

Prevention Through Collaboration: Family Engagement With Rural Schools and Families Living in Poverty

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Many families living in rural poverty endure toxic stress and trauma, contributing to challenges in engaging with their children's schools. Rural schools also face challenges in partnering with these families. Family engagement as a prevention approach, implemented by a team of social workers in collaboration with a rural school district, is presented as a case example to describe an emerging model. The conceptual framework, developed through a community-based participatory research approach, is (a) strengths-based, to support and enhance the parents' existing capacity; (b) trauma-informed, to understand and respond to the physiological and psychosocial impact of toxic stress; and (c) systems-focused, to facilitate change within the school system to make it responsive to the families' needs and strengths.

IMPLICATIONS FOR PRACTICE

- This study demonstrates ways in which trauma-informed practices can be applied to mezzo- and macro-level services.
- Lessons learned from these efforts show that initial systems change can occur with outreach to a small sample of hard-to-reach families, potentially creating system readiness for larger change.

The social worker and master of social work program (MSW) interns arrive on a sunny summer afternoon. The adults in the community relax in chairs, easy banter among them. Babies are cradled in arms or are resting in strollers. Older children play in the yard; the teens sulk and flirt. A 4-year-old shows off her turtles and her sister brings out the pet ferrets. Dogs playfully roll in the grass. The community sits in the woods, the only road tapering off up the hill, not easily connected with any other. The mobile homes in the background are ragged and rusting, tenuous shelter in varying stages of decay. Two moms step out to greet the team, upset and hoping for resolution regarding a miscommunication with the school.

There are approximately 40 children in Pleasant Grove, 17 of whom attend school in the small rural district 5 miles away over country roads.¹ All of the parents dream that their child will be the first in the family to graduate, but describe contentious relationships with school administrators and teachers. The parents grew up in rural poverty and are now at the lowest end of the socioeconomic spectrum where their families are exposed to high levels of physical and psychosocial stressors daily. The school district is located in upstate New York and serves approximately 1,400 students, some middle class and some

extremely poor. Few of the school administrators and teachers call this community home, since they live in surrounding urban and suburban areas. Graduation rates and scores on state tests for children from the financially poor families are lower than for the district overall, particularly in the early grades. The district requested help, noting that the families of students with the highest level of need were often the least engaged in school activities and their children's education. To develop productive engagement with these families, a conceptual framework has been needed that is: (a) strengths-based, to support and enhance the parents' existing capacity; (b) trauma-informed, to understand and respond to the physiological and psychosocial impact of toxic stress experienced by these families; and (c) systems-focused, to facilitate change within the school system to make it responsive to the families' needs and strengths.

Randolph, Fincham, and Radey's (2009) systems-focused model of family engagement as a prevention strategy informed the initial phases of the work. A trauma-informed approach supplemented this model, using the most intense outreach methods to engage a community of families dealing with toxic stress. Community-based participatory research (CBPR; Minkler & Wallerstein, 2008), which is closely connected to grassroots community work and welcomes the knowledge of people who are also "subjects" of the research, informed the emerging model through a social research and development process. The work with the Pleasant Grove families is presented as a case example to describe the essential components of the emerging model. While the model is still in a pilot phase, its core components and practices are presented with the goal of demonstrating benefits that can add to the knowledge base about initial phases of family engagement practice with financially poor rural families.

¹ The name of the community and names of individuals have been changed to protect their privacy.

Core Components for Family, School, and Community Partnerships

Strengths-Based

A strengths-based approach assumes parents can be effective advocates, take full advantage of support to increase school engagement, and be productive partners in their children's education. School personnel may not understand the factors contributing to the enduring poverty of the poorest families, and can judge them harshly. As noted by Weiss, Bouffard, Bridglall, and Gordon (2009), parents impacted by poverty are often not thought of as allies in their children's education, may be discussed with disparaging language, and can be accused of hindering their children's success. Families living in poverty are exposed to environmental and psychological stressors and often become disengaged with the school system (Rebell & Wolff, 2012). Teachers often develop perceptions of families and create plans for student support based on experiences with parents who have cultural capital; they may devalue parents whom they perceive as lacking skills and strengths (Alvidrez & Weinstein, 1999). Supporting families' strengths helps build the parents' sense of competence and provides opportunities to demonstrate their skills and motivation to school personnel.

