Promoting Preschool Quality Through Effective Classroom Management

IMPLEMENTATION LESSONS FROM THE FOUNDATIONS OF LEARNING DEMONSTRATION

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DECEMBER 2009

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BUILDING KNOWLEDGE
TO IMPROVE SOCIAL POLICY

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Foundations of Learning Funders

The findings and conclusions in this report do not necessarily represent the official positions or policies of the funders.

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Overview

The Foundations of Learning (FOL) demonstration evaluated a strategy to enhance the quality of preschool programs by promoting emotionally positive, behaviorally supportive classrooms. The program model includes intensive training in classroom management skills for lead and assistant teachers; weekly in-class support from a master's-level clinician, called a Clinical Classroom Consultant (CCC), to reinforce the lessons from the training; and a customized stress management workshop for teachers. The model also includes one-on-one clinical services for selected children who have not responded to teachers' enhanced classroom management skills by spring of the school year.

The FOL program was tested in Newark, New Jersey, and Chicago, Illinois. The Newark program is the subject of this report. Because the Newark school system had already implemented enhancements that were mandated by the New Jersey Supreme Court's landmark decisions in the *Abbott v. Burke* class action case — which sought parity in school financing for poor urban districts — it provides an opportunity to examine the incremental effects of adding an emotionally and behaviorally based intervention to other quality-enhancement efforts.

Key Findings

- **The FOL program model was implemented with fidelity in Newark, suggesting that this intervention can be joined with other efforts to enhance the quality of preschool programs.** The teacher training was especially well attended, and teachers gave the workshops high ratings for quality. A substantial number of in-class and individualized consultations were provided, although fewer than the number scheduled. The stress management workshop, which program planners had thought would be a secondary part of the FOL intervention, turned out to be highly valued by the teachers.

- **Teachers incorporated the FOL techniques into their classroom management practices.** Teachers' comments underscored three key themes: (1) the supportive relationships with the CCCs and the strengthened relationships between lead and assistant teachers were important; (2) the creation of a learning community helped reduce teachers' sense of isolation by providing opportunities for collaboration and information sharing, both between teachers in the same classroom and with teachers in other FOL programs; and (3) teachers felt reduced stress in their professional and personal lives.

- **The Newark experience provides a number of practical operational lessons.** Policymakers and administrators who are considering implementing similar programs should pay particular attention to the program design, management and staffing, and professional development issues that arose in FOL's integration of an emotionally and behaviorally based intervention into a large urban preschool system.

A preview of impact findings from Newark was released by MDRC in September 2009. Forthcoming reports on Newark and Chicago will provide additional important evidence regarding the feasibility, impact, and cost of implementing the FOL approach in two different settings.

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Preface

Policymakers are investing in early childhood education as a promising strategy for improving the school readiness of disadvantaged young children and for advancing their long-term academic success. But how can the quality of programs be maintained or enhanced when they are operated on a large scale? One critical aspect of quality is addressing children's emotional and behavioral development — that is, their ability to engage positively with peers and teachers and to focus their attention and behavior during classroom activities.

Evidence suggests that enhancing young children's healthy emotional and behavioral development is both an important outcome in its own right and can also be a pathway to improved academic achievement. However, preschool teachers in low-income neighborhoods report that between 15 and 20 percent of the young children in their classrooms exhibit clinically high levels of disruptive and challenging behaviors — to the detriment of both these students and their classmates. In survey after survey, teachers consistently emphasize their need for professional development and other supports to help them address children's behavioral issues.

This report offers lessons from the implementation of MDRC's Foundations of Learning demonstration in Newark, New Jersey. The project is evaluating a program model in Head Start programs, community-based child care centers, and public schools that provides intensive training in classroom management skills for lead and assistant teachers, weekly in-class support from a master's-level clinician — called a Clinical Classroom Consultant — to reinforce the lessons from the training, and a customized stress management workshop for teachers. The model also includes one-on-one clinical services for selected children who have not responded to teachers' enhanced classroom management skills by spring of the school year.

Early results from Newark (released in September 2009) suggest that the intervention has improved teachers' classroom management and productivity, reduced children's conflict with peers, and engaged students in the learning tasks of preschool. These promising early findings give researchers reason to further explore the idea that helping teachers manage their classrooms can improve the productivity and engagement of children in school — possibly putting them on a pathway to an improved experience in kindergarten and better academic success in the years beyond.

In early 2010, a full impact report on the Newark demonstration, including findings on children's transition into kindergarten, will be published. Results from the other Foundations of Learning site — Chicago — will be available in 2011.

Gordon Berlin
President

Acknowledgments

Executive Summary

Improving the school readiness of disadvantaged young children has become a high priority for officials at the federal, state, and local levels. Even as policymakers and program administrators embrace investments in preschool programs, they confront the challenge of maintaining the consistently high quality that is needed for these programs to make a long-term difference in children's lives. An important — but too often neglected — aspect of maintaining quality is addressing children's emotional and behavioral development.

The quality of the preschool experience can be disrupted when young children's level of emotional and behavioral development prevents them from properly adjusting to the classroom environment. This can create concerns for (1) the disruptive children themselves, who are more likely to face social, behavioral, and academic difficulties throughout their school careers; (2) their classmates, whose learning is impeded when teachers are diverted from instructional time to manage problem behavior; and (3) teachers, who may experience increased stress and burnout.

This report provides implementation lessons from Foundations of Learning (FOL), a demonstration project coordinated by MDRC, a nonprofit, nonpartisan education and social policy research organization, to test an intervention that trains preschool teachers to better manage children's behavior and provides them with in-class consultation from master's-level clinicians. The FOL program model was implemented in Newark, New Jersey, during the 2007-2008 school year and in Chicago, Illinois, during the 2008-2009 school year. The Newark program, which is the subject of this report, was conducted in close collaboration with the Newark Public Schools and was funded entirely by grants from private foundations.

The Foundations of Learning Demonstration

The Foundations of Learning demonstration focuses primarily on enhancing the quality of teacher-student interactions and increasing teachers' capacity to manage the classroom environment in order to promote children's social and emotional development. The intervention also includes targeted services later in the preschool year for selected children. FOL includes four components:

1. **Teacher training.** Lead and assistant teachers are invited to attend five Saturday training sessions, once a month for six hours each, from late September to January. The workshops provide training to help teachers develop positive relationships with children and their families; present classroom strategies teachers can use, such as setting clear rules, outlining predictable

limits, and instituting a discipline structure that minimizes classroom disruptions and avoids confrontation; and provide teachers with techniques to develop children's social skills, anger management, and problem-solving ability. Teachers are trained to use certain techniques liberally (such as praise, encouragement, and celebrations), while using others only selectively (such as loss of privileges).

2. **Classroom-level consultation.** To complement the training, teachers are assigned a master's-level Clinical Classroom Consultant (CCC) to work with them in the classroom one day per week throughout the school year. The CCC enters the classroom in September, before the first teacher-training workshop, to begin establishing close, supportive relationships with the teachers, children, parents, and school staff. The CCC plays an important role in modeling and reinforcing the content of the training sessions and in acting as a sounding board for teachers.

3. **Stress management.** Beginning in January or February, lead and assistant teachers participate in a customized, 90-minute stress management workshop at their own program site. In the months leading up to and following the workshop, the CCC helps support the teachers' stress management skills and techniques.

4. **Individualized child-centered consultation.** Beginning in March, the CCC provides one-on-one clinical services for selected children who have not responded sufficiently to the teachers' improved classroom management. By design, the individualized clinical consultation is delivered only after teachers have completed their training and have had an opportunity to use their newly acquired techniques and after children have had ample time to react. The clinical services, which are provided primarily in the classroom, address specific behaviors that continue to inhibit the children's ability to negotiate the classroom environment.

The timing and sequence of FOL activities are depicted in Figure ES-1.

Overview of the Demonstration and Evaluation

FOL operated on a larger scale than most demonstration projects, with 26 program sites (constituting about 20 percent of all preschools in Newark). The demonstration operated in each of the three main types of preschool venues — Head Start programs, community-based child care centers, and public schools — roughly in proportion to these venues' representation in

Foundations of Learning Demonstration

Figure ES.1

2007-2008 Program Timeline

Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June

Monthly Workshops for Teachers

CCCs Enter Classrooms | In-Class Consultation by CCCs

Stress Management Workshop

One-on-One Services
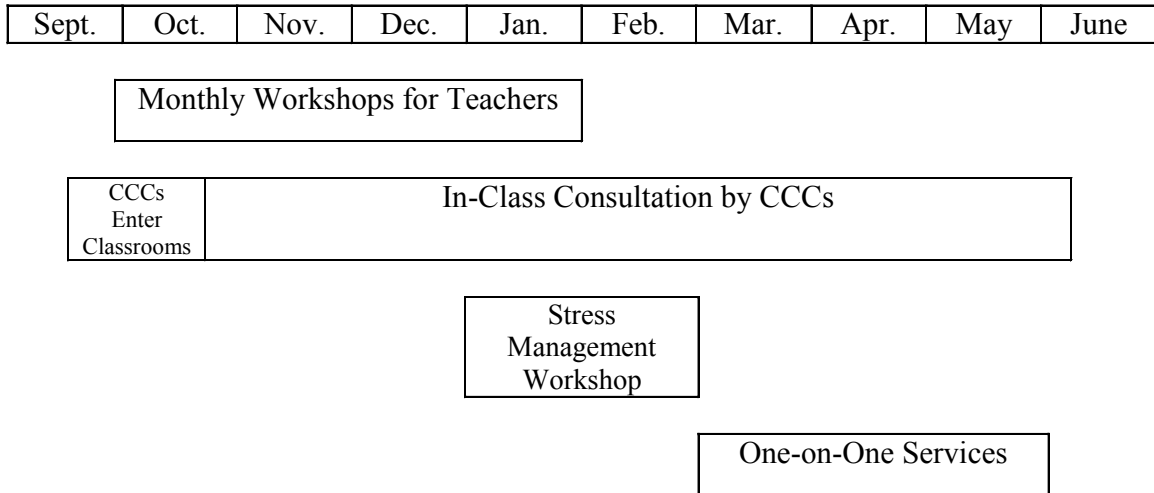
NOTE: CCC = Clinical Classroom Consultant.

the city's service delivery system. The vast majority of the children in FOL classrooms were four years old. MDRC played an important supportive role in the demonstration by identifying the project's flexible foundation grants, assisting with recruitment of CCCs, and providing technical assistance to help ensure that the program was implemented with fidelity to the model.

While it faces challenges common to many urban areas, Newark is ahead of most of the country in implementing structural changes to promote quality in preschools — including smaller class sizes, higher teacher salaries, and stricter teacher credential requirements — as a result of the New Jersey Supreme Court's *Abbott v. Burke* decisions, which required the state to increase education funding in disadvantaged districts. For example, preschool classes in Newark are limited to 15 children, and each classroom has both a lead and an assistant teacher. The FOL demonstration, therefore, provides an opportunity to examine the incremental effect of adding this type of intervention over and above other resource-intensive efforts to enhance quality.

To measure this effect, a key part of the FOL demonstration in Newark was a rigorous impact analysis, in which 51 preschool classrooms were randomly assigned to one of two groups: the 26 classrooms that received the FOL intervention, and 25 classrooms in a control

group that operated their regular program without the enhanced FOL services. A similar research design is also being used to evaluate the Chicago FOL demonstration.

This report on the FOL demonstration describes the background of the intervention, the operating context and implementation experience in Newark, and early operational lessons for policymakers and practitioners interested in mounting similar programs. The information comes from a diverse set of data sources, including administrative records, field observations and interviews, teacher surveys, systematic field documentation by CCCs, and focus groups with teachers. A preview of findings on FOL's impact in Newark was released in September 2009. Forthcoming reports will present complete findings on the impact of FOL on the classroom environment and teacher and child outcomes in both Newark and Chicago, as well as a benefit-cost analysis of FOL in Chicago.

Findings

Was the Foundations of Learning Demonstration Implemented as Intended in Newark?

On the whole, the Newark experience provides a solid basis for evaluating the impact of a program that was implemented with reasonable fidelity to the FOL program model.

- **Both the dosage (frequency) and quality of the teacher training workshops were especially high.**

The training workshops were well attended: for instance, 22 of the 26 lead teachers received the full dosage (defined as attending at least four of the five sessions, since the fifth one was a refresher session). Teachers who attended at least one session received an average of about 26 hours (out of a possible 30) of curriculum content. The teachers gave high ratings (between 4.6 and 4.7 on a scale of 5.0) when asked whether the training content was clear, the training environment was conducive to learning, the trainers themselves were effective and clear, and the training enhanced the teachers' professional development.

- **The dosage of classroom consultation that CCCs provided to teachers was less than the full amount scheduled, but it exceeded what is typically offered in early childhood consultation models. Teachers gave high ratings to the quality of the consultation.**

CCCs provided an average of just over 162 hours (or about 23 days) of in-classroom consultation over the course of the academic year. Although reporting methods differ, it appears that the FOL dosage was well above that of other programs described in the research literature. Teachers rated the CCCs between 3.6 and 3.8 on a scale of 4.0 with respect to their effective-

ness in helping the teachers work on classroom management techniques, work on building relationships with children, and spend more time teaching.

- **Stress management workshops turned out to be more important to teachers than program planners had expected. Virtually all of the teachers attended their on-site workshop and rated it highly.**

Originally considered to be a relatively minor part of the FOL model, the stress management component turned out to be of great interest to the participating teachers. The teachers felt considerable stress in both their personal and professional lives, and they believed that stress in one part of their lives affected how they handled other parts. Particular concerns included managing deadlines, dealing with difficult colleagues, a lack of personal autonomy and self-efficacy at work, domestic violence, financial challenges, physical and mental health, and the management of familial responsibilities.

- **The individualized, child-centered consultation provided by the CCCs addressed a number of emotional and behavioral challenges. However, the dosage of consultation fell short of the amount expected in the FOL program model.**

A total of 63 children received one-on-one consultation, an average of 2.4 children per FOL class. The children presented with (1) externalizing issues, such as physical aggression (for instance, hitting), verbal aggression (taunting and bullying, for example), tantrums, impulsivity, and hyperactivity; (2) internalizing issues, such as anxiety, extreme shyness, and reduced socialization with peers; and/or (3) cognitive and behavioral challenges, such as an inability to focus, decreased ability to self-regulate, and delays in language acquisition and expressiveness. The Newark FOL model envisioned that the CCCs would conduct approximately 12 one-on-one sessions with each identified child. In actuality, the CCCs conducted an average of 4.7 sessions per child.

Did Teachers' Classroom Practices Change Over the Course of the Year?

- **Teachers appeared to adopt the FOL techniques and incorporate increased attention to children's social and emotional development.**

In focus groups, teachers said that the training and in-class support led them to use the new FOL techniques they had learned. CCCs also reported that, by January or February, teachers had substantially increased their use of the types of classroom-management techniques that the FOL intervention taught. The teachers' and CCCs' perceptions are consistent with the impact data (presented in other reports) comparing FOL classrooms with control classrooms. Those data show that FOL improved teachers' classroom management (reflecting measures

such as teacher sensitivity, management of student behavior, and classroom climate), classroom productivity (reflecting effective use of classroom time, including reduced down time), and engagement of students (reflecting students' focus and participation in learning activities).

What Factors Contributed to the Changes in Teachers' Practices?

