lightfoot, 2003). For example, Edwards (2016) offered that schools consider redefining narrow views of literacy. This would allow schools to

recognize the many actions caregivers already do at home to support literacy. Changing how schools recognize literacy practices will be essential to building a caregiver-school partnerships (Compton-Lilly et al., 2019; Edwards, 2016).

### ***Barriers Inhibiting Caregiver-School Partnerships***

Current research about caregiver-school partnerships identifies several barriers that may inhibit the partnership. One factor is the current political landscape around caregiver voice and advocacy in educational policy. Within the past year, caregivers have increased their involvement by 1) showing up outside of school board meetings armed with weapons (Villarreal, 2022), 2) insisting books be removed from circulation or display (Lambeck, 2022; Villarreal, 2022), 3) demanding that schools cease teaching content that makes children feel uncomfortable (Kingkade et al., 2021; Steffes, 2021), 4) advocating that children attend school maskless or vaccine-less (Powell, 2022), and 5) stipulating the termination of school personnel (Skolnik, 2022). Some of these forms of caregiver involvement directly put school personnel in danger (Barnum, 2022).

Due to this heightened politicization, candidates running for governor in one Midwestern state have coined the phrase “parents’ rights” and use it freely in their campaigns (Dixon, 2022; Soldano, 2022). Within that same state the incumbent governor has appointed a council of caregivers to tackle concerns like the ones listed above (State of Michigan Office of the Governor, 2022). This political context may limit the ability to form partnerships between caregivers and schools.

It is important to remember that teachers and caregivers do not have to agree on everything to have a working partnership. They need to reflect on their current perspectives about the roles each entity should play in the partnership. Without this reflection, inaccurate

assumptions and perspectives may limit the development of the partnership. For instance, Herrera and colleagues (2020) reported some teachers felt “good” caregivers send their child to school fed, find a defined spot at home for child to work on schoolwork, and communicate with the school when needed (p. 44). Further, some caregivers think schools have the responsibility to create opportunities for caregiver engagement (Robinson, 2017). In reality, both parties need to communicate with one another about how they will each work together to support a child’s literacy development.

### **The Present Study**

Examining current caregivers’ perceptions of school partnerships during the implementation cycle of a state-wide literacy policy calls attention to the successes and challenges of collaborative caregiver-school partnerships. Using this data, schools can create more differentiated opportunities to engage with caregivers and enhance the literacy development activities utilized at home. My study will serve to answer the following questions:

***Overarching Question:*** To what extent are caregivers’ reported and desired partnerships with schools, around early literacy, aligned to current theories and research on caregiver/school engagement?

***Question 1:*** What do caregivers report about the current partnership with schools around early literacy activities?

***Question 2:*** How do caregivers want schools to connect with them to support early literacy?

***Question 3:*** What resources do caregivers report are readily accessible around early literacy?

## Summary

In summary, research has shown the importance of schools and caregivers partnering to support a child's literacy development. The state-wide literacy policy requirement for schools to enlist caregivers as partners compels schools to engage with caregivers. To foster this partnership, schools will need to alter biased assumptions about caregivers. Additionally, schools will need to recognize that not all caregivers are the same and thus, familial differences ought to be considered. If schools desire caregivers to work with children at home, they need to engage with all caregivers and provide the necessary support so caregivers can assume this role. It should be noted that there are barriers such as differences in ideas and the politicization of *parental rights* that impact caregiver-school partnerships. Missing from this body of literature is the voices of the caregivers themselves. It is essential that research not only examine the roles of caregiver/school partnerships, but also the perceptions of caregivers about current and future engagement. This study collects caregivers' perceptions and proclivities about engagement in at-home literacy support that can inform the cultivation of stronger caregiver-school partnerships.

## CHAPTER 3 – METHODS

Caregiver engagement within the school setting has recently seen a burst of publicity in the state, as it has become a political talking point for most gubernatorial political candidates during this election cycle (Ahmad & Yu, 2022; Dixon, 2022; Soldano, 2022). One candidate even proclaimed to make this state the “parent rights capital of the country” (Soldano, 2022), with another promising a “Parent’s Right to Know Act” (Dixon, 2022). Further, research has shown that caregiver engagement positively impacts a child’s achievement (Aikens & Barbarin, 2008; Edwards, 2016; Epstein et al., 2019; Grau et al., 2009; McClain, 2000; Yeung et al., 2002). State-wide literacy policies have also declared that schools must engage with caregivers through regular communication and partnership (see Read by Grade Three, 2016). Because of the erroneous claim of a lack of caregiver rights and the importance of caregiver engagement according to research, I designed a study to explore precisely how caregivers interact with schools specifically to support early literacy development.

Within this chapter, I detail the methods employed in the current study. Because this study utilized a multifaceted qualitative approach, I divided this chapter into three separate sections: parts 1, 2, and 3. Prior to detailing each part of the study, I offer a researcher positionality statement because of my desire to diversify my sample and listen to voices in spaces where I am an outsider. In part one of the study, I explored how caregivers self-reported their interaction with the school in the past year (2021-22). I conducted an online survey (Nardi, 2018) of caregivers in the four focal areas of a Midwestern state amid an implementation cycle of a state literacy policy. Specifically, I examined what caregivers reported occurred last school year and what caregivers would be willing to do in the future to support their child’s literacy development. Next, I utilized one-on-one interviews (Kruger & Casey, 2015), which allowed me



to collect caregivers' perspectives on their interactions and perceptions of the partnership with the school during the last school year (2021-22). The final part of the study examined the resources posted on the school website for caregivers supported the caregivers' responses from the previous portions and whether resources were supported by current literacy research (Braun & Clarke, 2006; Neuendorf, 2002; Neuendorf, 2018). The next section of this chapter will illustrate the design and logic, participants, coding, and data analysis used in each part of the study.

### **Researcher Positionality**

As a former middle school teacher and reading specialist/literacy coach, I understood the value and importance of engaging with caregivers to support a child's literacy development. In fact, I often attribute my success as a teacher to the supportive caregivers who extended my classroom lessons or were willing to discuss texts that we read throughout the week at home with their child. Even in middle school, I felt the importance of a caregiver and their support.

As a non-caregiver myself and no longer involved in the K-12 school setting, I was an outsider. As a non-resident in each of the spaces I included in this study, I was an outsider. Additionally, I recruited my participants through Facebook, so I did not know them. My position as an outsider allowed me to collect the caregivers' perspectives and more honest opinions as I did not have any prior bias or assumptions. I could draw on my educational background and teaching experience to understand some of the interactions and ask follow-up questions. Yet, there were some challenges as I sought to create a nuanced understanding of the participants' experiences. Because I had no prior experience with the participants, I was unsure if the questions were too invasive or private.

Lastly, and most importantly, I was seeking participants that represented racial and ethnic as well as economic diversity. As a White woman who grew up in a rural community within the same state as the study, I grew up in a rather homogenous community of White people. In the past twenty years since I moved from that rural community, their diversity has changed little (95% White, 3% two or more races, 2% Black, and the remaining demographics are <1%) (US Census Bureau, 2020). My first teaching experience was in an urban charter school where 2 out of my 28 students were White. I found the caregivers in that community most helpful with settling into the community and the school. My last three years teaching was in the state where the study took place in an urban charter school. While the school does not publish demographics on their families, I was asked in the interview process if I could work with people who did not physically look like me. My reading specialist/literacy coaching job afforded me the opportunity to work in major urban areas with schools experiencing difficulties teaching reading. Here, I document and report the voices of caregivers by carefully designing the current study and using various research methods. With this project, I sought to tell the caregiver's stories, which are often left untold.

### **Part One: Online Survey**

The initial part of the study included an online survey with caregivers and their perceptions on the partnership with their children's school(s). This portion of the study helped me answer my first two research questions: (1) What do caregivers report about the partnership with schools around early literacy activities? and (2) How do caregivers want schools to connect with them to support early literacy? Because each question within the study helped answer the primary research question, this portion of the study supported the conclusions to that overarching

question: To what extent is caregivers' reported and desired partnership with schools, around early literacy, aligned to current theories and research on caregiver engagement?

### **Design and Logic**

The online survey was created on Qualtrics using the guidance of Nardi (2018). At the start of the online survey, participants were given a full copy of the Participant Consent Form to read (see Appendix A). The final line within this section noted that by clicking forward, the participant grants permission for the researcher to use their responses. The next screen began the participant questioning portion. Initially, the survey collected primary demographic data from participants such as race/ethnicity, language spoken in the home, gender and household income primarily focused on the caregivers. The next indicators included which grade the child attended, type of school, retention history, amount of time spent learning in-person, and location of the school primarily focused on the child. All items were required of participants completing the survey to ensure a representative sample.

According to the survey guidebook, surveys that intend to explore perceptions should utilize Likert-type response choices (Nardi, 2018). Following the demographic section, the survey requested information about the caregiver's historical interactions with the school over the previous (2021-22) school year. Within in this section, the survey asked about caregivers' physical materials (or have not received) from their child's school. Caregivers were also asked to report on the frequency with which they received books at home to read, activities to complete with their child(ren) including activities that honor their home literacy practices, read-at-home plans, and homework packets. Additionally, caregivers were able to fill in if they have received materials not represented in the previous categories.

The next part of this section focused on the interaction between the teacher and the caregiver in the past school year. Participants reported the frequency with which the teacher communicated their child's progress in literacy. More specifically caregivers could share the manner in which the information was shared: verbally, with charts/graphs, face-to-face at a conference, or virtually. With the anticipation that teachers are communicating with more than one manner and more than once of year, each method of communication was independent, meaning each participant responded to the frequency of each method of communication. Within this section, there were also some perception-based questions regarding the trust of the teacher, whether the caregivers felt capable of supporting their child in the completion of at-home activities (Bandura, 1977), and if the caregiver had attended workshops given by the school (Read by Grade Three, 2016).

The third section of this survey asked caregivers what support materials they would like to receive from their child's school. This portion of the survey began to answer my second research sub-question by asking potential ways that caregivers might want schools to engage with them. Requesting caregiver input is essential if schools want caregiver buy-in (Edwards, 2016; Epstein et al., 2019; Lumby, 2007). I utilized these questions to explore families' beliefs on school engagement further, even if only at a surface level; however, part two of the study (one-on-one interviews) went more in-depth on this particular topic. Within this section of the survey, caregivers reported on the likelihood of engaging in specific activities like activities with clear and complete directions, the use of videos to guide the completion of activities, face-to-face demonstrations of activities, and workshops to learn how to complete activities with their child (Rasinski & Stevenson, 2005). The last series of questions in this section of the survey asked participants to identify the frequency with which they would be willing to participate in various

literacy-related activities at home. The literacy-related activities identified in the survey were: listen to the child read, read *to* the child, read *with* the child, talk with the child about books or schoolwork, phonics skill practice, and sight work practice (MAISA GELN, 2016). Caregivers could also respond to the “Other” option and record the frequency and activity they would be willing to complete with their child. These options were all independent, so a participant could respond with a different frequency on each item. Additionally, caregivers were asked to identify roadblocks that prevent them from engaging with their child at home with literacy activities (Aikens & Barbarin, 2008; McClain, 2000; Van Steensel et al., 2011). In this question, caregivers ranked the given roadblocks (e.g., time, multiple children to support, tired after working all day, fear of doing an activity wrong, and not understanding what the school wanted the child to do). Caregivers also had the option to respond with “Other” and then identify the roadblock. Because this was a ranking question, only one option could occupy each place within the ranked list (i.e., one participant could not put *time* and *multiple children to support* in the 2<sup>nd</sup> place on the list). A complete list of questions and answer choice options can be found in Appendix B of this document.

The concluding section of the survey invited survey participants to engage in one-on-one interviews (part two of this study). The caregivers identified a time and method of contact that worked best for them for the interview. In the following section, I describe how I recruited participants for this study.

## **Participants**

In this section, I describe the participants recruited for the first two parts of the study, the online survey and the one-on-one interviews. With a state-wide literacy policy that focused on early literacy (e.g., Read by Grade Three, 2016), this portion of the study aimed to survey

caregivers with children attending a school within the state between preschool grades (3-5 years old) through third grade. I used convenience sampling (Nardi, 2008) to recruit participants from four geographic regions within the state to ensure representation from each of the population-based, geographic indicators (e.g., rural, suburban, and urban). In the next section, I introduce the four focal areas using the pseudonyms: Windy Point, Little Cove, Sandhill, and Lakeland. Table 2 will show the designation of each community, the total population, the land area, and the population density of the community.

Table 2

*Comparison of Population & Designation within Focal Area's*

Community	Designation	Population (people)	Geographic Area (sq. mi)	Population Density (people/sq. mi)
Windy Point	Rural	724	1.25	579.20
Little Cove	Rural	2,588	1.34 <sup>a</sup>	1,931.34
Sandhill	Urban	21,704	2.09	10,384.69
Lakeland	Urban	51,780	20.95	2,472.60

<sup>a</sup> 0.01 square miles is water, 1.33 square miles is land

In addition, I profile one elementary school representative of the city's demographics using various characteristics. Table 3 describes the school's total population (student body), grades serviced, free and reduced meal rate, percent of children receiving special education services, English language learner services, and the proficiency rate on the previous year's state reading assessment. Additionally, Table 3 contains the number of schools within a five-mile radius of the school described. This will illustrate the choices a caregiver has for the education of their child.

Table 3

*Comparison of Target Schools in Focal Areas*

School (designation)	Pop. of school (children)	Grade	FRL (percent)	SPED (percent)	ELL (percent)	Prof. (percent)	Number of Schools within 5 miles <sup>a</sup>
Windy Point Elementary (rural)	503	PK-5	54	9	< 5	51	0
Little Cove Elementary (rural)	554	K-5	91	16	38	18	1
East Sandhill Elementary (urban)	625	K-6	86	6	68	12	>25
Apollo Elementary (suburban)	362	K-5	81	17	23	48	>25

Note: All data are collected from [mischooldata.org](https://mischooldata.org) (2021) reports available to caregivers.

<sup>a</sup> *U.S. News & World Report* (2022) list truncates at 25.

The final demographic indicators used are race, ethnicity, and gender. I used these indicators to ensure that I chose focal areas representative of the state and to ensure I represent most, if not all, of the different ethnic and racial identities in the state. It is important to note that neither the school accountability data nor the U.S. Census Bureau identified which races are included when a person marks “Two or more races”. Still more important, these two data sources identify people of Middle Eastern and North African (MENA) heritage as “White” (U.S. Census Bureau, 2020). Additionally, the Census Bureau (2020) does not recognize “Latinx” as a race but an ethnicity. This means people could check a race and “Latinx” and not be included in

the “Two or more races” category. Table 4 illustrates the breakdown of each focal community’s representative school for this study.

Table 4

*Comparison of Ethnicity & Race and Gender in the Focal Area’s Target School (all values are percent)*

School location (designation)	Asian	Black/African American	Indigenous	Latinx	White	Two or more races <sup>c</sup>	Gender <sup>d</sup>
Windy Point (rural)	0.00	0.00	0.80	10.14	87.67	1.39	M=51.49 F=49.51
Little Cove (rural)	0.00	1.08	1.26	61.55	35.56	0.54	M=53.43 F=46.57
Sandhill (urban)	29.92	6.56	0.00	0.32	61.60	1.60	M=54.24 F=45.76
Lakeland (suburban)	11.05	46.69	0.28	16.30	16.85	8.84	M=45.86 F=54.14
Average of focal area	<b>10.24</b>	<b>13.58</b>	<b>0.59</b>	<b>22.08</b>	<b>50.42</b>	<b>3.09</b>	<b>M=51.10</b> <b>F=48.90</b>
State average	6	12.40	1.30	18.70	61.60	10.20	M=49.20 F=50.89

<sup>a</sup> The Indigenous indicator includes “Native Hawaiian and Other Pacific Islander” and “American Indian and Alaskan Native.”

<sup>b</sup> The Latinx indicator is labeled “Hispanic origin” on the census and is not considered a race.

<sup>c</sup> The “Two or More Races” indicator is never further described by information such as the rate at which each race is included in this number. It is calculated by a participant chooses more than one race on the race question (U.S. Census Bureau, 2020).

<sup>d</sup> Neither the census bureau, nor the state accountability data included the option for gender neutral or gender non-conforming terms (e.g., they/them, ze, ey, mx).

### ***Windy Point***

Windy Point is a rural community located in the northern part of the state and is known for its agriculture. Additionally known for its small population, Windy Point is ranked as one of the smallest cities in the state with a population of 724 residents (US Census Bureau, 2020).

Locally, Windy Point has a reputation for its good schools (i.e., high-performing) and tight-knit



community. Within the Windy Point schools, the one elementary school enrolls 469 children from preschool to grade 5 (U.S. News & World Report, 2022). The racial/ethnic make-up of the school is 87% European American/White, 10% Latinx, 2% being two or more races (although those races are not identified), and 1% being Indigenous Native American, Native Alaskan, Native Hawaiian, or other Pacific Islander. Important to note is that Asian American/Asian and African American/Black were not listed because they total 0% (U.S. News & World Report, 2022). The gender makeup of the elementary school in Windy Point is fairly evenly split at 51% male and 49% female, and the number of families qualifying for free or reduced meals is 55% (U.S. News & World Report, 2022). Lastly, almost 5% of their population enrolled in the English language learners' program, which is integrated into the regular classroom with support (U.S. News & World Report, 2022). Windy Point was chosen for its performance on state tests while welcoming a growing number of Latinx farm workers with families. The community has embraced the incoming workers for several reasons with one being the MSFW caregivers' support of the school and the MSFW caregivers' willingness to work with their children (Participant 5 interview).

### ***Little Cove***

An additional rural community in the state focused on agriculture is the village of Little Cove. While their agricultural focus differs significantly, Little Cove boasts the highest level of Migrant Season Farm Workers (MSFW) within the state (Larson, 2013). In addition, Little Cove is located on the southwest side of the state and adjacent to several small lakes. According to the US Census Bureau (2020), Little Cove has a population of 2,588 residents. The schools in Little Cove also differ from those of Windy Point. The elementary school in Little Cove serves 554 children in grades Kindergarten through 5 (mischooldata.org). Little Cove has a more diverse

racial and ethnic makeup than Windy Point. While U.S. News refers to Latinx as a “minority,” it is not the case in Little Cove (U.S. News & World Report, 2022). Little Cove’s ethnic makeup is Latinx at 62%, European American/White at 36%, Two or more races (although undefined) at less than 1%, Indigenous Native American or Alaskan Native at around 1% each, and African American/Black at 1% too (mischooldata.org). Other racial or ethnic groups totaled 0%. The gender makeup of the school is nearly evenly split again at 52% male and 48% female, and 91% of their families qualify for free or reduced meals. In Little Cove, 38% of the children are serviced in an English language learner program, although it is unclear how that occurs, and 16% are labeled as children with a disability (schooldata.org). While both Little Cove and Windy Point are agricultural communities, they are vastly different in several ways. I choose these two geographically separate rural areas in the state because of their large populations of MSFWs.

### ***Sandhill***

Sandhill is an urban pocket mostly surrounded by a larger, sprawling urban city in the southeast of the state. The physical land mass of Sandhill is a little more than two square miles, but its population is nearly 22,000 residents (US Census Bureau, 2020). Sandhill is a community that in the past has been synonymous with Eastern European immigrant culture, but whose population has shifted significantly to welcome Middle Eastern and Asian residents (Block & Nadworny, 2017). The ethnic demographic makeup in the school mirrors this shift. In East Sandhill Elementary School has an ethnic breakdown with 62% identified as White (it is important to note-Middle Eastern children are placed in this category), 30% identify as Asian, 7% identify as Black/African American, 2% as Two or more races (although the individual ethnicities are not identified), and less than 1% identify as Latinx (mischooldata.org). All other ethnicities totaled 0%. The school population (student body) is comprised of 54% male and 46%

female children, and the school's population of families receiving free and reduced meals is 86% (mischooldata.org). Interestingly, East Sandhill Elementary has an English language learner population that totals 68%, and 6% of their population are identified as children with disabilities (mischooldata.org). While Sandhill is in the middle of an urban center, it shares similar features with Little Cove, including a lower proficiency rate on the reading assessment in the state.

### ***Lakeland***

The community of Lakeland is a suburban city located on the west side of the state. It is home to a few large corporations and a culturally and linguistically diverse population. It is over double the population of Sandhill at roughly 54,000 people and nearly ten times the geographic size (US Census Bureau, 2020) at about 21 square miles. The racial demographics of Lakeland are almost half of the population identifying as Black/African American (47%) (US Census Bureau, 2020). The remainder of the populations identifies as White (17%), Latinx (16%), Asian (11%), and Indigenous (less than 1%) (US Census Bureau, 2020). Almost 9% of the population identify as two or more races, although it is not clear which races those were (US Census Bureau, 2020). There are several schooling options for families in the Lakewood area. Apollo Elementary, one of Lakeland's eleven elementary schools, prides itself on its ethnic, cultural, and linguistic diversity. Within the Lakeland community, nearly 1 in 4 people over the age of five speak a language other than English at home (US Census Bureau, 2020). The community is working class with almost 90% of the adult population having a high school diploma but only a third of the population graduating college (U.S. Census Bureau, 2020). The school district's website touts the feel of a community school with all support services being located at the schools. This sense of community supports their large number of immigrant and multilingual families (Hong, 2011; Housel, 2021).

These four focal communities were intentionally chosen for their racial/ethnic diversity and their unique qualities like languages spoken, religions practiced, or influx of MSFWs. Once the communities were identified, I utilized Facebook groups in each of the communities to recruit caregiver participants. I posted a single-page, recruitment flyer with a QR code and bitly link (shortened, easy-to-remember link) to access the survey (see Appendix C) and a brief note explaining my role and project purpose. I returned to each group page at the routine interval of a month. While I did not have experience the widespread participation, once a caregiver took the survey, they would comment on the legitimacy of the survey. This endorsement from the participant allowed me to gain additional participants on the online survey. Table 5 illustrates the sample of participants who completed the survey.

Table 5

*Participants Demographic Information in Survey*

Indicator	Category	Participant (N=20)	
		<i>n</i>	%
Race/Ethnicity	Asian	2	10
	Black/African American	9	45
	Latinx	2	10
	Middle Eastern	1	5
	White	8	40
	Two or More <sup>a</sup>	2	10

Table 5 (cont'd.)

Indicator	Category	Participant ( <i>N</i> =20)	
		<i>n</i>	%
Language spoken in home	English	20	100
	Other <sup>b</sup>	3	15
	Bengla	2	10
	Chaldean	1	5
Gender	Female	17	85
	Male	3	15
Household Income Level	Below \$25,000	0	0
	\$25,000-\$50,000	3	15
	\$50,001-\$75,000	5	25
	\$75,001-\$100,000	3	15
	Above \$100,000	9	45
Grade Level of Children, 2021-22 school year ( <i>n</i> =31) <sup>c</sup>	Pre-Kindergarten	7 children	23
	Kindergarten	5 children	16
	1 <sup>st</sup> Grade	7 children	23
	2 <sup>nd</sup> Grade	3 children	9
	3 <sup>rd</sup> Grade	9 children	29
Retention, prior to 2022-23 school year	Yes	0 children	0
	No	20 children	100
Type of School Children Attend	Charter	6 families	30
	Private	0 families	0
	Public	14 families	20

Table 5 (cont'd.)

