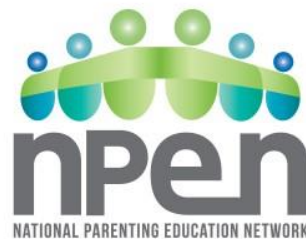# NPEN White Paper

A Closer Look at Diverse Roles
of Practitioners in Parenting Education:
Peer Educators, Paraprofessionals, and Professionals

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Acknowledgements

Abstract:

This white paper examines similarities and differences among practitioners providing parenting education and support services to parents and families. It presents an overview of the current status of peer educators and paraprofessionals in the field of parenting education. Recommendations to advance the field of parenting education while being inclusive of the various diverse roles and practitioners are included.

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Table of Contents

Background of White Paper

This white paper seeks to clarify the role of peer educators and paraprofessionals in the field of parenting education and provide recommendations for advancing the field by being more inclusive of diverse practitioners. The document was prepared by members of the National Parenting Education Network's (NPEN) Professional Preparation and Recognition Committee (PPRC) in response to discussion at the National Forum on Professional Development Systems for Parenting Education held in Oregon, in May 2011. Parenting educators from Oregon and Washington State and invited national leaders gathered to share information and discuss ways to promote parenting education and advance the profession (Bowman, Rennekamp & Wolfe, 2012). A series of next steps based on issues raised during the conference was developed by the national guests during a roundtable group discussion. Under the leadership of Mary Kay Stranik, a work group was later formed to address one of the issues: the role of peer educators and paraprofessionals in parenting education. Brief statements about each author are included to illustrate their geographic and experiential diversity.

Stephanie Jones, MS began her career in parenting education as a Parent Educator with the North Carolina Cooperative Extension with an undergraduate degree in history. In 2007, she became the first graduate to receive a Master of Science in Human Development and Family Studies with a concentration in family life and parent education from North Carolina State University and University of North Carolina at Greensboro.

Ms. Jones has worked at the community and university level. Currently she is a consultant with Possibility Parenting (http://www.possibilityparenting.com/) where she provides education, support, and coaching for parents, and consultation for practitioners. Ms. Jones is the co-chair of the North Carolina Parenting Education Network (NCPEN), a member of the NPEN Council, and serves as chair of NPEN's Professional Preparation and Recognition Committee (PPRC).

Mary Kay Stranik, MS holds a Master of Science in Public Health from the University of Minnesota. She practiced as a public health nurse and pediatric nurse practitioner. While parenting education was always woven into her work, in 1973 she began a more formal involvement with parenting education through a 25 year association with Meld. Meld is a group-based, peer self-help program that served 9 different parent populations and was replicated nationally. Ms. Stranik assisted with program and curriculum development, was national program director, and executive director. Meld is currently a part of Parents As Teachers. During her career, she provided consultation for many parenting education programs, foundations and public projects. She is now retired. Ms. Stranik has been involved in NPEN since 2000 serving as a member, Vice Chair, Chair, and Past Chair of the NPEN Council. She now serves on the NPEN Advisory Council, and the PPRC.

M. Gayle Hart has worked for HIPPY USA, national office, since 2000. She began with HIPPY USA in the role of Director of Training and after two years was promoted to her current position of National Program Director. She has been associated with HIPPY since 1989 in various capacities such as program coordinator, multi-site HIPPY director, a national trainer, as well as a regional liaison and a state contact. Her responsibilities have included the development of training procedures and

modules, the creation of program assessment processes and tools along with the provision of intensive support and training for staff and parents.

Ms. Hart has presented at various international, national and regional conferences, as well as served as a Trainer for HIPPY International. Prior to her experiences with HIPPY, Ms. Hart worked in a school district as the coordinator for a school volunteer and after school tutorial program. Her experiences include working within corporate America, public schools, housing authorities and public health settings; being an educational and management services consultant; and operating a sole proprietor business for ten years.

In addition, Gayle is honored to be a member of the NPEN Council as well as a member of NPEN's Committee for Professional Preparation and Recognition.

Judith Rae Wolf, MS holds a Master of Science in Home Economics and has completed additional graduate coursework in Family Relations. She has worked with parents in educational and support roles for over 35 years and has trained parenting educators and other family workers for over 20 years. She is currently the Association Team Coordinator for the Family Development Program at Cornell Cooperative Extension of Tioga County. She is responsible for planning and implementation of educational programming in Tioga County in the areas of parenting and family development. The two Family Resource Centers in Tioga County have been established and sustained under her leadership.

Ms. Wolf is a member of the NPEN Council and the chair of the Diverse Roles on Parenting Education Workgroup. She serves on the New York State Parenting Education Partnership (NYSPEP) Steering Committee and co-chairs the NYSPEP Parenting Educator Credential Committee.

Sandra McClintic, Ph.D., CFLE is an Assistant Professor at Texas Woman's University. She has a doctorate in Child Development and a Master of Science in Family Studies. She is a Certified Family Life Educator and a Certified Early Childhood Outdoor Play Inspector. Her background includes being a preschool teacher and a center director for 10 years; an Outreach Coordinator for the University of North Texas Center for Parent Education; and a Program Project Manager for a U.S. Dept. of Ed. Grant–Child Care Access Means Parents in Schools. Dr. McClintic is a Past President of the Texas Association of Parent Educators (TAPE) and present board member. Sandra has been a member of TAPE since its inception in 2002. She is member of the NPEN Council and a member of NPEN's PPRC.

Summary of the Parenting Education Field

Parenting education consists of periodic education and support for parents to strengthen families by promoting an optimal environment for healthy adult and child development (NPEN, n.d.). Parenting education and support services are intended to build confidence and competence of parents to care for children and increase their capacity to prevent and respond effectively to family life issues and problems as they arise. It is an effective intervention for addressing multiple social problems such as child abuse, juvenile crime, teen pregnancy, and academic disengagement (U.S. Department of Health and Human Services, 2006).

Parenting education is for all parents, regardless of age of children or family configuration. Most often parenting education is conducted in groups; however, one-on-one consultations, home visits, and center-based services are common.

Sponsors of parenting education are many and varied. They include community agencies, religious organizations, courts, public and private schools, mental health, public health, Departments of Social Services, Cooperative Extension, hospitals, senior centers, family resource centers, businesses and employers, and professional affiliate groups (Bryan, DeBord & Schrader, 2006).

The roots of parenting education can be found in many disciplines such as education, social work, health care, mental health, and human services (Carter & Kahn, 1996; Bryan, et al., 2006; Heath & Palm, 2006). Practitioners representing these disciplines provide a range of parenting education services. Professionals most often deliver parenting education; however, peer educators and paraprofessionals also provide services to families. Methodologies, approaches and intensity of services provided by practitioners vary (Carter & Kahn, 1996; Duncan & Goddard, 2007), though they should be complementary (Heath & Palm, 2006).

The success of parenting education is largely dependent on having qualified educators (Campbell & Palm, 2004). Opportunities to develop oneself as a parenting educator and to be recognized vary by region and state. The "Framework for Understanding Parenting Educator Professional Preparation and Recognition" provides a foundation for the future development of a career ladder for parenting educators (see NPEN, 2011b).

The number of program and state sponsored parenting educator recognition systems, also known as credentialing systems, is increasing. NPEN (2011a) identified professional preparation and recognition systems available in parenting education. These recognition systems typically include an assessment of parenting educators' qualifications (i.e. education and experience, as well as knowledge, skills, and attitudes/dispositions) related to working with families. In 2002, North Carolina became the first state in the United States to offer such a system (Bryan, et. al, 2006).

Agreement upon a core set of ethics and competencies as well as licensure are important milestones along the path of professionalization of a field (Czaplewski & Jorgensen, 1993; DeBord & Matta, 2002; East, 1980). Extension Specialists and national program leaders were among the first to propose competencies specifically for parenting education. In 1994, a team developed the National Extension Parenting Education Model (NEPEM) to guide the content of what parenting educators teach parents (Smith, Cudaback, Goddard, & Myers-Walls, 1994). Then in 2000, another team developed the National Extension Parenting Education Framework (NEPEF), which framed the processes that parenting educators perform in their work with parents and families (DeBord, et. al.,

2002). More recently, after a thorough review of numerous national and international sources, McDermott (2011) proposed 10 competency areas for parenting education that include: lifespan and human development, child and parent development, family relationships/dynamics, guidance and nurturing, family diversity, school/child care relationships, community relationships, health and safety, professional practice/adult education methods, assessment and evaluation, public and organizational policies, ethics, and laws. McDermott also has organized related competencies into the 10 areas identified from existing sources. Members of NPEN are currently using McDermott's comprehensive list of competencies to propose a refined list of competencies for parenting educators.