- **Three key themes emerged as principal causes of the changes in teachers' practices: (1) collaborative relationships specifically among and between teachers and CCCs, (2) increased cooperation and information-sharing in general, and (3) reduced stress in teachers' professional and personal lives.**

The FOL intervention contributed to new, supportive relationships between teachers and CCCs, as well as strengthened relationships between lead and assistant teachers. Teachers attributed this to, among other things, the CCCs' enthusiasm for the FOL intervention, their immersion in the classroom, and the respectful manner with which CCCs determined when to praise, guide, support, and challenge the teachers. Teachers also cited the opportunities for ongoing learning, reflection, and practical feedback. This included the engagement of both the lead and the assistant teachers, whose collaboration began with joint attendance at the monthly training workshops and continued to be nurtured by the CCCs throughout the school year. Teachers also felt that their improved classroom management skills, increased personal and professional insights, and efforts to change their personal lives all led to reduced stress, which they felt benefited both themselves and the children in their class.

Lessons for Adopting Programs Similar to Foundations of Learning

The findings in this report should be interpreted in light of the particular context in which FOL operated, including the well-above-average resources available to Newark preschool programs and the short-term nature of the FOL demonstration. The following implementation lessons should also be considered preliminary since data on the full effects of the FOL demonstration on teachers, children, and the classroom environment are not yet available.

- **An emotionally and behaviorally based intervention such as FOL can be joined with other efforts to enhance the quality of preschool programs.**

The FOL experience confirmed that the quality-enhancement efforts mandated by the *Abbott v. Burke* rulings did not fully address teachers' classroom management needs and that an intervention focused on children's social and emotional development can be integrated into these classrooms. Also, while Newark preschool classrooms used a particular curriculum (called

The Creative Curriculum), it appears that the FOL program model could be used in conjunction with a variety of classroom curricula.

- **FOL was implemented as an integrated, multicomponent program model.**

The quality of the intervention might be affected by modifications, such as reducing the number of training sessions, the days of in-class consultation, or the level of skills, training, or supervision of the CCCs. Also, assigning CCCs to more than the four classrooms they each served in the FOL demonstration could compromise the important time needed for planning, reflection, and building relationships with teachers and children in each classroom.

- **The program design should take into account teachers' level of stress, the extent to which teachers feel isolated, and the need to strengthen the relationship between lead and assistant teachers.**

Teachers embraced the stress management component as an important opportunity to address the significant stress that they felt. FOL teachers also appreciated that the program helped to facilitate a level of cooperation and coordination, both within and across classrooms, that they had not previously experienced. Since lead and assistant teachers were viewed as a team (for instance, through joint attendance at training workshops), they developed common goals, a shared vision, and opportunities to learn and practice the FOL techniques together.

- **Particularly if run on a large scale, a program such as FOL requires an effective means to promote and coordinate the overall effort.**

The Newark experience confirms the feasibility of the FOL model in a major urban system but also suggests that implementation on a similar or larger scale requires some form of central coordinating mechanism, like that provided by MDRC in this demonstration. This will help create economies of scale and high quality in the recruitment, training, and supervision of CCCs; planning and conducting monthly training workshops for teachers who come from multiple programs across the city; developing linkages with other classroom support efforts; and providing a mechanism for CCCs and teachers to engage in ongoing reflection, feedback, and problem-solving. There appear to be considerable benefits to having a source of technical assistance with sufficient capacity and time to support the project.

- **Teachers valued the training workshops' depth of content, combination of sound theory integrated with real-world practicality, and sequencing of monthly training sessions.**

The Incredible Years training curriculum that was used in the teacher workshops has a sound research and theoretical basis, while also providing opportunities to incorporate real-

world issues that the teachers face in their classrooms. The FOL teachers emphasized that this weaving together of theory and practice helped to ground them in the strategies in a way that was particularly relevant to their everyday experiences. In contrast to what are sometimes one-time training sessions for teachers, the monthly FOL workshops built on each other: teachers received in-depth exposure to research-based content in workshops that were spaced to provide opportunities for them to test the FOL techniques between sessions, give feedback to the trainers, and see the feedback incorporated into subsequent sessions.

- **In organizing training sessions, careful attention should be paid to providing teachers with incentives to attend, to the number and type of attendees invited, and to other logistical matters, such as transportation, child care, and refreshments.**

The FOL training sessions were held on Saturdays, rather than as part of regular district professional development days, in part to facilitate joint attendance by lead and assistant teachers as well as by the CCCs. To encourage attendance, the demonstration provided the training in a central location with free parking and child care, the teachers were compensated, and hot meals and refreshments were provided.

With an average of 40 people attending each session, the FOL training workshops probably reached the maximum size at which they could be effective. Indeed, some teachers felt that the sessions were too large to foster full and open discussion. While larger groups would presumably reduce the cost per attendee, the sessions could become unwieldy. Center administrators and supervisors were not invited to attend the trainings because their presence could have discouraged teachers from sharing their views openly; however, administrators and supervisors should receive a separate orientation to the program so that they can support the classroom teachers.

- **It was important for the teacher training sessions to be reinforced by the CCCs' regular in-class consultation.**

Valuable as the training sessions were, the focus groups and surveys confirmed the importance of the CCCs' regular presence in the classroom to model proper techniques and provide feedback. The effectiveness of the training sessions, support from CCCs in the classroom, and teachers' observations of changes in children's behavior all combined to motivate teachers to use the FOL strategies.

- **Since CCCs need a combination of clinical, communication, and interpersonal skills, careful attention should be paid to recruitment and retention of qualified individuals.**

At its core, classroom consultation is a relational process. The CCCs certainly required clinical skills to provide effective classroom support, deliver one-on-one services for selected children, and deal with community issues that affected the programs. However, their strong interpersonal skills were equally important; these skills helped ensure quality interactions with teachers, other adults in the preschool setting, and children.

The FOL demonstration struggled to recruit and retain the required number of qualified CCCs, in part because the short-term nature of the demonstration meant that the CCCs could not be assured of employment for more than one year. Because of the importance of identifying CCCs with a particular combination of skills (which could also include proficiency in a language other than English), early and active recruitment efforts need to be in place; this challenge will be even greater if the program operates on a larger scale than FOL did in Newark. Similarly, retention of the CCCs is important to maintain continuity in their relationship with the teachers and children.

- **Consideration should be given to lodging the CCCs on the staff of an outside agency rather than employing them within the school system.**

MDRC contracted with Family Connections, a community-based counseling and family services agency, to provide physical space, clinical supervision, and administrative oversight for the CCCs. FOL teachers consistently stated that their working relationship with the CCCs was enhanced by the fact that CCCs were not employed by the school system and did not evaluate the teachers. This encouraged teachers to share their vulnerabilities and struggles without fear that it would have an impact on them professionally.

Conclusion

Coming at a time of increased interest in preschool programs, the findings from the studies of Foundations of Learning in both Newark and Chicago will provide important insights into the feasibility and impact of efforts to strengthen teachers' classroom management skills and promote children's social and emotional development. The operating experience in Newark indicates that the program can be implemented with fidelity, addresses a genuine need, and is valued by teachers. FOL could be a model worth replicating or adapting to promote high-quality preschool programs.

Chapter 1

Introduction and Policy Context

The school achievement gap between low-income children and their middle-class peers is widely viewed as a major cause of persistent poverty. Since the gap begins in early childhood, an increasingly popular policy response has been providing expanded funding for preschool programs. However, low-income children in these programs tend to experience greater difficulty in emotional and behavioral adjustment to the classroom, so additional supports may be needed to promote effective teaching and learning.[1]

MDRC, a nonprofit education and social policy research organization, coordinated the Foundations of Learning (FOL) demonstration in Newark, New Jersey, in the 2007-2008 school year, and in Chicago in the 2008-2009 school year, in response to this concern. Foundations of Learning is an intervention designed to improve young children's school readiness by promoting their age-appropriate emotional and behavioral development. The integrated FOL program model includes intensive classroom-management training for teachers; the training is reinforced by regular in-class support and supplemented by individualized services to selected children who might benefit from more intensive attention to their emotional and behavioral needs.

This report focuses on the implementation experience in Newark, New Jersey. It describes the background of the FOL demonstration, the operating context and implementation experience for the Newark component of the demonstration, and early operational lessons for policymakers and practitioners interested in mounting similar programs. A recent report provided a preview of the impact of the Newark FOL demonstration on such measures as the classroom environment, the amount and quality of instructional time in the classroom, and children's engagement in preschool learning. Later reports will present findings on the impact of FOL on outcomes both in Newark and in Chicago, as well as implementation lessons and a benefit-cost analysis of FOL in Chicago.

The Role of Emotional and Behavioral Development in School Readiness

Preschool teachers in low-income neighborhoods report that 15 percent to 20 percent of the children in their classrooms display clinically high levels of disruptive and challenging

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[1] Aber, Jones, and Cohen (2000); Dodge, Petit, and Bates (1994); Raver (2002).

behaviors.[2] This means that in a preschool class of 20, teachers may typically face three or four children who have serious symptoms of sadness, withdrawal, aggression, or disruptiveness. A recent well-publicized study found that expulsion rates from preschool classes were three times those of K-12 classes, with 10 percent of preschool teachers reporting that they had expelled at least one student in the past year.[3]

The consequences of this situation are significant for the disruptive children themselves, for their classmates, and for preschool teachers:

- Children who have not learned to regulate their behavior in preschool are more likely to face difficulties in adapting to the social and academic demands of elementary school. They are more likely to be delayed in language and overall cognitive functioning, score lower on tests of reading achievement, repeat a grade early in elementary school, and receive special education services. Not surprisingly, these children represent an especially large percentage of school districts' high-expenditure pupils.[4]

- Disruptive children may impede their classmates' learning because teachers are diverted from instructional time to attend to persistent acting out or disruptive behavior.[5] A study in Chicago found that, in the lowest performing quartile of preschool classes, fewer than 31 minutes in a 4-hour period were devoted to instructional time.[6]

- Teachers consistently report that dealing with challenging behaviors is one of the most difficult parts of their job. Faced with even a small number of challenging children, teachers may respond with frustration, criticism, and less instructional attention to the persistently disruptive children; this lowers the young children's motivation and interest, which contributes to a spiraling cycle of negative interactions with teachers.[7] The result can be a reduction in teachers' job satisfaction and effectiveness, which has the potential to increase their stress, burnout, and turnover.[8]

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[2]Campbell, Shaw, and Gilliom (2000); Raver and Knitzer (2002); Rimm-Kaufman, Pianta, and Cox (2000).
[3]Gilliam (2005).
[4]Ladd, Birch, and Buhs (1999).
[5]Raver (2002).
[6]Gross, Sambrook, and Fogg (1999).
[7]Raver et al. (2008).
[8]Burke, Greenglass, and Schwarzer (1996); Curbow et al. (2000); Deery-Schmitt and Todd (1995); Schonfeld (2001).

There are, however, grounds for optimism. Teachers with effective classroom management skills, including techniques to reinforce children's positive behavior, can help children develop their capacity for self-regulation. Moreover, there is evidence that children are more engaged and demonstrate higher academic competence when they are in emotionally supportive classrooms.[9] Therefore, supporting low-income children's healthy emotional and behavioral development during the preschool years could improve chances for success in school and beyond, both for the highest-risk children in a classroom and for their lower-risk peers. For these reasons, targeting teachers' classroom management skills could be an important part of an overall school-readiness strategy.

The Foundations of Learning Approach to Promoting Quality Preschool Programs

Supporters of investments in preschool programs cite long-term studies indicating that high-quality interventions can offer significant, long-term benefits to disadvantaged children in educational attainment, earnings, and other measures.[10] Yet, even as policymakers and program administrators embrace greater investments in preschool programs, they confront the challenge of maintaining consistently high quality, especially when the programs operate on a large scale. This is particularly important because of convincing evidence that the positive results of high-quality preschool interventions are not found in mediocre or poor-quality programs.[11]

A number of approaches have been proposed to increase program quality, such as smaller class size, curricular reforms, higher teacher salaries, and teacher credential requirements. However, there is evidence that what matters most is the quality of the interactions between teachers and children (termed the "process" measures of preschool quality).[12] In the case of the FOL intervention, the focus is on improving teacher-student interactions as a means of promoting young children's emotional and behavioral adjustment to the preschool setting. Children's age-appropriate emotional and behavioral development is considered to be an important outcome in its own right, as well as a pathway to academic achievement, because a more positive, less disruptive classroom environment is conducive to improved teaching and learning.

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[9]Raver et al. (2008).
[10]Puma et al. (2005); Schweinhart et al. (2005).
[11]Magnuson, Ruhm, and Waldfogel (2007).
[12]Birch and Ladd (1997).

The FOL demonstration has operated in two cities: Newark during the 2007-2008 school year and Chicago during the 2008-2009 school year.[13] Both cities share many of the same challenges facing urban school systems, and both serve a large number of low-income children in preschool programs. However, the cities present different operating contexts. Newark is ahead of most of the country because, in the last decade, it has implemented structural changes to promote quality in preschools — including, but not limited to, smaller class sizes, higher teacher salaries, and stricter teacher credential requirements — which were mandated by the New Jersey Supreme Court's landmark decisions in the *Abbott v. Burke* class action case. In contrast, Chicago has class sizes, teacher salaries, and other program features that are more typical of urban areas.

Thus, the FOL demonstration provides the opportunity to evaluate an emotionally and behaviorally based intervention in a system with typical levels of preschool resources and the same intervention in a resource-intensive system. FOL researchers, therefore, have the opportunity to observe the incremental effect of adding the FOL approach over and above other resource-intensive efforts. The example of Newark underscores the point that the FOL approach can be joined with other quality-enhancement efforts.

The Foundations of Learning Program Model

The FOL demonstration focuses primarily on strengthening teachers' skills to serve all the children in their classrooms more effectively (the *universal* component); secondarily, the FOL model includes targeted services to the children with the highest levels of behavior challenges. While recognizing that parents play an important role in their children's social and emotional development, the FOL intervention does not emphasize special outreach to parents beyond what the preschool programs already have in place.

The FOL program model includes the following elements (described in greater detail in Chapter 2):

1. *Teacher training:* Lead and assistant teachers are invited to attend five monthly training sessions of six hours each. The training provides teachers with concrete classroom management strategies to promote children's positive emotional and behavioral development while reducing negative behaviors.

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[13]The Chicago FOL program, originally scheduled to run simultaneously with the Newark program, was deferred for a year because the Chicago Head Start program was undergoing a periodic federal review in 2007-2008. This made 2007-2008 unrepresentative of standard operations.

2. *Classroom-level consultation:* Teachers are assigned a master's-level Clinical Classroom Consultant (CCC) to work with them in their classrooms, one day per week. The CCCs are expected to establish close, supportive relationships with teachers to enhance the teachers' receptivity to the CCCs' roles in modeling and reinforcing the content of the training sessions and in acting as a sounding board.

3. *Stress management:* In January or February, the CCC Coordinator, who provides the supervision and management of the CCCs and serves as backup for consultation services when necessary, provides a customized stress management workshop at each site for the lead teacher and assistant teacher. In the months leading up to and following the workshop, the CCC helps reinforce the stress management skills and techniques with teachers.

4. *Individualized child-centered consultation:* For selected children who do not respond sufficiently to the universal classroom techniques, the CCC provides in-class clinical services beginning in March. These services are scheduled on a regular basis and are tailored to address specific behaviors that continue to inhibit the children's ability to negotiate the classroom environment.