Indicator	Category	Participant (N=20)	
		<i>n</i>	%
Percentage of Time Spent In-person Learning, 2021-22 school year	0-25%	4 families	20
	26-50%	1 family	5
	51-75%	1 family	5
	76-100%	14 families	70
Location of School	Rural	3 families	15
	Suburban	12 families	60
	Urban	5 families	25

<sup>a</sup> When “Two or More” were selected, participants also selected each of their identified races, so the total will be over 100%.

<sup>b</sup> When “Other” was selected, it was in addition to English. Participants were asked to identify the additional language spoken in the home.

<sup>c</sup> Participants listed all children in the household in each grade; some participants had more than one child within the targeted age group.

### Coding and Data Analysis

The data analysis process began with reviewing the initial demographic data to ensure I have participants from various backgrounds. In the next section of questions on the survey, I counted the frequency of each of the answer choices as reported by caregivers. For example, this included the frequency (e.g., daily, weekly, monthly, quarterly, or not yet) with which caregivers reported receiving each of the literacy-based materials (e.g., read at home activities, books, suggested activities that align to home practices, homework packets, etc.) from the school in the 2020-21 school year. Examining at how frequently caregivers were offered the various materials supported my investigation into my first research question: *What do caregivers report about the current partnership with schools around early literacy activities?*

In the third major section of the online survey, I focused on frequency with the communication of the child’s literacy progress throughout the school year and the way the

communication occurred. Like the first and second sections, I counted the response frequencies to determine how often caregivers reported the schools communicating with them. The frequencies of this section varied from the second section in that they asked caregivers to quantify (i.e., 0-1, 2-3, 4-5, and 5+) the times their child's progress was shared. In this section of the online survey, I was also able to determine which method of communication (face-to-face, paper without explanation, paper with explanation, no communication yet) the caregivers reported experiencing most frequently. This measure was important to understand how caregivers were perceiving the communication that schools in different parts of the state are sharing regarding information about a child's literacy development.

In the final couple of sections of the online survey, I asked caregivers about what they would be willing to do and what support(s) they would be willing to use in assisting their child with literacy development at home. One section asked about the likelihood of using resources (i.e., workshops, videos, clear instructions) if they were provided to caregivers. I counted each likelihood option and then calculated the percentage that that option represented for each of the resources. From those calculations, I was able to determine which resources these caregivers were willing to use to support their child in literacy at home. This would be important for schools to know to provide resources that are more likely to be utilized by caregivers.

The penultimate section in the online survey asked caregivers specifically about the activities they would be most likely to do with their child at home. Additionally, this section asked how frequently (i.e., daily, weekly, monthly, quarterly, or none) the caregiver would be willing to do each activity. I counted the total caregiver reported frequency for each activity. Because each activity was answered independent (i.e., a caregiver could mark daily on each of the activities), I calculated the percentage of responses for each activity. This measure could also

help schools determine how frequently some caregivers are willing to complete activities and which activities they are willing to complete most frequently.

The final section, other than the interview contact information section, caregivers were asked to rank the roadblocks that inhibited their engagement with schools. The roadblocks were situational indicators like time, multiple children at home, tired after a long day, not understanding what the school wanted, and fear of doing it wrong. There was also an option for caregivers to enter in a situation that was not represented by the given choices. I averaged the scores for each of the roadblocks and then used those averages to rank the roadblocks as they caregivers had responded. The responses to this question helped me to determine what might be standing in the way of caregivers engaging with schools to support literacy development. The responses could support schools with understanding why a caregiver cannot always engage with activities that are sent home. Examining the responses and which ones are ranked lower (less significant) versus the higher ranked (more significant) roadblocks could guide schools in investigating potential solutions to those roadblocks before the others.

The conclusion of the online survey was a data collection for caregivers interested in participating in the one-on-one interviews. Using the survey data in conjunction with the interview data and the investigation into the available resources will offer a unique insight into caregiver's perceptions of the current partnership with the school. Additionally, the results of this online survey with the other data points from this study will support schools with understanding what caregivers believe could happen in the future to build a strong partnership. Therefore, the data collected from this online survey was essential to answer my first and second research questions: (1) What do caregivers report about the current partnership with schools



around early literacy activities? and (2) how do caregivers want schools to connect with them to support their child's development in literacy?

In the next section, I describe the second part of the study, one-on-one interviews, which built directly upon part one, the survey. The survey was conducted prior to the one-on-one interviews, and the interviews amplify what caregivers shared in the survey portion of this study.

## **Part Two: One-on-One Interviews**

I conducted one-on-one interviews with six caregivers to understand the caregiver's desire to build a solid relationship with their child's school, and their recommendations for fostering that relationship. The following interview questions guided my process of designing interview questions: (1) What do caregivers report about the partnership with schools around early literacy activities? (2) How do caregivers want schools to connect with them to support early literacy? and to a lesser extent (3) What resources do caregivers report are readily accessible around early literacy? In this section, I will describe the design of part two of the study using one-on-one interviews (Kruger & Casey, 2015). This section details how the participants were chosen for this more in-depth investigation, as well as the coding and analysis strategies (Saldaña, 2021) employed in the analysis.

### **Design and Logic**

I designed one-on-one interviews using the guidelines suggested by Kruger and Casey (2015). Each interview ranged from approximately 30 minutes to 75 minutes, with an average of 46:36 minutes for the six interviews. The purpose of the interviews was to gain valuable information from caregivers regarding the specific type of support they have received. Additionally, the interviews queried caregivers regarding what partnership and support they would like from schools to help their children's literacy development. These interviews

augmented the data collected from the survey with a more in-depth investigation into suggested ideas for caregiver involvement with a child's literacy development.

According to Kruger and Casey (2015), the questioning route is one of the most critical elements of an interview, as, without solid questions, it may not yield significant data. My questioning style was informal, even though I had drafted a formal questioning route (see Appendix D). The interview questions broadly focused on following themes: 1) perspectives on which resources and engagement attempts made during the 2021-22 school year; 2) how their child's literacy development was conveyed to them; 3) which resources and supports the caregivers would be willing to engage with. Following each interview, I reviewed my notes, the questions asked, and the questioning route for effectiveness, as is standard in multiple interview research (Krueger & Casey, 2015). The next section will describe how I recruited participants for this portion of the project.

## Participants

Six caregivers from various geographical location (e.g., urban, suburban, and rural), who showed willingness to participate in one-one-one in-depth interview, participated in the interviews (Table 6).

Table 6

### *Demographic Breakdown of Participants in Interview Portion*

Indicator	Category	Participant (N=6)	
		<i>n</i>	%
Race/Ethnicity	Black/African American	2	33.33
	White	4	66.67

Table 6 (cont'd.)

Indicator	Category	Participant ( <i>N</i> =6)	
		<i>n</i>	%
Language spoken in home	English	6	100
Gender	Female	5	83.3
	Male	1	16.7
Household Income Level	\$50,001-\$75,000	1	16.7
	\$75,001-\$100,000	1	16.7
	Above \$100,000	4	66.7
Grade Level of Children, 2021-22 school year ( <i>n</i> =12) <sup>a</sup>	Pre-Kindergarten	2	16.7
	Kindergarten	1	8.3
	1 <sup>st</sup> Grade	3	25
	3 <sup>rd</sup> Grade	6	60
Retention, prior to 2022-23 school year	Yes	0	0
	No	6	100
Type of School Children Attend	Charter	2 families	33.3
	Private	0 families	0.00
	Public	4 families	66.7
Percentage of Time Spent In- person Learning, 2021-22 school year	26-50%	1 family	16.7
	51-75%	1 family	16.7
	76-100%	4 families	66.7

Table 6 (cont'd.)

Indicator	Category	Participant (N=6)	
		<i>n</i>	%
Location of School	Rural	2 families	33.3
	Suburban	2 families	33.3
	Urban	2 families	33.3

<sup>a</sup> Participants listed all children in the household in each grade; some participants had more than one child within the targeted age group.

The caregivers represented above shared more details in their interviews (e.g., marital status, living situation, etc.) that are not reflected in the demographics gathered from the online survey. Below is a brief description of the caregivers who participated in the online survey and interview portion of the study.

#### ***Caregiver A***

Caregiver A is from Sandhill and identifies as White. They reported being a single parent to two daughters. They work as a banker for a local bank but work remotely following the pandemic. Despite being at home during the day and evening, Caregiver A reported relying on their older daughter to support the younger, 3<sup>rd</sup> grade child, with schoolwork. Further, Caregiver A reported sending their children to the local public school despite several options within the vicinity of their home.

#### ***Caregiver B***

Caregiver B is from Lakeland, a suburban community although they report not sending their child to the local public school, instead opting for a charter school in a neighboring community. Caregiver B has the means to get their children to and from school each day, as the charter school does not offer transportation. Additionally, Caregiver B, who identifies as Black,

is the parent of two boys in grades 1 and 3. Caregiver B reminded me that their youngest son started his schooling during the pandemic and their school needed to be reminded of that.

### ***Caregiver C***

Caregiver C, also from Lakeland, sends their child to a charter school despite access to quality public schools near to their home. Caregiver C, who identifies as Black, is a divorced parent to one son. They referred to their son as a “miracle baby” several times during our interview. Caregiver C explained to me that they have the means to give their child everything they can with the exception of time. Caregiver C enlists the support of a paid tutor to go through schoolwork with their child twice a week. Additionally, Caregiver C’s interview revolved around their frustration with the school on not providing adequate support for their son, who has additional needs due to a vision condition that causes him to process the visually received information different than the average individual.

### ***Caregiver D***

Caregiver D, who identifies as White, is from Windy Point. They are the parent to four young children (two girls and two boys), all younger than 3<sup>rd</sup> grade. Caregiver D is a pillar of their small community, as they interact with the local church community weekly. They send their children to the local elementary school because there are no alternatives with the exception of home schooling and a private faith-based school that charges tuition. Caregiver D works in a neighboring community for paid employment but supplements their income with sales from farm animals. Caregiver D also owns a working farm and engages their children and other children in the community with activities on their farm for the local 4-H chapter.

### ***Caregiver E***

Caregiver E is a married parent of three school age children-two girls and a boy, and they are from Windy Point. Recall Windy Point has only two options for schooling, other than homeschooling: faith-based school that charges tuition and a free public school. Caregiver E, who identifies as White, sends their children to the public school. Caregiver E is very involved with the public school in Windy Point. Like most families in Windy Point, Caregiver E lives with their family on a small farm, but they are not a MSFW. Caregiver E is not originally from the community but has relocated to Windy Point after marriage.

### ***Caregiver F***

Caregiver F, a married parent from Sandhill with two young boys in early elementary. Caregiver F, who identifies as White, sends their children to a local public elementary school. Uniquely, the public school where Caregiver F sends their children is a Montessori school, but they chose the school for its small class sizes. Classes are capped at 18 students in the elementary school. Caregiver F works from home and their partner also works from home, allowing them to opportunity to engage with in-school activities during the day or evening.

To keep the most accurate account of the one-on-one interviews with these caregivers, I recorded each interview conversation with the permission of the participants. To protect the caregiver's identity, I avoided using their names during the interview; however, on the rare occasion I used a caregiver's real name, or they used their own child's name, I used pseudonyms or the generic identifier *caregiver* or *child* within the transcript. Additionally, I took notes during the interviews to note my own perception of the caregiver's responses. This helped me in recalling any additional data that may not come through in a transcript during analysis. This was especially beneficial after I cut the coded phrases from the transcript and organized the data by

code. Following the audio recording, I had each file transcribed to better support my coding.

When I analyzed the data, I utilized both the transcripts of the interviews and my notes from each conversation. I also used my notes to clarify misconceptions or confusion when analyzing single phrases (after 2<sup>nd</sup> round of coding), and this supported my judgement when coding the individual phrases.

### **Coding and Data Analysis**

Each interview was recorded using a digital recorder rather than using the video conferencing platform Zoom. I utilized a transcription service for the initial transcription and thereafter edited the computer generated transcript. Before coding, I reviewed each transcription for accuracy. For data analysis, I used inductive and deductive codes, which according to Kruger and Casey (2015) and Saldaña (2021), is appropriate for qualitatively analyzing interview data. After coding the data, I noticed that most of the i priori (deductive) codes were used in the second and third rounds of coding with the exception of communication. While this may have seemed backward, Saldaña (2021) states that you can do either inductive or deductive coding first. As I read the transcripts multiple times, I noticed themes that seemed to occur frequently. After finishing my final transcript, I had identified eight inductive codes after selecting 564 phrases to code. Table 7 offers a list of the inductive codes and their descriptions that I used to highlight patterns in the data.

Table 7

#### *Inductive Code Scheme for Interviews*

Code	Code descriptions
Asset	Caregiver mentioned something about their relationship with the school in a positive manner or a way that would have supported the child's development academically.

Table 7 (cont'd.)

Code	Code descriptions
Communication	Caregiver discussed of sending and receiving or the attempt to send and receive information between the caregiver and the school (including teachers and office personnel). This could be verbal or written.
Ideal Situation	Caregiver mentioned what their hope or desire for the future partnership might be.
Outlier	Caregiver shared information that did not fit well into any category. It usually occurred when a caregiver spoke specifically about something they were passionate about that did not fit the other categories (e.g., agency, diagnosis).
Outside factor	Caregiver mentioned of an outside factor other than the school or caregiver/child unit (e.g., COVID, community tutoring program).
State-wide policy	Caregiver offered information on any aspect of the state-wide literacy policy or any of its components. This could include any support the school offered (i.e., workshops).
Relationship	Any mention, positive or negative, about the caregiver and school partnership or child and school or caregiver and child relationship.
Roadblock	This code was used when caregivers mentioned anything the prohibited them from engaging with the school. There were a number of subcodes (or factors) that the caregivers mentioned specifically as roadblocks (e.g., time, disengagement, family situation, etc.)

Following my initial round of coding, I used the deductive codes I have identified (Saldaña, 2021) enlisting the tenets of my theoretical frames and in conjunction with anticipated potential responses from participants (see Table 8 for a list of deductive codes). While I did not utilize every code to categorize the data, I used the deductive codes when I analyzed the data and determined the implications of the data.



Table 8

*Deductive Code Scheme for Interviews*

Theories	Codes	Code descriptions
Self-efficacy (Bandura, 1977)	Vicarious experience	Participant is watching or hearing someone else's example of a successful experience with helping a child with literacy development or other schoolwork.
	Social persuasion	Participant received positive verbal feedback that pushed them to continue with behavior.
	Physiological status	The participant is in a healthy state both physiologically and emotionally.
Parental Involvement (Epstein et al., 2019)	Parenting	Families are supporting child as a student.
	Communication	Schools and families partner to design effective two-way communication.
	Volunteering	Schools and families recruit parental support and assistance. Parents are often the audience for child's activities.
	Learning at home	Supports are offered to aid families in helping their children at home with their literacy development.
	Decision making	Schools intentionally include families as part of the decision-making process.
Curriculum- based Engagement (Edwards, 2016)	Collaborating with community	School utilizes community resources to support families with aiding in their child's literacy development.
	Intentionality	Requests are intentionally focused on child's growth in literacy.
	Targeted toward curriculum	School creates engagement directly aligned with curriculum.

Using these codes, I was able to organize the categorized phrases first by the inductive codes. From the inductive codes I ran through the data two additional times for additional

explanatory codes (e.g., engagement, breakdown, resources, etc.) as well as the inductive codes. After completely coding all six transcripts three times, I organized all the coded phrases into one large spreadsheet. Then I separated all the phrases into individual spreadsheets according to the primary codes (first round codes). These ended up being concept codes (Saldaña, 2021). Once each subcode (e.g., roadblock, asset, communication, ideal situation, outlier, relationship, outside factors, policy, and special quotes) was into its own separate sheet, I organized the list of coded phrases. I had nine separate sheets within the larger spreadsheet, within which I organized phrases using the subcodes. I examined the phrases for patterns within the subcodes. Once patterns began to emerge, I grouped similar subcodes together (e.g., student engagement and family engagement were grouped under the subcode *engagement*). After grouping and identifying patterns, I returned to examine each of the phrases that were included in the subcode. This was to verify that the phrase from the caregiver fit best with these codes and subcodes. After I was confident my phrases were adequately coded, I examined the phrases together as a unit and considered the connotative meaning of group of phrases. According to Saldaña (2021), using concept coding in the first round and then values coding (see engagement example above) would be appropriate for the type of analysis I desired. Finally, after creating multiple subgroups of phrases, phrases spoken during the interviews fit together to tell the story of these six caregivers and their engagement with the school during the 2021-22 school year.

Beyond identifying and evaluating the phrases, I aimed to understand whether certain codes or subcodes occurred more or less frequently. I believed this would explain the primary focus for multiple caregivers from different parts of the state. I counted the frequency with which I used each of the codes and subcodes. When subcodes were used only a few times, I categorized them as *other* and then specified the code and description in the narrative. Additionally, I

calculated the percentages of each of the subcodes used, except for the other category where all less significant codes were combined for a percentage.

### **Part Three: Thematic Content Analysis**

The final part of this study used thematic content analysis to discover what resources are being offered to caregivers, so they can support literacy development with their children at home. I reviewed and analyzed the readily accessible documents posted by schools for families to access. These resources were found by examining school's websites. This part of the study will answer my final research question.

Question 3: What resources do caregivers report are readily accessible around early literacy?

### **Design and Logic**

As I designed this part of the study, I aimed to investigate the resources offered to caregivers to determine an additional point of data. In the first two parts of the study, I focused on what caregivers reported; however, for this part, I focused on resources available to the caregivers. To do this without the resources being filtered through only the caregiver, I chose to investigate the schools' websites.

I initially aimed to investigate the resources posted that specifically targeted early literacy skills (e.g., phonemic awareness, phonics, spelling, sound/letter patterns, vocabulary, etc.) and used early literacy skills because caregivers were being called on in state-wide literacy policies to support their child at home with early literacy development (see Read by Grade Three, 2016). When this did not materialize because of the lack of posted resources that focused on any type of instruction, I shifted my focus to reporting on what was present. I chose to use inductive coding

to analyze the content of each of the school's websites. Because my content analysis was focused on common themes, I reviewed them all initially to determine which themes were emerging.

According to Saldaña (2021), inductive coding can be used on its own. Therefore, after reviewing each of the web sites, I established my inductive code list (see Table 9) before returning to each web site to further investigate.

Table 9

*Inductive Code List for Content Analysis of Targeted School's Web Sites*

Code (themes)	Code Description
Password protected portal	Usually a school-purchased platform where student information is housed. Caregivers can typically access grades, assignments, and attendance records. Some portals even have a spot where caregivers can contact the teacher or other school personnel.
Handbook	Often this resource is a link to a PDF document that contains important information about several facets of the school (e.g., school personnel, expectations for caregivers, dress code for students, expectations for students, policies the school has for various instances, etc.)
Forms	This was typically seen as an additional page on the school's website where a series of forms were house. The forms were often printable and not to be completed online. These forms were related to food service support, transportation, permissions for video and photographs, and field trip permissions, etc.

Table 9 (cont'd.)

Code (themes)	Code Description
State-wide literacy policy resources	These resources were anything that mentioned the state-wide literacy policy. Most of the time it featured links to the state's information on the policy or PowerPoint presentations introducing the policy (that was enacted in 2016).

Following the determination of the themes, I returned to each web site to record whether the site included any of the themes. Once I had an account of which web sites had included the themes, I returned to the web site a third time. This time I counted the number of clicks it took to get from the homepage of the site to the usable part of the web site. In the case of the password protected portal, I added one click to the total it took to get to the log in screen (to account for logging in). One sites where the log in for the password protected portal was on the home page, I counted only one click. Little evidence exists on how many clicks it takes before an individual will abandon their quest for information (Thurow, 2014). However, I opted for this measure to quantify the accessibility. Examining the number of resources posted for caregivers, the accessibility of those resources, and particularly those resources that aligned to the state-wide literacy policy would help answer the part of the question: what early literacy resources were readily available for caregivers.

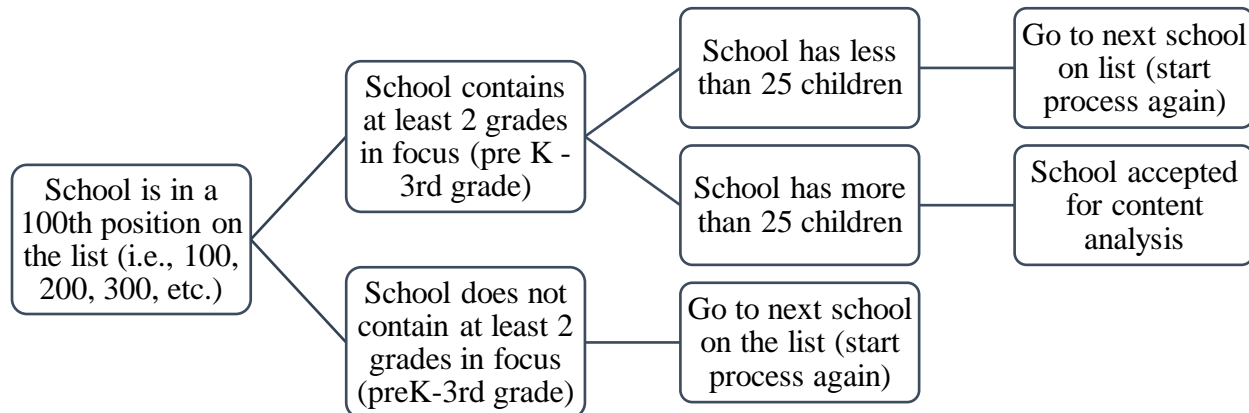
### **Data Sources**

Using a publicly available list of elementary schools in Michigan (Greatschools.org, n.d.), I used random interval sampling (Neuendorf, 2002), to narrow the sample size down to thirty-two elementary schools (see Appendix E for a list of schools included in the sample). Within the list, there were 3,181 total elementary schools. This included schools only containing

grades 4 and 5 (which would not apply to this study). Schools were chosen by selecting every 100<sup>th</sup> school on the list unless the school did not contain the grades that pertained to the study (i.e., solely preschool, only grades 4, 5, or 6). If one of the selected 100<sup>th</sup> schools was outside of the scope of this study, the next school was chosen (see Figure 1 for a visual description). This sample accounts for one percent of the total population of elementary schools in Michigan.

