

## ■ The TLC<sup>3</sup> Project: A National Initiative to Enhance Language and Cognitive Development of Children from Birth to Five Years

## ■ *Le TLC<sup>3</sup> Project* : une initiative nationale pour favoriser le développement linguistique et cognitif des enfants, de la naissance à cinq ans

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### Abstract

Children's early cognitive and language development in a positive relational context has bearing on later development and readiness for learning and social competence. This paper describes a Canadian national initiative that has been undertaken to promote language and cognitive development in the context of early relationships, particularly for economically disadvantaged children. As well, the project has a goal of influencing public policy and early childhood practice in community prevention and early intervention. As it is still underway, this paper serves to delineate project goals, trace the project's history, describe the sites, discuss the plan of evaluation, and summarize some of what has been learned so far.

### Abrégé

Le développement linguistique et cognitif de la petite enfance dans un contexte relationnel positif a des répercussions sur le développement ultérieur ainsi que sur la motivation à apprendre et à bien se comporter en société. Le présent article décrit une initiative canadienne nationale pour favoriser le développement linguistique et cognitif dans le contexte des premières relations interpersonnelles, particulièrement chez les enfants démunis sur le plan économique. Cette initiative vise également à influencer sur les politiques publiques et sur les pratiques dans le secteur de la petite enfance, notamment sur le plan de la prévention et de l'intervention précoce. Comme cette initiative est actuellement en cours, cet article cherche à en délimiter les objectifs, à en retracer l'historique, à décrire les endroits où elle a lieu, à discuter du plan d'évaluation et à résumer certaines des conclusions tirées jusqu'à maintenant.

**Key words:** language, cognition, First Nations, development, prevention

**T**his paper is about a five-year Canadian national prevention initiative, called TLC<sup>3</sup>, that has been undertaken to promote language and cognitive development in the context of early relationships in children aged zero to five years. TLC<sup>3</sup> aims to strengthen the capacity not only of children and families at risk but of all families to provide education and pleasurable relational experiences for their young children. The emphasis is on the importance of families, and the communities in which they live working together to support early development. The project also has a goal of influencing public policy and early childhood practice in community-based prevention and early intervention. As it is still underway, the intention here is

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to trace the project's history, describe the sites, discuss the plan of evaluation, and summarize some of what has been learned so far.

### *Why Prevention and Early Intervention Programs Are Important*

There is now widespread awareness of the importance of the early years of life for long-term health, education and well-being. Of most relevance here, children's early cognitive and language development in a positive relational context has bearing on later development and readiness for learning and social competence (Ramey, 1999). Recently, interest in the earliest years has been fuelled further by findings of research showing the rapid growth of the brain's neural pathways supporting communication, cognition, social development, and emotional well-being and the interactive nature of development in the first three years of life (McCain & Mustard, 1999). These findings have been interpreted to indicate that early childhood offers a window of opportunity for enriching environmental input. Conversely, it is a window of susceptibility to social stressors such as poverty, social isolation, family stress, and inadequate opportunity (Zeanah, Boris, & Larrieu, 1997). Children with poor language and cognitive skills are not only less ready for school but also may encounter difficulties in social and emotional development that lead to referral for mental health services (Cohen, 1996). Although by and large prevention and early intervention programs have been viewed as a way to ready young children for school when their life circumstances have left them ill-prepared because of risk factors associated with poverty (St. Pierre & Layzer, 1998), there is also recognition that children and families from middle class environments have needs for early intervention (McCain & Mustard, 1999). It is presumed that programs must be guided by certain principles to be successful including centring on the needs of families, being based in local communities, and drawing upon and integrating the approaches and expertise of different disciplines and emerging knowledge about child development and risk factors. Further, it is presumed that families provide young children with their first and most important learning environment for cognitive, language, social, and emotional development even though they may share this responsibility with community resources.