Evolution of the Foundations of Learning Demonstration

The FOL program model, and the demonstration as a whole, drew heavily on lessons from the Chicago School Readiness Project (CSRP), which was conducted from 2004 to 2006. Under the leadership of Dr. Cybele Raver, who is now a member of the FOL research team, CSRP operated in 18 Head Start sites in high-poverty Chicago neighborhoods. CSRP tested a multicomponent model, later adopted by FOL, with two cohorts of teachers, one in the 2004-2005 school year and one in the 2005-2006 school year.

The evaluation of CSRP used a rigorous research design, in which the 18 sites were randomly assigned to one of two groups: half received the multicomponent CSRP intervention; the other half served as a control group that operated without the CSRP-enhanced services, but they were given teacher's aides.[14]

The still-emerging results from the CSRP evaluation indicate that the intervention improved the quality of the classroom environment. By the spring of the preschool year, teachers

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[14]The presence of the teacher's aide in control classrooms ensured that any positive impacts of the intervention were not attributable to an improved adult-child ratio in the CSRP classrooms.

in the CSRP classrooms were more responsive to and less harsh with children than were teachers in the control classrooms. The CSRP teachers were also somewhat more able to engage in effective classroom management practices. Finally, the newest findings suggest that, over the course of the school year, these changes improved the children's self-regulation and pre-academic skills, as well as the quality of teacher-student relationships.[15]

Encouraged by these findings, MDRC decided to test the model on a larger scale. Working closely with the Newark Public Schools, MDRC first conducted a brief feasibility study in Newark in the spring of 2006 and then a full-year pilot in Newark during the 2006-2007 school year. The purpose of these efforts was to confirm that the program that had been piloted in Chicago was also needed in Newark, especially in light of the substantial resources available as a result of the *Abbott v. Burke* court mandate; to determine the feasibility of implementing a random assignment research design in Newark; and to assess the possibility of attracting a sufficient number of participating sites to test the model on a larger scale than was the case with CSRP. Based on the results of the feasibility study and the year-long pilot, MDRC decided to proceed with a full-scale demonstration, now called Foundations of Learning, in Newark during the 2007-2008 school year and in Chicago in the 2008-2009 school year. The timelines and selected site characteristics in CSRP and FOL are set forth in Table 1.1.

As in CSRP, the FOL research design includes random assignment of preschool class-rooms to either receive the enhanced services (the program sites) or to continue their standard operations (the control sites). Yet, the original CSRP evaluation and the FOL demonstration in Newark differ in some respects. In addition to the distinctions between the Newark and Chicago operating contexts noted earlier, the key differences include:

- *Scale.* With 51 FOL sites (26 program sites and 25 control sites) in one year, the full FOL demonstration phase in Newark operated on a larger scale than the CSRP evaluation, which operated in 18 sites (9 program sites and 9 control sites) across two cohorts.[16]

- *Delivery mechanism.* CSRP was a university-based intervention, while FOL was more embedded into the regular service delivery framework. For example, the clinical consultants in CSRP were retained by the University of Chicago

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[15]For a more detailed discussion of the CSRP findings, see Raver et al. (2009) and Raver et al. (2008).

[16]Cohort 1 operated from 2004 to 2005 and consisted of 10 sites (five program sites and five control sites). Cohort 2 operated from 2005 to 2006 and consisted of eight sites (four program sites and four control sites).

Foundations of Learning Demonstration

Table 1.1

Evolution of the Foundations of Learning Demonstration

Characteristic	CSRP[a]	FOL[b] Pilot Newark	FOL Full Scale Newark	FOL Full Scale Chicago
School years	2004-2006	2006-2007	2007-2008	2008-2009
Total number of sites	18	17	51	20
Program	9	9	26	10
Control	9	8	25	10
Total number of classrooms	35	17	51	40

SOURCE: Raver et al. (2008) and MDRC calculations from random assignment and baseline forms.
NOTES: [a]CSRP = Chicago School Readiness Project.
 [b]FOL = Foundations of Learning.

(where the CSRP research team was based), but in Newark the Clinical Classroom Consultants (CCCs) and the CCC Coordinator were employees of Family Connections, a community-based counseling and family services agency.

- *Venue.* All of the CSRP sites were Head Start programs, although some of them were contracted out to the public schools. The Newark FOL demonstration operated in three types of venues: Head Start sites, community-based child care centers, and public schools. (All of the Newark FOL sites received the special funding required by *Abbott v. Burke* and operated under the auspices of the Newark Public Schools, which is charged with carrying out the Abbott court order.)[17]

- *Age of children.* While CSRP had a roughly even mix of 3- and 4-year-olds, the vast majority of children in Newark FOL classrooms were 4-year-olds. This provided an early opportunity to observe the demonstration's impact on children's transition to kindergarten.

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[17]Also, unlike in the CSRP demonstration, the FOL control group classrooms did not have an extra teaching assistant. It should be noted, however, that under the *Abbott v. Burke* mandate, all preschool classes in Newark are capped at 15 children, and both the program and control classrooms had a lead teacher and an assistant teacher.

The Newark Context

To help understand the Newark implementation experience, this section briefly summarizes demographic data on Newark; the structure of the preschool system and the resources available to it, particularly in light of the *Abbott v. Burke* decisions; and the location of the sites where the FOL demonstration operated.

Demographics

Like many other U.S. cities, Newark faces serious challenges precipitated by deindustrialization and the flight of affluent homeowners to the suburbs. A disproportionate share of the city's population lacks social and economic resources. According to the 2007 American Communities Survey, 20 percent of all families in Newark, and more than 30 percent of all female-headed families there, live below the federal poverty level. More than 35 percent of adults over age 25 lack a high school diploma or General Educational Development (GED) certificate, and less than 30 percent of residents own their own home.[18] Additionally, Newark has a high crime rate, with 852.7 violent crimes per 100,000 citizens, compared with the national average of 466.9.[19]

Newark is home to a large number of minority group members and immigrants. Fifty-five percent of the population is African-American and 21.2 percent is white, while 21.7 percent of the population reports Hispanic or Latino origins. Twenty-seven percent of the population is foreign-born, and over 44 percent speak a language other than English at home.[20] Moreover, while racial and ethnic segregation in housing markets is common in most cities, it is particularly acute in Newark. The city is divided into five wards: North, South, East, West, and Central. The South, Central, and West wards are almost exclusively African-American, the North ward is predominantly Latino, and the East ward (also known as "the Ironbound") is almost entirely Portuguese/Brazilian.

The Public Preschool System

As noted earlier, the substantial level of preschool resources in Newark is due primarily to the New Jersey Supreme Court's rulings in the case of *Abbott v. Burke,* a class action suit alleging that the New Jersey Department of Education's system of resource allocation discrimi-

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[18]United States Census Bureau (2007).

[19]See Federal Bureau of Investigation (2007b) for the first statistic, and Federal Bureau of Investigation (2007a) for the second.

[20]United States Census Bureau (2007). The percentages represent those individuals identifying with only one race.

nated against children in low-income communities. The Court ruled that the state must provide additional resources, oversight, and regulations for 31 low-income school districts in the state, including Newark.

At the preschool level, the Abbott rulings mandate that the state provide free preschool education to all children whose parents wish to enroll them. Additionally, the Court ordered that:[21]

- All lead teachers are required to have a minimum of a bachelor's degree. This requirement, coupled with a substantial increase in financial resources, make Abbott-funded Newark preschool teachers among the highest paid and most credentialed in the nation.[22]

- All classrooms must have a lead teacher and an assistant teacher.

- Each preschool classroom must have no more than 15 students.

- The size of each preschool classroom must be at least 950 square feet (however, since this could require construction or renovation of facilities, program sites with classrooms below this size were initially allowed to remain within the Abbott system).

- Each preschool classroom must have a standard set of materials and distinct activity areas for children, including a sand and water table, a dramatic play area, a library, and an area specifically for playing with blocks.

- All facilities must provide special education, bilingual education, and health services.

- Teachers must use a standard curriculum assigned by the school district. At the time of this study, Newark used *The Creative Curriculum*.[23]

Newark's preschools serve a higher percentage of children than do other localities in New Jersey. According to the Association for Children of New Jersey (ACNJ), the 55 percent of Newark's preschool-age children who were enrolled in approved preschool facilities in 2006 far exceeded the state average of 19 percent.[24]

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[21]New Jersey Department of Education (2008).
[22]Barnett et al. (2008); Bureau of Labor Statistics, United States Department of Labor (2009).
[23]See http://www.creativecurriculum.net for more information.
[24]ACNJ (2006). The 19 percent state average includes both Abbott districts and districts that are not subject to the mandates of the Abbott rulings.

The Need for the Foundations of Learning Demonstration in Newark

There was initially a question whether the FOL intervention was needed in Newark, given the substantial level of resources already available in its publicly funded preschool system. However, during the 2006 feasibility study, MDRC team members interviewed Newark educational administrators and teachers, who responded that there was still a dearth of resources to address the emotional and behavioral needs of preschool children.

Newark's primary support services to address emotional and behavioral issues are the Preschool Intervention and Referral Team, operating through the public school district, and mental health consultants, available to Head Start centers as part of the program's federal mandate. However, both of these resources were thought to be insufficient, partly because of what administrators and teachers perceived to be a rise in the number of children exhibiting challenging behaviors, and because teachers were not trained to respond to the issues.

Educational staff in Newark also stated that referrals for services to address children's challenging behaviors often took a significant amount of time to process. While the staff were committed to meeting the needs of the highest-risk children, they readily acknowledged that the system could benefit from a greater number of adults available to attend to children with challenging behaviors. Most salient, however, was concern over the absence of teacher-oriented resources designed to help manage challenging classroom behavior and promote healthy social and emotional development. Teachers repeatedly noted that the educational process was compromised by disruptions in classroom routines caused by children who were unable to share with others, follow simple directions, engage in learning, or respond to teachers and peers for an age-appropriate amount of time. Based on this information, it was concluded that FOL was needed in Newark and could have significant impact.

The Composition and Location of Foundations of Learning Sites

The 26 program sites and 25 control sites that volunteered for FOL collectively represented approximately 40 percent of the preschool sites in the city.[25] The FOL sites were spread across Newark, capturing the city's demographic diversity. The sites also reflected the range of operating venues in which preschool classrooms are located: 25 percent of the FOL sites were in Head Start settings (compared with 26 percent for the city as a whole), 53 percent

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[25]However, FOL included less than 40 percent of the city's *classrooms*, because only one classroom per site participated in FOL, even if the site had multiple classrooms.

were at community-based nonprofit or for-profit providers (compared with 48 percent for the city), and 22 percent were in public schools (compared with 26 percent for the city).[26]

The diversity of settings affects preschool classrooms in multiple ways. For example, preschools in public school buildings are likely to have more physical space, a dedicated play area, and structured preparation time for the teachers. However, there tend to be very few preschool classrooms in each public school site, so both students and teachers are somewhat isolated within the larger school. In contrast, classrooms in Head Start and private child care facilities are in an environment centered on early childhood education, thereby offering both teachers and students broader opportunities for peer interactions. However, these facilities tend to lack the physical space available in public schools and to have fewer staff available to share the workload.

Organization and Staffing of the Foundations of Learning Demonstration

In addition to its evaluation role, MDRC helped launch the FOL demonstration by enlisting the backing of the Newark Public Schools, identifying the private foundation funding that supported the demonstration, assisting in the recruitment of Clinical Classrooom Consultants (CCCs), arranging for the teacher training sessions, and providing ongoing support for the CCCs.

MDRC contracted with Family Connections, a community-based counseling and family services agency, to serve as the home base for CCCs and the CCC Coordinator. Family Connections provided physical space, clinical supervision, and administrative oversight for the CCC staff. There were several benefits to this approach: Family Connections was already familiar with the Newark educational system, had previous experience delivering services in preschool classrooms, and agreed to be a backup source of service for FOL children and families who otherwise were unable to receive services in Newark.

Family Connections had some difficulty recruiting and retaining CCCs during the demonstration year, in part because the short-term nature of the demonstration meant that the CCCs could not be guaranteed employment for more than one school year. Also, the recruitment effort got off to a late start, and the Newark Public Schools had recently hired a number of staff with similar qualifications for other positions in the system.

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[26]Most of the Head Start sites in Newark, and all but one of the Head Start sites that participated in FOL, are run by the Newark Preschool Council, Inc.

Family Connections did, however, hire seven full-time CCCs to serve the 26 FOL demonstration classrooms. All seven held master's degrees in a human service discipline, primarily social work, but also including such fields as psychology, counseling, and art therapy. All of the CCCs had experience working with young children in low-income communities, and four of them had more than five years of early childhood experience. In addition, since the relationship between the CCCs and classroom teachers is a critical element of the FOL model, it was helpful that three of the CCCs had at least a few years of experience working with adults, and two of the three had spent five years or more working with adults.

The seven CCCs ranged in age from 24 to 38, and all but one were female. A concerted effort was made to identify CCCs who were culturally competent and who reflected the racial, ethnic, and language diversity of the classroom: One CCC self-identified as African-American or black, two as white, one as Hispanic or Latino, two as mixed race, and one as other (specifically, South American). All of the CCCs spoke English, and two spoke either Spanish or Portuguese.

Family Connections also hired a full-time CCC Coordinator, who provided the required level of supervision and management of the CCCs and served as backup for consultation services when necessary. Therefore, in addition to the aforementioned CCC skill set, the Coordinator position also required managerial experience. In general, the Coordinator oversaw the activities of the CCCs, including maintaining regular contact with them, scheduling their work in classrooms, reviewing their performance, assessing the reactions of the teachers to the CCCs, and serving as a liaison to Newark school administrators and the MDRC project manager.

During the course of the year, the MDRC project manager offered the CCCs technical assistance on model implementation. Weekly meetings, either in-person or by phone, helped ensure that the intervention was being carried out with integrity and fidelity to the model. In addition, CCCs participated in regularly scheduled individual and group clinical supervision about the content of their work.[27] This ongoing feedback provided the CCCs with a forum to reflect critically on their work in sites and to recognize their strengths and weaknesses as clinicians.

Research Questions and Overview of This Report

This report focuses on the FOL implementation experience in Newark. A preview of impact findings from Newark was published in September 2009. Later reports will present

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[27]This clinical supervision was also used as a recruiting tool. Most social service professionals require a certain number of supervised clinical hours for licensure, and clinicians often have to pay for this with their own funds.

findings on the impact of FOL on the classroom environment and teacher and child outcomes in both Newark and Chicago, as well as implementation lessons and a benefit-cost analysis of FOL in Chicago. Taken together, the reports will provide extensive evidence for policymakers, administrators, teachers, and researchers interested in the potential of addressing young children's emotional and behavioral development as a means to enhance the quality and impact of preschool programs.

This report addresses the following principal implementation questions:

1. Was the FOL model implemented in Newark as intended? In particular, were the teacher training, in-class consultation, and stress management workshops implemented with the expected dosage and quality?

2. Did the FOL teachers' classroom practices change over the course of the school year?

3. What underlying dynamics and other factors contributed to any changes in the teachers' classroom practices?

4. What lessons does the Newark experience provide for policymakers and practitioners interested in adopting a program model similar to FOL?

The findings are based on a diverse set of data sources, including administrative records, field observations and interviews, teacher surveys, systematic field documentation by CCCs, and focus groups with teachers.[28]

The remainder of the report is organized as follows:

Chapter 2 presents additional background on the rationale behind the multicomponent FOL model. It also addresses the first research question by describing how each component was implemented in practice, including the dosage and quality of implementation.