Figure 1

*How Schools Were Chosen for Thematic Content Analysis*



Additionally, I included a small purposive sample which included the featured elementary school from each of the focal districts in parts 1 and 2. This brought my initial total to 38 schools; however, five schools were removed once the investigation began due to their closure in the 2020-21 school year, their school not having a web site, or their scope of education being outside of the typical elementary school (i.e., a science-based supplemental school for enrichment purposes). This yielded a total of 33 schools for the final analysis. Once the full list was obtained, I reviewed each school's website scanning for resources for families using the search feature on the web site if they had one or the control-F feature on the computer. If neither of these options resulted in any resources, I did what caregivers might do and searched through

the different menus in search of something that might apply to a caregiver (e.g., resources for support at home, PTO/PTA meetings, messages from teachers or administrators, etc.). Further, I labeled the school by region (according to where my survey was distributed) and school type (public, private, charter). I downloaded resources when I could and saved web pages when I could not. Saving the resources supported me with the coding of the resources when it came time for that. Additionally, I returned to the web sites often when coding as well.

### **Coding and Analysis**

When designing how to code and analyze the data I used Saldaña (2021) and Neuendorf (2002) to guide my thinking. After collecting the materials from each of the schools, I attempted to complete a form on each of the resources (see Appendix F for form). Through completing the form, I aimed to show how usable the document is to caregivers, how easy it is to access, and whether it reflects the academic demands placed on a child during that specific school year. When unanticipated patterns emerged, I aimed to be flexible by using inductive coding (Saldaña, 2021) as I went through the process.

While there was no guarantee that these elementary schools had support materials available, I wanted to exhaust all possibilities when searching for resources readily available to families. Unfortunately, very little resources ( $n=6$ ) about the state-wide literacy policy were discovered through my use of random interval sampling, so I switched the resource investigation to report on what *was* available to the caregivers through each of the school's web sites. Because so little was found to support families with literacy development at home ( $n=2$ ), I opted to shift focus to the resources caregivers might use throughout the school year (e.g., parent portal, handbooks, forms, etc.).

As I started to analyze these web sites, I uncovered four different resources that caregivers might access throughout the school year: password protected portal, where caregivers can access grades and attendance, various forms caregivers might need, a handbook for either caregivers or families, and anything that mentioned the state literacy policy. These became themes (Braun & Clarke, 2006) across most of the sites with all but two of the sites having at least one of the resources. This centered my content analysis on themes present rather than analyzing the word or phrase level codes within the websites (Braun & Clarke, 2006; Neuendorf, 2002). Following the determination of the presence of each of the codes I identified above, I also counted the number of clicks it took caregivers to access each of the resources on all thirty-three web sites. I chose to count clicks to determine the ease of accessibility because it was a quantifiable way to determine how quickly a caregiver could find the resource. According to Zeldman (2001), a user will lose interest in a web site if they cannot find their desired information within three clicks. This assumption has been ruled as a falsehood by several tech experts (Thurow, 2014).

By the examination of what was available to families alongside the data from the interviews, I will answer my last research question (*What resources do caregivers report are readily accessible around early literacy?*) regarding the level of alignment between what is expected, what is available, and what is utilized by families.



## CHAPTER 4 – FINDINGS

In this chapter, I will share the findings of a multilayered investigation into the caregivers' perceptions of practices utilized by schools to partner with those caregivers. First, I discuss *what caregivers reported about the current partnership with schools around early literacy activities*. Recall, partnerships include outreach from schools which could comprise of resources and materials offered to caregivers to extend the learning beyond the school day. This outreach could include homework (Hillier et al., 2019), read-at-home activities (Read by Grade Three, 2016), workshops for caregivers to attend (Read by Grade Three, 2016), as well as the communication between caregivers and schools (Epstein et al., 2019). I connect the findings of this first question to overarching research question: *To what extent is the reported and desired partnership with schools, which is designed to support early literacy achievement, aligned to current theories and research on caregiver engagement?* Following this, I elaborate on caregivers' desire for future partnership with schools by revealing the findings to the second research question: *How do caregivers want schools to connect with them to support early literacy?* Again, I connect these findings back to the overarching research question stated above. Lastly, I reveal caregivers' perceptions on the posted resources for caregivers, answering research question 3: *What resources do caregivers report are readily accessible around early literacy?* In closing time, I utilize these findings to further examine the answer to the overarching research question.

### **Research Question 1- What Caregivers Report about School Partnerships**

In this section, I report the information shared through caregiver's survey responses and one-on-one interviews regarding the dynamics of the partnerships, including the resources shared. I discuss the roadblocks caregivers identified which they perceive to be inhibiting strong

caregiver/school partnerships. I elaborate on the reported strengths or assets that are present in the current partnerships. From the data, I identify two key levers in the current relationships: the relationship itself and the communication used to build or sustain a solid partnership. Together this information will help answer my first research question: *What do caregivers report about the current partnership with schools around early literacy activities?*

### **Caregivers' Perceived Roadblocks to School Partnership**

According to the participants of this study, the roadblocks that prevent caregivers from partnering with a school are equally varied. One such roadblock that was identified by these caregivers was the caregivers' attributes (i.e., knowledge, advocacy, disengagement, etc.). Additionally, the use or overuse of technology was seen by caregivers as a roadblock to engagement. Misuse of assessment, compliance, and a lack of resources was also linked to roadblocks according to the caregivers. Together these identified roadblocks illustrated a portion of how the interviewed caregivers viewed the current partnership between themselves and the schools. Table 10 illustrates the interviewee responses that were categorized as a roadblock to caregiver and school partnerships.

Table 10

#### *Selected Caregiver's Responses Labeled as Roadblocks*

Caregiver	Response	Sub Code Label
B	<i>So, we did it out of compliance, but there was [sic] no grades associated with it or anything like that.</i>	Compliance

Table 10 (cont'd.)

Caregiver	Response	Sub Code Label
D	<i>And the ones that I see with the most struggle are the disassociated families okay. Which tend to be the more transient, lower income families</i>	Engagement (caregiver disengagement)
F	<i>Because I feel like everyone's situation is a little bit different in terms of why or how or their ability to engage with the school. Maybe they don't want to, maybe they want to, I don't know.</i>	Need for differentiation
B	<i>If you don't go up to the school or don't, if there aren't many activities that you can go to as a parent, you could very well not even see the child's teacher</i>	Lack of connectedness
C	<i>So, I said that to say if they have more resources available, like, yes, I think there should be things that he has access to do at home.</i>	Lack of resources
A	<i>The only thing that I have reservations on is not really understand exactly what they want. So, like, for literacy, I struggle with reading and comprehension quite a bit.</i>	Caregiver knowledge

Table 10 (cont'd.)

Caregiver	Response	Sub Code Label
C	<i>And so, at that moment, I requested a meeting with the teacher. Everybody bring everybody to the meeting, because this is the problem, and this is my child, and this is not going to happen.</i>	Caregiver as advocate
E	<i>It's not just and they're not engaging, they're not communicating. (children using technology instead of interacting)</i>	Technology-negative
C	<i>And I'm like, I get it. He's probably only a grade level behind, but considering everything we've done, you really should be three grade levels ahead.</i>	Testing/accountability

For instance, one identified roadblock to school partnerships is compliance. Caregiver B, a caregiver of two boys from Lakeland, shared that compliance is the reason why they and their child completed the reading logs that were sent home. These logs were sent as homework and an accountability piece for the child to demonstrate completion of the read-at-home tasks. This quote by Caregiver B illustrated a compliance situation, in which caregivers are willing to do what schools ask of them but perhaps for the wrong reasons. Additionally, the compliance code demonstrated that maybe caregivers are not adequately understanding the importance of the activities schools sent home with a child. Not understanding what resources the school is sending home is a roadblock which is inhibiting partnership according to the caregivers. Further, Caregiver B offered an anecdote demonstrating a feeling which lacked connectedness with the

school, which further impedes partnership. Specifically, they called out the possibility that a caregiver might never see their child's teacher throughout the school year. This is detrimental to the caregiver/school relationship, yet it demonstrated the importance of the caregiver's need to be an active member of the partnership. The situation described by Caregiver B illustrated one of the tenets of the Epstein et al. (2019) parental involvement framework: *parenting* (i.e., supporting the child as a student).

Another roadblock to school partnerships is caregiver knowledge. Caregiver A shared that they do not feel comfortable with activities being sent home because they do not understand what the school wants. Not feeling confident with the materials impacts a caregiver's self-efficacy (Bandura, 1977) and impacts their ability to complete activities (Rasinski & Stevenson, 2005); it also constrains further partnership with the caregiver. Caregiver C, whose child has additional visual needs, focused more on the lack of resources at the school, the downside of accountability, and what they felt their role was as an advocate for their child. These three focal points would connect to the current partnership. The quote coded with *parent as advocate* attests to Caregiver C's commitment to their child's education and the demand they place on the school to support their child. Again, this statement would exemplify the *parenting* tenant (Epstein et al., 2019) as Caregiver C is supporting their child as a student.

Caregiver D and Caregiver E, rural caregivers from the small town of Windy Point, both share quotes focused on current partnership. Caregiver D speaks to an observation they made about other caregivers who are not communicating with schools. Yet, Caregiver E explains a frustration with children not engaging in communication or interaction with adults or other children because of technology. Further, Caregiver E felt the schoolwork online was supporting this behavior. While Caregiver E focuses on children, the same type of engagement is happening

with adults (see communication code breakdown below in Table 16). Caregiver D’s quote offers their perception of caregivers who do not support their child as students (Epstein et al., 2019). Caregiver D’s observation described their perception of other caregivers’ partnership with the school community. Caregiver E’s quote aligns more with a lack of two-way communication, a tenet of the parental involvement framework (Epstein et al., 2019), which connected to current partnerships with the school.

Table 10 above illustrates a sample of the responses from caregivers’ interviews that were coded as a roadblock and then further coded with the specific roadblock type (i.e., caregiver knowledge, lack of connectedness, technology-negative, etc.). The roadblock code was the most frequent code used (176 occurrences of 564 total coded responses) and represented nearly a third of the responses (31%). The breakdown of subcodes identifying the specific roadblock demonstrates how caregivers perceive the current partnerships between schools and themselves. Table 11 illustrates the most frequent subcodes and their rate of occurrence within the responses coded as roadblocks.

Table 11

*Breakdown of Subcodes for Caregiver Responses Coded as a Roadblock (N=176)*

Subcode	Frequency (percent)			
	<i>n</i>	%	<i>n</i>	%
Engagement			31	18
<i>Child engagement</i>	4	2		
<i>Caregiver engagement</i>	6	3		
<i>Child disengagement</i>	12	8		
<i>Caregiver disengagement</i>	9	5		

Table 11 (cont'd.)

Subcode	Frequency (percent)			
	<i>n</i>	%	<i>n</i>	%
Caregiver knowledge			29	16
Lack of resources			21	12
Resources provided			12	7
Technology			14	8
<i>Negative</i>	12	7		
<i>Positive</i>	2	1		
Caregiver/child life			10	6
Test scores/accountability			15	9
Teacher shortage			9	5
Lack of connection to school			6	3
Other (8 subcodes)			29	16

Two of the subcodes were further broken down by secondary subcodes. This occurred with *technology* and with *engagement*. To fully describe the response, the subcode technology was sorted by the connotation of the comment made by caregivers: positive or negative. As seen in Table 11, rarely were caregivers commenting positively about the use of technology either at home or at school. Referring back to Caregiver E's comment regarding technology as a roadblock, this roadblock connects to both the current partnership. Additionally, caregivers' responses that were coded as a roadblock, and then as engagement, were also then categorized by who the quote applied to (e.g., the child or caregiver), and whether it was meant to guide engagement or report disengagement. See Table 12 for sample responses of each type of subcode engagement.

Table 12

*Selected Sample Responses from Caregivers Using the Subcode of Engagement*

Caregiver	Response	Category of Subcode-Engagement
A	<i>Yes, she does like what she likes, but if she doesn't like it, she doesn't want to do it.</i>	Child engagement
B	<i>They've done things like the Scholastic book fair. They do a book fair. Okay. But I don't recall specific, like night literacy nights or something like that. Maybe I overlooked it, but I don't recall having one.</i>	Caregiver engagement
D	<i>And our kids continue to suffer, and our kids don't have a love of reading because it's not rich authentic. It is cut and dry read from the basal series. And that's a big problem. And we're going to continue to fail</i>	Child disengagement
C	<i>I don't really want to do it at home. It's not fun for us.</i>	Caregiver disengagement

From the information in Table 12, it is evident that some of the caregivers' responses would be considered roadblocks because they mention things that might have worked (e.g., literacy nights or book fairs) but also what is perceived as blocking further engagement (e.g., caregiver does not recall if the event was even held). In the example shared from Caregiver A, their child explains that they are engaged when they like something but not as engaged when they do not like something. Recall Caregiver A is a single caregiver who shared she has an older daughter that supports the younger one with homework. When their child disengages, Caregiver A relies on the older sibling to assist. Additionally, Caregiver B reported their level of



engagement as it related to literacy specific events held at the school. While they share one event (Scholastic Book Fair), a type of engagement with the school, they remember participating in, the other event (Literacy Night), an additional type of engagement, is more questionable as they try to recall whether the event was even held. A claim like the one made by Caregiver B demonstrates that event-based caregiver activities do not always lead to the caregiver engaging with the school (Edwards, 2016; Edwards et al., 2018).

Additionally, when asked on the survey to rank the roadblocks participants felt hinder caregiver engagement with literacy activities, caregivers chose *time* as the biggest impediment (see question 19, Appendix G for full survey results). The *fear of doing the activity wrong* ranked as the smallest hurdle. I interpreted this to mean that of the caregivers that responded to the survey, most (17/20 participants, 85%) ranked the fear of doing the activity wrong in the lowest or second to lowest spot. Therefore, caregivers who responded to the online survey felt efficacious about the resources being sent home. According to Bandura (1977), a person with strong self-efficacy feels they have the knowledge and the ability to complete the activity. While *time* and *fear of doing the activity wrong* are not considered partnership, they describe the current impediments that these caregivers believe are preventing strong partnerships with the schools. Schools could use this information to offer resources to caregiver that are more targeted toward the curriculum being used in the classroom (Edwards, 2016). Table 13 below illustrates the average responses from the survey in rank order according to the caregivers.

Table 13

*Rank of Roadblocks to Caregiver Engagement as Perceived by Caregivers*

Rank Greatest to least	Roadblock	Average of responses
1	Time	1.8
2	Multiple children at home	2.55

Table 13 (cont'd.)

Rank Greatest to least	Roadblock	Average of responses
3	Tired after working all day	2.6
4	Not understanding what the school wants you to do	3.9
5	Other	4.59
6	Fear of doing activity wrong	4.85

The category labeled *other* also asked caregivers to identify the specific roadblock. Some of the responses recorded in the *other* category were “household chores take too much time,” “child refuses to do work at home,” “having the tools to assist at the grade level required,” and “child’s interest level.” A complete report of the responses for the survey are available in Appendix G. Although a school cannot manufacture time or make housework less intense for the caregiver, perhaps re-evaluating how they ask caregivers to support at home is a viable option.

This section illustrated caregivers’ perceived roadblocks to school partnerships. Listening to the caregivers explain their thoughts on the impediments of a partnership is one example of the two-way communication channels that Epstein and colleagues (2019) expressed in their parental involvement theory. Schools could shape the requests on caregivers and children in a more meaningful and academically targeted way (Edwards, 2016), clear up misconceptions regarding early literacy development resources sent home (Hillier et al., 2019), and provide more guided support (Bandura, 1977) through the intentional use of the policy-suggested literacy workshops (Read by Grade Three, 2016). Finally, schools could utilize the strengths they already possess and build a stronger partnership through each of those channels.

### **Caregivers’ Perceived Strengths of School Partnerships**

Building a partnership between caregivers and school personnel could resemble teambuilding, where there is a “shared scoreboard” (Bryant, nd). Both schools and caregivers

understand the goals and are working toward them. There are some ways schools can leverage their strengths or assets with their current caregiver partnerships. Interestingly, some of the same themes emerged in the asset category as in the roadblock category above. For example, current engagement, both child and caregiver, was an asset and could also be a roadblock (as reviewed in the section above). Caregiver knowledge specifically about their child and the resources provided were also seen as an asset from the responses provided by caregivers. The final category which contained a significant number of occurrences was that of differentiation. Table 14 illustrates the interviewee responses that were categorized as an asset to caregiver and school partnerships.

Table 14

*Selected Caregiver's Responses Labeled as Assets*

Caregiver	Response	Sub Code Label
E	<i>The teacher, she did, like, a take home packet, and you just could do it anytime</i>	Differentiation
B	<i>Like just try to work and partner with parents a little bit more so that they can get support that they need to better support their kids.</i>	Engagement

Table 14 (cont'd.)

Caregiver	Response	Sub Code Label
C	<i>One of the things I will say that the school has pretty much always communicated in one way, or another is that we don't know your child the way you know your child</i>	Caregiver knowledge
F	<i>But at the same time, I think one on one, that 18 months of one-on-one reading with phonetics, basic tutoring, like basic reading, just like all those things in particular.</i>	Resources provided

One perceived strength of school partnerships was caregiver knowledge. Caregiver C, a divorced caregiver with one son, shared a quote that demonstrated the school privileging caregiver's knowledge about their child. This quote supports a caregiver's efficacy when offered positive feedback like honoring a caregiver's knowledge (Bandura, 1977). Caregiver F, from the urban area of Sandhill, shared how the community resources, such as a university tutor, impacted their son's literacy development. Community support, like the university tutor, is important for caregiver involvement (Epstein, et al., 2019). The table above illustrated the sample responses from caregivers that were coded as assets or strengths to the school/caregiver partnership. The asset code was the third most frequently used code, being used 17% of the time (96 occurrences/564 total coded quotes from caregivers). Within the 96 occurrences labeled assets, the statements given by caregivers were further described using a handful of subcodes (e.g., differentiation, engagement, caregiver knowledge, resources, etc.). Table 15 describes the frequency of the subcodes used to classify the statements categorized as assets.

Table 15

*Breakdown of Subcodes for Caregiver Responses Coded as an Asset (N=96)*

Subcode	Frequency			
	<i>n</i>	%	<i>n</i>	%
Caregiver knowledge			15	16
Differentiation			14	15
Engagement			33	35
<i>Child</i>	16	17		
<i>Caregiver</i>	17	18		
Resources			17	17
<i>Lack of</i>	3	3		
<i>Provided</i>	14	14		
Other (9 subcodes)			17	15

The table above illustrates the categorization of the responses coded as an asset to the caregiver/school partnership. Within this breakdown, the subcode of engagement was further divided by the person being described in the statement (i.e., the child or caregiver). Additionally, the *other* subcode ( $n=9$ ) featured descriptors like “accountability,” “class size,” “misconceptions,” “motivation,” and “teacher support.” The highest rate of frequency with any of these descriptors categorized as *other* was 3 occurrences.

The assets of an existing partnership could be utilized to bolster that relationship. The interview data collected from caregivers described the strengths they identified in their own partnerships with the school. These strengths were notably the caregivers’ knowledge and engagement, both caregiver and child, with the school already. Additionally, the differentiation that caregivers identified also proved to be an asset in their relationship with the school. When

caregivers in this study spoke about differentiation, it was always about the work given to the child (e.g., homework), not to the engagement with the caregiver. The need for differentiation for the different subgroups of caregivers remains a need to strengthen partnerships among all caregivers and schools. Lastly, the resources (i.e., outreach) that the school provided were seen as an asset to the caregivers.

### ***Relationships as a Perceived Strength of School Partnerships***

The reported current relationships between caregivers and school serves as a baseline to build a solid future partnership. In speaking with these caregivers, some themes emerged across the conversations regarding the current partnership. First, *community support* appeared frequently, as did *comfortability*, when caregivers were asked how they felt about reaching out to the school for support. *Trust* was an additional theme that emerged across the conversations. Lastly, there were some themes that could be perceived as negative, for example, a *breakdown* in the relationship and *contradiction*. The latter was used when the caregiver would say something and then immediately follow it up with a contradictory statement about the relationship. Together, these coded phrases illustrated how the interviewed caregivers felt about the current partnership with schools. Table 16 illustrates phrases coded as relationship and the sample of subcodes used.

Table 16

*Selected Caregiver's Responses Labeled as Relationship*

Caregiver	Response	Sub Code Label
C	<i>First grade teacher wasted time. Pandemic was the best thing that happened to us academically that he did not have to spend another semester in her classroom. It's terrible. That's terrible. It is. Yeah, it was terrible. But I think of all the other kids, too.</i>	Breakdown
D	<i>Yes. We've known the teacher for many years. She used to go to our church, very comfortable with her. And both the second grader and the kindergarten had the same teacher.</i>	Comfortability
F	<i>And there were tutors from [local university] that we got on virtual with them once and then actually moved up to twice a week for pretty much, I want to say, it was close to a year and a half, maybe even two years.</i>	Community support
C	<i>So, school has been very good in that partnership. Once we got to the bottom of the issue, I wish they would have done more. I shouldn't have had to do this, in my opinion, for them to discover it</i>	Contradiction

Table 16 (cont'd.)

Caregiver	Response	Sub Code Label
B	<i>But as far as, like, truly partners in regards to here's where they are, here's how we take them to the next level. No, I haven't experienced that.</i>	Partnership
A	<i>Like, you [the teacher] are literally their parent throughout the day.</i>	Trust

Caregivers when asked about the state of their relationship with the school often centered their responses on a single teacher (often the teacher from the current, 2021-22 school year). Caregiver C, a suburban caregiver whose child attends a charter school, focused on a prior teacher. Caregiver C reported that pandemic was “the best thing that happened to us academically.” A comment like this shows the level of frustration a caregiver expresses when the relationship between school (in this case a teacher) and caregiver is fractured. Caregiver C went on to explain the frustration was occurring because the teacher could not explain the reason for the lack of academic achievement in Caregiver C’s son, when Caregiver C felt they were doing everything to ensure their son was successful. After multiple attempts at partnering, through communication, on the caregiver’s end, they gave up. Yet, later in the same conversation when prompted about the relationship with the school currently, Caregiver C explains that the “school has been very good in that partnership.” Caregiver C brings up two very important points. First, the relationship with the school if based on the teachers will naturally fluctuate each year with the shift to a new teacher. Secondly, Caregiver C, a suburban caregiver who identifies as Black, was very upset with the first-grade year experience at the school, even two years later. They felt their concerns were not being taken seriously about their child’s lack of academic progress. This



perceived failure to listen to Caregiver C's concerns caused a significant fracture in the relationship between them and the school that year. Further, according to Caregiver C the relationship had strengthened during the 2021-22 school year. Caregiver B, from the same suburban community and who also sends their child to a charter school, offered that their relationship with the school is not a partnership that is working toward supporting their child in literacy development. Dissecting the shared quotes from Table 16 above, Caregiver B is discussing a partnership and uses the collective pronoun of "we" (Smith, 2020) to share that both the school and the caregiver play a role in supporting the child in their literacy development.

In opposition, Caregiver D, a rural caregiver with four young children, spoke highly of the teacher their two oldest children had for kindergarten. While they did not share academic examples, Caregiver D mentioned their comfort due to the connections to the teacher through the community. The teachers in the public school that Caregiver D sends their children to has teaching faculty that are from the same small rural community. Complimentary to this is the trust Caregiver A showed when they shared that the teacher is "literally their [the child's] parent throughout the day." Their quote shows the weight that caregivers place on the teacher's impact and role throughout the school day. Positive or negative, the caregivers offered their honest examination of their previous and current school (often teacher) and caregiver relationships.