Minnesota is currently the only state to require licensure of professional parenting educators. The Minnesota parent and family education license was instituted in 1989 and is both a teacher license and a license specific to parent and family education. The license is required of those working in early childhood family education (ECFE) programs in public schools in Minnesota.

Around 1970, many parenting education programs were generated in the community and commonly utilized peer educators and paraprofessionals. It wasn't until academic programs related to parenting education began to be offered that degreed professional parenting educators emerged in larger numbers. These formal educational programs have increased and expanded. The increase in academic degree programs related to parenting education has helped to provide continuity for professional parenting educator preparation and clarified their role, but less attention has been given to other practitioners in the field. Furthermore, most existing recognition systems focus on professionals and paraprofessionals; few recognize peer educators. North Carolina currently has the only parenting educator recognition system that offers a credential for peer educators.

This white paper is part of a larger effort that, while recognizing professionals provide most of the parenting education services, considers peer educators and paraprofessionals as practitioners in the field who provide valuable services, deserve adequate training and support, and are worthy of recognition. The authors illuminate the similarities and differences of practitioners in the parenting education field by concentrating on the contributions and limitations of peer educators and paraprofessionals, highlighting the challenges they face, and providing recommendations necessary to advance the field.

Authors of this white paper have also developed a survey targeting peer educators and paraprofessionals in parenting education. The survey, released in the fall of 2013, was designed to solicit input from peer educators and paraprofessionals about their work with families. Information from the survey will be used to further the discussion of appropriate roles and professional development for peer educators and paraprofessionals who serve as parenting educators.

Part I: Current Status

Similarities and Differences of Practitioners in Parenting Education:
Overview of Peer Educators, Paraprofessionals, and Professionals

Definitions of Peer Educators, Paraprofessionals and Professionals

Defining terms is necessary to proceed with a discussion of practitioners in the field of parenting education. We are unaware of existing definitions of "peer educator," "paraprofessional," and

"professional" in parenting education literature. Carter and Kahn (1996) undertook the task when they described three types of practitioners in parenting education: professionals, paraprofessionals, and volunteers. Their discussion is notable, but lacks specificity and is dated. The field of parenting education has evolved considerably since 1996 and the changed landscape warrants a closer look at practitioners and their roles.

Looking beyond the field of parenting education, there are no universally accepted definitions of "peer educator," "paraprofessional," and "professional." Definitions of these terms vary by occupational fields and settings where they are applied. Therefore, we explored existing and related definitions of the terms.

Merriam-Webster (2013) defines **peer** as a person of equal standing. In the context of providing support, peers are people who have mutual life experience (Mead, 2003). The life experience can vary. However, the commonality among peers helps to connect them and is often used as a foundation for subsequent education and support.

A **paraprofessional** is generally trained to *assist* professionals, but are not themselves licensed or credentialed at a professional level (Oxford University, 2013). Paraprofessionals can carry out many tasks and possess substantial knowledge of the field, and may be able to work independent of direct supervision, but they do not meet the requirements to be recognized as a professional in the field. Some occupations require testing or certification of paraprofessionals, while others require a certain level of education. The occupational requirements for paraprofessionals differ from those for professionals.

Businessdictionary.com (n.d) defines a **professional** as someone who is "formally certified by a professional body belonging to a specific profession by virtue of having completed a required course of studies and/or practice. And whose competence can usually be measured against an established set of standards."

In applying these definitions to parenting education, we were very aware of the existing overlap of titles and roles, particularly between peer educators and paraprofessionals. For example, many paraprofessionals are also peers, but some are not. Many peer educators have job titles that name them as paraprofessionals, but it is not true for all peer educators in parenting education. An attempt to clarify language of diverse practitioners in the field of parenting education was the genesis of the work on this paper.

It is worth noting that during a discussion at the annual NPEN Council meeting in April 2013, there was division on whether "peer" is a general descriptor or a specific role in parenting education. For the purpose of this paper, we have used "peer educator" to describe a specific role in parenting education.

Role Analysis

We describe, in detail below, "peer educator," "paraprofessional," and "professional" roles in parenting education. The following categories of descriptors were used: motivation and population match, preparation, role capabilities, aspects of work, and opportunities for advancement. A chart comparing the three types of practitioners is located on page 13 and descriptors used in the chart are defined on page 14.

Peer Educators' motivation to work with parents is thought to be primarily altruistic, particularly if they are unpaid volunteers. They have some life experience in common with the parents with whom they work. This match is essential to their role and is often used when selecting peers to work with a given parent population.

They may or may not have formal education (e.g. immigrants). However, many have a high school diploma or the equivalent, and some have degrees in unrelated fields. They typically do not have degrees in parenting education or a related field.

Prior to working with families, many peer educators are interested in parenting; have learned on their own using the Internet, books, and magazines; or informally from others. They may have participated in parenting education programs.

Formal training in parenting education is typical but varied in preparation of peer educators performing specific roles and tasks with families. These trainings often present a narrowly defined repertoire of approaches and methods leading to limited or low versatility of roles. For this reason, peer educators may tend to favor Duncan and Goddard's *Facilitator* and *Expert* approaches (An overview of Duncan and Goddard's work on roles and approaches is contained in Appendix A). Peer educators may be knowledgeable and skilled in some tasks (e.g. share information, mentor, and advocate) with parents. Tasks they perform with parents may be parent or issue driven, or curriculum directed/guided. Tasks with colleagues are varied but may relate primarily to other peer educators, unless they are working with a supervisor to collaborate or make referrals.

Although advisable, supervision may not include critical reflection. Formal evaluation of peer educators' work is unlikely unless it is built into the program and done by a supervisor. Supervisors may require peer educators to obtain some professional development, which can consist of informal and formal training activities. Professional development activities are usually dependent on role, tasks, and the program or curriculum with which they are associated. Opportunities for professional development can be limited by funding and budgetary constraints.

Peer educators' work with parents may be volunteer or paid; it is likely part-time versus full-time and may be short or long-term.

Advancement in the field of parenting education may or may not be a priority for peer educators, however, it is unlikely without formal education and advanced training. Peer educators may be able to advance within an organization, although advancement is probably limited, but could include working with other less experienced peer educators. They may find that the experience working with parents in parenting education prepares them for opportunities within their community. Suitability for such opportunities may depend on an audience match, knowledge and experience, job performance, as well as interest.

Paraprofessionals' motivation to work with parents is thought to be mixed. They may be driven by altruistic, economic, or other reasons. They may or may not have shared experiences in common with the parents with whom they work.

Paraprofessionals usually have completed high school or an equivalency program and may have obtained formal education beyond. It is not uncommon for paraprofessionals to have completed formal educational coursework in parenting education and related fields, yet not obtained a degree. Some have degrees in unrelated fields.

Preparation for working with parents may include paraprofessionals engaging in self-directed study or informal learning such as Internet research, reading parenting magazines and books, and participating in parenting education. If it applies, life experience may be relevant to paraprofessionals' work with parents. Formal pre-service training targeting specific roles and tasks with parents is common.

The more extensive the education and training, the more equipped paraprofessionals are to use semi-diverse support and teaching methods. As a result, they are typically able to perform more diverse roles and tasks than peer educators. However, their repertoire of approaches may still be limited as compared to professionals. They may favor one or several approaches, tending toward Duncan and Goddard's *Collaborator and Expert* approaches. (An overview of Duncan and Goddard's work on roles and approaches is contained in Appendix A). Paraprofessionals are knowledgeable and skilled in some tasks with parents such as sharing information and teaching. Tasks paraprofessionals perform are likely to be directed by a professional with whom they work or by a curriculum they are trained to deliver. Tasks with colleagues vary, but may relate primarily to other paraprofessionals or peer educators, with the exception of referrals and collaborations, which tend to be done with a supervisor.

Supervision of paraprofessionals is typical, but may not include critical reflection. Evaluation of work by a supervisor is common. Formal evaluation of work by parents is also common, especially if it is built into a program that is being delivered by a paraprofessional.

Paraprofessionals are more likely than peer educators to be paid. Their work may be full or part-time, and the terms of their employment can be short or long. Paid employment typically means more institutional or organizational support for professional development, which for paraprofessionals consists of informal and formal training. Access to professional development, however, may be tied to funding.