Trauma-Informed

Advances in neuroscience, biology, epigenetics, and the social sciences are explaining how exposure to toxic stressors can become biologically embedded, setting the stage for innovative approaches to prevention and intervention (Odgers & Jaffee, 2013). Negative childhood experiences contribute to changes in *allostasis*, the biological systems responsible for maintaining physiological stability during environmental changes (Danese & McEwen, 2012). High allostatic load has been associated with low socioeconomic status (SES; Szanton, Gill, & Allen, 2005) and toxic stress, the strong, frequent or prolonged activation of the body's stress management system (National Scientific Council on the Developing Child, 2005). Toxic stress can negatively impact brain development and contribute to cognitive and learning challenges (Cortiella, 2009), impairment in executive functioning (Center on the Developing Child at Harvard University, 2011), and poor attention/concentration (Gutteling et al., 2006). All of these concerns present challenges to learning and social-emotional development for the growing child, and continue into adulthood if not adequately addressed. Studies on intergenerational trauma (Dekel & Goldblatt, 2008; Yehuda, Halligan, & Grossman, 2001) help explain how toxic stress can impact fetal development, influence parenting, and be transmitted

to children, who themselves are exposed to chronic or toxic stress.

Pleasant Grove parents frequently discussed their histories of childhood abuse and neglect, and experiences witnessing domestic violence, substance abuse, and other traumatic events. Responding to the impact of these adversities, in addition to the chronic stress associated with poverty, is essential for effective engagement. Our trauma-informed family engagement approach contextualizes families' troubles within ongoing toxic stress and intermittent traumatic events. Intervention supports healing and enhances coping skills in the face of trauma and in the process of engaging with schools.

Systems-Focused

The trauma and toxic stress that surrounds the families of Pleasant Grove are interpersonal in nature: they have been hurt by people and systems represented by people. Thus, healing must take place with and within systems and it requires reciprocal partnerships characterized by peacefulness and respect. The culture that has emerged from the profound daily struggles of the Pleasant Grove community is not familiar to the largely middle-class personnel of the school district, and this negatively impacts relationships. When parents and schools work together, children are no longer responsible for navigating divergent cultures of home and school (Epstein, 2001). As school personnel understand each child's life outside of school, they are able to approach families with informed sensitivity, respect, and willingness to explore creative alternatives to achieve positive student outcomes.

As with many isolated, financially poor communities, the social network of the Pleasant Grove residents is enmeshed with extended family members who have little affiliation with capital-building professionals (Horvat, Weininger, & Lareau, 2003). Systems-focused family engagement helps parents understand the school system as a whole, including learning about the many roles of professionals in the school (Olsen & Fuller, 2008), decreasing the sense of injury when things go wrong and increasing parents' abilities to advocate effectively.

Rural Community Family Engagement Pilot Prevention and Research Project

This family engagement work has been supported by the federal Safe Schools/Healthy Students initiative. A local university is a primary partner on the grant and is responsible for developing and implementing a range of services and innovations to improve school climate. The participating social work team includes

a full-time licensed social worker based in the school district who supervises four MSW interns, each of whom spends 15 hours a week on-site, dividing their time equally between providing school-based services to students and outreach in the community.

The social work team initially conducted a “windshield assessment,” driving through the communities served by the school district to identify visible factors of strength and need. School personnel identified the rural Pleasant Grove trailer park as an area with high poverty, disengaged parents, and many children receiving special education services, but cautioned against conducting outreach there due to perceived danger and violence. The team’s windshield assessment confirmed the residents’ poverty; talking to the community members uncovered their skepticism about the school, and also showed their strengths as a group of caring parents with high hopes for their children.