While the conversations were overall positive toward schools and teachers, when specifically examining the current relationship, the isolation of specific phrases produced an overall perceived negative theme of *breakdown*. There were other themes like *trust*, *community support*, and *comfortability* that showcased the overall positive nature of the conversations. Table 17 offers an overview of the frequency of descriptors (subcodes) for the phrases that were coded as relationship.

Table 17

*Breakdown of Subcodes for Caregiver Responses Coded as Relationship (n=108)*

Subcode	Frequency	
	<i>n</i>	%
Breakdown	24	22
Comfortability	20	19
Community support	9	8
Contradiction	11	10
Need for community	5	5
Ownership	4	4
Partnership	8	7
School support	4	4
Trust	7	6
Other (9 subcodes)	16	15

The table above offers the frequency with which the descriptors (subcodes) were used to describe the statements made by caregivers that were coded as relationship. *Breakdown* was most frequently used. This subcode described when caregivers spoke about a distinct fracture in the relationship. *Comfortability* was second in frequency and described when a caregiver explained the comfort level with their child's teacher during the 2021-22 school year. Some caregivers also spoke about prior caregiver/teacher relationships to offer a better explanation of this year's relationships. The *other* descriptor was comprised nine subcodes and a total of sixteen statements. Some of the descriptors in the other category were "vulnerability," "respect," "nostalgia," and "accountability." Examining the existing relationship will help to build a

stronger partnership in the future and assist with answer the research question about what caregivers reported about the current partnership with schools around early literacy activities.

During the interviews, only seven phrases out of the total relationship category (6%) mentioned trust, most caregivers ( $n=18$ , 90%) reported on the survey that they agree (50%) or strongly agree (40%) that they trust their child's school personnel to adequately support their child's literacy development. The remaining 10% ( $n=2$ ) were neutral on the subject, concluding that none of the survey respondents lacked trust in the school. Table 18 illustrates the survey question on trust and the breakdown of how participants responded.

Table 18

*Breakdown of Survey Participant Responses around Trust (N=20)*

Indicator	Response rate	
	$n$	%
Strongly Agree	8	40
Agree	10	50
Neutral	2	10
Disagree	0	0
Strongly Disagree	0	0

Some caregivers during the interview process alluded to the mistrust or contradicted (10% of the phrases coded as relationship,  $n=11$  phrases) the school's decisions, they claimed on the survey to still trust the school personnel overall (as seen in Table 18 above). Other caregivers shared comments during the interview that aligned to the survey results. This demonstrated that each caregiver and their interpretation of the caregiver/school partnership is different, and it

benefits the schools to open the channel of communication (Epstein et al., 2019) and talk with and listen to caregivers about their lives and expectations of the school (Edwards et al., 1999). One asset to any relationship is communication, and caregivers in the interviews discussed the different ways schools communicated and how that impacted their partnership.

### **Communication as a Lever for Strong Partnerships**

Communication plays a vital role in any relationship including a caregiver/school partnership (Epstein et al., 2019). The caregiver interview responses yielded several occurrences which were coded as communication (52 out of 564 total coded phrases). Within these phrases coded as communication, there were six subcodes that emerged. Some subcodes dealt with the act of communication (i.e., breakdown vs. effective, need for), and others pertained to the tool used for communication (i.e., p/t conferences, parent portal, technology). The remainder of the occurrences were counted in the category labeled *other* and included subcodes like “differentiation,” “frequency,” “teacher support,” “test scores,” and “transparency.” Table 19 showcases some selected caregiver responses that were coded as communication.

Table 19

#### *Selected Caregiver’s Responses Labeled as Communication*

Caregiver	Response	Sub Code Label
F	<i>They don't want to say one thing and do another. I never really knew what the situation was, and even then, I never got feedback on what is M-STEP scores were.</i>	Breakdown

Table 19 (cont'd.)

Caregiver	Response	Sub Code Label
C	<i>There needs to be a listening ear from a policy perspective, that there are certain things that are addressing a lot of kids that people just there's no awareness about it, and it makes no sense.</i>	Effective
D	<i>I definitely think the more that they can explain to the parents, the why behind it, I think that we need to start earlier.</i>	Need for
C	<i>For the parent portal, I'm in there regularly during the school year checking his assignments</i>	Parent Portal
F	<i>It's [Teams meetings] just not accessible for a lot of people. So again, I think if they want to communicate one way to parents, they're doing that pretty well.</i>	Technology

Caregivers spoke at length during the interviews about the importance of, the need for, and how to establish effective communication between schools and caregivers. Caregiver C, a divorced caregiver for a young boy, discussed the need for “a listening ear” signaling the importance of two-way communication (Epstein et al., 2019). Additionally, Caregiver C mentioned the use of the password protected portal that they check regularly. This quote represents one of the novel tasks that befall a parent when supporting their child as a student (Epstein et al., 2019). Conversely, Caregiver F focused on the breakdown of communication and

the downside of using technology to engage with caregivers. In the first quote, Caregiver F, a married urban caregiver with two young boys, shared they did not completely understand the child’s literacy progress as “they never quite knew what the situation was.” Interestingly, Caregiver F reported on the survey that they “agree” that their child’s literacy development was adequately explained to them. Caregiver F spoke very highly of their child’s teacher and the pressures of teaching, but they also felt like they could not reach out to inquire about their child’s assessment score because it was during the summer months. This highlighted an important gap in the support for caregivers and not one necessarily that should be covered by a classroom teacher.

This sample of quotes from the table above explains how responses from caregivers were coded as communication and then further categorized. The most frequent descriptor (subcode) was breakdown. Caregivers in this study appeared to recall more instances when there was no communication or when communication failed (*breakdown*,  $n=15$  versus *effective*,  $n=9$ ). Additionally, several caregivers offered specific examples of the way the communication effectively flowed between the caregiver and the school. Table 20 illustrates the breakdown of the subcodes used for those occurrences coded as communication.

Table 20

*Breakdown of Subcodes for Caregiver Responses Coded as Communication (N=52)*

Subcode	Frequency	
	<i>n</i>	%
Breakdown	15	29
Conferences	3	6
Effective	9	17
Need for	4	7
Parent Portal	6	12
Technology	6	12
Other (5 subcodes)	9	17

The data above illustrated the caregivers in this study spoke less about communication than other ideas when it came to the caregiver/school partnerships. Within the frequency of phrases being coded as communication, there was more emphasis placed on the recall of communication *breakdowns* ( $n=15$ , 29%) than *effective* instances ( $n=9$ , 17%) of communication. Still yet, few caregivers talked about the *need* for solid communication ( $n=4$ , 7%).

Caregivers were asked to report on two ways the school communicated with them over the previous school year (2021-22). In each question, the caregiver was asked to recall the frequency with which the communication occurred. The purpose of this question was to determine how often the school was sharing a child's progress with their caregiver (a required component of the policy) and what resources (i.e., outreach) were being shared with the caregiver. The information in Table 21 illustrates the frequency with which caregivers reported communication from the school during the 2021-22 school year on their child's literacy development.

Table 21

*Frequency of School Communication on Literacy Development as Reported by Caregivers*

Frequency	Verbally, via a conference		Received a paper with charts/graphs that were explained by school		Received a paper with charts/graphs only (either face-to-face or email)		Have not received anything	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
0-1	5	25	11	55	8	40	17	85
2-3	13	65	6	30	10	50	2	10
4-5	0	0	2	10	1	5	0	0
More than 5	2	10	1	5	1	5	1	5

First, most caregivers reported that they received some type of communication during the 2021-22 year at least twice. Half of the respondents received a paper with charts/graphs (50%) at least 2-3 times during the school year, but a smaller percent received an explanation with the paper (30%). More than half (65%) of the caregivers had their child's literacy development verbally explained via a conference 2-3 times during the school year. Furthermore, 1 out of 10 respondents (10%) received information on their child's literacy development five or more times via a conference with the school personnel. Taken together, this illustrates that according to the caregivers surveyed, schools are communicating with caregivers throughout the school year about their child's literacy progress. Communication is both an integral part of the partnership (Epstein et al., 2019) as well as considered outreach (Hillier et al., 2019).

This frequency of communication was also supported by most caregivers (85%) feeling confident (strongly agree or agree) that their child's literacy progress had been clearly explained. Table 22 illustrates this data.

Table 22

*Progress Explained in an Understandable Way*

Progress Explained Understandably	Frequency	
	<i>n</i>	%
Strongly Agree	4	20
Agree	13	65
Neutral	1	5
Disagree	2	10
Strongly Disagree	0	0

More than eight out of ten respondents agreed or strongly agreed that they had their child's literacy progress clearly explained to them. In addition to this data, Table 19 demonstrates that caregivers perceive the information they received to be adequate for



understanding the literacy progress of their child regardless of the method of that communication.

### ***One-way Communication Still Used Frequently Among Schools***

From the previous section and Table 21 above, schools are communicating a child's progress and perhaps waiting until report card periods (i.e., every 9 to 12 weeks or 2-3 times a year). With the advent of technology in schools, teachers and other school personnel have access to resources that can send messages to caregivers throughout the day or even notify the caregivers the minute an assignment is entered into the gradebook (Mac Iver et al., 2021). Teachers no longer have to wait until the end of the day or week to reach out to a caregiver regarding missing assignments or behavioral missteps in the classroom. Even the traditional classroom weekly newsletter appears to be a dying artifact according to caregivers. The table below (Table 23) offers sample caregivers' responses to the current and past state of communication between caregivers and the school.

Table 23

#### ***Sample Caregiver Responses to Current/Past Communication with Schools***

Caregiver	Quote
C	<i>For the most part, they send their generic emails to everybody, but other than parent teacher conference, I don't feel the school initiating relationship building with parents unless we go into the schools, or we call or email.</i>

Table 23 (cont'd.)

Caregiver	Quote
B	<i>But because you could very well go through a whole school year without verbally speaking to a child, especially if you rely on email, text, dojo [ClassDojo] whatever the case, or if you just have a pretty well-behaved kid, you can go without ever really speaking to the child teacher. You could also go without seeing the child's teacher before we stepped into the whole virtual world of school.</i>
A	<i>You could always email the teacher with any questions that we had kind of very broken down okay. There's definitely been a lack of communication and what they're doing, definitely during COVID.</i>

### Summary of the Dynamics of Current Caregiver/School Partnerships

Understanding communication and its effectiveness is necessary for continuing to support a solid caregiver/school partnership. Building a strong partnership becomes increasingly difficult if little is understood about the current relationship. In the section above, I used surveys and one-on-one interviews to examine caregivers' perceived roadblocks and strengths of school partnerships, as well as perceived communication between school and home.

The section above illustrated caregivers are reporting a variety of perceptions of the current partnerships with the schools. The caregivers reported roadblocks and assets to the current partnerships. One of the biggest roadblocks identified by caregivers was caregiver knowledge (either of the subject or what the school wanted from them). Both engagement (or a lack of) and resources (or a lack of) were seen as roadblocks and assets. Clearly, from the caregiver's perspective these were both impactful; not having them could prove to be a roadblock but having them was seen as an asset. Caregivers also perceived the current relationship as one that was working effectively and one where caregivers reported a trust in the

school. Lastly, caregivers perceived communication as an important factor in the partnership. One of the most important elements in any relationship is communication, and caregiver/school partnerships are no different. Communication also served as a form of outreach from the schools (Epstein et al., 2019). Caregivers spoke frequently about communication, both in terms of its effectiveness and its breakdown.

### **School Partnerships: Connection to Research and Theory**

In the previous section, caregivers shared their perceptions of current partnerships with schools through an online survey and one-on-one interviews. Using these two sources of data, I analyzed caregivers' perceptions about the current state of the caregiver/school partnerships. In doing this, I discovered caregivers identified both roadblocks that inhibited partnerships, as well as assets that promoted it. Additionally, caregivers offered their perceptions about their current relationships with the schools their children attend. Lastly, the caregivers shared their thoughts on communication and its impact on the partnership.

In this section, I connect the findings of the first research question: *What do caregivers report about the current partnership with schools around early literacy activities?* to the overarching question. Recall the overarching question for this study is: *To what extent is the reported and desired partnership of schools, which is designed to support early literacy achievement, aligned to current theories and research on caregiver engagement?* To answer this, I explore how the current partnership with schools, as reported by caregivers, aligned with the current research on caregiver engagement. First, I examine the reported current partnership (including roadblocks and assets) and discuss how it aligns with research on caregiver engagement. Second, I investigate the current state of communication as reported by caregivers and how this communication aligns with current research on caregiver engagement.

## **Current Reported Caregiver Engagement Occasionally Aligns with Research**

Caregivers report there are both assets and roadblocks in their current relationships with schools. Caregivers offered that time and communication were roadblocks. Epstein et al. (2019), Smith (2020), and Volk (2021) all described the importance of caregiver/school communication streams. Communication should be bi-directional (Epstein et al., 2019). Further, schools could ensure they are communicating effectively by gaining a clear understanding of the caregivers they are engaging with (Edwards, 2016; Smith, 2020; Volk, 2021). The engagement reported by caregivers in this study was not always considering the needs of the caregivers. Schools used mass communication through email blasts, mass text messages, and robocalls, as reported by caregivers in the interviews. This type of communication, while informative, may not have been effective in mobilizing the caregiver to support their child with literacy development at home. Caregivers spoke about their knowledge and resources provided by the school as additional assets. A caregiver's knowledge of their child being honored by the school (see comments above by Caregiver C) supports a caregiver's efficacy. With this positive reinforcement, caregivers would be more likely to engage with activities from school (Bandura, 1977).

Caregiver interaction with schools has been universal and uniform, with the expectation that all caregivers are able and willing to participate in the same way (Edwards, 2004; Epstein et al., 2019; Herrera et al., 2020; Smith 2020). This type of relationship falls short of what might be called a partnership. From the interviews and surveys, caregivers explained how they were asked to engage with the schools, how the schools engaged with them, and what the caregivers thought about the ability of every caregiver to engage with the school. The data confirmed that historically underrepresented caregivers are not always being considered. Conversely, there are some caregivers who report that they see efforts being made by the schools to engage specific

populations of caregivers and families (see Appendix G). Additionally, some schools are holding workshops, yet not all caregivers are attending. Table 24 shows the response from caregivers as to whether they have participated in these workshops.

Table 24

*Frequency of Caregivers Reported Attendance at Workshops*

Workshop type	Frequency	
	<i>n</i>	%
Yes, virtual	4	20
Yes, in person	4	20
No	2	10
None offered	10	50

The data from Table 24 illustrates that half of the caregivers reported no workshops were offered. As a reminder, the literacy policy requires that schools support caregivers, one of these supports could be a workshop (Read by Grade Three, 2016). The data from the table above (Table 24) illustrated half of the caregivers recalled there being workshops offered. Of those caregivers, 80% attended one of the workshops, either virtually or in-person. Edwards (2016) suggests single workshops, like those mentioned in the policy, are not effective at supporting future caregiver engagement. Often those workshops do not offer sustained support that are needed to build caregiver efficacy, like the support offered to those caregivers in Rasinski and Stevenson's (2005) study.

## **Being More Connected Did Not Equal Feeling More Connected**

The quotes from the caregivers in Table 23 pinpoint some trends in communication in schools now. With technology like ClassDojo or Remind, schools are able to send communication to the caregivers instantly. It appears from these services that caregivers can also respond to the school to develop an open line of two-way communication. Epstein et al. (2019) and Edwards (2016) both speak about the importance of communicating with the caregivers effectively. Ensuring an open channel of two-way communication, without privileging one party over the other, would allow the caregiver/school partnership to be strengthened. Epstein et al. (2019) and Smith (2020) illustrated strong communication channels between school and caregivers impact on student's academic development. One way to determine whether schools are effectively communicating is to ask a caregiver as well as the school and allow the caregiver to be part of the decision-making process when it comes to methods of communication (Epstein et al., 2019).

Caregivers also reported using the parent portal frequently to check on the status of their child's grades or attendance records (see Table 26). Caregivers reportedly felt confident that the school has explained their child's literacy progress in the 2021-22 school year (see Table 22). It is difficult to discern whether caregivers feel these touchpoints are sufficient communication because they align to traditional communication expectations (i.e., beginning of school year, conferences, end of school year communication, 3-4 times per year). The responses from the caregiver interviews, however, contradict the idea that caregivers believe the communication to be sufficient. Additionally, current research on caregiver engagement does not support this minimal, one-sided communication stream.

Epstein and colleagues (2019) felt two-way communication was so important they made it a pillar in their caregiver/school/community partnership framework. As half of the partnership, it is important for caregiver's voices to be heard (Cleland & Lumsdon, 2021; Lumby, 2007). The data collected here did not support that caregiver's were *partnering* with schools, rather they were involved (Goodall & Montgomery, 2014) at best. This included the communication from the school as well as the access to password protected portals. Some researchers would argue that email, phone calls, and the portals are effective ways for teachers to share information and motivate caregivers to engage (Laho, 2019; York et al., 2019), yet in the caregiver interview data shared previously, this communication is not serving to motivate these caregivers. This could be because the communication needs to be ongoing (Kosanovich, Lee, & Foreman, 2020) or because it needs to be two-way (Cleland & Lumsdon, 2021; Epstein et al., 2019).

### **Summary of Reported Partnership Alignment with Current Research**

Caregivers reported perceptions on current partnerships mentioned roadblocks, communication, and a lack of differentiation. The overarching research question, *To what extent is the reported and desired partnership with schools, which is designed to support early literacy achievement, aligned to current theories and research on caregiver engagement?* analyzes the caregiver perceptions according to current scholarship. The answer to this question is the perceived partnership is intermittently aligned to research. Notably, the perceived relationships between caregivers and schools aligned to some of the tenets of the Parental Involvement Theory (e.g., parenting, volunteering) (Epstein et al., 2019) but lacked alignment with other parts of the theory (two-way communication and shared decision making, Epstein et al., 2019). The current reported partnership lacked intentionality (Edwards, 2016) and did not always support a caregiver's efficacy (Bandura, 1977). Schools were making efforts to communicate with

caregivers but in uniform ways. This communication style lacked alignment to the two-way communication desired for partnership (Epstein et al., 2019; Herrera et al., 2020; Smith, 2020). Communication became a theme both in what was reported currently but also with caregiver's desire for future partnership. In the next section, caregiver's desires for future partnership are described.

### **Research Question 2 - Caregivers Want Strong Partnerships with Schools**

In addition to questions about current caregiver/school partnerships, I asked what they desired in future partnerships with their child's school. Through these one-on-one interviews and the online survey data, three topics emerged. Once again communication became a strong theme, more specifically the mode and frequency of the communication. Secondly, nostalgia on the part of the caregiver was a reoccurring point. This developed when the caregiver spoke about something in the past in a fond manner. Finally, the importance of the relationship between the caregiver and school was discussed. I investigated these three points to answer the second research question: *How do caregivers want schools to connect with them to support their child's development in literacy?*

### **Caregivers Request Strong, Open, and Honest Communication**

In the last section, communication was covered broadly as it occurred in the prior school year (2021-22). In this section, communication will be examined as it is requested by caregivers for future partnership. Specifically, caregivers desire strong, open, and honest communication. Technology and the use of different technologies were viewed as both an asset and a roadblock by caregivers when it came to early literacy activities, as well as communication. Lastly, caregivers called for transparency and honesty when it came to sharing their child's progress in the classroom.



Initially, the importance of strong communication stood out most. The statements made by caregivers were direct and provided insight into what caregivers viewed as important to the partnership between them and the school. Table 25 below shows a sample of caregiver responses that illustrated their desire for more open and frequent communication.

Table 25

*Sample Caregiver Response Regarding Desired Communication*

Caregiver	Quote
B	<i>I think that there needs to be constant communication. And so, with constant communication, then you have schools, teachers, leaders, whomever communicating with parents in regards to where the students are and then how to support them where they are taking them to the next level or hey, we have some concerns. Here's what we're going to do. Here's what we need you to do.</i>
F	<i>I think the communication is a big issue that could really seem like an easy one to fix</i>
D	<i>I definitely think the more that they can explain to the parents, the why behind it. I think that they need to start earlier.</i>
F	<i>It is how we can make it easier, better for the teachers and our schools to let parents know what their options are, what the choices are.</i>
A	<i>And when I get, like, messages. I will be more apt to do something.</i>

One example of strong communication was Caregiver F's shared sentiments regarding communication. Recall Caregiver F is an urban caregiver to two young boys and resides in Sandhill. They felt communication is important but is a problem that could easily be fixed. Additionally, Caregiver F spoke to a collective "we" showing that they desire to be an active partner in their child's literacy development, while also supporting the school. Caregiver F's

perception of the communication around a child's early literacy development has not been adequate and possibly burdensome for the teachers. Caregiver F spoke about concern for the teachers being accountable for all the required communication between schools and caregivers.

Table 25 illustrates some of the claims of the interviewed caregivers. Embedded in their responses are the need for communication, the call for frequent or "constant" communication, and purposeful communication between the school and caregivers around a child's literacy development. One caregiver (F) even stated that communication was "a big issue" but one that was "an easy one to fix". Additionally, Strunk and colleagues (2021) have discovered that teachers feel they do not know how to adequately communicate with families, especially regarding early literacy development. Despite teachers reporting they did not know how to communicate adequately (Strunk et al., 2019), caregivers felt the use of some technologies was the teacher's attempt at adequate communication. Several caregivers relied on the technology as their means of communication with the school (see quotes from Caregiver B and Caregiver A, in Table 26 below). The perceptions of the caregivers are that communication is important, but how to communicate effectively is elusive. The caregivers were split on whether the use of technology (e.g., robocalls, email blasts, messages through the password protected portal) was an effective and adequate means of communication. These types of mass communication channels were often one-directional and therefore would not be supported by the parental involvement theory (Epstein et al., 2019).

One method of communication that caregivers mentioned frequently was the "parent portal." This portal often houses grades on individual assignments, attendance records, messages to caregivers, and sometimes resources. Typically, caregivers can contact the classroom teacher

through email in these portals. Table 26 illustrates some examples of what caregivers offered about their current or desired use of electronic communication.

Table 26

*Sample Caregiver Response Regarding Use of Electronic Communication*

Caregiver	Quote
C	<i>For the parent portal, I'm in there regularly during the school year checking his assignments</i>
D	<i>We use parent portal, mainly parent portal. And not a lot of the teachers post as much to that. That's more of your attendance, that kind of thing.</i>
E	<i>There's Power School. The upper grades used that for grades. And then the parents can see it on there. So, the lower grades don't use that because we don't have grades.</i>
F	<i>There's a really active Facebook group that the school uses</i>
E	<i>Our school, the whole school uses Remind.</i>
D	<i>And I feel comfortable enough with any of these teachers that I could shoot them a message to Facebook or through they use Remind and that kind of stuff, but in this community, they're easy to access and they don't get upset.</i>
F	<i>I think text messages honestly have been very helpful to robocalls and text messages from the school because I feel like everybody's got a phone. Not everybody, but many people have a phone even if they don't have Internet home, they probably have a cell phone.</i>
B	<i>For the most part, they [teachers] send their generic emails to everybody, but other than parent teacher conference, I don't feel the school initiating relationship building with parents unless we go into the school, or we call or email.</i>

Each caregiver in the interview portion of the study spoke about the technologies used to communicate with caregivers. In addition to the parent portal, caregivers also elaborated on other technologies used for one way communication. These technologies included items like robocalls,

email blasts, or a specific service that sent scheduled messages for the teacher. Some of the services also allow for a response to be sent by the caregiver. Caregivers seemed to appreciate the multiple ways teachers connected with them (see Caregiver’s C, D, and F responses in Table 26 above).