### *The TLC<sup>3</sup> Project: Goals and Early History*

TLC<sup>3</sup> refers to three meanings for the letters T, L, and C that summarize the goals of the project. TLC<sup>3</sup> stands for Thinking, Listening and Communicating (*Tandem: langage et cognition*). It also stands for Tender Loving

Care in the learning environment (*Tendresse, lien et communication*). Finally, it stands for The Learning Centres (*Théorie en liaison avec la communauté*) to encompass its programs. The value of the TLC<sup>3</sup> Project lies in the diversity of the sites. From this project it will be possible to describe how different programs have worked in different environments for children of different ages within the zero to five year age range. There are sites in seven communities: Dartmouth, Nova Scotia; St. Rémi, Quebec; Toronto, Ontario; Regina, Saskatchewan; Meadow Lake, Saskatchewan; Calgary, Alberta; and Vancouver, British Columbia. The core management, evaluation, and administration of the overall project is the responsibility of the Hincks-Dellcrest Institute in Toronto with input from an 11-member National Advisory Committee representing research, communications, and policy.

The specific goals of the TLC<sup>3</sup> Project are to: (a) enhance the cognitive and language development of children aged zero to five years; (b) increase the awareness and skills of the families and service providers who participate; (c) stimulate and facilitate similar activities in the local, regional, and provincial communities by demonstrating a range of effective community based practices and disseminating knowledge derived from the project; and (d) leave the participating sites with a sense of the importance of evaluating the outcomes of their work as a way of getting the support of policy and decision makers.

The TLC<sup>3</sup> Project is funded by a private foundation dedicated to the well-being of young children and their families with the understanding that programs based on best practices in early language and cognitive development would be established at sites across Canada. A precondition for funding was that site programs be implemented quickly. Consequently, sites were chosen by nominations made at the provincial level by a policy maker or someone in the government with responsibility for early childhood programs who could recommend a program that could utilize an injection of funds from TLC<sup>3</sup>.

The criteria for selection of sites were as follows. First, because funding was not intended to establish entirely new programs but to permit program enhancement, the TLC<sup>3</sup> Project sites had to be located within established high quality community based programs and have leaders with experience in forming community partnerships and the skills and enthusiasm to develop new activities based on best practices and in keeping with the TLC<sup>3</sup> goals. Second, sites had to represent different populations (e.g., immigrant, First Nations) and types of communities (e.g., rural, urban). Third, sites were expected to use different models of intervention chosen

because of perceived suitability for the communities in which they are embedded along with a sound theoretical and empirical base in the literature on child development and early intervention. Fourth, the focus had to be on prevention; with one exception, sites could not be devoting all of their resources to children with established developmental disabilities. A fifth requirement was that sites had to systematically evaluate the outcomes of their efforts.

As a first step, all sites that were nominated were required to submit a proposal based on recognized models of language and cognitive development or on current conceptual schemes for best practices. Proposed program plans also had to be consonant with the existing community-based program and the larger community in which they were embedded. Proposals were reviewed at the Hincks-Dellcrest Institute and feedback was provided to help the sites revise their plans in preparation for the first year of funding. Once approvals were given, site staff were hired and trained. As well, sites engaged in discussions with staff, parents, and the community regarding the proposed program content and structure. Site staff included early childhood educators, community home visitors, daycare coordinators, speech-language pathologists, and psychologists. TLC<sup>3</sup> funding allowed for expansion or introduction of the services of speech-language pathologists who otherwise were either not available or only minimally so. In some sites, consultation from speech-language pathologists and psychologists working for other community agencies was donated. The Hincks-Dellcrest Institute staff responsible for overall project management and for the evaluation make annual site visits. These visits provide an opportunity to gain familiarity with site activities, develop relationships with the individuals involved in the site programs, meet with advisory committees and with the professionals involved in the sites' evaluation, and to understand local issues.

### TLC<sup>3</sup> Site Programs

TLC<sup>3</sup> sites deliver programs through activities such as community and home daycare, half day preschool, home visiting, direct child intervention, joint parent-child activities, parent groups and workshops, and teacher training. The programs at individual TLC<sup>3</sup> sites also differ along a number of dimensions including: intensity (frequency), timing (infant vs. preschooler), direct vs. intermediary service delivery (classroom vs. parent-child interactional approaches), planned environmental maintenance of gains, attention to individual differences in program delivery, comprehensiveness (few vs. multiple interventions), degree of maternal/parental

involvement, and elements of the program in which TLC<sup>3</sup> is embedded. In all cases, the nature of the TLC<sup>3</sup> programming has been developed with the community as represented by parents, professionals, and other community members who are participating in planning groups or on advisory committees for the project.