School administrators have been supportive of the initiative from the beginning. The superintendent allocated Title 1 money to support activities, provided space for meetings, arranged for bus transportation so the parents could get to meetings when their transportation failed, and encouraged other administrators and leaders to support the endeavor.² Despite their support, however, most school administrators and staff were also skeptical. Their doubts began to ease by the end of the first year of this work when evidence of real connections with the families brought forth discussions about ways the outreach enhanced understanding and collaboration.

The family engagement work did not begin as a research project. As the social work team moved deeper into the work, however, they realized that there was very little in the family engagement literature that informed work with traumatized populations, and the trauma recovery literature largely focused on therapeutic treatment. They turned to their university partner for guidance, and discussions began about a CBPR approach to contribute to the knowledge base. The process was discussed with the parents and school district administrators, all of whom expressed excitement for the idea that parents’ experiences and opinions were valued and could potentially contribute to others’ knowledge. While parents were assured that participation in the research was not a requirement for taking part in family engagement activities, all chose to move forward as research participants. The university partner received a letter of agreement from the school district, internal review board approval from the university, and informed consent from participating parents.

² Title 1, as part of the reauthorized Elementary and Secondary Education Act (i.e., No Child Left Behind Act of 2001), provides supplemental federal funds to school districts serving disadvantaged students.

At the end of the first school year, parents participated in a focus group (described later), responding to broad-based questions designed to assess their experiences with the family engagement efforts and inform the team’s approach to practice. The focus group, facilitated by the principal investigator who was previously unknown to the participants, was audio recorded and transcribed, and the social worker took notes during the meeting. The principal investigator, social worker, and a former MSW intern with the project analyzed the data, utilizing grounded theory methods. They developed initial codes, condensing the data into categories, and axial coding, identifying concepts that clustered together (Padgett, 2008). Attempts were made to member check the codes and concepts with the focus group participants, some of whom provided feedback that helped refine the interpretation of data; however, most were not interested in examining the data. A description of the practice model follows, along with a review of the nominal needs assessment process and focus group data, all of which augment the team’s experiences with families and school personnel in continual refinement of the family engagement model of practice.

Building Trust: Trauma-Informed Outreach

Outreach with the families is informed by a trauma-recovery model designed for systems intervention. The trauma-informed Sanctuary Model[®] was originally designed as an inpatient treatment model for trauma survivors, but its key elements have informed work in other systems and can be applied to schools (Bloom, 1995). The Sanctuary elements used in this model of family engagement practice include: (a) a democratic process where the voice and authority of families and school personnel are respected with attention to the differing roles and responsibilities of the people involved; (b) an appreciation for the validity of multiple perspectives; (c) the articulation of shared assumptions about the purpose of the project and the strengths and needs of the people involved, including the assumption that the families’ troubles are rooted in trauma. The fourth component of Bloom’s model, a common language that helps move people through a path of healing, will be part of the next phase of development.

The social work team repeatedly visited the Pleasant Grove community, knocking on doors and talking to people sitting in their yards. Demonstrating the democratic style, practice began with workers telling parents that they wanted to know what it was like to be a parent in the district, expressing that the parents’ voice was important to ensure that the school district served all families, not only those who showed up at school events. Families were polite, but wary. Many would begin the conversation by stating, “You don’t

want to hear what I have to say,” conveying both anger at the school and the belief that the team’s information gathering was futile. By listening and respecting the parents’ views, the team began the process of building the multiple perspectives necessary to work toward systems change.

Concurrent with the outreach, the team provided support to students and parents with specific problems or concerns. Team members followed up with families using a model of strengths-based practice by inquiring whether they had found resolution to problems previously discussed and asking whether they needed anything more from the school or social work team. After a month of visiting at least once or twice a week, the team was no longer seen as a threat.

Healing With and Within the System: Multiple Perspectives and Shared Assumptions

For the project to be successful, the school system needed to also be engaged as part of the practice model, and their experiences incorporated into the systems-focused approach. To ensure a strong foundation, the team’s social worker first focused on building trust and buy-in with the MSW interns. The MSW interns were eager to learn about social work within a school setting but wary of making visits to a community often devalued by school personnel; some confided that the outreach work made it impossible to ignore their own prejudices and biases.