Caregiver A seemed to feel email and paper newsletters were too easily lost in the shuffle and seemed to appreciate more messages through text (Interview notes with Caregiver A). Caregiver B took a more disapproving view of e-mail, expressing they felt a lack of relationship building with the school when they received “generic” emails. The responses above illustrate the varied feelings of different caregivers and provides further evidence of the importance of the school knowing the caregivers and children they are serving and intentionally engaging with the caregivers (Edwards, 2016). While technology has provided alternate methods of communication, it also has created an impersonal feel to the communication being sent (see quote from Caregiver B in Table 26). Some caregivers, like Caregiver E, would like a return to the less technologically driven, more engaging, personal communication.

### **Caregivers Offer Desire a Return to the Past**

In this section, I share the responses caregivers offered when asked what they felt the ideal situation would be moving forward regarding caregiver/school partnerships. This will help answer the second research question: *How do caregivers want schools to connect with them to support early literacy?* Some sample responses for each of the subcodes are shared in Table 27. This table highlights the caregiver’s desires for future partnership with the schools.

Table 27

*Sample Caregiver Response Regarding Future Partnerships with Schools*

Caregiver	Quote	Subcode
E	<i>But usually if the kid has something for the parent or wants to show them something, the project they've worked on, I think that's usually [the] best turnout.</i>	Engagement
F	<i>I feel like it's always like policy makers or government officials or administrators who are teachers. I get it, but I feel like there's just like this huge disconnect between what it actually means for an actual physical child and a physical teacher and a family.</i>	Experience
B	<i>We've gotten away from all of that stuff where some of those basic things are older things that we used to do, we kind of need to get back to. I just don't have a connection to my first-grade kid's teacher versus my third grader.</i>	Nostalgia
C	<i>They needed to be able to still incorporate plans for learning even though they were going in kindergarten, and she catered to that. And I don't know if it was her or if it was the school, but I loved it.</i>	Pedagogical Success
E	<i>So, it's like just giving them those experiences, too, so that they can make those connections and engaging with the real world.</i>	Real world
D	<i>But more so than anything else is I think education as a total doesn't need more reforms thrown at it</i>	Reform

Table 27 (cont'd.)

Caregiver	Quote	Subcode
B	<i>We could do things virtual. No, some things need to be simply face-to-face. And I think when you have the fun activities at the school or the parent night or we have a new unit. We have a new unit. It's going to focus on this, hey, go ahead and come in. We have those types of things that make me, as a parent, want to see what things about or let me see what my child is learning at you.</i>	Suggestion

The sample responses above illustrate the caregivers' thoughts for future partnerships with schools. During the interviews, one-fourth of caregivers responded with some type of nostalgic response (17 occurrences out of 72 total phrases, 24% of the responses). Caregiver E shared when caregivers felt engaged at a school-based event it was typically because their child was sharing an artifact created at the school. Additionally, Caregiver E spoke to the importance of making authentic connections with caregivers and their child. One specific example not shared in the quotes was having a caregiver, who worked putting boats together at a local factory, come in and speak about the importance of reading in their job (Caregiver D interview notes). This type of activity would support the invited caregiver's efficacy (Bandura, 1977) with school related activities and demonstrate the importance of literacy using a real-world application (Duke et al., 2011; Parsons & Ward, 2011). Table 28 below summarized the descriptors used to categorize the caregivers' response on their desired partnership.

Table 28

*Breakdown of Caregiver Responses on Desired Future Partnership (n=72)*

Subcode	Frequency	
	<i>n</i>	%
Engagement	7	10
Experience	7	10
Nostalgia	17	24
Pedagogical Success	5	7
Real world	8	11
Reform	8	11
Suggestion	11	15
Other (6 subcategories)	9	12

Table 28 suggests that when caregivers referred to future partnerships, they drew upon experiences in their past. Additionally, the caregivers offered specific examples drawing from real world experiences for children and caregivers. Both the *reform* subcategory and the *experience* subcategory were used when caregivers called for major changes or for policymakers to experience the school setting respectively. Lastly, caregivers offered *suggestions* for ways schools could support caregivers with engagement in future partnerships.

Within the subcode of *nostalgia*, most caregivers spoke about previous experiences in their own schooling or their own interpretation of what schooling used to be. Of the coded phrases, 34% (found by combining *nostalgia* and *engagement*) were connected with caregivers recalling their own positive memories about engagement. Caregiver D offered “Yeah, being more open. The school used to be the center of the community.” Caregiver B’s response “We’ve gotten away from all of that stuff where some of those basic things are, older things, that we used to do. We kind of need to get back to that. I just don’t have a connection to my first-grade kid’s teacher versus my third grader.” While Caregiver B alludes to a back-to-basics approach, they also mentioned that teachers should “stop being afraid of us [caregivers].” Additionally, none of

the caregivers mentioned the exclusion of historically underrepresented caregivers when we use a nostalgic approach to engagement.

A small fraction of caregivers ( $n=2$ ) spoke about their desire for the school to fully participate as a member of their “village.” The reference is attributed to a West African proverb, *it takes a village to raise a child* (Karabo, 2017). Caregiver C, who identifies as Black and is the caregiver to one young son, stated, “This is half of the village that they talk about, right?” This was in response to why they felt a partnership between caregiver and school was important. Caregiver B, who identifies as Black and is the caregiver to two young sons, offered, “We are this village, so we should be working together for this kid, all 30 whatever in the classroom. But I think because that's missing, that's what is hindering like this partnership.” Both caregivers had a desire to rely on the school, as part of their “village,” to support their children in their development. This did not always constitute solely academic development. Caregiver C was explaining a situation regarding the request for testing and support for her child with a medical condition. They had requested support from the school with little success, which led to frustration by Caregiver C. This situation illustrated a breakdown in the two-way communication that Epstein and colleagues (2019) argue for in their parental involvement framework. Caregiver C further explained, “So a lot of it's on me. So, I have been having to rely on my village.” In this latest quote, Caregiver C's village presently does not include the school. From this interview, I concluded Caregiver C (and Caregiver B) desired the school's partnership, but that was not what they were presently experiencing.

### **Caregivers Have Suggestions to Support Future Partnerships**

When asked if caregivers had suggestions for how to partner with schools in the future, each caregiver had ideas to offer. Some suggestions would likely work only in their child's



school setting, some ideas were more applicable to a broader audience, and some suggestions might prove difficult to implement. Of the responses categorized using the subcode of *suggestion*, slightly more than half ( $n=6$ ) gave a specific example of something to do, while others gave a more generic response ( $n=5$ ). Some examples of suggestions offered by caregivers can be found in Table 29.

Table 29

*Sample Specific Suggestions Offered by Caregivers to Promote Future Partnership*

Caregiver	Quote
B	<i>But you should be able to, like, instead of maybe arguing about the book that is being chosen, perhaps we should be arguing or advocating for students to have choice in what they read.</i>
A	<i>Like, reading month. They have that literacy month where I think it's like the month of March where they have all these fun, different things, and I get really involved in that.</i>
A	<i>Like, maybe all the parents go to school, and we play kickball, and then at the end of kickball, the winning team gets popsicles and whatnot. And then you sit down, and you have 20 minutes literacy of like, hey, this is what we're going to be doing.</i>
A	<i>No, but you could do like spaghetti dinner, right? And we have babysitters at XX Elementary. We're going to dinner at the high school. Drop your kids off at 05:00. We have the volleyball team and the football team volunteering. You guys all had over here. Dinner on us.</i>
A	<i>if there's some way to bring everybody together somehow shape or form, even if it's, like, before a football game or a basketball game, like, just quick insights</i>

Table 29 (cont'd.)

Caregiver	Quote
B	<i>No, some things need to be simply face-to-face. And I think when you have the fun activities at the school or the parent night or we have a new unit. We have a new unit. It's going to focus on this, hey, go ahead and come in. We have those types of things that make me, as a parent, want to see what things about or let me see what my child is learning at you.</i>

Caregiver A, a single caregiver of two daughters, offered several suggestions. While some of the suggestions could be perceived as challenging (caregiver kickball game) or difficult to accomplish (football team offering babysitting), they are worth listening to. Caregiver A spoke about the fun activities sent home during March (reading month) and wondered why those activities could not be all year long. This is a feasible and engaging suggestion. If the school was able to connect it to the curriculum (Edwards, 2016), this suggestion might be impactful on student achievement. Further, Caregiver A mentioned leveraging caregivers love of supporting sports in the schools, so perhaps the schools could find a way to engage other caregivers at that time. This could be another great way to utilize the school community that Epstein and colleagues (2019) speak about in the community involvement tenet of their parental involvement theory. These shared ideas offer insight into what some caregivers are willing to do to engage with the school and what some caregivers want in partnership opportunities.

### **Summary of Caregivers Ideas for Desired Future Partnerships**

Through the online survey and one-on-one interview portions of this study, caregivers shared thoughts that highlighted their individual wishes for future partnerships with their child's school. I used this data to answer the second research question: *How do caregivers want schools to connect with them to support early literacy?*

The caregivers' responses were overall drawn from their own perceived experiences in school. Caregivers offered suggestions for specific activities to try to engage additional caregivers with their school. Most of the suggestions placed the onus on the school to create the invitation to partner with the caregiver. However, the data illustrated several instances of the caregivers taking it upon themselves to reach out to the schools. From the examination and analysis of the caregivers' responses, caregivers desire the schools connect with them especially if that engagement will support their child's literacy development. Caregivers in this study want to be an active participant in their child's early literacy development. The caregivers reported a desired return to the past, with several caregivers mentioning nostalgic feelings of engagement in the past. Lastly, the caregivers desire the schools to have open and honest conversations with them regarding their child's literacy development and stop being "afraid of [them]."

### **Connecting Desired Engagement with Current Research and Theory**

In the section above, caregivers responded to the online survey and interview questions with their preferred future engagement with schools. The findings from research question two highlighted caregivers want open, honest communication and a return to the past. From the interview data, caregivers offered suggestions for fun and engaging ways for schools to interact with caregivers. After answering how caregivers want schools to partner with them, this section will examine the findings of the second question, *how caregivers want schools to connect with them to support early literacy*, to determine the alignment of desired engagement practices to current research. This exploration will answer the overarching research question: *To what extent is the reported and desired partnership with schools, which is designed to support early literacy achievement, aligned to current theories and research on caregiver engagement?* To answer this question, this section explains how tradition often leaves out historically underrepresented

caregivers and solid and sustained support will increase a caregiver’s efficacy according to current research.

### **Traditional Partnership Does Not Consider Historically Underrepresented Populations**

In the state-wide literacy policy schools are required to attempt engagement with caregivers around literacy practices to use at home (see Read by Grade Three, 2016). There is no requirement for schools to differentiate their support for caregivers, even those from historically underrepresented populations. In the interviews, caregivers alluded to the schools lack of reaching out to all caregivers and families. A small fraction of responses (27 out of 564) connected to the need to differentiate the partnership from schools. Table 30 illustrates a sample of the responses from caregivers around the need for differentiation.

Table 30

#### *Sample Caregiver Responses Regarding Need for Differentiation*

Caregiver	Quote	Subcode
B	<i>If you don't go up to the school or don't, if there aren't many activities that you can go to as a parent, you could very well not even see the child's teacher</i>	Accessibility
A	<i>We know sometimes parents can't show up. Maybe you do a survey to see what time of day works for parents. Is there an option to do like a middle of the day lunch or does it have to be evening?</i>	Ask caregiver

Table 30 (cont'd.)

Caregiver	Quote	Subcode
F	<i>Like, that fine, I can do that. But when it comes to, like, the mechanics of learning to read or reading or the mechanics of math, I'm like I'm having to Google as my friend</i>	Caregiver knowledge
F	<i>Because I feel like everyone's situation is a little bit different in terms of why or how or their ability to engage with the school. Maybe they don't want to, maybe they want to, I don't know.</i>	Family Situation
B	<i>There's one that says parent read at home plan. And outside of that we don't get anything else. And so, there's this generic, like, kindergarten through third grade read at home for student success and it's read 20 minutes each day. I can send it to you. That's all they give us. And so, the school itself doesn't give us anything multiple times throughout the year.</i>	Generic
E	<i>But we have nights where they invite parents and they just don't always have a good turnout because right, and it's like I don't know what gets them there.</i>	School-centric

This was a much smaller subset of statements made by caregivers, but the statements were profound and revealing about how schools are still engaging with caregivers in a traditional, non-differentiated manner. Caregivers spoke to the lack of accessibility of both

resources and events held at the school, and they suggested asking caregivers for better ways to engage. Additionally, caregivers mentioned an individual family situation and why that should be considered. Further, the generic nature of communication was called out by the caregivers interviewed. One identified roadblock in the partnership was caregiver knowledge further supporting the importance and need for differentiation. Lastly, it was important to identify the current partnership as school-centric (Goodall & Montgomery, 2014), meaning that it was based on what the school needed or what was convenient for the school often without regard for the caregiver or the child. Table 31 provides a breakdown of the frequency of each of the subcodes within the responses caregivers gave about the need for differentiation in caregiver engagement.

Table 31

*Frequency of Caregiver Statements Regarding Differentiated Engagement (N=27)*

Subcode	Frequency	
	<i>n</i>	%
Accessibility	4	14.81
Ask caregivers	1	3.70
Caregiver knowledge	8	29.63
Family Situation	6	22.22
Generic	4	14.81
School-centric	4	14.81

When analyzing what is being reported by the caregivers' interviews, the data highlights the lack of alignment to current research on the importance of differentiating for caregivers to build solid partnerships between *all* caregivers, not just the easy- and convenient-to-reach ones. Cleland and Lumsdon (2021) showcased studies that investigated school's differentiation within their communication streams with caregivers. Using the data above, current partnership with schools aligns more with *parental involvement* than *parental engagement* (Goodall & Montgomery, 2014). The latter being the desired level of partnership to support the child's

learning development. Goodall and Montgomery (2014) defined *parental engagement* as driven by the caregivers and support positive attitudes toward school and home-based learning activities. This might also include conversations about what occurred at school that day. Conversely, *parental involvement* was more school centered based on the school's needs and little consideration is given to the families or caregivers (Goodall & Montgomery, 2014).

### Caregiver Efficacy Not Considered

One of the key components to a successful partnership is each participant in the partnership feels that they are a valued member of the group. When a caregivers' efficacy and agency are not considered, it prohibits a partnership bond. It relegates the relationship to a top-down involvement (Goodall & Montgomery, 2014) rather than a partnership in which each actor has a meaningful stake in the relationship (Epstein et al., 2019). During the interview portion of this study, caregivers shared some statements that demonstrated the lack of consideration for the caregivers' efficacy. In some cases, as caregivers shared, this meant caregivers were left to find alternative resources to support themselves and their child. Table 32 shows some sample responses from caregivers that demonstrated the lack of awareness or consideration for caregivers' efficacy.

Table 32

#### *Sample Caregiver Responses Demonstrating a Lack of Consideration of Efficacy*

Caregiver	Quote	Efficacy Component (Connotation of quote)
C	<i>The only reservations I have is his lack of interest, and he fights me tooth and nail, so I try to outsource a lot of it because I don't like to have to fight with him about something so important.</i>	Caregiver perceived ability (negative)

Table 32 (cont'd.)

Caregiver	Quote	Efficacy Component (Connotation of quote)
E	<i>[Child], he was, like, in a book club and I don't know, because the teacher never gave us exactly what we had to do, so we just always read, like, a chapter a night. But for him, it was like it was longer, and it was, for the first time, like, hour of homework every night, and it was just too much</i>	Caregiver perceived ability (negative)
C	<i>I actually got him progressed during the pandemic because I was able to give him more individualized learning and resources based on his individual needs. And so, I felt like he did way better at home.</i>	Caregiver perceived ability (negative)
F	<i>I remembered when they went to virtual school and they did all these YouTube videos for first graders, right? Like, watch this video and there's a workbook, and I remember watching it. There was so much more that could be done.</i>	Caregiver perceived ability (negative)
A	<i>And so, I just taught [child] how to do math my way, okay? And so, the teachers would get kind of flustered with me, and they were like, we can't have her learn this one. I was like, oh, you bet you can.</i>	Caregiver perceived ability (negative)



Table 32 (cont'd.)

Caregiver	Quote	Efficacy Component (Connotation of quote)
F	<i>But if there's like a conversation meaning like those Teams meetings not accessible, you get maybe ten people on them. Because I think part of it is just like, when is it? What time is it? What's the software I have to use to do that? The people are going to just give up. Or a PTA meeting or some other in person meeting, which is again, same issue. What time is it? I can't get there. I work till next time. Who's going to watch my kids?</i>	Caregiver perceived ability (negative)

The table above shares some of the caregivers' thoughts around their individual beliefs or their own perceived abilities to support their child. The connotation of the quote (i.e., negative/positive) explains whether the quote demonstrates a positive impact to the partnership or a negative impact to the partnership. The data shows that without considering caregivers' perceived abilities (a part of one's efficacy) (Bandura, 1977), there is a missed opportunity to strengthen the partnership. Caregiver E, a rural caregiver with 3 school aged children younger than 3<sup>rd</sup> grade, shared when their child came home with a book club book, they were not sure what to do with it. Caregiver A, an urban caregiver with two daughters, mentioned that they taught their daughter how to do math *their* way, instead of the teacher's way. Each of these quotes illustrates what happened when a caregiver was unsupported and unsure what to do with schoolwork. Both Caregiver A and E had the efficacy to at least attempt the activity, but it may not have been the way the school was expecting because of the lack of direction with the activity. Table 33 shares the opposing side of this experience. Caregivers shared a little about the schools' encouragement, an additional element that supports one's efficacy (Bandura, 1977).

Table 33

*Sample Caregiver Responses Demonstrating Efficacy Component of Encouragement*

Caregiver	Quote	Efficacy Component (Connotation of quote)
C	<i>So, I think they've always been very encouraging of you, helping them understand how to teach your child</i>	School encouragement (positive)
B	<i>Like just try to work and partner with parents a little bit more so that they can get support that they need to better support their kids.</i>	School encouragement (negative)
C	<i>I know I've attended for math. I can't specifically remember the resources provided for Reading, but they will kind of let you come in, teach you about or talk to you about what they're doing in the classroom and ways you can support at home.</i>	School encouragement (negative & positive)

Caregiver C offered both positive and negative encouragement quotes. Recall, Caregiver C is a suburban divorced caregiver to one young son. They explained that the school does try to help you “understand how to teach your child;” however, Caregiver C could not remember attending any workshop to support reading. Caregiver B, a suburban caregiver with two young boys, frustratedly mentioned that they desired the school to “partner with parents a little bit more, so that they can get supported.”

This information (Table 33) was slightly more contradictory when considering the connotation of each of the statements made by the caregivers. On one side you have Caregiver C saying the school has been encouraging caregivers to support their children, and on the other you have Caregiver B saying schools should do a better job of encouraging caregivers to support their children at home. The final comment by Caregiver C was more difficult to categorize. The

comment about the school holding a literacy night where they gave out resources showed a positive connotation and encouraging step in the direction toward being supportive; however, the fact that the caregiver could not recall the activities meant that the activities most likely were not revisited following the event, and therefore, not effectively supportive. This showed a negative connotation and a discouraging step toward compliance rather than support. This single statement demonstrated that event-based parent engagement has little effect on the partnership (Edwards, 2016).

A caregiver's efficacy, their belief that they can achieve the task in front of them, is an important component to successfully supporting their child at home (Bandura, 1977). In addition, efficacious caregivers feel more confident in partnering with schools (Goodall & Montgomery, 2014; Hill & Taylor, 2004). From the caregivers' interview responses, the caregivers perceived that schools are doing little to support the efficacy of caregivers. MacPhee (2021) and Hill and Taylor (2004) both agree that practices and policies by teachers, schools, and other caregiver groups can encourage and support caregivers. From the responses in the interviews, the perceived actions of the school are not aligned to current research. Additionally, the lack of differentiation for variety of caregivers (Cleland & Lumsdon, 2021) as noted from the caregivers' responses in the interviews also demonstrates a lack of alignment.

### **Summary of Findings for Overarching Research Question for Future Engagement**

Caregivers shared their desired partnership with schools for future engagement around early literacy. They requested open and honest communication. Caregivers also described a need for schools to consider caregivers' situation. From there the school can offer differentiated support for the caregivers. While the engagement requested is wonderful, it is important to determine if that desired engagement is aligned to current research. To answer the overarching

research question: *To what extent is caregivers' reported and desired partnership with schools, around early literacy, aligned to current theories and research on caregiver engagement?* I used the findings from research question 2. The findings were slightly aligned to current research. The caregivers call for a return to nostalgic practices does not align with current research on inclusive caregiver engagement (Cunningham, 2021; Edwards, 2016; Herrera et al., 2020; Smith, 2020). The request for differentiated support to build efficacy (Bandura, 1977) is aligned to current research. Supports for caregivers do improve the likelihood that they will complete activities with their children (Cunningham, 2021; Rasinski and Stevenson, 2005; Yeung et al., 2002).

### **Research Question 3 - Resources Posted for Caregivers Fall Short of Helpful**

With the emphasis on more electronic communication, especially in the wake of the COVID-19 pandemic, the schools' websites have become hubs of information for caregivers. To answer my third research question, I reviewed of a sample of schools' websites to better understand the information being shared with caregivers. After completing the review of the sites, four themes emerged from the data collected to support answering the research question 3: *What resources do caregivers report are readily accessible around early literacy?*

First, most schools opted for a traditional type of website that services as an information warehouse, which lends itself to resource sharing. Additionally, while the websites did not offer robust information on the current state-wide literacy policy, caregivers were willing to share their experiences with the resources posted or distributed to caregivers regarding the policy. This discrepancy led to the final conclusion; there may be more resources available behind the password-protected portal or given to caregivers through the backpack transfer than on the public facing site. In other words, it cannot be assumed that schools do not share resources with caregivers because there are no resources posted on the public facing school website.

### **Caregivers Report Tradition and Routine Rather than Innovation**

When investigating the content of the schools' websites, I noticed schools tended to post traditional information on the site. Additionally, the student/family/parent handbook was posted as a document and readily available (within 3 clicks) to anyone visiting the site. Lastly, there were typically forms or a place for forms to be accessed by caregivers. These forms included enrollment forms, video permission forms, transportation forms, and food service forms. The lack of information on the literacy policy for the state was notable, as only 18% of the sites ( $n=6$ ) contained any mention of the policy.