Chapter 3 relies on teachers' personal reflections on the FOL experience, as well as other data, to address the second and third research questions. In addition to confirming that teachers' classroom practices did change, the chapter outlines three key themes: (1) the relationships that the CCCs established with teachers, as well as the strengthened relationships between lead and assistant teachers, were important; (2) these relationships contributed to greater

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[28]For a more detailed description of the data sources, see Appendix A.

collaboration and information sharing; and (3) reduced teacher stress played an important role in teachers' adoption of the FOL techniques.

Chapter 4 addresses the final research question by presenting overall conclusions and lessons from the FOL implementation in Newark. Among other things, the chapter concludes that the Newark experience provides a solid basis for evaluating the impact of a program that operated with reasonable fidelity to the FOL program model.

Chapter 2

Design and Implementation of the Foundations of Learning Program Model

This chapter presents the rationale for the individual Foundations of Learning (FOL) demonstration components, explaining how they fit together within an integrated model. The chapter also answers the first research question posed in Chapter 1: Was the FOL model implemented in Newark as intended? In particular, were the teacher training, in-class consultation, and stress management workshops implemented with the expected dosage and quality? It concludes that, for the most part, the FOL intervention in Newark was delivered as intended. The teacher training operated particularly well; there was also substantial in-class and one-on-one consultation, although it fell short of the fully scheduled amount. This analysis helps set the stage for the conclusions, presented in Chapter 4, on the feasibility of the FOL model.

Rationale for the Foundations of Learning Components

The goal of the FOL demonstration is to create a positive classroom environment in which preschool children are effectively prepared for success in elementary school and beyond. To achieve this goal, FOL focuses primarily on enhancing the quality of teacher-student interactions as a means of promoting young children's social and emotional development. In addition, selected high-risk children in the demonstration receive one-on-one services toward the end of the school year.

The sequence of activities, depicted in Figure 2.1, helps ensure that the individual FOL components are mutually reinforcing. The components are as follows:

- *Teacher training.* Because teachers typically have limited practical training in promoting children's emotional and behavioral development, the FOL program model includes teacher workshops on how to establish positive relationships with students, encourage age-appropriate behavior, and minimize classroom disruptions and confrontation.[1] The teacher training consists of five full-day workshops (each one approximately six hours long) held once a month from late September through January.

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[1]See Weist (2005) for a discussion of teachers' limited practical training in promoting children's emotional and behavioral development.

Foundations of Learning Demonstration

Figure 2.1

2007-2008 Program Timeline

Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June

Monthly Workshops for Teachers

CCCs Enter Classrooms	In-Class Consultation by CCCs

Stress Management Workshop

One-on-One Services
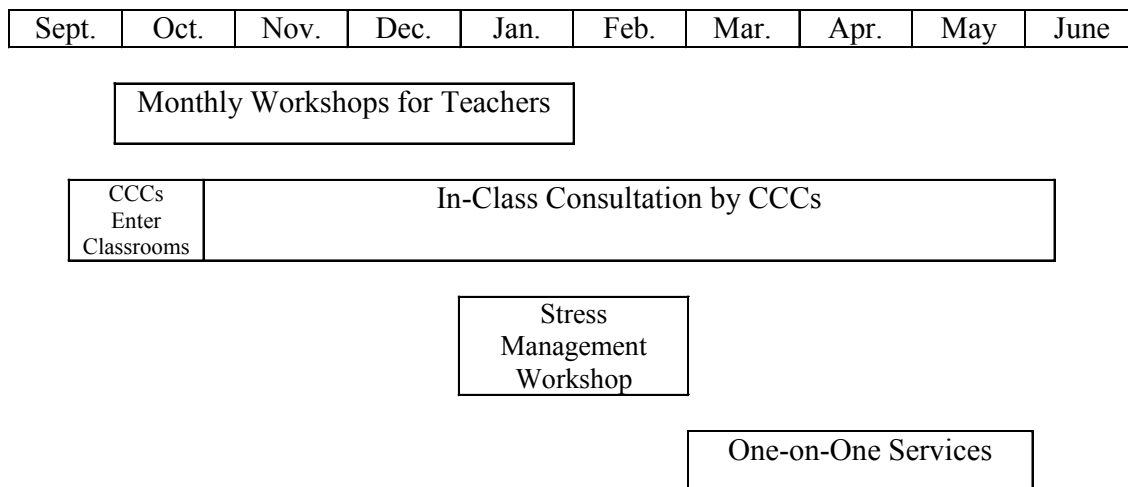
NOTE: CCC = Clinical Classroom Consultant.

- *Classroom consultation.* Training alone is often insufficient to ensure that teachers implement new practices.[2] Therefore, the FOL program design calls for a Clinical Classroom Consultant (CCC) to provide in-class support one day per week to reinforce the lessons from the training and to model appropriate techniques. This regular in-class presence contrasts with the "on call" approach used in many programs.[3] Although CCCs enter classrooms in September, they do not start active consultation with teachers until October, after the first teacher training session. The CCCs' consultations then continue through May. (See Box 2.1 for a description of the sequential phases of the CCC's engagement with teachers and children in the classroom over the course of the school year.)

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[2]Raver (2002); Raver et al. (2008); Webster-Stratton, Reid, and Hammond (2001).

[3]For a detailed discussion of the programs reviewed, see Alkon, Ramler, and MacLennan (2003); Farmer-Dougan, Viechtbauer, and French (1999); Gilliam (2007); Hennigan, Upshur, and Wenz-Gross (2004); Kagan (2003); and Lehman et al. (2005).

- *Stress management.* In addition, because stress in teachers' personal and professional lives can reduce teaching effectiveness, the CCC Coordinator conducts a stress management workshop in January or February that is customized to respond to the lead and assistant teachers' particular needs.[4] The workshop is delivered conveniently on site in the teachers' school or center. The CCCs also provide support to teachers throughout the year on issues related to stress and burnout.

- *Individualized, child-centered consultation.* Finally, the FOL model recognizes that the teachers' improved classroom management skills (the universal component of the model) should be supplemented by individualized attention to selected children's additional emotional and behavioral needs.[5] However, the individualized clinical services are deferred until the final third of the school year (March to May) to ensure that the universal component is implemented fully and that children first have sufficient time to respond to the teachers' new strategies.

The operating hypothesis underlying FOL is that effective implementation of the program components will have an impact on three levels: the teachers, the children, and the classroom environment. Teachers will improve their classroom management skills and respond more constructively to behaviorally challenged children. Children will exhibit less disruptive behavior because of their enhanced social and emotional development. Together, these changes will create a more positive classroom environment that promotes the teaching and learning needed for improved school readiness.

FOL's benefits are also hypothesized to extend over the long term. Teachers will carry over their stronger classroom management skills into succeeding years, leading to a more positive climate in future preschool classrooms. The children will build on their age-appropriate social and emotional development, so that in future classrooms they will have increased ability to regulate their emotions, have more positive relationships with their teachers, and perform better academically. Finally, the children who had been at higher risk in preschool will require less disciplinary action and fewer referrals for special services.

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[4]For discussions on how stress can curb teachers' effectiveness, see Curbow et al. (2000), Deery-Schmitt and Todd (1995), and Manlove (1993).

[5]There is some evidence of positive results from a blended program of teacher training supplemented with individualized services for high-risk children in kindergarten and first grade (August, Egan, Realmuto, and Hektner, 2003; August, Realmuto, Hektner, and Bloomquist, 2001).

Box 2.1

Phases of the Clinical Classroom Consultant Role

Pre-entry: Before entering the classroom, Clinical Classroom Consultants (CCCs) learned about the preschool site where they would be working and the community the site serves. This process also included a visit to the community.

Entry: Lasting as long as a month, the entry phase began when the CCC first met the teacher, typically at the preschool site. The key goal for this phase was to lay the foundation for trusting relationships with the teachers, other staff, children, and parents by, as the CCC training literature puts it, "hanging out, helping out, and being checked out."*

Joining: The goal of the joining phase was not only to enter the setting, but also to become a part of the classroom. The CCC learned from the setting he or she was in and from the people in it, communicated a willingness to give and take, and shared information about herself or himself.

Assessment: Overlapping with the entry and joining phases, the purpose of the assessment phase included developing a more complete understanding of the strengths, challenges, and resources of the preschool site, the surrounding community, and the people in them.

Consulting: This was a structured, collaborative process in which the CCC modeled and reinforced the lessons from the teacher training to promote teachers' effective classroom management and children's social and emotional development.

Stress and burnout: Throughout the school year, CCCs helped teachers address issues of personal and professional stress. In January or February, the CCC Coordinator, often in conjunction with the CCC assigned to a given classroom, conducted an on-site stress management workshop, 90 minutes to 2 hours long, that was customized for lead and assistant teachers.

Direct services to children: In February, the teachers and the CCC identified selected children for whom the universal classroom management strategies had not been effective. The CCC provided individualized attention to help address these children's continuing social and emotional needs. In March, the direct services to the children began.

Referral: In May, when the FOL intervention came to a close, some of the children who had been receiving individualized services were referred for other services in the community.

Termination: As the intervention year came to an end, the CCC prepared teachers, other staff, children, and parents for the CCC's eventual departure. This included addressing any unresolved issues and making plans with teachers for ways that they could continue to use their newly acquired skills in the future.

*Sybil Madison-Boyd, Cybele Raver, Elysia Aufmuth, Darlene Jones-Lewis, and Maya Williams, *Chicago School Readiness Project Mental Health Consultation Manual*, unpublished manuscript (Chicago, IL: University of Chicago, 2006).

Implementation of the Foundations of Learning Components

The remainder of this chapter describes how each of the FOL components was implemented in Newark. The components are addressed in the same basic order in which they were delivered over the course of the school year.

Teacher Training

Implementation Experience

The cornerstone of the training workshops was *The Incredible Years,* a comprehensive, evidence-based curriculum developed by Carolyn Webster-Stratton. The curriculum content and topic sequencing were slightly adapted for FOL and were delivered through a combination of didactic instruction; active discussion; and the use of role-playing, vignettes, videos, and hands-on activities, such as the development of classroom behavior plans.[6]

The curriculum lays a solid foundation by training teachers to develop positive relationships with children and their families; then focuses on proactive classroom strategies, such as outlining clear rules, setting predictable limits, and using a discipline structure that minimizes classroom disruptions and avoids confrontation; and concludes with techniques to help develop children's social skills, anger management, and problem-solving ability (see Box 2.2). A key aspect of *The Incredible Years* curriculum is a pyramid approach in which teachers use certain techniques (such as praise, encouragement, and celebrations) liberally, while using others (such as loss of privileges) only selectively.[7]

This curriculum was selected because of convincing evidence that, when combined with other supports, its emphasis on teachers' use of alternatives to harsh classroom management practices fosters a more positive instructional and emotional climate in the classroom. There is also evidence that children in classrooms led by teachers who are following the curriculum display less disruptive behavior and increased skills related to school readiness, such as greater engagement in learning and self-reliance.[8]

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[6]All topics and content included in the training came from *The Incredible Years* curriculum. However, some topics were eliminated, and the sequencing of content was altered slightly to address the expressed needs of the participating teachers and to fit the training into five sessions. (The Webster-Stratton training has six sessions. For more information about *The Incredible Years* curriculum, see http://www.incredibleyears.com.)

[7]Webster-Stratton (1999).

[8]Webster-Stratton, Reid, and Hammond (2001). While *The Incredible Years* curriculum was selected for FOL, there are also other evidence-based curricula that promote children's social and emotional development, including *Tools of the Mind*, which uses scaffolded play and learning activities in daily 50-minute time blocks (see

The training was also designed to help the lead teachers, assistant teachers, and CCCs collaborate in developing a shared vision of high-quality classroom management in a safe environment. To foster this process, attendance was restricted to FOL teachers and CCCs (although center directors and school administrators were offered a separate, one-day version of the training at no cost). The restricted attendance at the teacher workshops produced several benefits:

- Having the lead teachers, assistant teachers, and CCCs learn the curriculum together leveled the playing field. Power differentials between lead and assistant teachers were minimized, and CCCs were viewed as collaborators rather than experts.

- Attending the training together enabled teachers and CCCs to develop a common knowledge base and shared language.

- Attending the training together promoted frank conversations among teachers and CCCs about the relative merits of using particular approaches in their classrooms.

- Limiting the attendance of administrators created a safe environment in which teachers could be open about their successes, challenges, and concerns without fearing adverse consequences.

A concerted effort was made to ensure that the training responded to concrete issues that can arise in the classroom. Teachers were encouraged to provide feedback via written evaluations at every training session and were surveyed regularly by their CCCs about whether the training was meeting their needs. CCCs also encouraged teachers to share classroom difficulties with them during the weeks between trainings. The feedback helped trainers refine their techniques and incorporate into the training content that was relevant to the teachers.

Other feedback mechanisms included a debriefing session after each workshop with the MDRC project manager, the workshop trainers, the CCCs, the CCC Coordinator, and the project support staff. The debriefings centered on the training content, delivery, and logistics, as well as plans for upcoming sessions. In addition, meetings were held with the workshop trainers before each session to ensure that they received the feedback that teachers had given the CCCs about the training. Also, training sessions were videotaped to provide feedback and as part of the process of certifying one of the trainers in *The Incredible Years* approach.

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www.toolsofthemind.org for more information), and *Preschool PATHS* (Promoting Alternative Thinking Strategies), which includes structured lessons during "circle time" to teach children ways to think about emotions and responses to peers in social situations (Dormitrovich, Cortes, and Greenberg, 2007).

Box 2.2

Overview of Teacher Training Content and Objectives

Training Session 1: Building Positive Relationships with Students, Proactive Teaching, and Preventive Approaches

- Promoting positive relationships with students by listening
- Understanding students' strengths
- Collaborating with caretakers to benefit children
- Creating predictable and safe learning environments
- Giving clear and specific directions in positive terms
- Helping students make choices
- Using non-verbal cues and signals as a classroom management strategy
- Understanding the process, implementation, and benefits of a good behavior plan

Training Session 2: Teacher Attention, Praise, and Encouragement; Teacher Coaching; and Child-Directed Play and Friendship Skills

- Using praise to enhance children's self-esteem and confidence
- Praising social and academic behaviors
- Using descriptive commenting to facilitate children's social learning
- Developing children's abilities to praise themselves and their peers
- Helping children appreciate the achievements of others

Training Session 3: Motivating Students Through the Use of Incentives and Decreasing Inappropriate Behavior

- Understanding and effectively using the discipline hierarchy
- Understanding the advantages and disadvantages to using incentives
- Setting up and using developmentally appropriate incentives
- Using incentives to facilitate children's internal learning processes
- Using logical consequences to foster appropriate behavior

Training Session 4: Teaching Children Social Competence

- Increasing children's awareness of different feelings
- Building children's emotional vocabulary
- Understanding children's anger and helping them manage it successfully
- Promoting children's responsibility in the classroom
- Fostering positive reputations

Training Session 5: Training Review and Wrap-Up

- Overview of previous training content
- Targeted review of previous topics or training content according to teachers' requests

Since active participation was critical to the success of the training, a variety of methods were used to maximize teachers' voluntary attendance on Saturdays. These included hosting the training in a facility that was centrally located and easily accessible to the majority of attendees; providing meals and snacks, including breakfast and hot lunches; offering participants child care, compensation for their time, and transportation assistance in the form of free parking or bus fare; and granting certificates of attendance that could be used to meet continuing education requirements.[9] In addition, some teachers chose to include the plans that were developed during training sessions in their teacher evaluation portfolios.