Paraprofessionals may or may not be concerned with professional advancement in the field. Some opportunities within an organization and the community may exist for paraprofessionals. Job performance is likely to impact opportunities for advancement within an organization. Life experience can limit opportunities for paraprofessionals both within organizations and the community if an audience match is required. There are few opportunities for advancement in the field, as it is currently structured, without the attainment of formal education and degrees. With the necessary guidance and support, paraprofessionals can develop themselves personally and professionally in ways that prepare them for work within the field and in other fields.

Professionals' motivation to work with parents is thought to be mixed, both altruistic and professionally/career oriented. Having mutual life experience and a population match with a parent audience may be helpful, but are not required of professionals.

Formal education in parenting education or a related field is often used to designate individuals as professionals in parenting education. It is generally recognized that professionals have a minimum of a bachelor's degree, although many have master's and doctorate degrees. Their education and training is comprehensive and covers instruction and coursework in many, if not all, of the 10 competency areas in parenting education. Preparation to work with families primarily consists of formal education; however, some self-directed, informal learning and participation in parenting education may occur. General pre-service job training, excluding specific curriculum training, is less likely since it is assumed professionals have acquired knowledge and skills related to working with families as a result of obtaining formal education. Given their level of education and training,

professionals generally possess versatile skills and assume diverse roles, while using a variety of methodologies. Consequentially, they tend to use Duncan and Goddard's *Eclectic* approach in their work with parents and families. (An overview of Duncan and Goddard's work on roles and approaches is contained in Appendix A). Professionals often develop curricula and educational materials for parents, or modify existing materials to suit a specific audience. They are knowledgeable and skilled in a variety of tasks with parents and colleagues. Tasks with parents and colleagues are typically goal-oriented and learning objective driven.

Whether quality supervision that includes critical reflection is built into their position depends largely on whether professionals are self or other employed. Some professionals engage in self-evaluation or rely on professional colleagues for assistance with reflective practice. Formal evaluation by parents and possibly by a supervisor is common.

Professional development is generally required or highly encouraged of professionals. It is usually formal and structured, consisting of for-credit classes or workshops to gain or maintain certification, or in some instances licensure. Professionals often choose learning opportunities to improve their competence based on their personal interests and their self-identified professional development needs.

Professionals in parenting education are mostly paid for their work with families, although they may volunteer their services. Their work can be full or part-time, but their chosen career includes working with parents and families.

Professionals are likely concerned with professional/career advancement. Advanced opportunities within the field are limited, but may involve training, administration and supervision, program development, evaluation, research, and advocacy. Opportunities in the field are influenced by formal education, training, field experience, and job performance. Receptiveness of community members to professionals may impact some opportunities within the local community.

Def. of descriptors are on pg. *14*	"Peer Educators"	"Paraprofessional"	Professional
Motivation and Match	• Motivation primarily altruistic • Population match is essential	• Motivation mixed • Population match not required but match may be important	• Motivation mixed • Population match not required but may be helpful
Preparation	• May or may not have formal education • Preparation may include self-directed learning and/or participation in parenting education • Parenting education formal pre-service training typical but varied • Ed/training is role and task specific	• May have formal education (and even degrees) in an unrelated field or some formal education in PE and/or a related field • Preparation may include self-directed learning and/or participation in parenting education classes • Formal pre-service training likely • Formal ed/training is role and task specific	• Formal education related to PE or a *related field required - minimum of bachelor's degree • Ed/training comprehensive • Preparation consists primarily of formal education but some self-directed learning or participation in parenting education may occur • Pre-service job training less likely
Role Capabilities	• Limited or low versatility of methods and roles • Narrowly defined approach/es • Knowledgeable and skilled in some tasks (e.g. share info, mentor, advocate) with parents • May tend to favor Duncan and Goddard's Facilitator or Expert approaches • Tasks with parents are typically parent/issue driven or curriculum directed • Works w/professional and under supervision • Tasks with colleagues are varied but may relate primarily to other peers, with the exception of making referrals and collaborating	• Semi-versatile methods and roles • Limited versatility of approaches • May tend to favor Duncan and Goddard's Collaborator or Expert approaches • Knowledgeable and skilled in some tasks (e.g. share info and teach/instruct) with parents • Tasks with parents are typically program driven • Works w/professional who supervises and directs work • Tasks with colleagues vary but may relate primarily to other paraprofessionals, with the exception of making referrals and collaborating	• Highly versatile methods and roles • Uses a variety of methodologies • May tend to favor Duncan and Goddard's *Eclectic* approach depending on situation • Develops or adapts materials • Knowledgeable and skilled in a variety of tasks with parents and colleagues • Works independently or collaboratively • Tasks with parents and colleagues are goal oriented
Aspects of Work	• May not have quality supervision • Formal evaluation of work is unlikely unless it is built into program, may be done by a supervisor • Professional development (PD) dependent on program, role, and funding • PD consists of informal or formal training • Short or long-term work • Volunteer or paid (more likely part-time)	• Supervision is typical but may not be reflective • Formal evaluation of work by supervisor is typical • Formal evaluation by parents is common • PD supported • PD consists of informal and formal training • Paid • Full or part-time • Short or long term work	• PD required or encouraged • PD usually formal, structured and for credit • May or may not have reflective supervision depending on employment (self or other) • Self-evaluation (reflection) • Formal evaluation by parents and possibly by a supervisor is common • Paid • Full or part-time • Short or long term work
Opportunities for Advancement	• Advancement may or may not be a priority • Few opportunities within the field • Limited opportunities within an organization • Potential for opportunities within the community • Opportunities based on audience match, knowledge and experience, performance, and desire	• Advancement may or may not be a priority • Limited opportunities within the field • Some opportunities within an organization and the community • Opportunities based mostly on experience but formal education and training are considered • Audience match may or may not effect opportunities • Performance is likely to impact opportunities for advancement within an organization	• Advancement is likely to be a high priority • Opportunities for advancement within the field and an organization are diverse but depend on availability • Opportunities within the local community may depend on receptiveness of community members to professionals • Opportunities in the field and an organization are influenced by formal education, training, field experience, performance

Chart I: Similarities and Differences of Practitioners in Parenting Education:
Overview of Peer Educators, Paraprofessionals, and Professionals
Prepared by NPEN's Professional Preparation and Recognition Committee

Chart I Categories and Descriptors

Categories, descriptors and definitions developed by the authors are provided to assist the reader in interpreting the chart titled, "Similarities and Differences of Practitioners in Parenting Education: Peers, Paraprofessionals and Professionals," on page 13 of this document.

Quotation marks are used with paraprofessional and peer educator because there currently is misunderstanding of the meaning of these terms. For purposes of this document, refer to the column that best fits the parent educator you are thinking of, rather than the "formal/advertised" job description of the educator.

1. **Motivation and Match**
   a. _Primary Motivator:_ Professional/career oriented, altruistic, or mixed
   b. _Relationship with the Population Served:_ *Match, partial match or no match
      *Parenting educator possesses shared characteristics with audience served. Shared characteristics might include being a parent of a child/ren of a certain age or stage of development; being a foster parent, step parent, or grandparent, parent of special needs child, etc.; similar ethnicity or culture, and past or present life experience._

2. **Preparation**
      Source of Knowledge/Skills: Formal education; structured pre-service training; self-taught using print materials or online resources, and participation in parenting programs; or informal (life experience)
      *Related fields are those that relate to children and families, including: family life and parenting education; human development; child and family studies; social work, health, psychology & sociology programs, etc_
   a. _Scope:_ Comprehensive or job/role-specific

3. **Role Capabilities**
   a. _Methods/ Role Versatility:_ High to low
      i. _Parenting Education "roles" or approaches:_ Expert, facilitator, critical inquirer, collaborator, interventionist, eclectic (see Duncan and Goddard, 2011 in Appendix A).
      ii. _Parenting Education Methodologies:_ Large group presentations, small group facilitation, one-on-one consultation, develop information, disseminate information
   b. _Tasks with Parents:_ Share information, support, teach/instruct, counsel, mentor, collaborate, advocate
   c. _Tasks with Colleagues in the Field:_ refer, collaborate, support, supervise, train, educate, mentor, advocate

4. **Aspects of Work**
   a. _Employment Status:_ Paid or volunteer
   b. _Full/Part Time:_ Full-time: 30 or more hrs./wk. or Part-time: less than 30 hrs./wk.
   c. _Duration:_ Long-term: more than 6 consecutive months or Short-term 6 or less consecutive months
   d. _Professional Development(PD)/Training:_
      i. Required or Optional
      ii. Informal on-the-job or formal/structured **training
         **Formal/structured training includes for credit courses or not for credit training (workshops, conferences, seminars, institutes, and training in an evidence-supported/based curriculum or program)._
   e. _Supervision:_
      i. Present: Yes or No
      ii. Quality: consistency, intensity, and use of critical reflection
   f. _Source of Evaluation:_ Self, supervisor, client, third party, combination

5. **Opportunities for Advancement**
   a. _Priority issue:_ High or Low
   b. _Unlimited vs. limited_
   c. _Within the field, within an organization, within the community_
   d. _Criteria:_ Education, parenting education related training, experience in the field, performance or a combination

Contributions and Limitations of the Roles of Peer Educators and Paraprofessionals

A comprehensive discussion of the roles of peer educators and paraprofessionals in parenting education must consider both contributions and limitations. There are a number of unique contributions such as those that relate to delivery of information, the establishment of unique relationships, possessing unique knowledge, cost effectiveness, and increased accessibility for parents. Limitations of the roles relate to the tasks that can be performed semi-independently and those that must be done under supervision. There are additional practices that should never be performed. A chart on page 21 includes the information about contributions and limitations that follows.