For example, on the majority of the sites included in this study, (73%) there was a link to the password protected portal system. Of the schools that did not have access posted, most were private schools ( $n=6$ ). It is important to note that it cannot be assumed that because a school chose not to post a link to their parent portal did not automatically indicate that the school did not use a parent portal. Caregiver D mentioned the use of a parent portal, however, the school their children attended did not have a link to the portal on the school's website. Table 34 breaks down those schools within the sample that had access to a parent portal.

Table 34

*Schools Inclusion of Access to Parent Portal on Website (N=33)*

Access to Password Protected Portal	Frequency		Avg Number of Clicks to Access	Public		Private		Charter	
				Frequency					
	<i>n</i>	%		<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Yes	24	73	1.50	20	87	1	14	3	100
No	9	27	n/a	3	13	6	86	0	0
Total	33	100	n/a	23	100	7	100	3	100

The data shared in this table (Table 34) shows that the majority (73%) of schools in the sample had some sort of password protected portal. This included all of the charter schools. More than half (87%) of the public schools had access to a portal, yet only one private school (14%) did. The private schools had double the number of schools ( $n=6$ ) of any other type to not have access to a password protected portal. On average, it only took 1.5 clicks to access the log in screen for the portal. Provided the portal allows for communication with the teacher or school personnel, this resource would align with Epstein and colleagues (2019) two-way communication and potentially helps caregivers in supporting their child's academic development. If the portal does not contain a feature to communicate with the school, then this resource lacks alignment to any framework used.

In addition to the parent portal access, schools also posted some form of a handbook. This was referred to as a student, parent, or family handbook. Regardless of how the handbook was titled, it was included in the data. Table 35 below illustrates the schools within the sample that posted a handbook.

Table 35

*Schools Posting a Handbook on Website (N=33)*

Access to Handbook	Avg Number of Clicks to Access		Public	Private	Charter				
	Frequency		Frequency						
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	
Yes	25	76	1.6	17	74	5	71	3	100
No	8	24	n/a	6	26	2	29	0	0
Total	33	100	n/a	23	100	7	100	3	100

Table 35 illustrates that most (76%) of the websites had a handbook accessible for the public. All of the charter schools ( $n=3$ ) had access to a handbook for caregivers to access. The majority of both public (74%) and private (71%) had access to a handbook. Of the schools that did not have handbooks posted and accessible, about three quarters were public schools and the other quarter were private school sites. On average it took 1.6 clicks to access the handbook document on the 25 school website that had a handbook. Handbooks provide a solid start to partnership by posting expectations from the school. Therefore, it could serve as a solid piece of communication. However, it falls short of the two-way communication sought to build solid caregiver/school partnerships (Epstein et al., 2019). Further, having a handbook does not fulfill the intentionality nor the curriculum-based engagement that Edwards (2016) suggests. So, a handbook by itself is not going to increase engagement with caregivers, nor is it aligned to current research on caregiver engagement, but it offers a starting point for expectations for each of the parties (i.e., school, child, and caregiver).

Beyond a handbook, most districts also posted forms for caregivers to access. The forms were the same ones a caregiver would be likely to call the office for in the past or pick up at a

Back-to-School Night. The forms include generic permission slips, enrollment forms, transportation forms, and food service forms. Table 36 shows the breakdown of schools that readily provided access to these forms on their website.

Table 36

*Schools Providing Access to Forms on Website (N=33)*

Access to Forms	Avg Number of Clicks to Access		Public	Private	Charter				
	Frequency		Frequency						
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	
Yes	27	82	2	19	83	5	71	3	100
No	6	18	n/a	4	17	2	29	0	0
Total	33	100	n/a	23	100	7	100	3	100

This table shows that most schools (82%) in this sample provide access to forms for caregivers online. Once again, all charter schools in the sample ( $n=3$ ) offered a place for caregivers to access forms they may need. Additionally, and similarly to the other resources analyzed, the majority of public schools (83%) and private schools (71%) also had access to forms. On average, it took 2.0 clicks to access the forms caregivers might need. Again, like the handbook, forms would equate to a very superficial type of engagement with caregivers. Forms would technically represent a two channel communication because the school asks for the information (in the form) and the caregiver returns the form with the information; however, my interpretation of the Epstein et al. (2019) parental involvement framework would be that forms filled out do not constitute engagement.

There is a possibility that the forms could be housed on the parent portal for those schools that did not house the forms on their website. Only one private school had neither a portal for caregivers nor a place for forms to be accessed on their website. While most of these sites had a



portal for caregivers, a posted handbook, and a place to access forms, overwhelmingly these sites did not have information that pertained to the literacy policy other than links to the state department of education one-page informational sheets.

### **Sites Lacked Information for Caregivers on Literacy Policy**

Because of the complexity of the policy and the large number of children impacted by the policy, I hypothesized that all public schools and charters schools (those schools receiving state funding) would have some type of information about policy on their websites. After examining each page of the website and utilizing the search feature, the results proved to be quite contrary to my hypothesis. Table 37 illustrates the breakdown of websites from the sample of schools that posted information pertaining to the literacy policy.

Table 37

*Schools Providing Information on Literacy Policy on Website (N=33)*

Access to Literacy Policy Information	Avg Number of Clicks to Access		Public		Private		Charter		
Frequency		Frequency							
<i>n</i>	%		<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	
Yes	6	18	1.83	6	26	0	0	0	0
No	27	82	n/a	17	74	7	100	3	100
Total	33	100	n/a	23	100	7	100	3	100

Of the six schools which posted information on the literacy policy, all of them were public schools, and half of them ( $n=3$ ) posted only links to the State Department of Education's information on the policy. The other three schools posted comprehensive links to supportive activities (with instructions) for caregivers to utilize at home. One school even posted links to Florida's Center for Reading Research activities. Another school posted a more than 28-page

Read at Home document. This included all grade levels impacted by the state-wide literacy policy (PK-3). In an effort to share several activities for different caregiver/child's level of need, these districts posted an overwhelming amount of information and resources. It would be worth further investigation to determine how many resources and with what amount of support is the most effective for caregivers. Additionally, it would be worth further examination to determine which resources are being used by caregivers. In the next chapter, I discuss the activities caregivers in this study noted they would be willing to do at home. The resources posted are not technically "parentally appropriate" (Edwards, 2004, p. 282) because they do not consider the ability or efficacy of individual caregivers. These resources were mostly created as a compliance to the Read at Home component found in several state-wide literacy policies (see Read by Grade Three, 2016).

### **Caregivers Reported Experience with School Provided Resources**

As part of the interview, I asked caregivers to explain what resources they have received the past school year to support their child with literacy. This section will examine the responses from the caregivers regarding the literacy policy and its different elements, like a read a home plan or an intervention plan. To better understand the phrases that were categorized with these descriptors, Table 38 provides sample responses from caregivers that were labeled with these subcodes.

Table 38

*Sample Caregiver Response Regarding State Literacy Policy*

Caregiver	Quote	Subcode
B	<i>We got the letter that said that was kind of like, these are his results, and here's his place of struggle, but that really was it. And then in conference, she just said, maybe I'll pull him back.</i>	Caregiver communication
A	<i>I get a quick paper brought home, and I sign it. That's it. And then I send it back to them, but it doesn't really explain in detail. Okay. It just says, like, their goal to get them to level, whatever.</i>	Intervention plan
D	<i>Honestly, it may sound harsh, but I'm not going to sugarcoat it. We need to know. It needs to be enforced. The law itself. Schools need to be held accountable. Parents need to be held accountable.</i>	Lack of accountability
B	<i>We did have a literacy night this year. It just said, here attached is a PDF with some activities and website. Okay. And you could join through Google meet.</i>	Literacy activity/night
F	<i>I feel like this is like as much press and as much important people, and maybe it's just the press and maybe it's good policy out there talking about it, just to talk about it, but the parents are like, what?</i>	Misconception

Table 38 (cont'd.)

Caregiver	Quote	Subcode
D	<i>I would hate to say have everything rigid from the state. Right. Top down. It doesn't work.</i>	Poor implementation
F	<i>They don't do Read at Home plans.</i>	Read at home

Caregiver B, a suburban caregiver to two young boys, shared thoughts that align with the generic sharing of resources. They received a letter that defined which skills their child was “struggling” with, and the teacher offered to “maybe” pull him for small group instruction. Additionally, Caregiver B attended a single, school-based literacy event held online this year (e.g., math night). From the event, caregivers received “a PDF with some activities and website.” When asked to elaborate on the activities, the caregiver admitted to not having accessed them. Caregiver A echoed similar sentiments about the information shared with them. They remember reading a piece of paper and signing it but not any specific activities (other than reading for Accelerated Reader tests) that the school sent home. Caregiver F simply explained their child’s school does not “do read at home plans.” Caregiver F’s children attend an urban public elementary school that utilized the Montessori method of instruction.

These sample quotes offer a glimpse into the insights from the caregivers while discussing the literacy policy. It becomes clear that caregivers do not feel like they had adequate information regarding the policy. They also have some strong opinions on implementation and communication with a little over half (51%) the responses (accountability, implementation, communication) speaking to those ideas. To gain a better understanding of these ideas Table 39 illustrates the breakdown of responses that were coded as pertaining to the literacy policy.

Table 39

*Breakdown of Caregiver Responses on State Literacy Policy (N=39)*

Subcode	Frequency	
	<i>n</i>	%
Caregiver communication	10	26
Intervention plan	6	15
Lack of accountability	7	18
Literacy activity/night	5	13
Misconception	2	5
Poor implementation	3	8
Read at home	6	15

Overwhelmingly, *caregiver communication* seemed to be a popular topic around the literacy policy with a quarter of the responses speaking to that descriptor (subcode). The *lack of accountability* also came up frequently and was talked about mainly by one caregiver in the study, Caregiver D. This accountability Caregiver D spoke about seemed to focus on everyone: schools, policymakers, district leaders, children, and caregivers. Finally, there were elements of the policy that were specifically brought up: literacy nights, intervention plans, and read at home plans. Collectively these made up roughly a third (34%) of the responses. On the survey, caregivers reported they were willing to work at home at least weekly, if not daily, with their child. However, the current, generic work that is sent home with the child is often not being utilized according to the caregivers interviewed. Still yet, Table 40 illustrates the responses when caregivers were asked about their willingness to work with their child at home on the survey.

Table 40

*Survey Responses Regarding Caregiver Willingness to Provide Support at Home*

Activity	Read to child		Read with child		Listen to child read		Play silly word games		Practice phonics skills		Practice sight words	
Frequency	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Daily	16	80	17	85	16	80	17	85	14	60	10	50
Weekly	4	20	3	15	4	20	3	15	6	40	9	45
Monthly	0	0	0	0	0	0	0	0	0	0	1	5

The caregivers surveyed are willing to work with their child at home; most are willing to do this daily. When investigating the schools' websites, this seems to be the location for resources other than those connected with the policy and early literacy support. Caregivers report feeling that lack of communication around the policy requirements. Additionally, the resources that are provided to caregivers are generic, and that caregivers report feeling like they are to pick and choose what they do to support their child at home with literacy development.

Further, caregivers desire and are willing to participate in support offered by the school. In the online survey, caregivers were asked to report on the likelihood of their participation in specific event-based support or resources. Table 41 shares the caregivers' responses from the survey.

Table 41

*Caregiver Responses on Likelihood of Engaging in Support-based Resources*

Likelihood	Activity with clear written direction		Activity with video directions		Face-to-face demonstration of activity		Workshop		Other	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Highly Likely	11	55	10	50	9	45	7	35	7	35
Likely	8	40	9	45	9	45	12	60	5	25
Unlikely	1	5	1	5	2	10	1	5	3	15
Highly Unlikely	0	0	0	0	0	0	0	0	5	25

Table 41 offers insights into which resources caregivers are most willing to engage in. From the data, it is promising that caregivers completing the survey were most likely to engage with an activity if it had clear written directions (55% highly likely), however, activities with video directions (50%) and face-to-face demonstrations (45%) were not far behind. Interestingly, only 35% of the surveyed caregivers reported they would be highly likely to attend a workshop. The workshop support was called out in the literacy policy as one way schools could support caregivers. However, this data suggests caregivers would prefer alternative or additional supports. In the *Other* category, there was also an opportunity for caregivers to write in any options they chose to share. The write-in responses were mostly left blank, but of the three that did utilize the option, they mentioned “workshops,” “None,” and “Household work gets in the way.” I interpreted the last two responses as reasons why those caregivers chose *Highly Unlikely*. The data illustrated in this table offers hope for the caregiver/school partnerships. In general, caregivers are asking for and willing to use the support that the school offers.

**Password Protected Portals May Contain More Resources**

Promisingly, the schools’ use of the password protected portal could provide a rich and untapped resource for schools and caregivers. Previously caregivers had mentioned the type of

communication (e.g., attendance, missing assignments, scored assignments) that comes through the portal. There could also be information housed within that portal that caregivers did not mention (e.g., direct resources for students needing additional practice in specific skill areas). In a follow up, clarification phone call with Caregiver B, I discovered that their Read at Home Plan was found within the password protected caregiver portal. This resource was generic and posted for all schools within their charter network (101 schools). Caregiver B, while on the phone with me, had a hard time locating the document. After locating it on their cell phone, they verbally explained the sixteen-page document which is meant to support caregivers with guiding literacy development of their child at home. It is important to note other resources could be behind that password protected wall, but the quality and utility of these resources is unknown. According to caregivers interviewed in this study, the current posted resources are not feasible or usable resources.

Using the review of the schools' websites and the interview data from the caregivers, my aim was to answer the final research question: What resources do caregivers report are readily accessible around early literacy? What I discovered was that according to the caregivers the resources on the schools' websites are not usable for supporting them with their child at home. Some of the generic resources sent home are also not very valuable for supporting caregivers with these early literacy skills at home. Resources that were intentionally focused on the skills that the child needed and resources that were connected to the curriculum would be more aligned to current research on caregiver engagement.

### **Summary of Findings for Resource Investigation**

The findings from the section above answered the third research question: *What resources do caregivers report are readily accessible around early literacy?* I found that



caregivers report a widespread use of the password protected portal, but that usage cannot and should not substitute for personal communication with regard to their child's literacy development. Further, caregivers reported disregarding resources when the caregiver felt they did not apply directly to their child (i.e., Read at Home plans that were generic). Schools opted to use their websites for information warehouses rather than innovative spaces for resource sharing and support.

### **Resources for Caregivers Partially Aligned to Current Research**

In this section, I will examine the findings shared above to answer my overarching question: *To what extent is caregivers' reported and desired partnership with schools, around early literacy, aligned to current theories and research on caregiver engagement?*

### **Lack of Available Posted Resources for Caregivers**

Recall this study was conducted during the implementation cycle of a state-wide literacy policy. According to the policy, schools are obligated to provide caregivers resources to support their child in literacy development. Through the survey, caregivers were asked to report on the type of resources they received and the frequency with which they received these resources. Caregivers were asked about how often they received books to read at home, read at home activities, suggested activities that align with home practices (i.e., incorporating literacy activities with grocery shopping or making dinner), homework packets, or nothing at all. Caregivers could also fill in a category labeled "other" and describe the frequency of this type of resource. Some of the other resources listed by caregivers were flash cards which they received weekly and online work which the caregiver reported receiving daily. For the choice in frequency, caregivers could choose between daily, weekly, monthly, quarterly, or not yet. Table

42 illustrates the frequency with which respondents reported receiving resources during the 2021-22 school year.

Table 42

*Frequency and Type of Resources Received from School as Reported by Caregivers during 2021-22 School Year*

Frequency	Read at home activities		Books to read at home		Activities that align with home practices		Homework packets		Nothing	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Daily	4	20	3	15	3	15	3	15	1	5
Weekly	9	45	8	40	2	10	8	40	2	10
Monthly	2	10	3	15	2	10	1	5	0	0
Quarterly	2	10	4	20	2	10	1	5	1	5
Not Yet	3	15	2	10	11	55	7	35	16	80

Notably, most caregivers (80%) reported receiving some type of resource from the school. Additionally, more than half (65%) of the caregivers reported receiving read at home activities at least weekly and books to read at least weekly (55%). A small fraction of respondents reported not receiving either read at home activities (15%) or books to read (10%) during the school year. While the number of caregivers reporting not receiving these two items is minimal, any number above 0% is troublesome. Research points to the need for quality texts in the home in addition to school (McClain, 2000), but this can be difficult for under resourced caregivers (Neuman & Celano, 2006) but not impossible as Volk (2021) found with their study of two Latinx families in an urban area. This is where schools could support caregivers by sending quality texts home with children and further supporting the work caregivers are attempting at home (Volk, 2021). Caregiver D reported “we do see some library books; we do see with [our] Kindergartner child. We saw more level books coming home, and we did see some with the second grader, but a lot of those he was able to do on his own, so we really didn't see

them because he can knock it out real quick.” This was in response to the question about what resources were sent home with children. Schools are sending resources home, but Caregiver D never reported whether they received any support around the texts being sent home. A lack of support, even with resources being sent home, would not align with the current research (Rasinski & Stevenson, 2005).

More troubling than a lack of support is more than half (55%) of the caregivers report receiving little to no activities that align to their home practices. With the need to have children practicing their literacy skills in and out of school and with the urgent push to be culturally responsive to children and their caregivers, it is alarming to see this such a high percentage. Furthermore, the data gets more interesting when the racial demographics are considered; Table 43 breaks down the respondents’ choice by race on this question.

Table 43

*Racial Breakdown of Respondents on Resources Received that Align with Home Literacy Practices*

Demographic Category, Race/Ethnicity	Daily		Weekly		Monthly		Quarterly		Not Yet	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Asian	2	10	--	--	--	--	--	--	--	--
Black or African American	1*	5	1	5	--	--	1	5	6	30
Middle Eastern	--	--	--	--	--	--	--	--	1*	5
Latinx	--	--	1	5	--	--	--	--	--	--
White	1*	5	--	--	2	10	1	5	5*	25

Table 43 (cont'd.)

Demographic Category, Race/Ethnicity	Daily		Weekly		Monthly		Quarterly		Not Yet	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Two or More	1	5	--	--	--	--	--	--	1	5

\* The two or more: Caregivers were 2 or more races identified were counted once in each of their races/ethnicities and also identified in the Two or More category.

-- No respondents of the specified race/ethnicity selected this option.

Interestingly, the Asian respondents each stated that they received activities daily that reflected their home literacy practices. On the opposite end of the response-spectrum, the majority of the respondents, those that have received little to no resources reflecting their home practices (85.7%), identified themselves as Black or African American ( $n=6$ ). Regardless of race or ethnicity, schools might consider home practices when requesting literacy development support from caregivers (Grau et al., 2004; McClain, 2000). Additionally, the resources schools offer caregivers could be combined with ongoing support from the schools (Kosanovich, Lee, & Foorman, 2020; Rasinski & Stevenson, 2005). From what caregivers reported, the current resource distribution is not aligned to current research practices.

The data on posted resources showed that resources to support literacy development were not readily accessible. The websites included password protected portals that caregivers could access. This portal typically houses attendance records and grades. Sometimes, as Caregiver B pointed out, they contain resources like a generic Read at Home plan. With the exception of a few websites, none of the schools in the study shared resources that supported literacy practice at home on their websites.

### **Summary of Findings for Overarching Research Question Regarding Resources**

In summary, the perception of current partnerships with schools to support caregiver engagement is not aligned to current research practices. The data in this chapter illustrated that at

present there are not open communication streams for two-way communication. Research supports a two-way communication channel for a strong caregiver/school partnership (Cleland & Lumsdon, 2021; Epstein et al., 2019; Kosanovich, Lee, & Foorman, 2020). According to the caregivers in this study, communication is still traditional and unidirectional like robocalls and generic emails. The use of technology is not making the communication more robust. In general, caregivers in this study reported for the most part still feeling a disconnect between the school and themselves. As such, the communication reported by caregivers in this study is not aligned to current research on caregiver/school partnerships.

In addition to the uniformity of the communication, the caregivers in this study also reported no differentiation in the partnership. Little consideration is given to the caregivers' situations (i.e., single parent, working multiple jobs, speaking languages other than that of the communication from school, prior fear/trauma from schooling) according to the caregivers in this study. These historically underrepresented populations make up a large number of caregivers in which schools need to engage. Because of our diverse population, schools can no longer consider caregivers as a "homogenous group" (Cleland & Lumsdon, 2021, p.27). As the population has shifted to be more diverse, caregiver demographics have shifted as well. Historically, schools have held assumptions about caregivers that do not engage with the school, and these assumptions are viewed through a deficit lens (Cleland & Lumsdon, 2021). Additionally, this bias by schools influences how schools provide outreach. Caregivers in this study report that schools are not considering a caregiver's efficacy when they attempt to engage with them. When a caregiver fails to engage with the school, it reinforces the assumptions (Cleland & Lumsdon, 2021). The lack of differentiation as reported by caregivers in this study is not aligned to current research on caregiver engagement.

Examining resources sent to caregivers poses only one-side of the communication strand. Caregivers reported they had received resources from the school at least some point throughout the school year. As Caregiver B stated, they had not received any support from the school with resources targeted to what their child needed for literacy development. Rasinski and Stevenson (2005) demonstrated the importance of support in addition to the resources to maximize the impact the resource has on a child's literacy achievement. Additionally, within this study, caregivers' efficacy was strengthened when they received structured support with literacy resources (Rasinski & Stephenson, 2005).

The findings shared in this chapter support the answer to the overarching research question: *To what extent is caregivers' reported and desired partnership with schools, around early literacy, aligned to current theories and research on caregiver engagement?* The data collected from the caregivers supports a significant lack of alignment to current theories and research when implementing the caregiver engagement, especially within the portion of the state-wide literacy policy that pertains to caregivers.

### **Overall Summary of Findings for Study**

In summary, the stage has been set for developing solid caregiver/school partnerships to support the child's literacy development using the context of the state-wide literacy policy (see Read by Grade Three, 2016). Within this policy, caregivers are viewed as active members of the intervention team. As evidenced by this study, there have been some positive attempts made by schools to partner with caregivers. In answering the first research question, *what do caregivers report about the current partnership with schools with early literacy activities*, caregivers explained that there were roadblocks that inhibited partnership. In addition, caregivers also explained the strengths of their current relationships. Communication played a significant role in

the relationship according to the caregivers interviewed. Caregivers reported that communication, if not executed properly, became a roadblock to partnership, yet it proved to be a strength or asset to the current relationship when carried out effectively. Communication became a common theme throughout each of the research questions. Yet, the two-way communication channel that Epstein et al. (2019) proved as necessary is just not happening according to the caregivers interviewed.

When examining the desired partnership with caregivers, several key ideas emerged. This data supported the answer to the second research question: *How do caregivers want schools to connect with them to support their child's development in literacy?* Again, communication came up as a key lever in the desired partnership. Two-way (Epstein et al., 2019), honest communication was the gold standard for caregivers. As reported by caregivers, technology did not always foster a two-way communication that they desired. The technology used often felt impersonal, or as an avenue for information dissemination on the part of the school. The caregivers offered several plausible and some nearly impossible suggestions for ways schools could partner with families, especially around literacy and supporting literacy development. Rather than offering caregivers generic read-at-home plans, schools might consider differentiating both activity (Edwards, 2016) and the support (Bandura, 1977; Rasinski & Stevenson, 2005) to get the biggest impact with student literacy development.