In sum, the training environment was structured but flexible. The prescribed curriculum was applied to real-world examples to help teachers better understand the content. In addition, the training was interactive, and the trainers and program management worked diligently to create a safe and responsive atmosphere that supported attendance, community building, active collaboration, and learning.

Dosage

In general, teachers' attendance at the training sessions was high. Table 2.1 shows that the large majority of both lead and assistant teachers received the full dosage of the program: 22 of the 26 lead teachers attended four or five trainings, almost as many assistant teachers (19 out of 26) did so, and for 17 of the programs both the lead and assistant teacher attended at least four of the five sessions.[10] Most of the other teachers attended either two or three trainings, and only one lead teacher and three assistant teachers attended fewer than two trainings. Teachers who participated in at least one training session received an average of about 26 hours (out of a possible total of 30 hours) of curriculum content.

Quality

The quality of the training was assessed primarily through ratings provided by the teachers. Their perceptions are especially important because teachers who view the training positively are more likely to make an effort to implement the techniques.

As shown in Table 2.2, teacher satisfaction with the training was high. Exit surveys were conducted at the end of each session, with teachers rating aspects of the session on a scale

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[9]On-site child care was prohibitively expensive due to licensing, insurance, and liability requirements. The child care was therefore provided at a nearby location that was within walking distance of the training. Lead teachers were paid $300 per session, and assistant teachers were paid $165. These daily rates were based on the teachers' average annual salaries.

[10]Attendance at four sessions was considered to be full dosage because the fifth session was a review session.

Foundations of Learning Demonstration

Table 2.1

Attendance at Teacher Training Sessions

Attendance	Number of Lead Teachers	Number of Assistant Teachers	Number of Sites with Both Teachers Attending
Attended 4 to 5 trainings	22	19	17
Attended 2 to 3 trainings	3	4	5
Attended fewer than 2 trainings	1	3	4

SOURCE: MDRC calculations from attendance records for the five Foundations of Learning Demonstration Preschool Teacher and Clinical Classroom Consultant Training sessions.

Foundations of Learning Demonstration

Table 2.2

Quality of Teacher Training, as Rated by Teachers

Training Quality	Mean Rating
Training content was clear	4.7
Training environment was conducive to learning	4.7
Trainers were effective and clear	4.6
Training enhanced professional development	4.7

SOURCE: MDRC calculations from the Teacher and Clinical Classroom Consultant Training evaluation forms.
NOTE: Training sessions were rated on a scale from 1 to 5 with 1 representing "strongly disagree" and 5 representing "strongly agree."

of 1 to 5, 1 meaning "strongly disagree" and 5 meaning "strongly agree." Teachers' average ratings indicate that the training content was clear, the training environment was conducive to learning, the trainers were effective and clear, and the training enhanced the teachers' professional development. The aspects teachers were asked to rate were as follows:

- *Clarity of training content.* This category included such items as perceptions about the trainers' clarity in delivering the overarching rationale for and principles of the curriculum, and the quality of the training exercises and vignettes. As one teacher stated,

> I think [the trainer] reviewed everything pretty nicely. Sometimes with our busy lives, you don't have time to get through the whole chapter in the book, but then he goes over everything very thoroughly and it definitely helps. Between the little clips that he shows, between talking to other teachers, and definitely just being honest like when we speak, you know, because there's nobody here that's going to judge us, which I thought was nice.[11]

- *Training environment.* The views of the teacher quoted above were largely echoed by others who also said that the training provided a safe space for teachers to speak with one another without being judged. The training environment was designed to maximize teachers' participation and to encourage cross-talk and sharing. Teachers reported that the group discussions, hands-on exercises, and role-playing were valuable instructional methods. These methods provided opportunities for teachers to discuss the challenges they face in the classroom, helped to normalize their classroom experiences, and facilitated an active learning process. When asked what was useful about the FOL training, one teacher stated,

> Just being able to answer questions and sometimes just being able to vent. I think that's so important when you can sit down and say, 'You know what? I'm having a hard time.' Somebody else to feel your pain.

  The opportunity to interact with their counterparts from across the city helped teachers develop a sense that they were all in this together; they came to recognize that there are no perfect classrooms, parents, or students and that all teachers grapple with classroom challenges.

- *Quality of the trainers.* Teachers also overwhelmingly agreed that the trainers were effective and clear. The trainers were perceived to be knowledgeable and responsive to the issues that teachers raised. One teacher stated,

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[11]Quotations from teachers in this and succeeding chapters are representative of comments drawn primarily from focus groups. Of the teachers in FOL classrooms, 85 percent (44 out of 52) participated in the focus groups or, in a few cases, in structured interviews at their program sites. Lead and assistant teachers were interviewed separately to avoid possible discomfort in speaking about sensitive issues particular to each group. More details on the focus group participants are presented in Appendix B.

> You know how sometimes they send you to a training and you know they … leave you more confused than really helping you out…[The FOL trainer] was knowledgeable and knows what she's doing… She always had suggestions on how to try to fix it or make it better and less challenging for you.

- *Contribution to professional development.* Lead and assistant teachers valued the opportunity to discuss their classrooms without students present. The training was also seen as providing concrete knowledge that teachers could apply directly. For example, one teacher stated, "I don't have to hoop and holler. I could just hold up my hand, and they [the students] know what it means."

  That teacher's comment reflected a perception among teachers that by increasing their competence in managing classrooms, FOL had transformed the way they responded to challenging behaviors. Another teacher said,

  > I've seen a change in me. Because at four and five years old, they [the children] are going to always act the same. It's not about them changing. You have to change the strategy. You have to change your mindframe. And that was big….You have to have that understanding.

Most teachers were reluctant to see the trainings end, often feeling that there were more issues to be discussed and that they would miss the opportunity to interact further with their peers. There were, however, some concrete suggestions to strengthen the training. The average attendance of 40 or more teachers at training sessions presented a challenge for some. As one teacher noted, "It might have been just too many teachers at one time. I don't think everybody actually felt comfortable talking about certain issues."

In addition to preferring smaller groups, teachers also commented on the use of videos. They noted that, while the videos provided real-time opportunities to see other professionals using the same skills and concepts that the FOL teachers were learning, the children featured in the videos were sometimes older than preschoolers. On occasion, the differences in the age and cognitive abilities of the featured children reduced the relevance of the videos to the FOL teachers.

Classroom-Level Consultation

Implementation experience

When the CCCs entered the classroom in September, prior to the first teacher-training session, they began by laying the groundwork for positive consulting relationships. This

included familiarizing themselves with the classroom environment and context; developing a rapport with teachers, children, parents, and other school staff; and sharing information about the project. During this time, the CCCs did not engage in active consultation; their primary task was to acclimate themselves to classroom routines and norms, while also allowing teachers to become familiar with them and with the intervention. The CCCs accomplished this goal through simple methods, such as careful listening and sharing information about themselves and the FOL model, helping teachers with routine classroom tasks (for example, pouring milk, tying shoes, and wiping noses), and making general observations about classroom practices.

The beginning date of active consultation varied somewhat, but on average it was in mid-October. This came after the first training workshop and after CCCs had an opportunity to develop a rapport with the teachers. Working side-by-side with teachers, CCCs provided instruction on, modeled, and reinforced the strategies that were taught during the workshop. Although the consultation support lasted throughout the year, the FOL model stipulated that the intensity of the consultation would be strongest from October to January.

Focused daily debriefings, conducted either over lunch, during students' rest time, or after school, were a formal part of the day. This ensured that teachers and CCCs were on the same page and that they communicated with each other regularly. The debriefings were also a valuable opportunity to review classroom challenges and successes, assess whether the goals of the teacher and the model were being met, and find ways to adapt the program strategies if needed.

CCCs followed a manual that not only specified the amount of time that they should spend in classrooms, but also provided clear guidance about the activities in which they should engage. In order to take into account variables, such as teachers' receptivity to the intervention, CCCs had some latitude and professional discretion about the tasks that they performed, but any deviations from the manual guidelines were done in consultation with the MDRC project manager and the Family Connections clinical supervisors.

The teachers viewed the role of the CCC as quite important. As one teacher noted, "Sometimes you can sit in a workshop, you hear it, you've been sitting here for six or eight hours, you don't always remember everything. Or for me, anyway, it's better to have somebody in the room to reinforce what you talked about."

Another teacher emphasized the benefits of the CCCs' regular, weekly support, in contrast to what would have happened with more sporadic classroom visits:

> With the CCCs being there consistently, they [the CCCs] saw how things changed. Maybe this week it was a good week. Maybe the following week it wasn't a good week….With the CCCs, they were able to see how it was, the

consistency, and what happened on Friday, the following Friday, and the following Friday.

There were, however, some unanticipated disruptions. For example, crime and violence both at the sites and nearby had an impact on the work of the CCCs in a way that it did not during the FOL pilot phase. Instances of vandalism, theft, and robberies occurred in more than one site, and violence in the surrounding neighborhood caused a few sites to be placed on locked-down status. The CCCs' clinical skills and the guidance from supervisors were of utmost importance in helping students, parents, and school staff deal with these events.

Dosage

The number of classroom consultation hours varied because of events such as holidays and teacher or consultant absences, but on average the CCCs provided just over 162 hours (or about 23 days) of in-classroom consultation over the course of the academic year. (This compares with 228 hours and 35 days if the full schedule of in-class consultation had been provided.)[12] The number of hours of consultation per classroom ranged from a low of 66 to a high of 218 hours.[13] An analysis of Service Provision Form data indicates that CCCs generally adhered to the FOL model and provided the level and type of consultation that the model called for during the specified timeframes.[14]

Quality

Teachers also completed surveys that asked specific questions about the ways that the CCCs helped them implement what they had learned in the training sessions. As indicated in Table 2.3, the teachers rated the CCCs especially high (from 3.6 to 3.8 on a scale of 4.0) on their effectiveness in helping the teachers work on classroom management techniques, improve relationship-building with children, and spend more time teaching. The ratings were lower, but

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[12]Dosage takes into account time missed for winter and spring recess. The average dosage may be higher or lower for a particular site depending on how many of the CCCs' regular visits were scheduled on a professional development day, an early dismissal, or on the following holidays: Columbus Day, Veterans Day, Thanksgiving, New Year's Day, Martin Luther King, Jr.'s Birthday, Lincoln's Birthday, President's Day, Memorial Day, Puerto Rico Recognition Day, Election Day, and Administrative Day. Also, two of the sites did not have a spring break, so their dosage time may be greater than the average.

[13]The FOL model of 6.5 hours of consultation, one day per week, for 9 months in one classroom, is significantly higher in intensity and dosage than other models that have been described in the literature (see Brennan, Bradley, Allen, and Perry, 2008), although it is difficult to make exact comparisons because of inconsistencies in reporting methods.

[14]The Service Provision Form is a structured template that CCCs completed each week to provide snapshots of the teachers' and CCCs' FOL-related activities in the classroom. See Appendix C for a sample.

Foundations of Learning Demonstration

Table 2.3

Teacher Evaluation of the Clinical Classroom Consultants

Question	Mean Rating
How effective was the Clinical Classroom Consultant in helping you:	
Work on classroom management techniques?	3.6
Work on building your relationships with children?	3.8
Manage relationships with parents and coworkers?	3.1
Manage personal issues, like stress?	3.0
Spend more time teaching?	3.8

SOURCE: MDRC calculations of teacher responses to Clinical Classroom Consultant evaluation form.
NOTE: Clinical Classroom Consultants were rated on a scale from 1 to 4 with 1 representing "not at all effective" and 4 representing "very effective."

still positive, on the CCCs' effectiveness in helping teachers manage relationships with parents and coworkers and manage personal issues, such as stress. Although the model did include a stress-management workshop, the issues on which the CCCs' effectiveness was rated lower were not the primary focus of the FOL model.

Stress Management

Implementation Experience

Originally considered a relatively minor part of the FOL model, the stress management component turned out to be of great interest to the participating teachers. As discussed more fully in Chapter 3, the teachers felt considerable stress in both their personal and professional lives, and they believed that stress in one part of their lives affected how they handled other parts.

The CCCs' role included helping teachers understand how stress might exert an impact on their classroom performance, and assisting them in managing stress in proactive and positive ways. The lead and assistant teacher at each program were jointly offered a 90-minute, customized, on-site stress management workshop facilitated by the CCC Coordinator. The workshops were held in January and February because that was considered to be a particularly stressful time. Specifically, it was hypothesized that in January teachers' stress might be highest, due to the challenge of reacclimating children to classroom routines after the holidays. In addition, children tend to participate less in outdoor activities and spend more time in smaller indoor spaces during the winter months. The reduced opportunities for children to expend excess energy could contribute to acting out.

In advance of the workshop, teachers completed a brief survey about the issues that they wanted to address. The CCC Coordinator reviewed the surveys and, to the extent possible, tailored the workshops to teachers' specified needs. In addition, in order to make attendance and participation as smooth as possible, the CCC Coordinator worked with center and school administrators to secure coverage for teachers to attend the session, and a lunch was provided. Every effort was also made to schedule the workshop on a day when the CCC was present, so that the CCC could attend and help deliver the workshop.

Teachers were particularly pleased with the opportunity to identify sources of stress and learn specific techniques to reduce stress, and to communicate with each other with a mediator present. They did express some discomfort over having their coteacher join them in the workshop, which led to a suggestion that there be two workshops — one for each teacher separately and a second for them jointly. The teachers also requested longer and more frequent sessions, the use of relaxation tools (such as music), and more hands-on opportunities to practice the skills being taught.

Dosage

All of the sites received the workshop, and 49 out of 52 teachers attended their sessions. Lead and assistant teachers attended the workshop together in all but one of the sites. Whenever possible, the CCC assigned to a given site assisted in the delivery of the workshop, which resulted in CCCs cofacilitating 15 out of 25 workshops. The workshops were tailored to the needs of the participants, with topics including professional and personal issues such as managing deadlines, dealing with difficult colleagues, lack of personal autonomy and self-efficacy at work, domestic violence, financial challenges, physical and mental health, and management of familial responsibilities.

Quality

Teachers were asked to complete an evaluation at the end of each workshop. A total of 48 evaluations were completed (24 of 26 lead teachers and 24 of 26 assistant teachers). Evaluation criteria included teachers' understanding of stress and what kind of an impact it had on them professionally, their ability to identify the sources and symptoms of stress, and their understanding of how they could manage stress. Finally, teachers were asked whether the workshop was useful in helping them to manage and/or reduce their stress levels.

One hundred percent of the teachers either strongly agreed or agreed with the following two statements: "I have the tools/skills to cope with stress" and "This workshop was useful in helping me manage/reduce my stress." In addition, more than 85 percent of the teachers rated their facilitator(s) as excellent on content knowledge, presentation and style, and skill.

Individualized Child-Centered Consultation

Implementation Experience

By design, the CCCs' individualized services for selected children began after the teachers had completed their training and had an opportunity to use their newly acquired techniques, and after children had had an opportunity to respond. In February, teachers and CCCs jointly identified children who might benefit from clinical intervention. After obtaining parental consent, CCCs worked with the children for roughly a three-month period (March to May).