Contributions

Within well-developed service delivery models, peer educators and paraprofessionals effectively deliver a great deal of quality information and provide support to a variety of parent audiences, including special populations and those at-risk (e.g. inner city, low income, minority, recent immigrants, disadvantaged, those with behavioral health issues; Day, Michelson, Thomson, Penney & Draper, 2012; Day, Michelson, Thomson, Penney & Draper, 2011; Katz, Jarrett, El-Mohandes, Schneider, McNeely-Johnson, & Kieley, 2011). With proper training and quality supervision, peer educators and paraprofessionals can fulfill roles and successfully perform many tasks in parenting education. They can provide substantive parenting education and support to parents and families via groups, home visits, and one-on-one mentoring using evidence-based or research-informed program models and/or curriculum. They disseminate professionally-developed parenting information (e.g. fact sheets, newsletters, pamphlets) and conduct outreach and recruitment as components of their overall work with parents and families. Further, many peer educators and paraprofessionals are positive role models that some parents readily relate to and emulate.

Some peer educators and paraprofessionals possess unique knowledge, skills, or attributes that are particularly desirable when working with specific parent populations (Katz, et al., 2011; Reupert & Mayberry, 2010). For example, culture, ethnicity, language, and life experience, such as with immigration, health issues, or having a child with exceptionalities etc., are criteria often sought when hiring practitioners. As is characteristic of peers, mutual life experience can be an asset for peer educators thereby helping to facilitate meaningful and helpful relationships when working with certain parent populations.

Many, but not all, peer educators and paraprofessionals live in the communities where they work. Those who are embedded have a potentially valuable perspective of the "front lines." Relationships with parents and families can be quickly formed, strengthened and sustained with relative ease through casual meetings (e.g., at the grocery store) when practitioners live in the communities where they work. Furthermore, intensity and frequency of contact are factors that support long-term behavior change in parents (DeBord, Jakes & Guin, 2010). Peer educators and paraprofessionals may help connect participants to programs. They can also facilitate relationships between participants and professionals who may be less knowledgeable about and thus less attuned to issues facing some families. In addition, they can be helpful communicating with parents in ways they can readily understand and communicate parents' questions and concerns to others in the field.

There are a number of additional advantages of practitioners working within peer educator and paraprofessional service delivery models in parenting education. For instance, it can be cost effective

(Day, et al., 2011; Day, et al., 2012; Katz, et al, 2011), particularly when peer educators and paraprofessionals are situated in service delivery models sensitive to their strengths and unique needs. Their role may be key to meeting increasing demand for parenting services when there are limited professional and economic resources (Day, et al., 2012). Utilizing peer educators and paraprofessionals can increase access to parenting services (Day, et al, 2011) and improve retention rates (Katz, et al.). There is evidence of high (Katz et al.; Wright & Wooden, 2012) and exceptionally high retention rates (Day et. al., 2012) in some programs that utilize peer educators and paraprofessionals.

Peer educators and paraprofessionals are a potential source of new professionals. This is consistent with Sullivan (n.d.) and Stranik's (2000) parent leadership continuum frameworks and experiences reported by numerous practitioners working within well-developed models, such as those highlighted in Appendix B. Many peer educators and paraprofessionals are initially drawn to parenting education programs by their desire to be good parents and then go on to become actively involved in roles that seek to improve the lives of other parents, children and their communities. In time, with adequate support, some peer educators and paraprofessionals may grow into the next generation of "professionals." In fact, many current professional parenting educators entered the field as a program participant, peer educator or paraprofessional and went on to obtain degrees and specialized training in parenting education or a closely related discipline. Several authors of this paper are cases in point.

Finally, including peer educators and paraprofessionals as providers of parenting education within well-developed service delivery models can build social capital in local communities (Day, et al., 2012; Treichal, 2002). Training community members as potential leaders in the communities where they live can be a strategy to ensure continuation of programming even when temporary funding is exhausted, expires or is no longer accessible.

Limitation of Roles and Tasks

Despite the many contributions peer educators and paraprofessionals make in parenting education, there are limits to what they should do when working with parents and families. Even with adequate training and quality supervision peer educators and paraprofessionals should consult, confer and collaborate with their supervisor or a professional parenting educator when they perform certain roles and tasks. This is particularly important when they work across a range of circumstances to meet diverse, changing family needs or when working with individuals and families at-risk or who are unstable. Peer educators and paraprofessionals should work in concert with a supervisor or professional parenting educator to assess or evaluate individuals and families and their own work with them, make referrals to outside systems, or develop parenting content. Within parenting education, peer educators and paraprofessionals should not provide advice or guidance based solely upon anecdotal or personal information, present as definitive experts, "prescribe" a single approach, or "diagnose" individuals or families.

Issues and Challenges Related to Peer Educators and Paraprofessionals in Parenting Education

A number of issues and challenges pertaining to peer educators and paraprofessionals in parenting education emerged as we began considering diverse practitioner roles. These issues and challenges have to do with myths and misconceptions, job titles, screening, training, supervision, and wages.

The following will illustrate how many challenges arose as a result of inconsistencies due to a lack of agreement and communication within the field. A related chart containing the following information is on page 21.

Myths and Misconceptions

Myths and misconceptions about peer educators and paraprofessionals and their role with families in parenting education abound. A common misconception is that peer educators are all volunteers. Some perceive peer educators sharing meaningful and insightful aspects of their life experience as a risk factor. Wright and Wooden (2012) argued against the notion that peers pass on "bad" information or will do more harm to families than good, whereas Heath and Palm (2006) were more skeptical. Often peer educators are believed to be free agents working with families on their own, with little or no training, and without a sponsoring agency/organization and in the absence of supervision. And because peer educators and paraprofessionals generally don't have degrees in parenting education or a related field, they are perceived as uneducated or unskilled, under-educated or under-skilled. They are sometimes thought to be unaware of and as such not to adhere to commonly agreed upon professional boundaries and established ethical guidelines. There are those who believe that peer educators and paraprofessionals are content in their current role and don't want to develop themselves professionally, or they don't have any interest in personal or professional advancement. Finally, there is a myth or misconception that their work in parenting education is less helpful than professionals' and that families have a preference for professionals. As a result, peer educators and sometimes paraprofessionals are overlooked by sponsors of professional preparation and recognition programs, leaving them without a structure for professional advancement.

Attitudes of parenting professionals impact the role of peer educators and paraprofessionals. Changing attitudes of parenting professionals to appreciate the unique role of peers and paraprofessionals is a difficult but essential task if parenting education is to be a unified field of practitioners.

Job Titles

There is misunderstanding of the differences between practitioners in parenting education and their roles due to a multitude of ambiguous job titles and descriptions currently in use. Many job titles are *not exclusive* to peer educators and paraprofessionals, but also designate professional roles. Inconsistency and ambiguity in job titles presents a major challenge for practitioners, managers and supervisors, parents, and community partners alike. The current situation likely developed over time in response to organizational providers tailoring job descriptions to funding requirements or their specific needs. As a result, current job titles don't accurately reflect the role or tasks the practitioner is expected to perform. This is especially problematic when trying to compare parenting education roles across organizations.