Although the sites differ on a number of dimensions, there are also some commonalities. One obvious commonality is the overall project goals. Other commonalities include the commitment to provision of culturally sensitive practices, promotion of family empowerment, a spirit of collaboration, and commitment to high professional standards.

### Common Programmatic Elements

Before describing the seven sites, the most common programmatic elements will be reviewed.

#### *Caregiver-Child Interactional Approaches*

As part of the move toward early interventions with infants and toddlers, there has been an increased appreciation of parents' as well as other caregivers' role in the intervention process. Considerable research since the 1970s has demonstrated the important links between qualities of parent-child interaction in the first years of life and outcomes regarding cognitive and language abilities for both normally developing children and for children at risk (see Barnard, 1997 for a review). The underlying assumption in these approaches is that the child's language and cognitive development can be facilitated through improvement in parents' knowledge and attitudes toward child rearing and through developing a positive, sensitive, and supportive parent-child relationship in which development can flourish. In some recently completed research (Barwick, Cohen, Horodezky, & Lojkasek, 2001) it was found that qualities of mother-infant interaction were the strongest predictors of preverbal communication and emergent language skills, accounting for children's development more than psychosocial demographic factors including maternal education. The important elements of interaction include the capacity of the child to send clear signals and parents' or other caregivers' response to the child's cues, their ability to alleviate distress, and their provision of opportunities for exploration and learning.

There is evidence that parents can serve as effective facilitators for their young children not only in developing basic communication and language abilities but also in developing highly specific grammatical and phonological skills (see review by McLean & Cripe, 1997). Typically, interactional programs promote parents following their child's lead in order to better read their

child's cues regarding thoughts and feelings, and adapting their own verbal input and behaviour to the child's by repeating, extending, or otherwise building on conversations. All of the TLC<sup>3</sup> sites have included some components that utilize a parent-child interactional approach. These are programs such as You Make the Difference (Manolson, Ward, & Dodington, 1995), Learning Language and Loving It (Involving Teachers as Language Facilitators; Weitzman, 1992), Parent-Child Mother Goose (Lottridge, 1994), Dialogic Reading (Whitehurst et al., 1988), and Parents as Teachers (PAT; PAT National Center, 1999). The principles and practice of these approaches have also been provided to early childhood educators in preschool classrooms and daycare settings.

### Classroom Approach

It has long been recognized that young children from families living in low socio-economic conditions are at a disadvantage in terms of language and cognitive development when they enter school. Early education for these children has been studied for the past 30 years and social policy has focused on programs, such as Head Start, that improve the chances for school success of children from low-income families (see review by Bryant & Maxwell, 1997). The research on these programs has provided valuable evidence of the long-term impact of early intervention on "real world" indicators of success such as staying in school and staying out of trouble with the law. Classroom techniques such as those used in the Head Start Project High/Scope (Hohmann & Weikart, 1995) emphasize child initiated learning, direct experiences with hands-on materials, and a plan-do-review cycle for conducting classroom activities that support children's ability to plan and reflect on their activities. Activities which foster development of specific cognitive skills, for instance, in regard to seriation, number, space, and time are integrated into preschool activities.

### *Consultation from a Speech-Language Pathologist*

To varying degrees, the TLC<sup>3</sup> programs are incorporating the input from a speech-language pathologist who works in a consultative rather than a direct service role. Most often, speech-language pathologists facilitate mother-child language based interactional programs, lead parent groups, and train teachers and other staff working with children. They also consult to preschool classrooms or daycares around prerequisite skills for language development and the nature of specific language impairment. In this role, the speech-language pathologists provide strategies for facilitating growth in children's language and cognitive capacity and for modifying problems, and work with staff to see how language

learning opportunities can be integrated into naturally occurring activities and interactions. As would be expected, there are a small proportion of children with special needs who require remediation and provision of resources. When children with a language delay are identified, they are assessed and/or referred to community resources.