The CCCs provided the one-on-one services primarily in the classroom in order to reduce disruption to the children's school days, minimize stigma and parental burden, and help promote timely services (see Box 2.3 for an example of a clinical classroom consultation). The CCCs developed a treatment plan to reflect short- and long-term goals, and, to the extent possible, they collaborated with school social workers, the Preschool Intervention and Referral Team (PIRT), Head Start mental health consultants, and other individuals working with the child and family. In some instances, the CCCs also participated in Individualized Education Plan meetings.[15]

Sometimes, children required more intensive or longer support than the CCCs could provide. To address this need, the CCC Coordinator and program staff worked to develop relationships with service providers in the community. This relationship-building was important because a systematic review of community-based mental health resources by program staff revealed that services for children under age 5 in Newark were virtually nonexistent, and the few agencies that did provide assistance had lengthy waiting lists. The CCC Coordinator tried to expedite the referrals; however, if necessary, Family Connections, the agency that hired the CCCs, agreed to see participating children and their families.

Dosage

A total of 63 children received one-on-one consultation; the number of children per class ranged from 0 to 5, with a mean of 2.4. The children presented with (1) externalizing issues, such as physical aggression (for example, hitting), verbal aggression (for example, taunting, bullying), tantrums, impulsivity, and hyperactivity; (2) internalizing issues, such as anxiety, extreme shyness, and reduced socialization with peers; and/or (3) cognitive and behavioral

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[15]An Individualized Education Plan is a legal written document that outlines the services that a child with a disability needs in order to be able to progress during the school year. The plan is tailored to meet the specific needs of each child and is developed with the participation of those intimately involved in the child's care and educational process.

Box 2.3

**Case Example of a Clinical Classroom Consultation
with an Individual Child**

Tony (not his real name), a 4-year-old Portuguese male, has been having difficulty getting along with his peers and teachers for several months. He tends to have angry outbursts, and he occasionally uses inappropriate language and hits other children. The teachers and the CCC have very little contact with Tony's parents because his older sister brings him to the center. The teachers and the CCC jointly identified Tony as a child who might benefit from more one-on-one support. Consent from the mother for the clinical work was received during a regularly scheduled parent-teacher conference that the CCC also attended.

With consultation from her clinical supervisor, the CCC decided that play therapy might be a particularly useful intervention for Tony. The CCC worked with Tony for approximately 15 to 20 minutes every week in the dramatic play area of the classroom. Sometimes the intervention included other children in the classroom. In all cases, the CCC used toys in the classroom environment (such as dolls, cars, and airplanes) to allow Tony to communicate and process his feelings though manipulation of the objects.

During these sessions, the CCC learned that Tony's father recently "went away on an airplane and is not coming back." After connecting with the mother, it became clear that Tony's father was deported, and that the mother was reluctant to share this information with the school because of her own immigration status. The CCC continued to use dolls in role-playing games, in addition to other toy-based play therapy activities, to enable Tony to symbolically share and express his own feelings. The CCC also maintained more frequent contact with the mother about her work with Tony and together they developed a plan for him to be able to draw pictures for his father as a means of communicating his feelings of loss. In addition, the teacher incorporated a few stories and some puppet play into her circle time activities to facilitate conversations among all of the students about grief, anger, sadness, and loss, as well as ways to identify these feelings if someone might be dealing with them and ways to treat each other in light of them.

challenges, such as an inability to focus, decreased ability to self-regulate, and delays in language acquisition and expressiveness.

The Newark FOL model envisioned that the CCCs would conduct approximately 12 one-on-one sessions with each identified child. In actuality, the CCCs conducted between zero and 10 sessions per child, with a mean number of 4.7. The principal reasons for this shortfall included the timing of the receipt of parental consent, student absences, and the availability of CCCs to conduct the sessions. The CCC Coordinator needed to conduct some of the sessions because three of the CCCs were delayed in receiving their licensure; however, because of the number of children scheduled for services, the CCC Coordinator was unable to see every child on a weekly basis. Of the children who received clinical intervention, five were referred for additional services after the FOL intervention ended.

Chapter 3

Teachers' Reflections on the Foundations of Learning Demonstration

There is substantial evidence from teacher comments and other data that teachers perceived the Foundations of Learning (FOL) intervention to be helpful.[1] Teachers' classroom practices changed over the course of the school year, and the changes had a positive effect on the classroom environment. In addition to the quality of training, key factors that contributed to the results include the quality of the relationships that FOL engendered, the learning community it helped create, and the teachers' feelings of reduced stress.

In focus groups, teachers said that the training and in-class support led them to use the new FOL techniques they had learned. As one teacher stated, "I changed the way I treat, I understand the children socially and emotionally. I can say that I understand them much better because I changed the way I was working with them before with the new strategies."

Another teacher said,

> [T]his project has forced me, when children have negative behaviors, it's forced me to take a step back and say, well, why is this child acting like this, where I never did that…. I'm thinking, how did I deal with negative behaviors before I took the step back and said...what's going on and how can I change it? So I ask myself those questions now, and I find that it's much easier for me to manage my children. Much easier.

A third teacher reflected others' views that developing children's social and emotional skills was an important precursor to successful academic instruction:

> And to sit there at the beginning of the year and say, okay, you need to teach them this, this, this, this, this, this, all of those academic skills that, yes, they will get, they're going to get, but we need to focus on the importance ...about getting along so that they can focus ...enough to learn those academic skills.

The teachers' perceptions are consistent with other data. For example, with respect to changed practices over the course of the school year, the Service Provision Forms completed by

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[1]As in Chapter 2, the quotations from teachers in this chapter are representative comments from focus groups or, in a few cases, from structured interviews at program sites.

Clinical Classroom Consultants (CCCs) reported negligible use by teachers in late September and early October of the types of classroom-management techniques that the FOL intervention contemplated.[2] This is not surprising, since the teacher training and CCC support were just beginning at that point. However, by January and February, the Service Provision Forms reflect a considerable increase in teachers' use of the FOL techniques, and, in approximately 90 percent of the cases where the techniques were used, they were reported to be either "somewhat successful" or "very successful." The Service Provision Forms also indicated that the use of the FOL techniques continued at roughly the same level from January and February into May.

As noted in Table 2.3 in Chapter 2, teachers rated the CCCs between 3.6 and 3.8 on a scale of 4.0 on effectiveness in helping them "work on classroom management techniques," "work on building relationships with children," and "spend more time teaching." In focus groups, teachers said that FOL created increased opportunities for lead and assistant teachers to communicate with each other, seek each other's advice, and work as partners.

The teachers' perceptions are also consistent with the impact data comparing FOL classrooms with control classrooms.[3] Those data show that FOL improved teachers' classroom management (reflecting measures such as teacher sensitivity, management of student behavior, and classroom climate), classroom productivity (reflecting effective use of classroom time, including reduced downtime), and engagement of students (reflecting students' focus and participation in learning activities).[4]

Key Themes in Teachers' Comments

As depicted in Figure 3.1, the teachers' comments in the focus groups underscored three key themes: (1) the importance of collaborative relationships, including the new relationships between CCCs and teachers, as well as strengthened relationships between lead and assistant teachers; (2) the ways in which these relationships helped create an atmosphere characterized by greater cooperation and information sharing; and (3) the benefits of reduced

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[2]As noted earlier, the Service Provision Form is a structured template that CCCs completed on a weekly basis to document their own and teachers' FOL-related activities in the classroom. See Appendix C for a sample.

[3]Morris, Raver, Lloyd, and Millenky (2009).

[4]These findings are based on observations of the 26 FOL program classrooms and 25 control-group classrooms. Raters who were not part of the MDRC research team and were blind to the classrooms' intervention status were trained on the *Classroom Assessment Scoring System,* referred to as CLASS (see La Paro, Pianta, and Stuhlman, 2004, and Pianta, La Paro, and Hamre, 2006). The CLASS encompasses 11 dimensions that define and assess classroom quality, with each dimension scored on a 7-point scale from low to high.

Foundations of Learning Demonstration

Figure 3.1

**Major Themes and Subthemes of Teachers' Comments About
the Benefits of Working with Clinical Classroom Consultants**

Collaborative Relationships	**Learning Community**	**Stress Management**
• Enthusiasm • Immersion in the classroom • Acceptance by proxy • Safety • Respect	• Ongoing dialogue • Positive reinforcement • Concrete and practical feedback • Teacher connectedness	• Awareness • Improved capacity
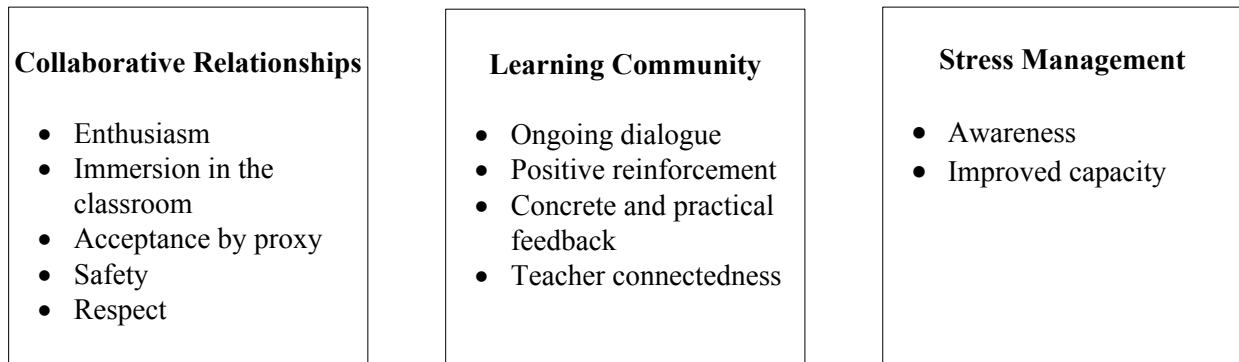
SOURCE: MDRC analyses of treatment teacher focus group interview transcriptions.

stress in teachers' professional and personal lives. The remainder of this chapter discusses each of these themes in more detail.

Collaborative Relationships

The FOL model recognizes that when CCCs enter the classroom in September, prior to the first teacher training workshop, teachers may have mixed reactions to the intervention and will not be clear about the CCCs' role. Indeed, when the Newark FOL teachers were asked about their first meeting with a CCC, some of them reported being skeptical and said they thought the intervention would be an imposition, while others were enthusiastic about the opportunity to develop new skills to address concerns they had about their classrooms.

Given this scenario, it is important to understand what CCCs did to make teachers comfortable with their presence and to foster a sense of collaboration and trust. The CCCs used several related strategies to create a bond that would enable them to avoid alienating teachers while helping to identify and correct weaknesses in what were sometimes long-held teacher practices.

Enthusiasm

CCCs were charged with motivating teachers to participate in the intervention and nurturing their growth in a variety of areas. By all accounts, CCCs who displayed enthusiasm were the most effective in motivating teachers to engage actively in the FOL intervention. One

teacher, who was initially skeptical about FOL, described how her CCC's approach to the work eased her trepidation:

> From the beginning she was very positive. And she was really excited and passionate about the whole project, so that kind of rubbed off on me, because she would just talk about it so passionately and she's really, really devoted to it. So it also helped me to kind of get on board and give it a shot.

Immersion in the Classroom

In addition to gaining teachers' commitment to FOL, the CCCs sought to empower teachers to develop their own capacity for effective classroom management. To achieve this, the CCCs needed to determine when to praise, guide, support, and challenge the teachers. As teachers noted, the ability of CCCs to strike a balance in this regard came with time and required the CCCs to have a consistent presence in the classrooms. CCCs not only needed to understand classroom routines and norms, but they also needed to become a part of the classroom. One teacher stated,

> She gets down and she does it all, you know, I'm going to put on his gloves, I'll help do lunch, I'll put down the cots, we'll get sheets. I mean everything to the point that she even said, "Oh you guys wear uniforms, I want a shirt…." She became so much a part of the team.

The CCCs' immersion in the classroom was also helpful in avoiding stigma that might have otherwise developed for those students who received one-on-one services later in the year. When asked if there was such stigma, one teacher commented, "No, not at all. Because the CCC blended so well in the classroom. It was almost like they called her the third teacher. They really didn't know."

If, on the other hand, a CCC failed to become a true part of the classroom, this could compromise the CCC's effectiveness. One teacher reported,

> She was very quiet, very observing, always jotting down notes…. I really wanted her to jump in to join the group.… There were times when I would even tell her, "Come a little closer," 'cause I saw that she was a bit distant, you know, just observing and seeing what I was doing in the classroom.

The relationship between this particular CCC and her teacher never solidified. Throughout the year, the teacher expressed frustration with the consultation process, indicating that she never felt supported and that she perceived the CCC to be disengaged. The teacher was unreceptive to collaboration or feedback because she thought that the CCC was not in tune with either the classroom environment or the teacher herself.

Acceptance by Proxy

Although the CCCs usually immersed themselves in the classrooms by helping children with concrete issues, such as tying shoes, even the immersion was not necessarily sufficient by itself. Teachers needed to be sure that the children accepted the CCC before the teachers also accepted the CCC. Seeing how open the children in her classroom were to the CCC had an impact on one teacher, who commented, "The kids…they expect her…they're by the door waiting…. It makes you feel good to know that your children are that comfortable with someone."

Safety

As was the case in the training workshops, teachers were more open to engaging in the FOL process and sharing vulnerabilities when they felt safe and perceived that their students were comfortable. One teacher noted,

> The first thing you kind of feel like, okay, she's going to critique me…but when she came in she…was a part of the classroom….. She tied shoes, she helped the children button, she did everything…. She made the children feel safe…so I looked forward to having her here the once a week that she comes.

Teachers' feeling of safety was aided by the fact that CCCs were not part of the school system and did not evaluate the teachers or report back to the teachers' superiors. As one teacher succinctly stated, "I think that the CCC position is to work with the teacher, the teacher's assistant, and the 15 children that she has. She's there to help the teachers and the children…[not to] evaluate or criticize."

Another teacher stated, "She basically came and she never judged…. You immediately have that ease when you know she's not gonna tell the principal this needs to get fixed, this needs to get done, this is wrong."

In contrast to some trainers that the teachers perceived as being present by mandate of the school district, the CCCs were seen, in the words of one teacher, as having a "heartfelt" interest in the teachers' work and the challenges they faced. This gave the CCCs a high level of credibility.

Respect

On numerous occasions throughout the school year, teachers lamented the general public's lack of respect for educators. They also reported feeling that public officials — and at times their own center and school administrators and parents — were unsupportive and failed to appreciate teachers' level of commitment or the challenges they faced. Most salient were teachers' feelings that they were not the masters of their environments, and that various curricu-

lar and other mandates limited their ability to function autonomously. One teacher discussed the lack of respect she felt when people from the state Board of Education visited her classroom:

> A lot of times you have people coming in our center, people from the [state] Board.... They just kind of come in, they're not real personable with you or the kids…. They come in…and the class turns into a jungle because they have their own method, strategies, and agenda.

Teachers particularly appreciated that the CCCs refrained from imposing their own standards, but instead treated the teachers with respect:

> Anytime [the CCC] wants to do something in class she always asks.... They [the kids] understand that it's still my classroom, I'm still in control — and it just sets the tone. I mean, I just love it.

FOL teachers valued the fact that CCCs provided needed support but trusted teachers to be competent educators. The CCCs entered the relationship not as authority figures but as partners. The creation of a teacher-centered consultation process, in which teachers' work and opinions were valued, was instrumental in building and maintaining positive consultation relationships.

Learning Community

In discussing their experiences in the FOL demonstration, teachers described an ongoing process of learning, doing, reflection, and feedback. This began with the five monthly training workshops, but also continued in other formal and informal ways.