To build toward the development of shared assumptions about the strengths of the parents and an understanding of the impact of toxic stress on their daily lives, the team began a series of formal and informal meetings with school personnel. Teachers often expressed frustration; they did not consider the parents capable of being viable partners in the education of their children. Discussion of the lifestyle and circumstances of the lowest income students revealed unrealistic expectations held by some teachers. One complaint from teachers was that parents do not respond to their phone messages, not realizing that the most cost effective phone service is a cell phone with pre-paid minutes that provides inconsistent coverage. As a result, parents sometimes do not receive calls due to lack of service, or do not listen to messages or return calls due to limited minutes. Email is unrealistic for families that do not have Internet service or are not computer literate. Notes home can also pose a barrier, as was discovered when working with one mother. She had saved and filed every school note, understanding their importance, but she was unable to read. This mother did not want to obscure parental boundaries and authority by having her son read notices intended for parents, and she was too embarrassed to confess her illiteracy to the teacher, so she did not respond.

Serving as mediators and advocates, the social work team helped teachers understand these perspectives and experiences, creating movement toward shared assumptions about the nature of the difficulties.

Strengths-Based, Democratic Nominal Needs Assessment and Parent Leadership Training

After 2 months of community outreach and building individual relationships with parents, the families were invited to a holiday party held at the high school in the evening. Sixty-one people (24 adults and 37 children) attended the party, representing 17 families. The parents were invited to come to a separate meeting to talk about working together to identify and solve some of their concerns with the school. Approximately three weeks later, 9 parents attended the first formal family meeting held at the local preschool. Four more joined the second meeting, bringing the total number of participants to 13.

At these meetings, the social work team facilitated a process of nominal needs assessment to understand and validate the multiple perspectives and shared assumptions. Each person was asked to write a list of what they identified as barriers to success for their children and family, using their own definition of success. Participants were assured that no one would look at their list, so they need not be concerned about spelling or penmanship. When needed, MSW interns helped parents document their ideas. Each person then verbally shared their list with the group, generating discussion and the identification of several common concerns. Concerns ranged from differences in values (e.g., “Since they took God out of the schools, I can’t trust them”) to a breakdown in communication (e.g., “How can I help my child do better in school if I don’t understand what the teacher wants them to do?”). The needs assessment continued weekly for 12 weeks as the group refined and clarified core issues. During this time, membership fluctuated, but a core group of committed members began to emerge and participants began identifying skills they needed to be more effective, leading to a decision to develop a parent leadership training (PLT) class.

Consistent with the strengths-based, democratic perspective, the PLT class was developed by the parents, who identified topics and determined how the sessions would be conducted. Parents made recommendations regarding the time and length of meetings, determining what would meet their learning needs and schedules. They were provided gas station gift cards for transportation. The 20-hour class, facilitated by the social work team, reflected the areas parents wanted to develop: communication, conflict resolution, and goal-setting skills. Instruction combined didactic lecture and experiential activities. At

the conclusion, those who had completed the full 20 hours of instruction graduated in a ceremony that was attended by school district administrators, including a board of education member, superintendent, director of curriculum and instruction, and school principals; the town mayor; representatives from the university; and children, spouses, and other family members of the graduates. It was the first time any of the parents had graduated from any type of course or training, and they were bursting with pride.

Pleasant Grove Family Participants and Focus Group Themes

In order to supplement what was being learned informally about best practices for family engagement with schools in this rural community, the social work team wanted documentation of the exact words of the parents. A focus group was held, and participants included seven women and one man; all identified as White and ranged in age from 23–56. While referred to generically as “parents,” two of the participants were grandparents, one raising her grandchildren and one as both parent to a young child and grandparent to a student in the schools. Most had more than one child; all had children in preschool and/or primary school (kindergarten through third grade) and one also had a child in middle school. All the parents left high school before graduation; one later completed a GED. While their incomes placed them at or below the poverty line, when asked about their SES status, they stated that they were “just barely getting by” or “making it, but worried about long-term financial goals.”