### Description of TLC<sup>3</sup> Sites and Programming

In the following sections, each of the TLC<sup>3</sup> site programs will be briefly described. A summary is provided in Table 1.

**British Columbia: CONNECTIONS.** In Vancouver, TLC<sup>3</sup> funding provided an opportunity to extend services offered through the Infant Development Programme that serves infants with identified delays. The term CONNECTIONS was created to encompass the distinct prevention activities of TLC<sup>3</sup> formed through a collaboration between the Infant Development Programme with a mental health centre. Located in two neighbourhood houses, which use a community development approach, CONNECTIONS focuses on infants aged birth to two years and their families who could be characterized as multicultural middle and lower middle class. This site concentrates on programs with a mother-infant interaction component, particularly Parent-Child Mother Goose. The Parent-Child Mother Goose Program is not only intended to enhance language development through singing and rhyming activities but also to facilitate the quality of the parent-child relationship by encouraging parents to read their infant's cues accurately to determine, for instance, what sounds and movements they do and do not enjoy. CONNECTIONS staff members have also trained a range of other professionals in the province to deliver the Parent-Child Mother Goose Program. The You Make the Difference mother-child interactional language program also is offered to some families. Interactional screening assessments with the parent and child are done at different points in the program using standardized instruments and observation of play. Specifically, First Look at Talking is done with the parent and child shortly after they begin the program. The instruments used include the Rossetti Infant-Toddler Language Scale (Rossetti, 1990) for infants eight months or younger, the Communicative and Symbolic Behavior Scales Developmental Profile Caregiver Questionnaire (CSBS; Wetherby & Prizant, 1998) for infants older than eight months, and the CSBS Screening and Evaluation Worksheet for Rating Behavior. The Vineland Behavior Rating Scales-Revised (Sparrow, Balla, & Cicchetti, 1984) is administered at all ages. The parent also brings some of the infant's toys which provide the stimulus for talking about early communi-

**Table 1 (part 1)**  
**Description of Sites and Site Activities.**

<b>Site</b>	<b>Age Range</b>	<b>Population Served</b>	<b>Base Program</b>	<b>TLC<sup>3</sup> Components</b>
<b>Vancouver</b>	0-2 years	Multicultural Low to middle income, moderate risk Urban	Parent-Infant Program (Infant Development Programme funded by the Ministry for Children and Families)	Parent-Child Interactional Programs: * Parent-Child Mother Goose (Lottridge,1994) * You Make the Difference (Manolson et al., 1995) Language Screening: * First Look at Talking * Further Look at Talking Parent-Child Follow-up: * Keeping in Touch Professional Training: * Parent-Child Mother Goose Training (Lottridge,1994)
<b>Calgary</b>	6 mths - 4 years	English Canadian Middle to upper middle income, low risk Urban	University Child Care Centre (University of Calgary)	Parent-Child Interactional Program: * Parent-Child Mother Goose (Lottridge,1994) Toy and Resource Lending Library Home Visiting Parent Education Program (PATS Center, 1999) Community Outreach: * Parent-Child Mother Goose Training * Lecture series
<b>Meadow Lake</b>	0-5 years	First Nations Low income, high risk Rural	Meadow Lake Tribal Council (First Nations' Child Care Program)	Developmental Screening Parent-Child Programs: * You Make the Difference (Manolson et al, 1995) * It Takes Two To Talk (Manolson, 1992) * Come Read With Me (Hoffman & Klassen, 1998) * Parent-Child Mother Goose (Lottridge,1994) Parent Education Program: * Nobody's Perfect (Health & Welfare, Canada, 1988) * Second Step (violence prevention) (Committee for Children, 1991) Parent Education Meetings Child and Parent Components * Bright Start (Haywood et al., 1992) Resources: * Toy and book lending library * Book and toy resource fairs
<b>Regina</b>	0-5 years	First Nations (largely Metis) English Canadians Low income, high risk Urban	Regina Early Learning Centre (community-based child & family resource centre)	Enhanced Preschool Program with strategies from High/Scope Curriculum (Hohmann & Weikart, 1995) Family Literacy Programs: * Parents' Role Interacting with Teacher Support (PRINTS) (Fagan & Cronin, 1998) * Come Read With Me (Hoffman & Klassen, 1998) Parent Education Program: * Parents as Teachers (PATS Center, 1999) Home visits
<b>Toronto</b> (St.James Town)	0-4 years	Immigrant (largely from Sri Lanka, Philippines and India) Low income, high risk, children with identified delays Urban	Growing Together (community-based, early intervention and health promotion program)	Developmental Assessments Preschool Program Parent-Child Interactional Program: * Parent-Child Mother Goose (Lottridge,1994) Parent Education Program: * You Make the Difference (Manolson et al.,1995) Home Visits Community Day Care Consultation