Ongoing Dialogue

One means of formal feedback was through weekly debriefings between the CCCs and the teachers. The debriefings gave CCCs and teachers the opportunity to process what went well or not so well during the course of the day and allowed them to work collaboratively to define specific, measurable, and realistic goals that the teachers would undertake when the CCC was not on site. As one teacher described the process, "During the children's rest time we sit down and we talk about any issues that may have taken place during the day and how I approached them or my aide approached them, and what we could've done differently…. We also talk about plans and strategies that [the CCC] also assists on."

The debriefings were not only an opportunity for the CCC to give advice; they also provided space and time for teachers to generate ideas about their own behaviors and actions. One teacher commented,

The CCC is good at following up on things. If she sees I'm trying to work on a strategy, she won't say if it's right or wrong, but she will give suggestions on maybe this is what we should do to make it better. We always sit down before she goes home. Her, me, and my teacher's assistant, we brainstorm. We'll say, "Well, how was the day? What do you think would have made this day better? How do you think we could have made this incident . . . smoother?"

Positive Reinforcement

CCCs asked open-ended questions that helped teachers recognize and understand the problems they encountered. When direct feedback was given, teachers appreciated that it was framed in a positive and supportive manner. As one teacher stated,

When you use the strategy and it works, she'd be like, Ms. Teacher, I like the way you did that, and that makes you feel good…. If someone comes in the classroom they're never there to give you praise. We need praise, too. They're looking for the wrong things. "You're doing this wrong and this is not right." So I think it's good. I wish they could come more than once a week.

Concrete and Practical Feedback

While constructive feedback framed in an affirming way increased the likelihood of teacher receptivity, the ability of the workshop trainers and CCCs to translate theory into concrete, user-friendly classroom management suggestions promoted teachers' actual use of the FOL strategies. As one teacher noted,

One thing that this program has is — see, we've been in a lot of trainings in preschool; we've seen a lot of theories. This [the Webster-Stratton book described in Chapter 2]…will go with me…. I'm going to make sure that I follow that book. Why? Because it's not only theories, it's practice…. It's very important to me. It's not coming from theories, it's coming from practice.

Another teacher also welcomed the link between theory and practice:

I wish that I had this, like, as a class in college, or, like, that you could give it to all the teachers…because I'm telling you, you go to these workshops, they really don't give you techniques to use in the classroom…. Well, if they're jumping off the table, what do I do then? You're not helping me here. You know? So I mean it was, like, definitely specific techniques [that we learned].… Not everything's going to work in your classroom. You always have to understand that, but at least try something, you know.

Teacher Connectedness

Teachers appreciated that the FOL intervention valued the perspectives and participation of both the lead and assistant teachers. Since lead and assistant teachers attended the training together, and the CCCs worked collaboratively with both of them, teachers had numerous opportunities to communicate openly about their educational philosophies, understand each other's expectations for classroom management, and develop a common language and purpose for the classroom management goals.

This was no easy task. Neither the lead teachers nor the assistant teachers had received formal training on how to work with other adults in the classroom. Yet, they work very closely with each other, and, as they expressed, tensions can develop. One teacher likened the relationship between lead and assistant teachers to matrimony: "The teacher and teacher's assistant relationship is so important. It's a marriage. You know? You can have a good marriage. You can have a bad marriage. And I always like a good marriage."

Creating opportunities for communication was especially important to a long-time assistant teacher:

> I've been with the Newark Board for 37 years and this is the first training that I've ever had with my teacher. I've always had trainings, like, my teacher goes first and then you go, maybe months later. And when you come back, nobody shares anything. So I don't know what the training was about and she doesn't — nobody says anything. [Now] we talk together. We work out strategies together. It just seems like this is working. And it's never been like that in the past.

Classroom staffing patterns in Newark changed as a result of Abbott regulations. Fairly young teachers who had the requisite Abbott credentials were often paired with older, more seasoned teachers who were either demoted from lead teacher status or were unable to be promoted to lead teacher because they lacked a bachelor's degree. This sometimes created resentment and tensions that the FOL demonstration addressed.

Prior to FOL, experienced assistant teachers might be reluctant to share what they knew with the lead teachers, even if it could be helpful. FOL provided an outlet for that kind of communication:

> She's a young teacher and…I want to help her. Sometimes I feel…that she feels like I know more than her. It's not that I know more than her, I'm just used to [the children and the center]. And at the beginning she kept apart from me and I let it go. Little by little, now, we have our good communication. Everything is different.

Teachers said that they were not only talking with each other more and improving their relationships, but the demonstration also helped to cultivate a shared sense of responsibility about the classroom. A lead teacher stated,

> It's really hard…when you come from a training to go tell your [assistant] teacher. They may not understand it the way that the presenter is presenting it to you. Sometimes I don't even remember everything that was said…. But with this, it's a team [and] we're going to implement this together, we decided this together, we read this together, everything is togetherness…the result of this is going to be *our* result, not just mine.

Stress Reduction

The final major theme related to stress. FOL teachers said in a survey that they experienced multiple stressors in the course of their workday. Stressors cited most frequently by lead teachers included a lack of time to complete tasks, excessive paperwork, children exhibiting challenging behaviors in the classroom, and working with children with special needs. Assistant teachers consistently reported that education/certification requirements, issues with parents, classroom disruptions, and challenging behavior from children were among the issues that caused them the most stress.

Increased Awareness

Teachers described both personal and professional benefits from the stress management workshop. For example, in a routine visit with the MDRC project manager, one teacher reported that the workshop provided her with insight into how her weight was draining her energy, thus making her less responsive to the children in the classroom. The workshop was the catalyst for the teacher to begin eating better, exercising more, and taking care of her health. She also received positive reinforcement throughout the year from her CCC about this issue.

In the professional arena, the workshop provided an opportunity for teachers to examine the way that stress has an impact on their work and the ways in which one can deal with stress. One teacher stated,

> You really just had to think and slow down…and for me, it just felt like an epiphany. And that made me a better person, to utilize what you taught me because with some of the stuff you spoke about in there, I didn't know that I was dealing with it. So I think that part, it was very pivotal, where it was placed, when it was done. After the holidays, after the rush of the first session of work, after the workshops — even having to make the administrators give us this time so we can be better…. That was very pivotal.

Another teacher reported that the workshop helped address long-held tensions between her and her assistant teacher that had created stumbling blocks in the classroom:

> Last week I did the stress management workshop, and I think that was very helpful because [the facilitators] really let me realize how different I am from my aide and how we approach things differently…. We would've never sat down ourselves and engaged in a conversation and come up with the idea that, you know, we're just two different people, we approach things differently.

Improved Capacity

Finally, comments made by teachers suggest that the intervention itself increased their level of confidence and competence in dealing with challenging classroom behaviors. As one teacher stated, this led to reduced stress and increased job satisfaction:

> My purpose before was to get away from those kids. Those kids have changed so substantially with the strategies. Some still have a lot of work but…their behaviors are improving. So you can stay in the classroom a little longer. Like [the CCC] brought up, you don't look at the clock anymore.

Recognizing and addressing teacher stress may be one avenue to support more effective teaching. Teachers said that the primary benefits of stress reduction included improved class-room performance, better health, and potential cost savings that result from increased morale (which, in turn, might reduce teacher burnout and turnover).

Chapter 4

Tying It All Together: Lessons Learned

The findings from the Newark Foundations of Learning (FOL) demonstration come at an opportune time, given the increased interest at the federal, state, and local levels in promoting quality preschool programs. The FOL demonstration provides especially useful information for quality-enhancement efforts that seek to strengthen teachers' classroom management skills and promote children's emotional and behavioral development.

Review of Key Findings

The lessons in this chapter flow directly from the findings in the previous chapters, which considered whether FOL was implemented in Newark as intended, how FOL teachers' classroom practices changed over the course of the school year, and which factors contributed to changes in teachers' practices.

As shown in Chapter 2, the multicomponent FOL program model was largely implemented as intended, despite some challenges. The training workshops for teachers operated especially well: Of all FOL teachers, 79 percent attended at least four of the five scheduled sessions, and teachers gave high ratings (between 4.6 and 4.7 on a scale of 5.0) when asked whether the training content was clear, the training environment was conducive to learning, the trainers themselves were effective and clear, and the training enhanced the teachers' professional development.

Although the dosage of in-class consultation — averaging about 162 hours or 23 full school days — was less than the full amount scheduled, it was still much greater than that for most early childhood consultation models. For issues that were FOL's primary focus (support for classroom management techniques, building relationships with children, and spending more time teaching), teachers rated the Clinical Classroom Consultants' (CCCs) helpfulness at between 3.6 and 3.8 on a scale of 4.0. The CCCs provided one-on-one services for an average of 2.4 children per class, although the identified children received only an average of 4.7 of the 12 sessions that were called for in the program design.

The stress management workshops, which program planners had thought would be a secondary part of the FOL intervention, turned out to be very important to the teachers. All but three of the teachers attended the scheduled workshops, which they found to be of high quality and helpful in providing tips for handling stress.

As shown in Chapter 3, teachers changed their classroom management practices to adopt FOL techniques and, in particular, to incorporate increased attention to children's social and emotional development. The comments by teachers in focus groups and reports by CCCs were consistent with data showing that FOL improved teachers' classroom management (reflecting measures such as teacher sensitivity, management of student behavior, and classroom climate), classroom productivity (reflecting effective use of classroom time, including reduced downtime), and engagement of students (reflecting students' focus and participation in learning activities).[1]

Teachers' comments underscored three key themes: (1) the collaborative relationships with the CCCs and the strengthened relationships between lead and assistant teachers were important; (2) the creation of a learning community helped reduce teachers' sense of isolation by providing opportunities for cooperation and information-sharing, both between teachers in the same classroom and with teachers in other FOL sites; and (3) the identification and reduction of teacher stress facilitated the teachers' ability to use the intervention strategies.

Taken as a whole, these findings suggest that the Newark experience provides a solid basis for evaluating the impact of a program that was implemented with reasonable fidelity to the FOL program model.

Lessons for Individuals or Groups Interested in Adopting a Program Model Similar to Foundations of Learning

The remainder of this chapter draws on the findings from earlier chapters to present a number of considerations that policymakers, administrators, and teachers should take into account if they are interested in adopting a program model similar to FOL. The considerations are divided into three categories: program design, management and staffing, and training and professional development.

These lessons should be interpreted in light of the particular context in which FOL operated. For example, as discussed in Chapter 1, the city of Newark faces significant challenges common to other urban areas, but its preschool programs benefit from well-above-average resources, as mandated by the *Abbott v. Burke* decisions. In addition, FOL was a short-term research demonstration. This complicated certain tasks, such as recruitment of CCCs, who could not be assured of employment for more than one year. However, MDRC, serving as coordinator of the FOL demonstration, facilitated some tasks, identifying flexible private

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[1]Morris, Raver, Lloyd, and Millenky (2009).

foundation funding and providing support for certain aspects of program operations. Also, while FOL operated on a much larger scale than most demonstrations, the 26 sites in the demonstration's program group were still well short of the roughly 125 preschool sites in Newark.

Therefore, rather than offering definitive guidance, this chapter frames the types of issues that should be considered in efforts to replicate, or improve upon, the promising FOL experience in Newark. The appropriate application of these principles necessarily depends on specific local circumstances.

Program Design

The FOL demonstration tested an integrated, multicomponent program model. The FOL model includes five monthly training sessions of six hours each, with a carefully prescribed curriculum and expert trainers; weekly in-class consultation for most of the school year by master's-level staff who were carefully trained and supervised; a customized stress management workshop; and individualized consultation for selected children. At a time of strained budgets, it might be tempting to eliminate or scale back one or more of these components, but doing so could compromise the quality of implementation.

While the FOL demonstration did not test the effect of modifying the program design, careful thought should be given to the tradeoffs inherent in such steps as reducing the number of training sessions, the days of in-class consultation, or the skills, training, or supervision of the CCCs. Increasing the number of classrooms for which the CCCs are responsible could limit the important time they had in FOL for planning, reflection, and building relationships with teachers and children in each classroom.

An emotionally and behaviorally based intervention such as FOL can be joined with other efforts to enhance the quality of preschool programs. Because of the mandates of *Abbott v. Burke,* preschool programs in Newark are ahead of most of the country in implementing structural changes to promote quality in preschools, including, but not limited to, smaller class sizes, higher teacher salaries, and stricter teacher credential requirements. The FOL experience confirmed that these quality-enhancement efforts did not fully address teachers' classroom management needs, and that an intervention focused on children's social and emotional development can be integrated into classrooms with more resources than typically found in most preschool settings. Also, while Newark preschool classrooms used a particular curriculum (*The Creative Curriculum*), it is likely that the FOL program model could be used in conjunction with a variety of classroom curricula.

The FOL program model could be supplemented with more direct and substantial engagement of parents. Program planners recognized that parents play an important role in their children's social and emotional development, and *The Incredible Years* curriculum

includes training for teachers in establishing relationships with parents. However, the FOL intervention in Newark deliberately focused on teachers' classroom management and did not emphasize special outreach to parents beyond what the preschool programs already had in place. A number of teachers, as well as others familiar with the FOL demonstration, suggested that parental engagement might be made a higher priority.

The program design should take into account teachers' stress levels. Initially, the stress management workshop in the winter was considered to be a secondary part of the FOL model. However, teachers embraced this component — and some would have preferred more than one workshop — as an important opportunity to address the significant stress that they felt. Teachers emphasized the extent to which stress in their personal lives affects them on the job, and vice versa. One factor that might have contributed to teachers' stress was their feeling that they are often subject to excessive mandates that limit their control of their classrooms, and that administrators, public officials, and parents do not accord teachers the respect they deserve. The FOL teachers noted, however, that their improved classroom management skills, increased personal and professional insights, and efforts to change their personal lives all led to reduced stress, which they felt benefited both themselves and the children in their classes.

The program design should take into account the extent to which teachers feel isolated. Teachers are typically housed in a single classroom and do not have the benefit of substantial interactions with their peers. FOL teachers said that the demonstration helped to facilitate a level of cooperation and coordination, both within and across classrooms, that they had not previously experienced. Participation in training workshops with other teachers in the district enabled them to engage peers on classroom management strategies, challenges, and successes. (However, the fact that the FOL demonstration was conducted in only one classroom per site limited the demonstration's ability to reduce the sense of isolation; if the intervention is conducted elsewhere, efforts should be made to share information and experiences among all teachers within sites that have multiple classrooms.)

The program design should take into account the relationship between lead and assistant teachers. The FOL program model views the two classroom teachers as a team. By attending the monthly teacher trainings together, which apparently had not been the norm for previous trainings, the lead and assistant teachers could develop common goals and a shared vision. They also had opportunities to learn and practice the FOL techniques together. In addition, the CCCs consciously promoted information-sharing between the lead and assistant teachers. It could be useful to identify other opportunities for joint problem-solving by lead and assistant teachers.

On the other hand, it is important to acknowledge the possibility of tensions in the relationship between lead and assistant teachers. Because of this potential, some teachers suggested,

for example, that there be two stress management workshops: one for the lead and assistant teacher separately, and the other a joint workshop.