During the 2-hour long focus group, six of the women did all the talking. The male member, Duke, and the youngest mother, Christine, listened closely and nodded approval frequently, but did not contribute verbally even when prompted. Questions were rarely answered directly, but analysis of the transcripts showed concerns that fell into themes that support the core components of strengths-based, trauma-informed, and systems-focused family engagement practice: (a) communication with school personnel; (b) feeling excluded due to stereotyping and discrimination; and (c) benefits of the trauma-informed approach.

Theme 1: Challenges in Communication—Need for Systems-Focused Interventions

The parents identified communication with the school as their primary concern. As one mother stated, “Yes, [communication] is the biggest issue to this point that we want to work on.” The parents were very clear that they want to be involved in their child’s education and desire a partnership with their child’s teacher. They felt, however, that the teachers’ communications were

not only inconsistent, but the manner or methods of communication did not fit their needs.

Mr. [principal’s name] was the one who dealt with it, but he went home sick—but he never even called me, she [another staff member] ended up calling me back and telling me this is what happened, even though he was the one that gave [my son] the discipline. I didn’t like that; I wanted to hear from [the principal] what he heard happen. (Amelia)

Families identified that they were increasingly able to see the new parent leadership group as a system of mutual aid for improving communication with the school and building the capacity to work together for positive change.

It’s like, even though your kid has this issue and my kid has this issue and their kid has this issue, it all comes down to the way the school is dealing with the parents....So that’s something we as a group can handle. We...can advocate for a better communication system district-wide that is going to benefit every child. (Erika)

Theme 2: Stereotyping, Discrimination, and Exclusion—Need for Strengths-Based Approach

The family members made statements indicating they felt negatively judged or singled out because of their SES status, inhibiting their trust in the school personnel.

A lot of [other parents] say they are afraid... they are going to be judged by the school on how they run their house and how they dress and everything. (Eunice)

The nurse likes picking on Sienna real bad, about the lice and [if] she can’t complain about that she’s complaining about body odor and I don’t think it’s fair. (Betty)

The parents expressed that school personnel do not understand the struggles they have with poverty. For example, they feel in a bind when asked to contribute to school activities. They do not have the money, but they also do not want their child to go without. Adding to the sense of stigma, the parents painfully expressed that school personnel do not believe that they care for their children.

Sometimes I think that they think we don’t care, or [we] don’t have enough time in the day.... Not that they don’t care, but they think that *we* don’t care. (Amelia)

As with other painful experiences, only one parent was able to verbalize her feelings, but all of the others around the table nodded to show their support, indicating they, too, had similar experiences. Duke shook his head, his eyes downcast; Christine looked away.

The parents also felt excluded from the existing parent groups, such as the Parent Teacher Association, because they felt stigmatized by their low incomes and inability to fit in.

We're trying to explain to them dressing doesn't make a difference. It doesn't make a difference to us in this group, how we're dressed or what we look like. We're just here to try to get to the school, so we can get our community to work with the school. (Eunice)

The participants also expressed surprise that the social work team was genuinely interested in them, and gave indications of positive reframing of their image of their community by incorporating the team's term, "mobile home community," rather than trailer park.

I think at first I was, "Oh, yeah, whatever, you know, yeah they really care what we think." If they only knew what I think! I went up to my uncle's to ask, "Are they just coming up here to be nosy and coming to our trailer park?" [even though] it's not a trailer park anymore, it's a mobile home community, and then I started coming to the groups and stuff and, oh wow, they really do care, they do care what we think. (Amelia)

Theme 3: Benefits of Trauma-Informed Support

The benefits of trauma-informed work were clear in the discussion. For example, one aspect of trauma-informed intervention is to help the individual understand when she has been triggered and how the chain of physiological responses to stress and danger take over, influencing behavior. The social work team had done considerable work with one mother, helping her to understand her reactions and those of her sons to increase her ability to calmly handle stressful situations. This mother described a situation with her sons, one of whom becomes very anxious on the bus if he is separated from his brother. The bus driver did not know this, and was separating the boys, resulting in one of the boys having "a meltdown for 3 to 4 hours afterwards—crying, throwing stuff," according to his mother. She described new ways she had learned to control her reaction and effectively handle the situation.