Our extensive collective knowledge based on years of field experience in a variety of geographic regions of the United States was helpful in generating a list of existing job titles currently in use. An Internet search and a review of literature yielded additional job titles. Some job titles seem to describe the type of position (e.g. volunteer parent/ing educator, paraprofessional, paraprofessional home visitor; peer, peer educator, peer mentor, peer support, lay home visitor. Others are descriptive of the role (e.g. parent/ing educator, parent/ing education facilitator, parent/ing facilitator, parent partner, parent/ing coordinator). Still others include place of service (e.g. group facilitator/leader, home visitor,

home-based educator). Finally, there are job titles that are more general and suggest that the person filling the role is mostly involved with recruitment or connecting parents with resources, but many lack clarity to understand the function of the person in the role (e.g. peer facilitator, parent liaison, family partner, family support services staff, parent resource aide, parent/ing aide, parent involvement specialist, parent engagement specialist, community outreach worker, family advocate, family navigator, family activities coordinator, resource associate).

Screening

Screening before hiring and training peer educators and paraprofessionals is essential, but may not be consistently and thoroughly done. It is important to remember that practitioners' attitudes and personal parenting behaviors will inevitably impact their work with families.

During the screening process, those hiring do not commonly assess applicant's openness to new ideas and their willingness to uphold the values of the profession and key messages/values of parenting programs.

Training (Pre-service, In-service, and Professional Development)

Educational attainment upon entering the field of parenting education currently varies considerably among peer educators and paraprofessionals, from less than a high school diploma to graduate degrees. Even among those with degrees, few have degrees that directly relate to parenting education. Training is important for all practitioners, but even more so for those without formal education related to the field. Training can be divided into the following three categories: pre-service, in-service, and professional development. Training opportunities for practitioners in parenting education are provided internally by sponsor organizations and externally by outside sources.

Despite the fact that training is an essential step in utilizing peer educators and paraprofessional in parenting education, there is not consistency in training. Sometimes there is no training; sometimes training consists of following a step-by-step process after purchasing a curriculum; and sometimes there is more in-depth training. Some program models and curriculum are not evidence supported and do not follow best practices. More comprehensive trainings typically focus on an orientation to the organization, specific training models or curriculum, parenting education content and processes, and the specific role of the practitioner.

An academic-professional model, using a one-size-fits-all approach, to training practitioners in the parenting education field is common. It is often ineffective and may not be sensitive to peer educators and paraprofessionals' unique education/training needs.

Once trained in a curriculum or program model, peer educators and paraprofessionals tend to know the content and how to deliver it based on their training. Nevertheless, they may lack the knowledge and skills to appropriately and effectively deviate from the script. Trainings specific to peer educators and paraprofessionals are limited and vary considerably in duration and scope. Among the training models currently being used to prepare peer educators and paraprofessionals to perform parenting education roles with families, pre-service training requirements vary greatly. Examples of the range are from 36 hours (Meld Site Coordinator Manual, 2001) to 60 hours (Day, et al., 2011) to 45 days (Katz, et al., 2011). Some programs have additional requirements that must be met prior to working with families such as a portfolio and supervised practice for peer educators (Day, et al., 2011).

It is common for parenting education service delivery models to utilize an empowerment approach. This type of approach promotes positive outcomes by building personal confidence and professional competence of practitioners (Day, et al., 2011). Models, such as Hippy, incorporate personal goal setting within professional development plans (see Appendix B). As a result, in the course of their work with families, peer educators and paraprofessionals have pursued and earned high school equivalency diplomas, two and four year college degrees and even graduate degrees, and gone on to make significant contributions to their communities, whether as parenting educators or in some other role. Some practitioners attribute their personal growth and development to their work as a peer educator or paraprofessional in parenting education (Treichal, 2002).

The absence of agreed upon competencies for the entire field of parenting education is problematic, partly because of the lack of structure and guidance to assist in the development of appropriate training for peer educators and paraprofessionals. At present, training is often reliant upon the immediate supervisor/agency/program. Professionals responsible for the training other practitioners don't have a common framework to guide them. Therefore, they rely on diverse models and materials which promote inconsistency across programs and many different kinds of peer educators and paraprofessionals.

Professional development structures and career guidance are often lacking for the advancement of peer educators and paraprofessionals in the parenting education field. Professional development limitations can be due to supervisor's expertise, time or absence of appropriate resources. Accessing quality continuing education/training independently is more difficult because peer educators and paraprofessionals don't always have support in time and money for professional development.

Oregon and New York State are among the states that include diverse practitioners when offering professional development opportunities. In Oregon, pre-service training is offered to groups of practitioners, using an emerging system of parenting education hubs. Sponsors offer high-quality, free or low cost professional development training for all types of practitioners. Oregon's general approach to professional development does not delineate between professionals, paraprofessionals and, peer educators. Instead, the focus is on who is doing the work. Similarly, the New York State Parenting Education Partnership (NYSPEP) provides professional development training through regional training events offered at modest cost and webinars that are free. Trainings support the ongoing professional development of all those in parenting education roles. Trainings focus on content related to NYSPEP identified core competencies and current issues in parenting.

Supervision

In 1996, Carter and Kahn commented on the status of supervision in the field of parenting education:

> …there is no single area of performance in parenting education and family support that is of greater concern. Far too many programs run without any form of supervision, and of those that do have provisions for it, the supervision is usually weak or inappropriate and too infrequent. The causes for this are many, but the most prominent seem to be cost, adequately trained supervisors and an understanding/commitment from program managers. The higher the intensity of service, the higher the level of training and supervision necessary for the practitioner. All programs should be measured by this standard.

Although this comment was published 17 years ago, we believe that the situation has not changed a great deal in the intervening years. In fact, the need for supervision is more acute now given the expansion of parenting education. Unfortunately, those in supervisory roles may not have had comprehensive education and training in parenting education supervision, which may limit their effectiveness in supporting peer educators and paraprofessionals. Here again, peer educators and paraprofessionals have unique supervision needs.

Transmitting appropriate professional values in the work setting is an important structure to work within for peer educators and paraprofessionals, and it is not consistently offered. Peer educators and paraprofessionals may lack knowledge of and experience with managing personal beliefs and values when working with families. This can be particularly challenging because biases can develop from personal experiences, religious or political views. They may also have difficulty distinguishing when it is appropriate to disclose personal information. And unless practitioners are self-aware and conscious of these biases and tendencies, they are at-risk of relying upon them when working with parents and families.

The absence of quality reflective supervision may lead peer educators and paraprofessionals to perform roles and tasks they are not trained/qualified to do; to over rely on personal experience; overlook the necessary social/emotional support for their work with families, and not attend to symptoms of burnout. In addition, it may be difficult to maintain appropriate (professional) boundaries, particularly when working within their own communities. Such conditions negatively impact quality of work and don't support consistency and fidelity to program or organization goals.

Like many others, parenting education practitioners experience work-family conflict. This conflict can be exacerbated by the timing of many parenting programs. Practitioners commonly deliver parenting education services "after hours" and during weekends as these are times when many parents are typically available. Practitioners are often called to leave their own families to serve other families. Peer educators and paraprofessionals also experience such challenges, particularly when they are in the midst of childrearing and caregiving. This can be more difficult to manage for peer educators and paraprofessionals because they often have fewer resources to deal with this conflict. Supervisors can be essential to helping peer educators and paraprofessionals balance work-family roles and manage conflict.

Wages

Wages are typically based on formal educational attainment making it rare to acknowledge the value of peer educators and paraprofessionals' work. Peer educators and paraprofessionals without formal education or who have limited formal education may not qualify for higher wages, regardless of the quality or longevity of their work (Katz et. al., 2011).