Management and Staffing

Particularly if run on a large scale, a program such as FOL requires an effective means to promote and coordinate the overall effort. The Newark experience confirms the feasibility of the FOL model in a major urban system but also suggests that implementation on a similar or larger scale requires a central coordinating mechanism. Having such a mechanism in place would help foster economies of scale and high-quality recruitment, training, and supervision of CCCs. It would also facilitate planning and conducting monthly training workshops for teachers who come from multiple programs across the city; the development of linkages with other classroom support efforts; and the provision of a mechanism for CCCs and teachers to engage in ongoing reflection, feedback, and problem solving.

In the Newark FOL demonstration, the coordinating role was played in part by the CCC Coordinator, in part by MDRC, and in part by school district staff. Whatever mechanism is used, there appear to be considerable benefits to having a source of technical assistance with sufficient capacity and time to support the project.

The FOL model appeared to operate well in each of the three types of venues. The FOL demonstration ran in public school sites, Head Start centers, and community-based child care centers. Although there were some differences among these venues — for example, the school-based sites tended to have better facilities but fewer preschool classrooms than the other venues — these differences did not appear to have a substantial effect on the acceptance of the program, teachers' attendance at the training workshops, or teachers' relationships with CCCs.

Consideration should be given to lodging the Clinical Classroom Consultants on the staff of an outside agency rather than employing them within the school system. Teachers consistently stated that their working relationship with the CCCs was enhanced by the fact that the CCCs did not evaluate them and were not employed by the school system. This encouraged teachers to share their vulnerabilities and struggles without fear that doing so would impact them professionally. In addition, the CCCs' employment by a well-established, community-based agency provided them with office space, office equipment, and clinical supervision they might not otherwise have had.

The appropriate organizational home for the CCCs will depend on a number of variables. Who will supervise and evaluate the CCCs, what information CCCs should share with school-district administrators, how CCCs can be integrated into a given school community, and how CCCs will relate to school-district staff who also provide support to preschool classrooms are all relevant factors.

Classroom consultants require a combination of clinical, communication, and interpersonal skills. At its core, classroom consultation is a relational process. The CCCs certainly required clinical skills to provide effective classroom support, deliver one-on-one services for selected children, and deal with violence and other community issues that affected the programs. However, their ability to communicate with teachers and their strong interpersonal skills were equally important; these helped ensure quality interactions with teachers, other adults in the academic setting, and with children. The FOL experience demonstrated the value of the CCCs' enthusiasm for the project, their ability to generate openness and receptivity by teachers, and their ability to gain children's trust.

Recruitment of classroom consultants could be a challenge. The FOL demonstration struggled to recruit and retain the required number of qualified CCCs. This was attributable, in part, to the short-term nature of the demonstration project, given that CCCs could not be guaranteed employment for more than one year. However, because of the importance of identifying CCCs with a particular combination of skills (which could also include proficiency in languages other than English), early and active recruitment efforts need to be in place; this challenge will be even greater if the program operates on a larger scale than did the Newark demonstration. Similarly, retention of the CCCs is important to maintain continuity in their relationship with the teachers and children.

The CCCs need to coordinate with other professionals who may be providing support to preschool classroom teachers. In Newark, the CCCs made a concerted effort to coordinate their work with the public school system's Master Teachers and Preschool Intervention and Referral Team (PIRT),[2] as well as the mental health consultants available to Head Start centers as part of that program's federal mandate. This coordination, facilitated jointly by the FOL project manager and a key school administrator, included a number of meetings to define roles and responsibilities and to share information about the work that was occurring in classrooms. In addition, when it was feasible, the CCCs attended meetings on individual children's development, such as for their Individualized Education Plans.

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[2]Master Teachers act as mentors and provide guidance to new teachers around issues related to the educational process.

Training and Professional Development

Teacher training should be grounded in theory while integrating real-world practicality. *The Incredible Years* curriculum has a sound research and theoretical basis, while also providing opportunities to incorporate real-world issues that teachers face in their classrooms. The FOL teachers stressed that the combination of theory and practice that characterized their training helped ground them in the strategies in a way that was particularly relevant to their everyday experiences.

FOL teachers valued the depth of content and the sequencing of monthly training sessions. In contrast to what are sometimes one-time training sessions, each monthly FOL workshop built on previous ones. As a result, teachers received in-depth exposure to strong content in well-spaced workshops, allowing them to test the FOL techniques between sessions, give feedback to the trainers, and see the feedback incorporated into subsequent sessions.

Careful attention should be paid to the number and type of attendees at the monthly training sessions. With an average of 40 people attending each session, the FOL training workshops probably reached the maximum size at which they could be effective. Indeed, some teachers felt that the sessions were too large to foster full and open discussion. While larger groups would presumably reduce the cost per attendee, the sessions could become unwieldy.

As noted earlier, participants stressed the importance of the lead and assistant teachers' attending training sessions together. It was also critical for the CCCs to attend these sessions, since their doing so promoted collegial relationships and common learning experiences. However, center administrators and supervisors were not invited to attend, because their presence could have discouraged teachers from sharing their views openly. (It is helpful, however, for administrators and supervisors to receive a separate orientation to the program, so that they can support the classroom teachers.)

Careful attention should be paid to logistical matters and incentives for attending training. In the Newark FOL demonstration, the training sessions were held on Saturdays, rather than on regular professional development days (in part to ensure that both lead and assistant teachers could attend together; it would have been difficult to get enough substitute teachers to cover classrooms if the training had been held during regular school days). To encourage attendance, the intervention offered the training in a central location, with free parking and child care, and teachers were compensated. In addition, hot meals and refreshments were provided throughout the day. Teachers' comments suggested that the incentives helped promote attendance.

It was important for the training sessions to be reinforced by regular in-class consultation. Valuable as the training sessions were, the focus groups and surveys confirmed the importance of the CCCs' regular presence in the classroom to model proper techniques and provide feedback. The effectiveness of the training sessions, classroom support from CCCs, and teachers' seeing changes in children's behavior all combined to motivate teachers to use the FOL strategies.

*   *   *

The foregoing lessons emerged from the implementation research conducted on the FOL program in Newark. (A preview of impact findings from Newark was published in September 2009.) Other reports from the project will present complete findings on the impact of FOL on the classroom environment and outcomes for teachers and children in both Newark and Chicago, as well as a benefit-cost analysis in Chicago. These reports, together with other emerging research, will continue to provide important insights into the feasibility and impact of efforts to strengthen teachers' classroom management skills and promote children's social and emotional development.

Appendix A

Description of Data Sources Used in the Foundations of Learning Implementation Report

Attendance Logs: Measures of program dosage were collected using attendance logs from the following sources: (1) teacher attendance at the training sessions, (2) Clinical Classroom Consultant (CCC) attendance in the classroom, and (3) teacher attendance in the classroom.

Service Provision Forms: The Service Provision Forms were completed by the CCCs on a weekly basis, providing information on the CCCs' role in the classroom, the order of treatment implementation, the type of challenging behaviors that children exhibited in the classroom, the ways that teachers responded to challenging behaviors, goals for the upcoming week, and whether the intervention strategies as implemented by teachers were effective for the current week. The forms also provided insight into the presence of behavior problems, the use of modeling and consulting (as reported by CCCs), and the use of the intervention strategies in the CCCs' absence (as reported by teachers to CCCs). In addition, the forms provided a snapshot of what the CCCs were doing in the classroom beyond consultation with teachers and children, such as assisting with meals and recess, collaborating with other school staff, and meeting with parents. This was useful for understanding the nature of program implementation and the amount of time the CCCs were on site.

Teacher Evaluations of Training: At the end of each training session, lead and assistant teachers at the FOL program sites were asked to complete evaluations of the session. These evaluations measured teacher satisfaction with the training component of the intervention, as well as the extent to which teachers perceived the training to be useful and relevant to their work in the classroom.

Teacher Evaluative Reports of CCCs: Lead teachers were asked to complete evaluations that reflected their experience and satisfaction with the CCCs. These evaluations included questions that focused on whether or not they experienced the CCC services as useful and valuable to them and their students.

Stress Management Evaluations and Stress Management Workshop Surveys: Administered before and after the stress management workshops to lead and assistant teachers at FOL program sites, these surveys identified sources of teacher stress and determined the extent to which the stress management workshops helped teachers to identify and/or to mitigate teacher stress.

Focus Group and Individual Interviews with Lead and Assistant Teachers: Interviews with lead and assistant teachers at FOL program sites were conducted to shed light on the daily experiences and issues faced by the teachers in the classroom. In addition, the interviews provided researchers with an opportunity to understand the prevalence of disruptive and challenging behaviors in the classroom, the strategies teachers used to handle such behaviors, the services available to assist with this process, and how useful or successful teachers found

them to be. Finally, teachers were asked to share their ideas about what might be done to improve the quality of services available to them and their students as part of the FOL intervention and within the school district at large.

Intervention and Programmatic Research Notes: These data included a variety of observational notes written by program staff during and after site visits, and notes from weekly CCC intervention fidelity meetings.

Individualized Child Treatment Plans and One-on-One Reports: These forms provided data on the dosage of services received by children given individualized consultation, the types of interventions conducted, and the number of referrals made once the consultation process was completed.

Focus Group with the Preschool Intervention and Referral Team (PIRT) and the Head Start Mental Health Consultants: The focus group data from the PIRT and the Head Start mental health consultants illuminated the ideas individuals in these groups had about the FOL intervention implementation processes, provided insight into the extent to which these groups coordinated with CCCs, and identified challenges associated with the collaboration effort.

Appendix B

Characteristics of Lead and Assistant Teachers

Foundations of Learning Demonstration

Table B.1

Characteristics of Lead and Assistant Teachers

Characteristic	Lead Teacher	Assistant Teacher
Female (%)	80.0	89.5
Male (%)	20.0	10.5
Mean age[a]	35.4	48.0
Race/ethnicity (%)[b]		
Black/African-American	55.6	52.6
Hispanic	22.2	31.6
White	22.2	10.5
Other	0.0	5.3
Taught preschool for 5 or more years (%)[c]	41.2	73.7
Holds bachelor's degree or higher (%)	100.0	0.0
Sample size	20	19

SOURCE: MDRC calculations from information collected on the teacher demographic survey and self-survey.

NOTES: Numbers represent only teachers who attended Foundations of Learning focus groups and returned the focus group survey or were interviewed one-on-one.

   Teachers who did not respond to an item were not included in the total when determining the percentage for that item.

   [a]Data are missing for this variable for five assistant teachers.

   [b]Portuguese teachers identified as either "White" or "Other."

   [c]Categories for this item overlap, so up to five teachers could be missing from the lead teacher total and up to three teachers could be missing from the assistant teacher total. Categories that were included are "Taught preschool for 5-10 years," "Taught preschool for 10-15 years," and "Taught preschool for 15 or more years." Categories that were excluded are "Taught preschool for 0-3 years" and "Taught preschool for 3-5 years." Additionally, data are missing for this variable for three of the lead teachers.

Appendix C

Sample Service Provision Form

NOTE: The form on the following pages includes drop-down boxes with items such as "helpful," "not at all helpful," and so forth, and also includes fields for more qualitative data entry. However, due to the nature of the form, these boxes and fields are not visible here, and show up instead as "SELECT."

SELECT   TEACHER

SPF #

CCC Name
Date   /   /
Site/Room #
Teacher:

Visit Report: Time in: Time out:

****

1. Teacher received: □ 1st training   □ 2nd training □ 3rd training □ 4th training □ booster □ all trainings
Received in: **SELECT**   **SELECT**   **SELECT**   **SELECT**   **SELECT**

2. Phase of model:
□ 1. pre-entry   □ 4. assessment   □ 7. direct services to children
□ 2. entry   □ 5. consulting   □ 8. referral
□ 3. joining   □ 6. stress and burnout   □ 9. termination

 3. **Did you spend time on:**
□ a) Assisting with morning activities
  (i.e. reading materials, coloring,
    manipulatives)
□ b) Assisting with meals
□ c) Assisting with recess
□ d) Assisting with classroom cleanup
□ e) Assisting with field trips
□ f) Attending school-related event/mtg.
□ g) Reviewing training materials
    with teachers
□ h) Coaching teachers on Webster-Stratton
□ i) Classroom-based intervention
□ j) Teacher stress reduction
□ k) Referral/providing resources to
    teachers

□ l) Consulting with parents/guardians
□ m) Referral/providing resources to
        parents
□ n) Securing parental consent for 1-1
    intervention
□ o) Direct child-level service
    provision
□ p) Collaboration with center staff (i.e.
    director, cook)
□ q) Collaboration with other on-site
    professionals (i.e. PRC, MHC,
    social worker, nurse, resource
    teacher) Who:
□ r) Other: (explain)

4. Goal

a.   State the goal(s) for this visit
b.   Who identified goals? **SELECT**

5. Techniques
        (1) Select the Webster-Stratton techniques used during this visit.
        (2) How did teacher rate the technique's effectiveness?
        (3) How would you rate the teacher's success using the Webster-Stratton technique?

a. Work with parents
        1) SELECT   **2) SELECT**   **3) SELECT**

Please explain any additional observations:

b. Build positive relationships with students
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

c. Proactive Teaching
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

d. Promote Positive Behavior
   (teacher attention, encouragement and praise)
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

e. Using Incentives to Motivate Students
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

f. Managing Misbehavior (ignoring and redirecting)
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

g. Managing Misbehavior (consequences)
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

h. Teaching students to problem solve
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

i. Peer problems and friendship skills
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

j. Handling Emotions
       1) SELECT   **2) SELECT**   **3) SELECT**
       Please explain any additional observations:

k. **1)** Were there other techniques used?
   2) How did teacher rate the technique's effectiveness? **SELECT**
   3) How would you rate the teacher's success using the Webster-Stratton technique? **SELECT**

6. Coaching Cycle
Did you and the teacher attempt any steps in the coaching cycle? **SELECT , SELECT, SELECT, SELECT, SELECT, SELECT**

Observation Notes:

7. CCC/Teacher
Discuss debriefing (any successes/issues/concerns/challenges brought up by teachers)

8. Goal Attainment
Have the goal(s) of this visit been met? **SELECT**
Explain:

9. Plans for next visit
1. What goals does the teacher want to work on for the upcoming week?

2. Please describe the intervention(s) that you and the teacher will use to meet these goals

3. With the intervention, please describe the roles of the:
      Teacher:
      Teaching Assistant:
      CCC:
      PRC:
      MHC (if NPSC only):
      Resource teacher:
      Others:

Clinical Classroom Consultant Signature: Date: /   /

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Founded in 1974 and located in New York City and Oakland, California, MDRC is best known for mounting rigorous, large-scale, real-world tests of new and existing policies and programs. Its projects are a mix of demonstrations (field tests of promising new program approaches) and evaluations of ongoing government and community initiatives. MDRC's staff bring an unusual combination of research and organizational experience to their work, providing expertise on the latest in qualitative and quantitative methods and on program design, development, implementation, and management. MDRC seeks to learn not just whether a program is effective but also how and why the program's effects occur. In addition, it tries to place each project's findings in the broader context of related research — in order to build knowledge about what works across the social and education policy fields. MDRC's findings, lessons, and best practices are proactively shared with a broad audience in the policy and practitioner community as well as with the general public and the media.

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- Promoting Family Well-Being and Children's Development
- Improving Public Education
- Raising Academic Achievement and Persistence in College
- Supporting Low-Wage Workers and Communities
- Overcoming Barriers to Employment

Working in almost every state, all of the nation's largest cities, and Canada and the United Kingdom, MDRC conducts its projects in partnership with national, state, and local governments, public school systems, community organizations, and numerous private philanthropies.