I went down and talked to the bus driver. I didn't yell, I didn't scream. I just went down to talk to the bus driver and said they can't be separated....[The social worker], she helped me set up so I could talk

with them and everything else so, just to learn to communicate with them, to be calm and collected and to think out what you're gonna say to them before you actually say it. [I learned to] step back and to calm yourself down and wait a period of time. (Lucille)

Also supporting the trauma-informed approach to practice, which emphasizes planning for the future rather than only dealing with the moment, one of the participants made a statement that was met with nods of agreement and approval by others in the room:

I learned if I set a goal, to go through with it instead of pushing it off. (Bea)

Systems Change: The Few Influence the Whole

The eight parents who participated in the PLT and focus group remain at the center of the engagement activities, while the social work team continues to reach out to additional families in Pleasant Grove and in similar communities. Leaders in the school have also been consistently involved, and they are able to apply what they are learning from their relationships with these families to promote systems change. A principal requested the families' help in designing a parent flyer to educate parents about school attendance, recognizing that the flyer the school staff designed would not appeal to many parents. Several teachers have expressed that they have a deeper understanding of the students' needs, and some are working to adjust classroom management and lesson plan design accordingly. One teacher, who previously believed a parent to be unfit, became her strong defender and advocate during a crisis. It is important and encouraging to note that these systemic changes are not the result of some critical mass of parent engagement, but in response to deeper relationships among a few people that built an understanding for the need for systemic change. It is hoped that these system changes will influence overall school climate, and more inclusive family engagement will be the norm.

Discussion, Lessons Learned, and Recommendations

One of the basic principles of trauma-informed work is that the individual or group is approached with the assumption that the trouble is related to "what happened to you" rather than the more judgmental "what's wrong with you." The parents repeatedly noted that they felt judged by others, and they were deeply hurt that some people think they do not care about their children. Early conversations with teachers confirmed the parents' perceptions, and some teachers openly

stated that the parents in this demographic did not care about their children, listing examples of what they considered evidence. The examples, however, often illustrated lack of communication with parents or lack of understanding of their circumstances that generated misunderstanding. The teachers did not understand that these parents have similar concerns about performance and behavior, and share the same goals of educational success and graduation for their children. A trauma-informed approach created opportunities for school personnel to question their assumptions about parents' behavior, and develop dialogue that moved toward helping parents build social capital and the generation of solutions.

A trauma-informed understanding also helps explain some of the difficulties that arise in communication with people dealing with toxic stress. The Pleasant Grove parents' conversation style is not linear, sometimes making it difficult to understand their meaning. Their voices are often loud and they use profanity freely, which can be interpreted as aggressive, putting those on the receiving end on the defensive. Some teachers do attempt to communicate with the parents, but appear to give up when the parent continues to be experienced as "difficult." Those who do not have an understanding of the physiological impact of trauma and toxic stress most likely do not realize that the parent may have been triggered or moved into a state of heightened response by a stressful situation perceived as dangerous by an overtaxed biological system. Because communication with parents is a critical component of children's school success, teachers need to find ways to engage them. Communication must happen in a manner that is culturally appropriate for the family, responsive to the injury they have experienced, and sensitive to their daily stresses. Likewise, parents need to find ways to communicate in order to "be heard" by school personnel. Supporting parents in developing and participating in the PLT helped them develop skills for such communication, and is an example of lessons learned by parents.