Chart II: Issues & Challenges Related to Peer Educators and Paraprofessionals in Parenting Education
Prepared by NPEN's Professional Preparation and Recognition Committee

Contributions There are a number of identified advantages of practitioners working within peer educators and paraprofessional service delivery models in the parenting education field.	With proper training and high quality supervision peer educators and paraprofessionals can typically fulfill roles and successfully perform many tasks in the parenting education field. Can provide substantive parenting education and support to families via groups, home visits and one on one mentoring using a program curriculum (model). • Can effectively and efficiently (time and cost) reach some specific audiences; • Can be positive role models that some parents readily relate to and want to emulate. Some peer educators and paraprofessionals bring unique knowledge, skills or attributes that are particularly desirable when working with some parent populations. For example, culture, ethnicity, language, and lived experiences, such as with immigration, etc., are often criteria sought when hiring some practitioners. Relationships with families can be strengthened and sustained through casual meetings (e.g., at the grocery store) by peer educators and paraprofessionals who live in the communities where they work. (Duration of contact is very important to long term behavior change). Peer educators and paraprofessionals have a very valuable perspective of the "front lines." They may serve as intermediaries for professionals that may be less connected to families and thus less attuned to the issues families are facing on a daily basis. This can be helpful connecting research to practice and vice versa. It is cost effective to employ peer educators and paraprofessionals. Their role may be key to meeting increasing demand for parenting services when there are limited professional and economic resources. Often peer educators and paraprofessionals are drawn to the field by their desire to be good parents and to be actively involved in improving their community for families and children. Peer educators and paraprofessionals are a potential source of new professionals. In time, with support, they may grow into the next generation of "professionals." Because program funding is variable, building community capacity is a way to address sustainability of programs. Training community members (i.e. peer educators and paraprofessionals) prepares them as potential leaders available in their community.	
Limitations of Roles and Tasks There are limits to the roles and tasks peer educators and paraprofessional should assume and preform.	***Even with proper training and high quality supervision, peer educators and paraprofessionals should ALWAYS consult, confer and collaborate with their supervisors when they perform certain roles and tasks.***	***Peer educators and paraprofessionals should NOT perform any of these practices.***
	• Work across a range of circumstances to meet diverse, changing family needs. • Work with individuals and families that are at-risk or unstable. • Assess or evaluate families or their work with families. • Make referrals to outside systems. • Develop parenting content and process.	• Provide advice or guidance based solely upon anecdotal or personal information. • Present as experts. • Prescribe a single approach. • "Diagnose" individuals or families.
Myths and Misconceptions There are a number of existing myths and misconceptions related to peer educators and paraprofessionals and their work in parenting education.	**PEER EDUCATORS** All peer educators are volunteers. Peer educators pass on "bad" information or will harm families. Peer educators are free agents out there on their own.	**BOTH PARAPROFESSIONALS & PEER EDUCATORS** Paraprofessionals and peer educators are uneducated or unskilled, undereducated or under skilled. Families prefer a professional over a paraprofessional or peer educator. Paraprofessionals and peer educators' work is less helpful than professionals' work. Neither paraprofessionals nor peer educators are worthy of being considered for a credential and don't want to develop themselves professionally. Peer educators and paraprofessionals don't practice within established boundaries.

Job Titles There is misunderstanding of the differences between peer educators and paraprofessionals due to the multitude of ambiguous job titles and descriptions currently in use. Many job titles are *not exclusive* to peer educators and paraprofessionals but also designate professional roles.	This list is only a sampling of job titles that exist in the parenting education field. **By type of staff**: paraprofessional, paraprofessional home visitor; peer, peer educator, peer mentor, peer support **By breadth of role:** parent/ing educator, volunteer parent/ing educator, parent/ing education facilitator, parent/ing facilitator, parent partner, parent/ing coordinator **By place of services:** group facilitator/leader, home visitor, home based educator **General** titles, mostly involved with recruitment or resources as their main role, or not enough clarity to understand the job; parent liaison, family partner, family support services staff, parent resource aide, parent/ing aide, parent involvement specialist, parent engagement specialist, community outreach worker, family advocate, family navigator, family activities coordinator, resource associate
Screening Screening before hiring peer educators and paraprofessionals is not commonly done.	Screening before hiring and training peer educators and paraprofessionals is essential, but may not be consistently and thoroughly done. During the screening process, those hiring do not commonly assess applicant's openness to new ideas and their willingness to uphold the values of the profession and key messages/values of parenting programs. It is important to remember that practitioners' attitudes and personal parenting behaviors will inevitably impact their work with families.
Training (Pre-service, in-service, professional development) Training for peer educators and paraprofessionals varies widely.	To develop appropriate knowledge, skills and attitudes (dispositions) related to working with families, peer educators and paraprofessionals have unique training needs as compared to professionals. Pre-service and ongoing training vary considerably, and may be limited in duration and scope. Some service delivery models utilize an empowerment approach to train and develop peer educators and paraprofessionals. This type of approach promotes positive outcomes by building personal confidence and professional competence. There are many examples of peer educators getting GEDs, BAs, graduate degrees and going on to make significant contributions to their communities, whether as parenting educators or in other roles. Many attribute this personal growth to their work as a peer educator or paraprofessional in parenting education. Training is commonly focused in a program curriculum and peer educators and paraprofessionals tend to know the content of the program curriculum and are usually able to deliver it as it is written and as they were trained, but may however lack the knowledge and skills to deviate from the script. Professional development structures and career guidance are lacking for the advancement of peer educators and paraprofessionals in parenting education.
Supervision Peer educators and paraprofessionals have unique supervision needs.	Supervision of peer educators and paraprofessionals is critical. Many programs run without or with inadequate supervision. Where it exists it is usually weak or inappropriate and too infrequent. Peer educators and paraprofessionals have unique supervision needs, e.g. understanding boundaries and the use of personal values when working with families Adequately educated or trained supervisors and an understanding/commitment from program managers are missing. The absence of high quality reflective supervision may lead peer educators and paraprofessionals to perform roles and tasks they are to trained/qualified to do.
Wages The education/wages relationship hampers the perceived value of peer educators and paraprofessionals.	Wages are typically based on formal educational attainment making it rare to acknowledge the value of peer educators and paraprofessionals' work. Peer educators and paraprofessionals without formal education or who have limited formal education may not qualify for higher wages, regardless of the quality or longevity of their work.

Part II: Recommendations and Future Focus

In this final section, we offer recommendations to address issues and challenges discussed throughout this white paper. Many, but not all, recommendations are specific to peer educators and paraprofessionals.

Ethics
- To be responsible to the practitioners and the program participants, managers and supervisors need to commit significant resources to screening, orientation, training, and supervision.
- Ethics related to appropriate supervision and management of diverse staff and volunteers should be added to the existing ethical guidelines for parenting educators (i.e., Ethical Thinking and Practice for Parent and Family Life Educators; Minnesota Council on Family Relations, 2009.)

Job titles/descriptions
- The public and professionals alike would benefit from greater job title clarity. A national list of suggested job titles for diverse practitioners should be developed along with sample job descriptions for use in the field.

Screening
- Pre-service screening should become standard practice. Screening should include addressing practitioners' parenting attitudes, beliefs, and personal parenting experiences. This is more significant for peer educators and paraprofessionals because they will not have the in-depth time in formal parenting education preparation to understand how one's personal experience and bias can effect one's work. An examination of existing screening tools and hiring practices should be undertaken.
- Program managers and supervisors should consider potential practitioners' aptitude for growth as a result their involvement in parenting education during the screening/hiring process. (For a discussion of desirable characteristics of peer educators and paraprofessionals, see Day, et al., 2011; Katz, et al., 2011 and Appendix B.)

Training (Pre-service, In-service, and Professional Development)
- Consensus on core competency areas and specific competencies for the field should be actively pursued.
- The task of defining the difference between the educational and training processes for professionals and for peer educators and paraprofessionals, including the influence of time and depth of content should be undertaken. Examples include: the critical element of processing their parenting experience and the parenting content they are learning, and the use of modeling expected behaviors.
- Training and/or competence in specific competencies should be standardized for specific roles and tasks. With some core knowledge and skills assurance, hiring organizations can then customize pre-service, in-service and professional development training based on individual needs and specific job and organizational requirements.
- Empowerment approaches are particularly effective training models for peer educators and paraprofessionals and should be applied whenever possible. Peer educators and paraprofessionals' growth as people and citizens can be promoted through their involvement in the parenting education field.

- Professional development is essential for all practitioners, but should be tailored to the specific needs of practitioners and their roles. Peer educators and paraprofessionals need opportunities to further develop their knowledge, skills, and attitudes in the 10 core competency areas in parenting education. Professionals in supervisory roles should promote professional development of peer educators and paraprofessionals and assist them in creating individualized professional development plans that build on their strengths and enable them to optimally perform their assigned role with families. Program managers need to budget sufficient financial resources to support the professional development of peer educators and paraprofessionals.
- Particular attention needs to be made to adult learning principles such as responding to individual learning styles, utilizing experiential learning activities, understanding the learning needs of the trainees based on their acquired knowledge, and incorporating reflection of experiences.

