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Communicating with Parents

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Communication and the exchange of information are key components of the relationships between parents of young children and the staff of programs that serve them. In order for information to be useful, however, parents must be able to comprehend it. Professionals who work with families are likely to be more effective when they are aware of how aspects of their own communication practices may affect parents' ability and willingness to engage with a program in the interests of their children. Although little quantitative research exists on effective communication strategies, this Digest discusses the limited research and literature on parents' intellectual and physical access to information provided by programs that serve young children.

Intellectual Access to Information

Intellectual access to information is a concern in information studies; parents cannot use information that they cannot understand. Access to information can be seriously compromised by differences in reading level and home language, and by understanding of jargon and vocabulary, among parents and program staff.

Reading Level. The reading level of written material can affect its usefulness to readers. Parents can readily understand easy-to-read materials; more difficult materials may confuse some readers or be ignored. Yet studies suggest that print materials for parents of young children are often written at levels too difficult for a significant part of their intended audience. Analysis of 107 sets of child safety seat instructions (Wegner & Girasek, 2003), for example, revealed that all the instructions were written between 7th- and 12th-grade reading levels, which meant that parents with lower literacy skills were less likely to fully understand them. Similarly, in a readability evaluation of 33 sets of pediatric patient education materials for parents, Klingbeil, Speece, and Schubiner (1995) found that most of the materials examined had readability levels of 9th grade or higher, making them potentially inaccessible to parents with lower literacy skills or to second-language English speakers.

Home Language. Language differences may cut parents off from important information and prevent them from sharing their own knowledge with the professionals who are involved with the family. For example, researchers in a British study found that communication about asthma symptoms was challenging for doctors even when parents spoke English, because not all parents used the same terms to describe their children's breathing sounds. When parents and physicians communicated through translators, the situation became even more complicated because some of the languages used by parents apparently had no equivalent for the term "wheeze" (Cane, Ranganathan, & McKenzie, 2000).

In a 10-year ethnographic study of literacy practices in a Hispanic community in a small coastal town in California, Delgado-Gaitan (1996) recorded how Hispanic (primarily Mexican American) parents experienced frustration over school-to-home communications. As non-native speakers of English, they had difficulty understanding what teachers and school officials wanted of them. They responded to the problem by creating an organization to improve their access to information from schools.

Jargon. Research in medicine and in education confirms the conventional wisdom that when professionals use technical terms and jargon without sufficient explanation, parents may not understand key information about their children. In a longitudinal qualitative study of 36 low- to middle-income African American families of young special education students, parents told the researchers that professional jargon made it difficult to understand what was being said about their children (Allen, Harry, & McLaughlin, 1993). On the other hand, in a British study that used a semi-structured interview with 95 parents of children with acute viral illnesses, a majority reported that although they did not want jargon, they also did not want the doctors to omit technical information that would help them make sense of their children's condition (Kai, 1996). These findings suggest a need to give high priority to developing ways to help parents move from one level of understanding to another when complex situations call for complex explanations.

Vocabulary. Additional insight into the kinds of vocabulary challenges that parents and professionals may face during their interactions can be found in a report by Serpell and colleagues (1996) on the Cooperative Communication Project conducted in four pre-kindergarten and kindergarten classrooms in Baltimore. A preschool teacher involved in the study recounted being confronted by a mother who claimed that the teacher had called her a "bad" name. The teacher had refused to let the child go with the sitter, saying that the mother was "adamant" about not releasing the child without a note from her. The sitter was not familiar with the word "adamant" and told the mother that the teacher used "a cuss word." Such reports suggest that professionals need to be mindful of their spoken vocabulary, as well as what they write, when working with parents who may have lower levels of literacy.

Physical Access to Information

Distance and sensory or physical disabilities may impede access to information. Programmatic factors such as scheduling may also interfere with people's ability to connect with information sources.

Geographic Factors. Sparse population and difficult terrain can make it especially difficult for programs to connect with parents in some rural areas (e.g., Alaska, Appalachia) (Beeson & Strange, 2003). Distance between homes and program sites contributes to the challenges. In a report of their ethnographic study of Head Start/Public School Transition programs in six rural South Dakota towns, Allen and colleagues noted that, although some of the sites could be considered "the centers of their communities" and a focal point of parental involvement, other school sites were not. Parents tended not to see schools as a focal point when children had to be bused to school in a neighboring

community, when families in the community were highly mobile, or when a number of parents were employed outside the community where the school was located (Allen, Thompson, & Drapeaux, 1996, p. 17). In another publication based on the same study, the authors reported finding that home visitors (family service coordinators) were viewed as important links when children's programs were located in communities distant from their homes (Allen et al., 1997).

Disability. The difficulties that people with disabilities face in gaining access to information have been framed as aspects of "social exclusion" (Gleeson, 1998, in a discussion of disability and technology in urban settings). Typical written materials are of little use to visually impaired people, and services or information offered in spaces without accommodations for wheelchairs or walkers may be inaccessible to individuals with physical handicaps. It appears that, overall, information access for parents with disabilities has not received much attention in the research literature.

Hoffmeister (1985) notes, in a discussion and review of literature regarding families with deaf parents, that technological advances have improved communication between deaf and hearing people (pp. 125-126). On the other hand, as Gleeson (1998) points out, assistive technology cannot completely overcome the exclusion some parents are likely to experience from mainstream activities (pp. 88-89).

Programmatic Factors. As suggested by the work of Powell (1989) and Endsley and Minish (1991), the structure of the day in an early childhood program may limit contact between parents and child care providers so that high priority is placed on the exchange of information during transition times (i.e., when children are dropped off and picked up). In cases when parents do not enter a facility during transition times, they and the caregivers may not have access to important information about children or the program.

Descriptions of some early childhood programs indicate that special provisions are sometimes made to ensure that parents have access to information that they need. "Parent centers" and "family resource centers" are areas set aside for parents to facilitate their access to information and other resources. Parent room activities in the Chicago Child-Parent Centers, for example, include parent reading groups and inservice training sessions for parents in "child development, financial management, cooking, and home economics" (Reynolds, 2000, p. 41). In case studies of four programs with parent centers, Johnson (1994) describes what is offered by one center, including visits from representatives of community agencies; a bulletin board with job listings, courses, and contact information for community agencies; and learning games created by teachers for parents to take home with them. In interviews with parents who used the centers, Johnson (1994, pp. 38-41) found that some parents reported that the centers provided information and experiences that helped them better understand how to take a more active role in their children's education.

As Internet access becomes more common among low-income families, some problems related to physical access to information are likely to diminish. The impact of Internet use on parent-program communications has yet to be studied in depth.

Conclusion

Communication is an intrinsic part of any relationship, including relationships between parents of young children and the staff of programs that serve them. The ideal is two-way open and frequent communication between parents and the people outside the family. This type of communication increases the likelihood that the exchange of information can be coordinated and provided in ways that have a direct or indirect positive impact on children's development.

For More Information

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