Home visits and outreach in a rural community can be a critical part of a prevention approach for school personnel. Activities such as walking through a neighborhood, knocking on doors, and saying "hello" make a big difference. When school personnel get to know the neighborhoods their students live in, community members begin to see school personnel as caring people willing to leave their safe confines, and a climate of true collaboration on behalf of children can be fostered. As those with social capital become more connected to the community, healing relationships promote a reduction of toxic stress for residents. Employing social work interns who were initially reticent to participate in these efforts provides lessons learned

for them and helps prepare the next generation of social workers in this practice model.

Since the parents associate the social work team with the school, the trust established with them extends to school personnel. While there remain indications of an us-versus-them attitude, parents also demonstrate a growing awareness that there are caring, responsive professionals at the school. The generalized sense of trust may be an indication that if school personnel are seen making contact in the families' social milieu, the school culture may be perceived as more welcoming and inclusive. The expanded learning that occurs for school personnel through this work improves their receptivity to parents, ultimately helping to narrow the gap between children's experiences and values at home and at school.

While it is recommended that all school personnel participate in family engagement throughout the school year, there are benefits to having staff dedicated to focused engagement with the hardest to reach families. Lessons learned from these efforts have shown that initial systems change can occur even with outreach to a small sample of hard-to-reach families if school personnel are invested as partners in the process. The value of bringing marginalized families together to support their ability to find empowerment through mutual aid has benefits not only for the families, but for the school system, and is an important lesson for all. An additional lesson learned from this phase of the work is the use of language to support a social construction process. For example, referring to Pleasant Grove as a mobile home community instead of a trailer park helped reframe their stigmatized living environment as a community or neighborhood. Allowing parents to share their experience through storytelling, even when the stories appeared unrelated to the topic, was important both as cultural responsiveness and to support the process of developing a healing, strengths-based personal narrative. Reminders that the goal was "progress not perfection" was important for all parties involved during periods when outcomes were not yet clear, and supported the parents in feeling proud of themselves and hopeful about the school, even when pace of growth and change was slow.

This trauma-informed family engagement approach dedicated to working with parents individually and in small groups has proven beneficial to the families of Pleasant Grove and their schools. Marginalized and disengaged parents in any school could benefit from a similar approach to prevention, and social workers are the perfect professionals to facilitate the process. School social workers are encouraged to collaborate with local social work education programs to advance this work together through various avenues, such as grant applications and use of social work interns.

Limitations

The authors are expanding their research efforts to continue developing the model, but there are limitations inherent in the current process. The sample size is very small, most of the people have been known to one another or are related to one another, and they all identify as White Americans. While these families represent a segment of the population of financially poor rural communities, there is tremendous diversity in the larger population that is not captured here. People who identify with other races and cultures would be expected to have different experiences with toxic stress, including racism-related stress, and some different concerns with regards to communication and engagement with their children's school. The core components of the model, however, can be applied to different groups of parents with potential positive results.

Next Steps for Practice, Policy, Education, and Research

The social work team, with a new cohort of MSW interns, continues its engagement work with the families of Pleasant Grove and surrounding communities in the school district. CBPR continues to add data and inform the model. Trauma-informed methods are integrated into MSW field instruction. Based on lessons learned thus far, the next steps are to: (a) include formal training on the integration of components informed by the Sanctuary Model as appropriate to a school setting (Bloom, 1995) for MSW interns; (b) formalize a common language that directs the path to healing that can be linked with existing school climate/bully prevention work also being conducted at the school; and (c) collaborate with the districts' social workers and the bully prevention team to integrate trauma-informed methods and components of Sanctuary into their work. In this manner, students, school personnel, and parents will be provided opportunities to share a collective culture built on peacefulness and respect. Training the school-employed/school-based social workers is a priority, so they can sustain family engagement through supervision of MSW interns in the years to come. Educating the teachers about the physiological impact of toxic stress in relation to parent functioning and student learning and outcomes is also vital.

As the parent engagement model is further developed beyond its pilot stage, more formal evaluation will help refine interventions, demonstrate outcomes and effectiveness, and promote replication. This can occur through additional focus groups with parents, interviews and focus groups with school personnel, and surveys about benefits of the family engagement

practice and the continuing challenges that remain to be addressed.