Supervision
- The success of peer educators and paraprofessionals is dependent upon the quality of supervision they receive. After appropriate screening and pre-service training, peer educators and paraprofessionals should receive on-going supervision by a professional parenting educator.
- A core set of parenting education and organizational values should be transmitted from administrators to coordinators, to peer educators and paraprofessionals to enable these practitioners to successfully understand and then represent those values to the parents with whom they work.
- Intentional, multilevel, specific modeling within a program where peer educators and paraprofessionals have a broad parenting education role is critical.
- Guidelines for providing quality supervision in the field of parenting education including critical reflection should be identified and promoted.
- Quality supervisory knowledge and related skills should be defined and incorporate into the education and training of professional parenting educators.

Awareness and Recognition
- Greater awareness of peer educator and paraprofessional delivery models is required to promote acceptance and recognition of diverse roles and practitioners in the field.
- Peer educators and paraprofessionals should be consulted when designing state and a national certifications/credentials for them.

Wages
- Fair wages for ALL practitioners in the field, especially peer educators and paraprofessionals, are necessary and require strong advocacy to achieve.
- Third party reimbursement within the school, health and social work systems for parenting educators should be sought.

Research and Evaluation
- Creative means should be undertaken to solicit input from peer educators and paraprofessionals in regard to their view of their work and the training and support they perceive they need to do useful work with families.
- A review of existing publications and internal program documents about the effectiveness of peer educators and paraprofessional parenting educators should be undertaken and published for use in the field. After the review is complete, areas where more information is needed should be identified

Conclusion

We set out to raise awareness of peer educators and paraprofessionals as valuable practitioners who, when positioned within well-developed service delivery models, are important and essential to the field of parenting education. Not only do they provide effective services to parents and families, they also bring great diversity, depth, and richness to the field. Moreover, they are potentially a source of new professionals.

We advocate for greater inclusion and acceptance of diverse practitioners in parenting education. We also recommend developing consistent guidelines for hiring, training, supervision, and support of peer educators and paraprofessionals. For those who will take up our challenge to begin this critical work, Appendix B contains many details of well-developed parenting education program models that use peer educators and paraprofessionals.

Finally, as a continuation of this effort, an inquiry is underway to assess whether within parenting education peer educators and paraprofessionals want a national credential. If instituted, such a credential should be aligned with competencies for the field so as to promote unity and continuity. Greater consistency would benefit professionals, families, and sponsors and funders of parenting education programs and services. The greatest benefit could be to peer educators and paraprofessionals themselves who don't currently have a national credential to validate their role.

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Appendix A: Summary of Duncan and Goddard's Parenting Education Roles and Approaches
Reviewed by authors and permission to use granted.

Duncan, S. F. & Goddard, H.W. (2011). Family Life Education: Principles and practices for effective outreach (2ⁿᵈ ed.). Thousand Oaks: Sage, pp.15-19

Duncan and Goddard acknowledge that there are many different approaches or "roles" that practitioners who work with families can choose to use. They provide a list of some of these in their textbook. Their list of "roles" and approaches is not hierarchical in nature; one is not better than another. However, some approaches and "roles" work better than others in certain situations, and parenting educators, especially professionals, are advised to be knowledgeable of and skilled in performing many different approaches and "roles."

Expert approach: The parenting educator (PE) is viewed as an expert who possesses specialized knowledge and skills that their audience lacks or is superior to participants' knowledge and skills gained through experiential means. PE aim to transmit specific information to their audience with little or no variability, typically using a highly structured program and format. Participants are generally passive learners and low levels of interaction with and among participants are typical.

Facilitator approach: The PE is viewed as a facilitator who relies on participants to set the agenda according to what is important to them. Participants are viewed as possessing substantial knowledge. The facilitator's role is to guide participants in accessing the knowledge within them. PE are co-learners and see themselves equal among participants. Program and format is typically unstructured and informal. High levels of interaction among participants are common and involve PE.

Critical inquirer approach: The PE poses questions to encourage participants to think critically about the issues presented. This approach assumes that participants have a responsibility to society to become a well-developed thinker.

Collaborator approach: This approach falls between the expert and facilitator approaches. It recognizes that PE have specialized information and participants also have valuable experience-based knowledge. A structured program and format is used, but PE might deviate from them based on participants' needs and discussion. PE maintains significant control of the learning experience and environment, but typically solicits participant feedback and suggestions for making improvements.

Interventionist approach: The PE is viewed as change agents promoting cognitive, attitudinal, and behavior change. Systematic goal oriented plans, modeling and positive reinforcement and corrective feedback are typical. In transformative learning, reflection is used to help parents alter the ways that they think and subsequently how they behave.

Eclectic approach: PE uses a variety of elements of all the approaches depending on the audience and situation.

Appendix B

Examples of Well Developed Service Delivery Models that Utilize Peers and Paraprofessionals
These are included to add specific content that supports appropriate selection, training, supervision, evaluation and professional development systems when peers and paraprofessionals provide parenting education. All examples are nationally replicated. For the most part, parents attend voluntarily.

	Avance Inc. (1973) www.Avance.org	HIPPY USA (1984) www.hippyusa.org	Healthy Families America (1992) www.Healthyfamiliesamerica.org	Meld (1973) within PAT Cheryledylepalmer@parentsasteachers.org
Model Description / Goal/Role of P/P Curriculum Content/Audience	A free 9-month program, includes 3 hr. weekly parenting classes plus 8 home visits. For parents of children 0-3 years old **Program Goal:** Empower families to break the cycle of poverty by fostering parenting knowledge and skills that directly impact children's development, **Curriculum content** 27 parenting lessons (parenting skills, child development), toy making, adult development, community resources **Role of Paraprofessional** Parenting classes taught by Professional Parent Educator. The paraprofessional (Home Educator) is paid staff who observes the parent/child interaction and the child using parent made toys in the home. Uses a "possibility sheet for 10 minute observations). Also looks for parental understanding of learning through play, environmental stimulation and use of the toys. **Additional Services:** 1) early childhood education necessary for children's long term academic and personal success 2) Transportation and food services 3) referrals to assist the family with basic necessities and in crisis situations; 4) referrals and encouragement to parents to achieve their own educational and professional goals, which leads to financial independence and personal growth. **Audience:** Mexican American Hispanic Families with children 0-3 years old who are isolated, low income and often speaking Spanish as their first language.	A 3 year home visiting program model that instructs parents in effective engagement with their child in interactions around school readiness. **Program Goal:** Increase parent confidence, competence and long-term active involvement in their child's education. **Curriculum Content**: key learning domains: physical, intellectual, social and emotional domains are accomplished through a focus on literacy, language, problem solving, motor skills, science and math. **Role of Paraprofessional:** Home visits are conducted by paraprofessionals. 30 weekly visits are done during the school year, giving instruction in and practice of curriculum. Main methodology is role-play. Paraprofessionals are paid staff and peers to program participants. **Additional services**: 6 Group meetings/year, usually led by professional staff, focusing on education and enrichment, e.g. speakers, activities, facilitated discussions. Topic choice is parent driven. **Audience**: parents with barriers to teaching their children, e.g. poverty, physical or language isolation or education level, Children are 3, 4 and 5 years old.	An evidence-based voluntary home visiting model, using a holistic family-centered approach. Initiated prenatally or in newborn period, continuing for 3-5 years after birth. Number of visits vary from weekly to quarterly depending on need and longevity in the program. **Program Goals:** Build and sustain community partnerships to engage families in services. * Cultivate and strengthen nurturing parent-child relationships* Promote healthy childhood growth and development* Enhance family functioning by reducing risk and building protective factors **Curriculum content**: Programs select an evidence-informed curricula to meet the cultural needs of the families, promote positive parent- child interaction, child development skills, and health and safety practices with families. Service providers have an HFA framework, based on education or experience, for handling the variety of situations they may encounter when working with at-risk families. **Paraprofessional Role:** They are paid staff who conduct home visits to strengthen parent-child relationship, optimize child growth and development. (including cognitive and social-emotional well-being) child health, support positive family changes in areas of home safety, social connectedness, parenting knowledge and skills, mental health, substance use, financial stability and family cohesion **Additional Services:** Additional family services are available at some sites, but vary and are not part of the core program model. **Audience:** overburdened families at-risk for adverse childhood experiences, including child maltreatment.	A 2 year small group support and information universal program model for parents whose children are ages birth-adolescence. Groups meet weekly or biweekly throughout the program. Sliding fee scale optional. **Program Goal:** Enhance the capacity of those who parent to raise nurtured competent children. **Curriculum Content**: child development, child health, child guidance, parent development and family management. **Role of Peer Educator**: Groups are facilitated by trained parent peers who share the language and culture of families. Peers are volunteers who are reimbursed for expenses. **Additional services:** Transportation, meals and babysitting provided for group meetings. **Audience:** Parents of children in given age groups, preferably first children. Program has curriculum for many parent populations; adult couples, teens, Latinos, Deaf and Hard of Hearing, African Americans, parents of children who have special needs. The focus is on Birth to 2 years although Hmong Parents' children are from birth through adolescence. There is also a 3-5 year curriculum.