Data from the caregivers' interviews and the investigation into the resources posted on schools' websites supported the answer to the third research question: *What resources do caregivers report are readily accessible around early literacy?* The information I found on school websites suggest that schools preferred to share the traditional information on their sites (e.g., forms, handbooks, link to parent portal) with caregivers (Epstein et al., 2019). This

traditional information included forms needed for caregivers (e.g., permission slips, transportation, food services) and a portal to grades and attendance. However, I found little evidence that school websites provided information on the state-wide literacy policy and resources to support caregivers with the nuances of the policy. Less than 1 in 5 sites contained any information about the policy. Those sites that did have information contained links to the state's information on the policy or lengthy documents that contained general information intended to support caregivers with literacy practices at home. However, despite this perceived lack of resources, caregivers expressed a willingness to work with their child at home. Four out of five caregivers surveyed reported they were willing to work with their child daily on early literacy activities. Using what caregivers reported, what caregivers desired in a partnership, and the resources that are currently given to caregivers, a roadmap to a more balanced and effective partnership can be crafted.



## CHAPTER 5 – DISCUSSION AND IMPLICATIONS

Caregivers play a vital role in a child's academic develop (Compton-Lilly et al., 2019; Cunningham, 2021; Edwards, 2004; Edwards et al., 2018; Smith, 2020; Volk, 2021). However, not all caregivers can support their child in the same ways (Edwards, 2004; Rasinski & Stevenson, 2005; Yeung et al., 2002), and some need the support of the school in order to work with their child at home (Bandura, 1977; Epstein et al., 2019; Rasinski & Stevenson, 2005). In this section, I review the current study by examining the questions and analyzing the key findings from the study. I connect those findings to the current literature on caregiver/school partnerships, as well as the literacy policy itself. These connections support the recommendations for how research could inform future practice for key stakeholders. I acknowledge the limitations and offer ideas for future research beyond this study. Finally, I conclude by identifying the significance of this study to the education community, the policy community, as well as the research community.

### **Discussion**

In this study, I examined caregiver perceptions of the outreach from schools during the 2021-22 school year, during a state-wide policy implementation cycle. I utilized caregiver perceptions collected from surveys and interviews and offered direct quotes whenever possible to uplift the caregivers' voices (Lumby, 2007). To corroborate the caregivers' responses, I analyzed school websites searching for resources readily available to caregivers. The findings from the investigations supported the answer to my overarching research question: *To what extent is caregivers' reported and desired outreach from schools, around early literacy, aligned to current theories and research on caregiver engagement?* I employed the use of three research questions: (a) *What do caregivers report about the outreach from schools around early literacy*

*activities? (b) How do caregivers want schools to connect with them to support early literacy?*

*(c) What resources do caregivers report are readily accessible around early literacy? Through*

this study, I uncovered communication as a key lever in the caregiver/school partnership, and caregivers have mixed feelings with the current state of communication. Additionally, caregivers believed in the need for differentiated caregiver engagement, yet caregivers reported that their child's school rarely moved away from the traditional caregiver touchpoints (i.e., caregiver conferences, password protected portal, mass emails, robocalls, generic literacy resources, etc.). Lastly, to move toward a stronger partnership, schools and caregivers could revisit their current interaction and align their practices to current research. This will not only strengthen their partnership, but it will also support the child in literacy development.

### **Communication is the Key**

The state-wide literacy policy, under which this study was conducted, requires schools to reach out to caregivers (see Read by Grade Three, 2016). The policy requires schools notify caregivers in a timely fashion of their child's literacy assessment results, partner with them to craft a plan of support and intervention (if needed) and offer support and activities for caregivers to utilize outside of school (see Read by Grade Three, 2016). One common thread through each of these pieces is communication. In this section, I examine how caregiver reported communication breakdown is likely to impact the partnership. I focus on the need for intentional use of multiple streams of communication, something that caregivers in this study report is not currently happening for them. Drawing on the work of Epstein and colleagues (2019), I make the case for opening the line of communication to be a two-way stream rather than the traditional unidirectional stream.

Communication plays an important role in any relationship. When I analyzed the data, communication played a large role in the reported and expected outreach from schools. As caregivers reported in the interviews, a breakdown in communication led to a disconnect with their child's teacher (see quotes from Caregiver B and C). Additionally, those same caregivers, Caregivers B & C, reported that the relationship they had with the school was not a partnership. Examining the reported caregiver situations, the communication does not align with necessary components of Parental Involvement Framework (Epstein et al., 2019). Goodall and Montgomery (2014) argue, however, that what caregivers reported was involvement, but not engagement, and engagement will support a partnership between schools and caregivers.

When the breakdown in communication reportedly occurred, it was often because the communication felt generic or there was a lack of communication for caregivers. According to Kosanovich, Lee, and Foorman (2020), partnerships between caregivers and school are facilitated by *ongoing* communication. While mass emails, mass phone calls, and portals can be effective tools for teachers to share information (Flam, 2016; Mayer et al., 2015; York et al., 2019), it cannot be the only way of communicating with caregivers (Lawrence-Lightfoot, 2003; Smith, 2020) because it lacks a two-way communication stream (Epstein et al., 2019).

Schools and caregivers need to utilize technology, as well as other means of communication, if they want to maximize their relationship. From the data, caregivers shared that the online portal was a way in which they received information regarding their child's progress (e.g., report cards, attendance records), however, that was not the same place that they received information on their child's literacy development and progress. Most state-wide literacy policies have an element where schools have to *regularly* update caregivers in the *ongoing* progress of their child in literacy (see CO Read Act, 2013). While caregivers in the survey of this

study perceived they were kept updated on their child's literacy progress, some caregivers in the interview portion reported that they felt there was a lack of communication around their child's progress. This was especially notable because the two caregivers (Caregivers B & F) that mentioned not getting regular communication from the school, and each had a child that needed intervention services in literacy due to their benchmark assessment scores. Regular communication, including caregiver portals, can inform and motivate families to engage in literacy-related activities (Meyer et al., 2015; York et al., 2019). These caregivers both offered that they checked the parent portal regularly. Additionally, caregivers reported that communication about the state-wide literacy policy was sent home with the child (i.e., stuffed in a backpack) and not sent directly to the caregiver or through the portal. Smith (2020) would agree that these multiple methods of communicating would be necessary due to caregivers' different situations and access to technology. This sentiment was echoed in a chapter by Schafft and colleagues (2010) within the context of rural schools. In some cases, it became necessary for the school to meet the caregiver where they were literally and physically (Schafft et al., 2010; Smith, 2020). These multiple ways of connecting with caregivers would allow more caregivers to engage with schools.

Schools that used the portal to just share information missed a huge opportunity to connect with caregivers. Never before has connecting with caregivers been easier due to the multiple ways schools can communicate, but it is essential that the communication be a two-way stream (Epstein et al., 2019). Caregivers should have access to schools in order to communicate with them, to share their thoughts, concerns, triumphs, and celebrations (Cleland & Lumsdon, 2021; Epstein et al., 2019; Smith, 2020), and these portals may be one way the bi-directional communication stream could be opened. Some of the caregivers interviewed were asking for the

school to reciprocate their desire for open communication. One of the caregivers (Caregiver B) even reported that their child's teacher dismissed this caregiver's invitation to reach out any time their child misbehaved. The teacher reported stated it was because they had too many children in their class to be able to reach out to individual caregivers. Reportedly, the caregiver was told that the teacher could not possibly call a caregiver every time there was an issue in the classroom (Caregiver B interview). That interaction of dismissing the invitation to communicate fractured the relationship between the caregiver and school according to the caregiver. This situation violated the relationship and severed the lines of communication for the remainder of the year (Cleland & Lumsdon, 2021; Smith, 2020), as stated by Caregiver B. At that point the caregiver felt silenced (Lawrence-Lightfoot, 2003; Lumby, 2007) and dismissed. Schools often have difficulty getting to caregivers to engage for various reasons (Cunningham, 2021; Schafft et al., 2010; Smith, 2020). When a caregiver wants to actively engage, it benefits the school not to dismiss them.

### **Different Caregiver, Different Needs, Different Support**

The literature on caregivers offers how vastly different caregivers are in their needs and their requests for partnership with schools (Cunningham, 2021; Edwards, 2004; Epstein et al., 2019; Volk, 2021). According to the literature, the caregiver school relationship does not start with a blank slate, each person comes to the relationship with assumptions about the other (Sime & Sheridan, 2014). Often the measure of a good caregiver, as interpreted by the school, is through the lens of the White middle-class norms (e.g., well-fed, a workspace at home for completing schoolwork, communication with school at specific times) (Herrera et al., 2020). A large number of caregivers are not White nor are they middle class (see MI School Data, 2022; U.S. Census, 2020; U.S. News & World Report, 2022). Most of the caregivers in the study

would probably have been classified as middle class; however less than half were White. To best benefit the child, it is important for schools and caregivers, regardless of their race/ethnicity to partner with one another.

A solid caregiver/school partnership needs to be able to adapt to the differences in each of the members (i.e., teachers and caregivers). Some caregivers require more support depending upon the requests made by the school (Cunningham, 2021; Edwards, 2016; Rasinski & Stevenson, 2005; Smith, 2020). As caregivers in this study reported, they are not teachers and some of them worried about what the school really wanted them to do with the activities. Schools could offer a more robust structure and support if they enlist the caregivers to help with schoolwork at home (Edwards, 2016; Rasinski and Stevenson, 2005). Edwards (2004) described the differences in caregivers as *differentiated parenting*. This included “recognizing that [caregivers] are different from one another in their perspective, beliefs, and abilities to negotiate school” (Edwards, 2004, p. 281). In recognizing the differences of the caregivers and supporting the caregivers as individuals, the efficacy of the caregiver will increase (Bandura, 1977).

Further, it is not enough that schools recognize the differences, it is necessary to adapt their outreach and expectations to better engage with caregivers of all types. Rasinski and Stevenson (2005) recognized the need for structured support especially with literacy activities. The policy mandates schools offer literacy activities and support, such as workshops, for caregivers (see Read by Grade Three, 2016). Edwards (2016) discovered that the one-and-done workshops or single-event engagement are not effective ways of supporting caregivers to complete tasks at home. Additionally, half of the caregivers interviewed reported that there is poor attendance with the “literacy nights” held at the schools, and half of the caregivers surveyed stated that the school did not hold any workshops in 2021-22. To effectively engage with

caregivers, schools could review the alignment of their practice to the current research done on effective caregiver partnerships. A result of this alignment to current research is that caregivers' efficacy would most likely increase because of the direct support from schools.

### **Alignment to Research and Curriculum is Necessary to Move Forward in Partnership**

Schools' websites and outreach to caregivers did not meet the expectations of intentionality. The survey participants and interview participants both reported a generic style of outreach, with resources representing a lack of differentiation to the individual child's needs in literacy. Several caregivers reported receiving packets from the school to work on throughout with week. Edwards (2016) would disagree with such a practice, as it shows a lack of intention and connection to the learning standards or curriculum. This practice of uniform homework packets assumes all caregivers can support their child at home, which is not always the case (McClain, 2000; Smith, 2020; Yeung et al., 2002). Therefore, it befits the school to consider investigating their curriculum and attempting to align their outreach and support in order to help the caregivers support their child at home. In addition to the instruction and the intervention the child receives at school, they could also be getting support at home with literacy activities. Further, those activities could help bridge the cultural gaps between school and home (Edwards, 2016; Herrera et al., 2020; Hong, 2011).

### **Contribution of the Study**

The findings of this study support future work by schools, caregivers, and policymakers as they guide a child on their literacy journeys. Adding to the body of work done on policy implementation from the perspectives of both children and school personnel, this study adds the much-needed caregiver point of view and voice shared by caregivers residing in different parts of the state. With the findings, schools can support the creation a more robust support system and

partnership with caregivers. Creating a support system provides teachers with much-needed guidance on creating valuable and symbiotic partnerships with caregivers. These strengthened partnerships will benefit all parties: the school personnel, caregivers, and children. Additionally, policymakers can understand how loosely coupled policy implementation poses significant problem for the actors involved in implementation. Those same actors need support and guidance with implementing the policy. Lastly, caregivers can utilize the findings to assist their child's literacy journey.

Examining caregivers' points of view on caregiver/school partnerships is not a novel concept, yet very little literature exists on this subgroup of policy actors especially when examining state-level literacy policies. Other policy actors' perspectives have been examined during a literacy or language policy implementation cycle, such as 1) children (Lynch, 2009), 2) school personnel (Strunk et al., 2021; Thanyathamrongkul, et al., 2018), and 3) even non-system actors (i.e., independent professional development providers, universities, publishers, and other reform organizations) (Coburn, 2005).

Schools benefit from engaging with caregivers to support a child's development at home (Edwards, 2016; Epstein et al., 2019; Henderson et al., 2007). With the weight of the academic need and the social emotional needs following the COVID-19 pandemic, it benefits the schools to enlist the support of caregivers to aid with a child's literacy development in an effective way. Additionally, state-wide literacy policies are requiring schools to engage with families. Maximizing the way in which schools partner with caregivers will inevitably support a child. To maximize the partnership, schools will want to listen directly to caregivers on the best way to engage caregivers, and the support the caregivers feel they need to be able to effectively help their child at home.



With structured support from schools and strengthened relationships with school personnel, caregivers can be solid partners with their child's literacy development (Rasinski & Stevenson, 2005). The crux of this study hinged upon the honest sharing from caregivers about the current and future engagement with schools. This study served to place the caregivers' voices in the forefront of the engagement around a child's literacy development beyond the school day. Further, the caregivers' own words were used, when possible, in order to maintain the purity of the caregivers' voice and words, rather than filter their words through the researcher's interpretation of the caregivers' words (Lumby, 2007).

The study was conducted in the context of a state-wide literacy policy. The findings of this study support policymakers in understanding the importance of supports for all of the policy actors, especially when implementing through a loosely coupled, bottom up manner. Caregiver engagement is seen as an important element to a child's academic success which is why policymakers included engagement within the policy. The findings of this study highlighted caregivers' perceptions of current school engagement and future engagement opportunities. Additionally, using the findings of this study, policymakers are able to see the desire caregivers have to support their child, as well as the perception of a lack of direction and guidance with some of this work.

### **Informing Current & Future Practice**

I chose to focus on four subgroups for informing current and future practice. All of the subgroups were equally important, but I listed them according to what might be able to be done immediately down to what might take longer due to their type of work cycles. For example, school level change is much easier to achieve than a full scale state-wide policy level change.

## **School-level Professional Development**

Professional development calendars typically are full of pedagogical enhancement opportunities and reviews of current practices. Little attention is paid to building stronger caregiver relationships. Strunk et al. (2019) found that teachers report not knowing how to communicate parents adequately. Using the findings from this study, schools could begin work on small things like effectively using the password protected portal as an open line of two-way communication (Epstein et al., 2019). Additionally, supporting teachers to have honest and difficult conversations could be helpful, especially when reporting assessment data that shows a child still has skill gaps. During a professional development session, it may be beneficial to do some role playing with potential difficult situations that teachers encounter, especially around literacy development. Caregivers in this study stated they want honesty followed by support from the schools. This would be great place for schools to start.

Once communication is open, honest, and flowing two-ways, schools could consider focusing the resources they share with caregivers on what the child needs or the curriculum they are working on (Edwards, 2016). Aligning the outreach from the school to the curriculum will be quicker than targeting resources to each individual student; however, schools have already been focusing their work on individualized instruction. Schools could leverage the work they have already done (e.g., examine pieces from homework packets that specifically align to a specific early skill set) that is successful and grow from there (e.g., investigate how support could be offered to caregivers to get the most out of the activities).

## **Teacher Preparation**

Rarely is there a whole course in a teacher preparation program that pertains solely to fostering strong caregiver relationships. Caregiver/school partnerships are vital to supporting

student achievement (Edwards, 2016; Epstein et al., 2019; Smith, 2020; Volk, 2021). Therefore, I advocate for a course in this topic because findings of this study demonstrated the importance of incorporating *how* to communicate with caregivers. Additionally, teacher candidates need to learn how to have open and honest conversations even when it is difficult. As such, I strongly recommend that teacher preparation programs incorporate within all their methods courses some level of instruction on how to engage with different populations of caregivers.

Teachers will never be required to chase a caregiver through a parking lot to have a conference (my experience) or meet a caregiver at work in the field (Smith, 2020), but they are asked to recognize and honor the diverse backgrounds of their students (Cunningham, 2021) and engage with a diverse group of caregivers effectively (Volk, 2021). The caregivers in this study offered a few ways they would like teachers to do that, starting with open, honest two-way communication (Epstein et al., 2019) and differentiating expectations and support (Bandura, 1977; Edwards, 2004; Edwards, 2016). Additionally, caregivers reported they would like more activities focused on their child's specific needs (Edwards, 2016) that incorporates their own backgrounds rather than the generic homework packets. Our teacher preparation programs could be supporting teacher candidates to be able to do these activities efficiently and effectively. Unlike the mindset that this learning occurs in the first years of teaching, this type of learning does not occur when they get their first teaching placements, nor can novice teachers rely solely on mentors to help. Teacher preparation programs could try to include this in their programs, so teachers no longer say they do not know how to communicate with caregivers effectively (Strunk et al., 2019).

## **Policymakers**

Policymakers believed in caregiver/school partnership enough to include them in the state-wide literacy policies. As they drafted the policies, it appeared that the policymakers made a concerted effort to include caregivers as a valuable member of the intervention team within the school (see Read by Grade Three, 2016). The policy, with the exception of the retention element, might not be harmful to a child (Schwartz, 2022; Wisely, 2019); however, because of the manner of implementation in this particular state-wide literacy policy the policy seems ineffective (Mauriello, 2022). Teachers report being unprepared to engage with caregivers (Strunk et al., 2019) despite that being required in state-wide literacy policies. Caregivers interviewed in this study report not receiving updated progress on their child's literacy development throughout the year, which is required in some state-wide literacy policies. Because of this and the findings in this study, I suggest two actions on the part of the policymakers in the future.

First, as part of the policy implementation cycle, politicians evaluate the effectiveness of the policy using policy feedback (Mitra, 2018). When reviewing the policy feedback, it will be clear that the loosely coupled bottom-up approach (Mitra, 2018) does not work for a state-wide policy in education unless there are significant support systems built into the policy or implementation to guide policy actors. This type of implementation turns into a large version of the telephone game as information passed through each tier in the communication pyramid it gets morphed into how the communicator interprets the message from the tier prior. Policymakers then could use the findings in this study as a type of policy feedback, and they could consider tightening up on the guidance with the policy.

Second, policymakers need to ensure they are including caregivers in the discussions prior to the policies being enacted. Caregivers from all races and ethnicities, religious

backgrounds, linguistic backgrounds, and lifestyles could be included in the conversation. All of these caregivers are tasked with supporting their child under the state-wide literacy policy, yet few of them are represented in the policy. Policymakers get credit for finding caregiver/school partnerships important enough to include in the policy, but they could offer more guidance to schools through the implement the policy and ensure all caregivers are represented and supported in this early literacy endeavor.

### **Caregivers**

While this study focused on caregivers' reports of the school outreach, caregivers can still gain valuable insight from the findings of this study. Caregivers are an important part of their child's literacy development (Cunningham, 2021; Edwards, 2004; Epstein et al., 2019; Volk, 2021), and they need to engage with schools to support their child effectively. The schools should not be the only policy actor trying to reach out, caregivers could also play an active role in the communication. The findings in this study speak to the importance of *two-way*, honest, and open communication (Epstein et al., 2019). Caregivers have a responsibility to receive this honest assessment of their child's literacy development. Caregivers could consider these opportunities as ones that will grow both their child academically and them as a caregiver. Epstein et al. (2019) calls this *parenting* when a caregiver supports their child as a student.

Further, caregivers could be honest with the school about their need for support. If the school requests something that is outside of a caregiver's capacity, the caregiver could inform the school (e.g., open, honest *two-way* communication). For this to happen, it will take the school and caregiver building a common trust between each other. Everyone is on a different level of understanding; schools could start to differentiate support so *all* caregivers can engage with the resources provided. When this shift occurs, caregivers likely will feel safer to reach out to the

school for support. Additionally, if schools prove to elicit negative feelings, caregivers could attempt to work through their ghosts from their own schooling (Lawrence-Lightfoot, 2003), specifically if those memories are prohibiting engagement with the school. Most importantly, this is a partnership, and therefore, both the school and the caregivers could do their part to make it work.

### **Limitations**

This study was not without limitations. In this section, I describe three limitations to the study in this paper. The recruiting methods served as one limitation in this study. I explain the time and financial constraints that limited this study. Lastly, I conclude with the methodological limits that are seen in work done through one-on-one interviews and surveys.

This study was conducted by recruiting participants through social media platforms. This meant that the pool of participants was limited to caregivers with access and willingness to engage in such platforms. Unfortunately, this privileged caregivers from specific subgroups and left others, like financially under resourced caregivers out of the study. I took great care to intentionally focus on areas with a diverse population of caregivers, but I did not consider whether they would be able to participate, like a MSFW that may not have access to a smart phone or internet access. I utilized the digital format of the survey because it allowed caregivers to translate the survey into their preferred language. While I did not aim to privilege one group of caregivers over another, I did not recruit participants through schools to avoid the schools choosing who participated, thereby ensuring caregivers' responses were independent from schools. Further, because I did not have physical access to any of these locations during the data collection period of the study, I relied on an alternative recruitment strategy. For this reason, I

chose a social media platform to recruit participants. In the future, I would choose to explore other recruitment strategies, including visiting communities that I want to recruit from.

Another reason for choosing the recruitment strategy I used was due to another limitation to this study. Given the limited time and financial resources, I did not provide translation services in Bangla to bridge the language gap between the participants and me. This limitation privileged the primarily English-only caregivers. Given more resources in the future, I plan to hire translator(s) to gain a stronger, linguistically diverse sample and provide opportunities for participants to delve deeper in the language of their choice.

Finally, the methods used to collect data come with some limitations. With survey data it is difficult to discern the level of truth with the responses. The responses rely on caregivers' self-reporting. The same was true with the interview responses. Although the study is not without limitation, these limitations provide opportunities for future research.

### **Future research**

The limitations of this work created solid opportunities for future research. In this section I detail how time and financial resources could have informed this study. I describe other avenues around caregiver/school partnerships that could be explored in the future. Concluding this section, I detail how to incorporate student achievement into this work.

If I had more time with this project, I would have visited each of the four focal areas and recruit participants from other spaces (e.g., faith-based locations, libraries, workplaces, etc.). I would also visit the farms and fields where the MSFWs work. Listening to the MSFWs perceptions of how schools support their unique situation would bring a much-needed perspective and would provide a rich source of data from a viewpoint that rarely gets lifted up. I would have also worked with a translator in the urban space, Sandhill, and communicate

candidly with caregivers who prefer to speak their home language(s) rather than English. These are the caregivers I hope to communicate with in the future.