Policies that support flexible funding for prevention efforts like this one are needed so that localities can implement efforts to support their communities. To complement this work, social work educators as well as those training other professionals (e.g., teachers, psychologists, nurses) need to break down stereotypes about poor rural families. Promoting an understanding of the impact of toxic stress can lead to compassionate understanding and create pathways to prevention and change for students, families, schools, and communities.

References

- Alvidrez, J., & Weinstein, R. S. (1999). Early teacher perceptions and later student academic achievement. *Journal of Educational Psychology, 91*, 731–746.
- Bloom, S. (1995). Creating sanctuary in the school. *Journal for a Just and Caring Education, 1*, 403–433.
- Center on the Developing Child at Harvard University. (2011). *Building the brain's "air traffic control" system: How early experiences shape the development of executive function* (Working Paper No. 11). Retrieved from http://developingchild.harvard.edu/index.php/resources/reports_and_working_papers/working_papers/wp11
- Cortiella, C. (2009). *The state of learning disabilities*. New York, NY: National Center for Learning Disabilities.
- Danese, A., & McEwen, B. S. (2012). Adverse childhood experiences, allostasis, allostatic load, and age-related disease. *Physiology & Behavior, 106*, 29–39.
- Dekel, R., & Goldblatt, H. (2008). Is there intergenerational transmission of trauma? The case of combat veterans' children. *American Journal of Orthopsychiatry, 78*, 281–289.
- Epstein, J. L. (2001). *School, family, and community partnerships: Preparing educators and improving schools*. Boulder, CO: Westview Press.
- Gutteling, B. M., Weerth, C., Zandbelt, N., Mulder, E. J. H., Visser, G. H. A., & Buitelaar, J. K. (2006). Does maternal prenatal stress adversely affect the child's learning and memory at age six? *Journal of Abnormal Child Psychology, 34*, 789–798. doi:10.1007/s10802-006-9054-7
- Horvat, E. M., Weininger, E. B., & Lareau, A. (2003). From social ties to social capital: Class differences in the relations between schools and parent networks. *American Educational Research Journal, 40*, 319–351.
- Minkler, M., & Wallerstein, N. (Eds.). (2008). *Community-based participatory research for health: From process to outcomes*. San Francisco, CA: Jossey-Bass.
- National Scientific Council on the Developing Child. (2005). *Excessive stress disrupts the architecture of the developing brain* (Working Paper #3). Retrieved from http://developingchild.harvard.edu/resources/reports_and_working_papers/working_papers/wp3
- Ogders, C. L., & Jaffee, S. R. (2013). Routine versus catastrophic influences on the developing child. *Annual Review of Public Health, 34*, 29–48.
- Olsen, G. W., & Fuller, M. L. (2008). *Home-school relations: Working successfully with parents and families* (3rd ed.). Boston, MA: Pearson.
- Padgett, D. K. (2008). *Qualitative methods in social work research*. Los Angeles, CA: SAGE.
- Randolph, K., Fincham, F., & Radey, M. (2009). A framework for engaging parents in prevention. *Journal of Family Social Work, 12*, 56–72.

- Rebell, M. A., & Wolff, J. R. (2012). Educational opportunity is achievable and affordable. *Phi Delta Kappan*, *93*, 62–65.
- Szanton, S. L., Gill, J. M., & Allen, J. K. (2005). Allostatic load: A mechanism of socio-economic health disparities? *Biological Research in Nursing*, *7*, 7–15.
- Weiss, H. B., Bouffard, S. M., Bridglall, B. L., & Gordon, E. W. (2009). *Reframing family involvement in education: Supporting families to support educational equity* (Equity Matters: Research Review No. 5). New York, NY: The Campaign for Educational Equity, Teachers College, Columbia University.
- Yehuda, R., Halligan, S. L., & Grossman, R. (2001). Childhood trauma and risk for PTSD: Relationship to intergenerational effects of trauma, parental PTSD, and cortisol excretion. *Development and Psychopathology*, *13*, 733–753.
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