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Screening Characteristics/experience	The **primary requirement** is that a parent has successfully completed the AVANCE program and has at least one year experience working with adults and children or in a family support services environment. It is preferred that the parent have a high school diploma or GED, and is bilingual. An application and **interview** are necessary before hiring.	**Potential candidates** are identified by a list of **expectations**: current or former HIPPY parents; cultural match/competence; member of target population; potential leadership ability; adequate reading, writing and oral expression; good organizational and interpersonal skills, and computer skills or aptitude for. An **interview** focuses on personal strengths, passions, assets for program, team and families and flexible schedules to accommodate families. A basic skills assessment is also done. It includes literacy; reading aloud and writing; responding to home visiting and child development scenarios; and knowledge of and involvement in the community.	Some of the **criteria** that HFA programs use to select staff are strong interpersonal skills, life experiences, education and the ability to develop healthy relationships with families. HFA home visitors (both degreed and non-degreed) are often from the community and share the language and culture of families served. Across the HFA network 80% of HFA home visitors have some college education. HFA programs follow equal opportunity employment hiring practices and complete reference and background checks on new hire candidates. An **interview** with the applicant is conducted with a prescribed set of questions to discern their existing knowledge and skills.	**Ideal Candidate**: matches parents in the group, but whose child is older than group children, mature behavior, employed, has own transportation, can devote 6 hours/week to program, usually evenings or weekends, outside support system, unbiased, and has good references. **Interviews** are conducted in peer's home. Topics include: peers own pregnancy, birth and new parenting experience; their relationship with their partner/family and other sources of support; sensitive issues apt to arise in the group; comfort with self-disclosure and boundaries; group experience; their use of child guidance and knowledge of child development as a parent, working in a team. The **job description** is reviewed.
Pre-Service Training Duration and Content	Home Educators have a **3 day pre-service training**. It includes an overview of the Avance program and its components, the Home Educator position, the necessary skills and the nature of home visiting. Also included is how children learn (child and language development), and what children need to develop well (love, nurture and interaction) Role playing, videotaping and observations are used.	**15 hours of pre-service training** includes the philosophy, history, goals and rationale of HIPPY; a hands-on review of the curriculum; fundamentals of home visits (building trust and rapport, fears, solutions to problems, values clarification) and group meetings (purpose, structure, advantages and disadvantages); documentation and reporting on family progress; an overview of child development; and a workshop on professionalism	1) Receive site specific pre-service training from their HFA supervisor and/or program manager. 2) receive two trainings from a nationally certified HFA trainer within 6 months of hire. a) **4 day assessment training** that focuses on building skills to conduct the Parent Survey which assesses parents in regard to their strengths and needs b) **4 day home visitor training** re: communication skills, assessing, addressing, and promoting positive parent-child relationships, creating a trusting alliance with families, goal setting, and strategies to enhance family functioning, address difficult situations, and ensure healthy childhood development. 3) receive within the first 12 months of hire. **12 self-paced online learning courses** re: infant care, child health and safety, maternal and family health, infant and child development, the role of culture in parenting, supporting parent-child interaction, child abuse and neglect, family violence, substance abuse, mental health, preventive health care, drug exposed infants and managing family crisis.4) Sites are also encouraged to receive training locally from community partners.	**20 hours pre-service training** includes MELD philosophy, purpose and definition, adult learning styles, characteristics of support, hands on review of the curriculum and its use, group facilitation skills, group problem solving, group coordination, planning meetings, working in a team and evaluation responsibilities. (also see professional development – In-service training)

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Supervision/ Evaluation	**Supervision**: Weekly team meetings to communicate about families and issues that arise for team members. Led by the professional parenting educator (or program manager). Joint home visits may also be made.	**Supervision**: Weekly staff meetings for role-playing the curriculum, problem solving any challenges and joint planning of events. Supervisor is a professional that is certified in the model.	**Supervision:** HFA assessment and home visiting staff receive individualized clinical and reflective supervision for 1.5-2 hours each week that provides professional support, promotes skill development and ensures accountability and quality for work performed. Support plans, referrals	**Supervision** Planning and evaluation of the group with supervisor before each meeting, group visits by supervisor. The professional supervisor is certified in the model.
	Performance Evaluation Performance of team is evaluated by their supervisors. AVANCE also monitors sites for program fidelity at least once a year.	**Performance Evaluation:** Observations of home visits, group and staff meetings are combined for 3 performance evaluations annually of: proficiency in role-play activities, rapport with families, following home visiting protocol, dependability, record keeping, completion of tasks, readiness to profit from suggestions, use of independent judgment and work with others.	**Performance Evaluation** is an agency responsibility and is not standardized Each HFA program is required to monitor staff satisfaction and the factors associated with staff turnover, and analyze the ability to meet program goals and objectives through the implementation of a quality assurance plan. To ensure model fidelity HFA requires that all sites complete a periodic national accreditation review process to examine performance on nearly 150 standards of HFA best practice including personnel selection practices, receipt of staff training and supervision and all components of direct service work with families.	**Performance evaluation:** Twice a year based on delivery of information, provided support to parents, facilitation skills, coordinating group arrangements, working with team, completing evaluation of the group.
Professional Development (PD)	Home Educators are required to attend recertification training each year, usually **15-20 hours** in length. After a survey about needs, speakers are found and presentations given on topics requested and best practices. Also Home educators are encouraged to attend early childhood conferences and use webinars.	Knowledge and Skill Profile, may be used to help define professional development agendas. Areas evaluated are child development and home visiting issues, e.g. safety, distractions, missed visits. **15 hours are required annually**. PD is critical as home visitors are parent peers. The goals are to increase the home visitor's ability to better support the needs of parents and prepare them to move onto other pursuits. This includes topics such as establishing boundaries, communication, rapport building, time management, organizational skills, goal setting, and stress management, mandated reporting and résumé writing.	All HFA staff receive ongoing training based upon an assessment of each staff person's current needs, in an effort to continue to build skills and competence. These trainings are typically achieved through conferences, webinars, and trainings offered at local or state level.	**4 hour in-service trainings every 6 months**. Topics include evaluation of group and parent status, what has worked well, what needs work, problem solving group issues, and meeting specific needs of facilitators. No specific professional development focused on post program work. Letters of recommendation or description of skills are given along with certificates of completion. Peers most often facilitate only one 2 year group, then move on to other volunteer, community or educational experiences.

Appendix C:

Relevant Literature

Cohen, E. & Canan, L. (2006). Closer to home: Parent mentors in child welfare. *Child Welfare League of American, 85*(5).

> Discusses how peers can be effective "mentors" for families navigating the child welfare system.

Heller, S. S., & Gilkerson, L. (2009). *A practical guide to reflective supervision.* Washington, DC: Zero to Three.

> Compilation of articles on reflective supervision by numerous authors.

Myers-Walls, J., Ballard, S., Darling, C. & Myers-Bowman, K., (October 2011). Reconceptualizing the domain and boundaries of Family Life Education. *Family Relations, 60, 357-372.*

> A comparative analysis of three family family-related fields: family life education (FLE), family therapy (FT), and family case management (FCM). Similarities and differences of the three fields are noted.

Norris, J. A. & Baker, S. S. (1999). *Maximizing paraprofessional potential.* Malabar, FL: Krieger.

> A step by step model that includes the selection, hiring, training, supporting, and managing of human service paraprofessionals.

Paulsell, D., Avellar, S., Sama Martin, E., & Del Grosso, P. (2011). Home visiting evidence of effectiveness review: Executive summary. Office of Planning, Research and Evaluation, Administration for Children and Families. Washington, DC: U.S. Department of Health and Human Services.

> A review of the home visiting research literature an assessment of the evidence of effectiveness for home visiting program models that serve families with pregnant women and children from birth to age 5.

Home Visiting Forum. (n.d.) What makes supervision work: Recommendations from the home visiting field? Retrieved from http://eclkc.ohs.acf.hhs.gov/hslc/hs/resources/ECLKC_Bookstore/PDFs/6AD738B897CA1BCF3825388E700CAF47.pdf

> "This report highlights the importance of supportive management, training and professional development, structure and communication, and evaluation for home visitors and their supervisors."