This study should not be the last time caregivers' voices are utilized to tell their story with any education research. Rather, the sharing of these findings and this discussion seek to provide a standard of continuing to include actual voices through direct quotations (Lumby, 2007) and maintaining a focus on caregivers as valuable partners in their child's literacy development. Future work could also examine the child's achievement and the role that the school/caregiver partnership plays in supporting the child's literacy development.

Beyond this study, future work could seek to include multiple policy actors and stakeholders within the same context. Additional work could be done to explore other policy actors' interpretation of the caregiver/school partnership. While this project did not focus on the schools' perception of the situation, future work could include this perspective. As an equally important member in the partnership, it would be intriguing to see whether the findings in this study align with schools' perceptions of their own outreach to caregivers. Having both sides of the partnership share their thoughts allow for researchers to determine if any disconnect exists. Further, future studies could attempt to determine the causal nature of any disconnect and what schools and caregivers might do to overcome such differences. It will be important to gain insight from caregivers and school personnel within the same context (i.e., same school, same geographic location, etc.) to determine what might be supporting or hindering a strong partnership. Policymakers and the research community would be able to hear the voices from multiple sides of the caregiver/school partnership. It could potentially offer ideas for everyone on how to build stronger partnerships in the future.



Beyond just examining the relationship between caregivers and schools, it would be informative to investigate the impact of such high-functioning partnerships on a child literacy development. The goal of state-wide literacy policies is to ensure that a child can read on grade level by third grade (Weyer, 2018). With that goal, it would be important to determine whether the key elements of the policy are having any effect on child's achievement. We know that caregiver engagement has a positive impact on a child's achievement (Compton-Lilly et al., 2019; Cunningham, 2021; Edwards, 2004; Edwards et al., 2018; Smith, 2020; Volk, 2021), but do the specific mandates outlined in the policy around caregiver engagement have any impact on the child's literacy achievement.

### **Significance**

Caregivers play a vital role in a child's educational journey (Compton-Lilly et al., 2019; Cunningham, 2021; Edwards, 2004; Edwards et al., 2018; Smith, 2020; Volk, 2021). In this study, I discovered how the often-silenced caregivers perceived the schools' outreach and what the caregiver wanted from the school partnership. In addition, I uncovered how few resources to support literacy development are posted for caregivers and children on the schools' websites. Together, these conclusions illustrated the importance for schools to consider what and how they are communicating with caregivers around literacy development of a child. Further, it is necessary for caregivers and schools to align their partnership practices to the current research in an attempt to best support a child in their literacy development.

Using the findings in this study, regardless of the level of engagement outlined in the policy, schools could consider who the caregivers (and their children) are in their schools (e.g., see Demographic Profiles in Edwards (2016) or Creating a Community Profile in Edwards et al. (2018). This study demonstrated that caregivers have a desire to share in the responsibility, and

they are willing to work with their child at home on literacy activities. Schools could capitalize on this but in a manner that takes into consideration the situations of the caregivers (and their children).

Lastly, the atmosphere is ripe for a focus on caregiver engagement due to politicians bringing parental engagement/rights to the forefront of their campaigns. This is the time for schools to utilize the findings in this study and the abundance of empirical work which offers guidance of how to build solid partnerships with caregivers. According to the findings in this study, caregivers report being ready to partner with schools, ready to support their children at home, and ready to be seen and heard by schools in an equitable way.

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## APPENDIX A: PARTICIPANT CONSENT FORM

### **Research Participant Information and Consent Form**

**Study Title:** Caregiver perception of school outreach regarding PK-3 literacy development

**Researchers and Title:** Darreth Rice, PhD. candidate; Patricia A. Edwards, PhD.

**Department and Institution:** Department of Curriculum, Instruction, and Teacher Education, Michigan State University

**Address and Contact Information:** 2695 Springmill Ave SE, Grand Rapids, MI 49546; 231-631-4416

**Sponsor:** Dr. Patricia Edwards

#### **1. PURPOSE OF THE RESEARCH:**

This study intends to discover what caregivers believe about the outreach schools have done to support their children's literacy development. The primary research question that will guide this study is: *What do families say about the outreach from schools regarding Michigan's Read By Grade Three policy?* The data collected in this study will be used to draw conclusions to support teachers and schools with building a more useful plan to engage with caregivers and students beyond the classroom walls.

#### **2. WHAT YOU WILL DO:**

With your consent, the researcher will utilize the responses from the survey. The researcher may also invite you to participate in a small focus group with other participants. Focus groups are anticipated to last approximately 30-45 minutes and will be conducted via Zoom without cameras on (audio recording only). A follow-up email and/or brief 10-minute conversation may be necessary to clarify any unclear information.

#### **3. PRIVACY AND CONFIDENTIALITY:**

The records of the study will be kept private. In any report made public, the researchers will not include any information that will make it possible to identify you. When presented or published, all information will be anonymized. Audio recordings and other data will be kept confidential and will only be accessible to the researchers.

Records shall be retained for at least 3 years after completion of the research.

Information that identifies you will be removed from the survey and focus group data. After such removal, the data and any recordings could be used for future research studies without additional informed consent from you.

#### **4. YOUR RIGHTS TO PARTICIPATE, SAY NO, OR WITHDRAW:**

Participation in this research project is completely voluntary. You have the right to say no. You may change your mind at any time and withdraw. You may choose not to answer specific questions or to stop participating at any time. Whether you choose to participate or not will have no effect on you.

**5. POTENTIAL RISKS AND BENEFITS:**

This project is considered to be minimal risk. The risks associated with this project are the same as what you face every day.

The potential benefit to you for taking part in this study is for your voice as a caregiver to be heard. Your participation may lead to improvements in your child's quality of education and for other children as well.

**6. COSTS AND COMPENSATION FOR BEING IN THE STUDY:**

There is no cost to you for participating in this study. There is no compensation for taking part in this survey. If you are chosen for a focus group, you will be compensated with a \$25 gift card.

**7. CONTACT INFORMATION FOR QUESTIONS AND CONCERNS:**

If you have concerns or questions about this study, please contact the Principal Investigator, Dr. Patricia Edwards, at edwards6@msu.edu or doctoral candidate, Darreth Rice, ricedarl@msu.edu, or by regular mail at 620 Farm Ln., Room 262, East Lansing, MI, 48824.

If you have questions or concerns about your role and rights as a research participant, would like to obtain information or offer input, or would like to register a complaint about this study, you may contact, anonymously if you wish, the Michigan State University's Human Research Protection Program at 517-355-2180, Fax 517-432-4503, or e-mail irb@msu.edu or regular mail at 4000 Collins Rd, Suite 136, Lansing, MI 48910.

**8. DOCUMENTATION OF INFORMED CONSENT:**

By submitting this form (survey), you agree to participate in this study. If you are chosen to participate in a focus group, you will be contacted at the number provided in this form.

## APPENDIX B: SURVEY PROTOCOL

### **Demographic Information**

1. Grade of your child (options PreK, K, 1, 2, 3)

PreK   K   1   2   3

2. Race/Ethnicity

Asian   Black or African American   American Indian or Alaska Native  
Latino   Native Hawaiian or Pacific Islander   White   Other   Prefer not to respond (for two  
or more race/ethnicities, please select all that apply)

3. What language do you mostly use at home?

Arabic   English   American Sign Language   Spanish   Mandarin  
Chinese   Other: please specify   If two or more languages are used equally,  
please select all that apply.

4. Gender

Female   Male   Non-binary

5. SES (socioeconomic status)-household income

>25,000   25,001-50,000   50,001-75,000   75,001-100,000  
100,001+

6. What type of school does your child attend?

(public, private, charter)

7. Has your student been retained (held back) prior to this school year?

Yes   No   Tentative Promotion   Unsure

8. Last year school year (2020-21), what percentage of the school year did your child spend  
learning *face-to-face* in a school building?

0-25%   26-50%   51-75%   76-100%

9. Which best describes the location of the school your child attends?

urban, suburban, rural

**School Outreach-physical materials**

10. What materials have you received this school year (2021-22) from your child's school?

a. Read-at-home activities

Daily      Weekly      Monthly      Quarterly      Not Yet

b. Books to read with your child

Daily      Weekly      Monthly      Quarterly      Not Yet

c. Suggested activities that align with your home practices (for example, how to incorporate literacy activities into grocery shopping or making dinner)

Daily      Weekly      Monthly      Quarterly      Not Yet

d. Homework packets

Daily      Weekly      Monthly      Quarterly      Not Yet

e. None

Daily      Weekly      Monthly      Quarterly      Not Yet

f. Other: please explain:

Daily      Weekly      Monthly      Quarterly      Not Yet

11. My child's literacy progress has been explained to me in a clear and understandable way.

Strongly Disagree      Disagree      Neutral      Agree      Strongly Agree

12. My child's literacy progress has been shared with me this school year (2021-22): (choose the number of times each option has been shared with you)

- Verbally via a conference      0-1      2-3      4-5      5+
- Received a paper with charts/graphs that was explained by school personnel

- Received a paper with charts/graphs only      0-1      2-3      4-5      5+
- Have not received anything      0-1      2-3      4-5      5+

13. When given activities to complete at home, we can complete them.

Never      Almost Never      Sometimes      Almost Always      Always

14. I trust the school personnel to successfully support my child in their literacy development.

Strongly Disagree      Disagree      Neutral      Agree      Strongly Agree

15. Have you attended parent workshops (virtual or in-person) when the school offered

them? Yes (virtual or in-person)      No      No workshops held

## Caregiver Preferences for School Outreach

16. How would you like to partner with your child's school to support your child's literacy achievement? (Choose all that apply)

At home activities

Attending workshops at school

Supporting instruction in the classroom

Viewing videos to support at-home activities

Participating in community literacy events (library activities, religious activities)

Other, please explain

17. How likely would you use the following resources provided by the school to support you in working with your child in literacy? (Choose all that apply)

Offer clear and complete directions

highly likely   somewhat likely   somewhat unlikely   highly unlikely

Offer videos online demonstrating what I am supposed to do

highly likely   somewhat likely   somewhat unlikely   highly unlikely

Face-to-face demonstration

highly likely   somewhat likely   somewhat unlikely   highly unlikely

Workshops (so I can practice)

highly likely   somewhat likely   somewhat unlikely   highly unlikely

Other: please list

highly likely   somewhat likely   somewhat unlikely   highly unlikely

18. What activities are you able to do at home to support literacy achievement?

Read to my child	Daily	Weekly	Monthly	Quarterly
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Read with my child	Daily	Weekly	Monthly	Quarterly
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Listen to my child read	Daily	Weekly	Monthly	Quarterly
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Talk with my child about books/schoolwork	Daily	Weekly	Monthly	Quarterly
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Word play/silly word games	Daily	Weekly	Monthly	Quarterly
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Phonics skill practice	Daily	Weekly	Monthly	Quarterly
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19. What do you feel is the biggest roadblock to you partnering with your child's school to support literacy achievement? (*Rank in order of biggest to the smallest roadblock, 1 being biggest, 5 or 6 being smallest roadblock*).

Time	1	2	3	4	5	6
Multiple children to support in the home	1	2	3	4	5	6
Tiredness	1	2	3	4	5	6
Fear of doing it wrong	1	2	3	4	5	6
Lack of clarity on instructions	1	2	3	4	5	6
Other: please list	1	2	3	4	5	6

**Focus Group Invite:**

If you are willing to participate in a focus group regarding how schools support caregivers, please fill out your name, email, and phone number. Individuals selected for focus group participation will receive a \$25 gift card following the virtual focus group.

Name:

Email:

Phone:

Best time of day to contact me: Mornings (7 am-10 am) Midday (11 am – 3 pm) Evening (4 pm – 7 pm) Night (7 pm – 9 pm) Other: please specify



## APPENDIX C: RECRUITMENT FLYER

*Michigan families!*

We want to hear from you about your child's school and their outreach.





Parents of children PK-Grade 3 currently enrolled in a Michigan school, please take the quick online survey.

You can access the online survey by,

- Scanning the QR code above with your smartphone OR
- Clicking on this link, <https://bit.ly/mifamilies>

We need your opinion to

- create a better system of support for early literacy
- help determine better ways to build relationships between families and schools
- determine resources to provide families to better support their children

*For questions or if you need assistance completing the survey, please contact Darreth R. Rice, Michigan State University at [ricedar1@msu.edu](mailto:ricedar1@msu.edu)*

## APPENDIX D: ONE-ON-ONE INTERVIEW QUESTIONING ROUTE

### **Focus group (rural, urban, suburban) – Participant Name**

Tell me about the best way the school has partnered with you to support your child's literacy development.

Tell me about a time when you felt you needed help to work with your child at home. (Did you feel comfortable asking for help?)

What reservations do you have about working on literacy at home?

In an ideal world, how do you feel a school should partner with families to support literacy development?

What do you think needs to happen for our schools to achieve the goals of RBG3 (every 3<sup>rd</sup> grader reading on grade level at the end of that year)?

In what ways could a school be more inviting to families?

Do you use online resources posted by the school (including a parent portal)?

What are some examples of literacy (reading/writing) resources your child's school had given to you to work on at home?

Is there anything else you would like to share or that you think schools/policymakers should know?

APPENDIX E: LIST OF SCHOOLS INCLUDED IN THE THEMATIC CONTENT  
ANALYSIS

Table 44

*List of Schools Included in the Thematic Content Analysis*

School Name	School Name	School Name
Achieve Charter Academy	Jackson Early Childhood Center	
Alpine Elementary	KI Sawyer Elementary School	St. Isadore Catholic Elementary School
Amish School #1	Lapeer Co. Education and Technology Center	Steppingstone Center for the Potentially Gifted
Battle Creek Christian School	Loon Lake Elementary	Thomas Read Elementary School
Blanche Sims Elementary School	Mayville Elementary	Uriah H Lawton School
Cadillac Heritage Christian School	McBain Elementary School	Wegienka Elementary School
Charlotte Mason Community School	Montessori Academy of Davison	Woodland Elementary School
Community Baptist Christian school	Newaygo Elementary School	
Custer Elementary School	Oakman Elementary School	
Dresden Elementary	Palmer Park Academy	
Elva Lynch Elementary School	Pardee School	
Flagship Charter Academy	Pleasant View Elementary School	
Genesis Christian Academy	Richfield Early Learning Center	
Grandville West Elementary School	Salem Lutheran School	
Harvest Elementary School	South River Elementary School	
Home Education Site (GRPS)	St. Mary's Cathedral School	

Gray schools represent schools that were excluded from the study.

## APPENDIX F: FRAMEWORK FOR REVIEWING LITERACY RESOURCES

Table 45

### *Operationalized measures for coding family resources from schools/districts*

Measure	Codes	Theory (from framework)	Rationale for Inclusion
Grades targeted	Pre K=0 K=1 1=2 2=3 3=4	Edwards (2016)-intentionality with what families are asked to do	Knowing which grades are being supported by the resources.
Resource printed in English	English=0 Non-English=1	Edwards (2016)-knowing your demographics and supporting accordingly	Determining whether the resources offered are inclusive to each member of the community
Other languages available	Yes=0 No=1	Edwards (2016)-see above	Determining whether the resources offered are inclusive to each member of the community
Instructions for families	Copied verbatim	Bandura (1977)-can a family be successful with this Taylor (1983)-is this supporting child's achievement Edwards (2016)-intentionality with what we are asking families to do	Examining how the resource is being described and the level of instruction provided to the families who utilize the resource
Ease of instructions to follow	Difficult=0 Medium=1 Easy=2	Bandura (1977)-can families feel success with this level of instruction	Understanding the level of difficulty will support the level of family efficacy with a given resource

Table 45 (cont'd.)

Measure	Codes	Theory (from framework)	Rationale for Inclusion
Literacy components targeted	Phonics=0 Phonemic Awareness=1 Writing = 2 Comprehension=3 Vocabulary=4 Other phonological awareness (i.e., rhyming) =5	Edwards (2016)-is the resource directly targeted toward something in the grade level's curriculum?	Examining the intentionality of the resource to support the child's literacy development
Activity: What are they doing?	<ul style="list-style-type: none"> <li>• Potential a priori codes:</li> <li>• Reading to child</li> <li>• Child reading to parent</li> <li>• Word/letter hunt</li> <li>• Use of environmental print</li> <li>• Discussing book</li> <li>• Writing about experience</li> <li>• Writing about reading</li> <li>• Flashcards</li> <li>• Looking up unknown words</li> </ul>	Edwards (2016)-see above	See above

Table 45 (cont'd.)

Measure	Codes	Theory (from framework)	Rationale for Inclusion
Skill set needed to complete the activity	Possible a priori codes: <ul style="list-style-type: none"> <li>• Can family member read</li> <li>• Can family member write</li> <li>• Understands phonics</li> <li>• Understands rhyming</li> <li>• Can use technology</li> </ul>	Bandura (1977)-does the family member have the skill set to find success with the activity Taylor (1983)-is the family member engagement targeted toward child's achievement Epstein et al. (2019)-learning at home and parenting Edwards (2016)-is the resource considering the family's ability to support the child	Determine if a disconnect may exist between what is being asked of families and what they can do
Feasibility of completing the activity	Difficult=0 (cannot complete task without support) Medium=1 (can complete some or part of task without support) Easy=2 (can complete task with little effort and no support)	Bandura (1977)-efficacy of the family to support the child Edwards (2016)-is the resource considering the family's ability	To what extent might a family need support to complete activities in the resource

Table 45 (cont'd.)

Measure	Codes	Theory (from framework)	Rationale for Inclusion
Support available to the families with these activities	None=0 (nothing available) Some=1 (help feature or clarification available online) Full=1 (instructions on where to go or what to do for support, could include reaching out to teacher/administrator/interventionist)	Bandura (1977)-can the families find success with support/without support Edwards (2016)-does resource consider what families need to complete activity Epstein et al. (2019)-parenting/two-way communication to support families	Examining ways that families can reach out for support when helping the child at home using the resource.

# APPENDIX G: FULL BREAKDOWN OF SURVEY RESPONSES MINUS IDENTIFYING INFORMATION-RAW DATA

Table 46

## *Demographic Information: Survey Questions 1-9*

Grade of Child	Race	Language	Gender	Income	School type	Retention	Percent of in person learning	Geographic location
PreK 7 (23%)	Asian 2 (10%)	English 20 (100%)	Female 17 (85%)	25-50K 3 (15%)	Public 14 (70%)	Yes 0 0%	0-25% 4 (20%)	Rural 3 (15%)
K 5 (16%)	Black 9 (45%)*	Bengla 2 (10%)	Male 3 (15%)	51-75K 5 (25%)	Charter 6 (30%)	No 20 100%	26-50% 1 (5%)	Suburban 12 (60%)
1 <sup>st</sup> 7 (23%)	Middle East 1 (5%)*	Chaldean 1 (5%)		76-100 3 (15%)	Private 0 (0%)		51-75% 1 (5%)	Urban 5 (25%)
2 <sup>nd</sup> 3 (9%)	Latinx 2 (10%)			>100K 9 (45%)			76-100% 14 (70%)	
3 <sup>rd</sup> 9 (29%)*	White 8 (40%)*							
N=31	Two or more 2 (10%)							

Table 47

## *Frequency of Resources Received: Survey Question 10*

Frequency	Read at Home	Books to read	Homework Packets	Activities that align with home	Nothing	Other
Not Yet	3 (15%)	2 (10%)	7 (35%)	11 (55%)	16 (80%)	17 (85%)
Daily	4 (20%)	3 (15%)	3 (15%)	3 (15%)	1 (5%)	2 (10%)
Weekly	9 (45%)	8 (40%)	8 (40%)	2 (10%)	2 (10%)	1 (5%)



Table 47 (cont'd.)

Frequency	Read at Home	Books to read	Homework Packets	Activities that align with home	Nothing	Other
Monthly	2 (10%)	3 (15%)	1 (5%)	2 (10%)	0 (0%)	0 (0%)
Quarterly	2 (10%)	4 (20%)	1 (5%)	2 (10%)	1 (5%)	0 (0%)

Table 48

*Communication of Child's Literacy Progress: Survey Questions 11-16*

Progress explained in understandable way	Freq. of progress shared verbally in conf.	Freq. of progress shared via paper explained	Freq. of progress shared via paper not explained	Freq. of not receiving anything yet	Freq. of ability to complete activities	Trust in school personnel	Attended workshop
Strongly Agree 4 (100%)	0-1 5 (25%)	0-1 11 (40%)	0-1 8 (40%)	0-1 17 (85%)	Some 2 (10%)	Strongly agree 8 (40%)	Yes, virtual 4 (20%)
Agree 13 (65%)	2-3 13 (65%)	2-3 6 (30%)	2-3 10 (50%)	2-3 2 (10%)	Most of the time 6 (30%)	Agree 10 (50%)	Yes, in person 4 (20%)
Neutral 1 (5%)	4-5 0 (0%)	4-5 2 (10%)	4-5 2 (10%)	4-5 0 (0%)	Always 12 (60%)	Neutral 2 (10%)	No 2 (10%)
Disagree 2 (10%)	>5 2 (10%)	>5 1 (5%)	>5 1 (5%)	>5 1 (5%)		Disagree 0 (0%)	None offered 10 (50%)
Strongly Disagree 0 (0%)						Strongly disagree 0 (0%)	

Table 49

*Likelihood of Using Resources from School: Survey Question 17*

Likelihood	Activity with clear written direction	Activity with video directions	Face-to-face demonstration of activity	Workshop	Other
Highly Likely	11 (55%)	10 (50%)	9 (45%)	7 (35%)	7 (35%)
Likely	8 (40%)	9 (45%)	9 (45%)	12 (60%)	5 (25%)
Unlikely	1 (5%)	1 (5%)	2 (10%)	1 (5%)	3 (15%)
Highly Unlikely	0 (0%)	0 (0%)	0 (0%)	0 (0%)	5 (25%)

Table 50

*Frequency of Activities Willing to Complete at Home: Survey Question 18*

Frequency	Read to child	Read with child	Listen to child read	Talk about books/schoolwork	Word play	Phonics	Sight words	Other
Daily	16 (80%)	17 (85%)	16 (80%)	17 (85%)	12 (60%)	10 (50%)	10 (50%)	13 (65%)
Weekly	4 (20%)	3 (15%)	4 (20%)	3 (15%)	8 (40%)	9 (45%)	10 (50%)	3 (15%)
Monthly	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (5%)	0 (0%)	1 (5%)
Quarterly	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)	3 (15%)

Table 51

*Rank of Roadblocks that Inhibit Engagement: Survey Question 19*

Roadblock	Average	Rank
Time	1.8	Largest-1 <sup>st</sup>
Multiple children to support	2.54	2 <sup>nd</sup>
Tired after work	2.6	3 <sup>rd</sup>
Not understanding activity	3.9	4 <sup>th</sup>
Other	4.59	5 <sup>th</sup>
Fear of doing activity wrong	4.85	Smallest-6 <sup>th</sup>