ation, following the infant's lead, and joint attention. This procedure is repeated if a family returns for a second year (Further Look at Talking). One year after a family

leaves the program, they are seen for follow-up testing (Keeping in Touch). For children under two years the above measures are repeated. If over two years, a lan-

**Table 1 (part 2)**  
**Description of Sites and Site Activities.**

Site	Age Range	Population Served	Base Program	TLC <sup>3</sup> Components
<b>St. Remi</b>	0-5 years	French Canadian Low income Rural	1,2,3 GO! St. Remi (community-based, early intervention program)	Parent-Child Interactional Programs (Didactic Interactive Reading Programs): * ALI - Bébé (0-15 months) * ALI - Bambin (15-36 months) * ALI - Explorateur (3-5 years) Developmental Assessments and Corrective Action Program: * ALI - DAC (Detection-Action-Corrective) Community Action Program: * Resource Library * Training for toddler interventionists
<b>Dartmouth</b>	4-5 years (Preschool) 0-5 years (Family Resource Centre)	English Canadian Low income, high risk Semi-urban	Dartmouth Boys & Girls Club Preschool & Dartmouth Family Resource Centre (community-based, partnership project)	Enhanced Preschool Program Parent-Child Interactional Programs: * Parent/Tot Interactive Rhyming Program * Baby Talk (based on Keys to Caregiving) Parent Education Programs: * Strengthening Family Capacity (Adaptation, Webster-Stratton, 1979, 1989) * You Make the Difference (Manolson et al., 1995) Speech-Pathology Consultations * Learning Language & Loving It (Weitzman, 1992) * Involving teachers as language facilitators

guage sample is gathered from shared book reading, shared viewing of a photo album, and during play with a toy that promotes problem solving. At all of these assessments, parents are given printed brochures published by CASLPA. Further, if screening suggests developmental delays or if a parent expresses concern, the family is helped to make a referral to an appropriate professional.

**Alberta: University Child Care Centre.** TLC<sup>3</sup> activities have been incorporated into the University Child Care Centre. Located on campus at the University of Calgary, the Centre offers daycare services for children from infancy upward of students, faculty, and staff. The Centre also recognizes that some children have diverse needs and may need extra support in order to be included with peers. Modifications to the physical environment, staffing, and program planning are made to enable all children to participate in programs to their fullest abilities.

TLC<sup>3</sup> offers an opportunity to develop additional programming to enhance children's language and cognitive ability and to increase involvement of and support to parents in the enriched programming. Specifically, this is done through increased support for parents through the Parent-Child Mother Goose program, and through a home visiting program, Parents as Teachers (PATS Center, 1999) which facilitates development by promoting sensitive and responsive care giving in relation to meeting developmental needs of infants and

toddlers. These programs are offered in collaboration with the Calgary Family Connections Society. A toy and a resource lending library also has been established. Further, a lecture series on early child development is offered to a range of professionals and to parents. An outreach component is planned to allow the Centre to share resources and learning with other centres that work with parents and children in the broader community.

**Saskatchewan: Meadow Lake Tribal Council.** TLC<sup>3</sup> has been incorporated into community and home childcare in the nine First Nations subsumed under the Meadow Lake Tribal Council Child Care Program. The Meadow Lake Tribal Council has always used an integrated and holistic approach to development of its programs and services for the nine member First Nations. TLC<sup>3</sup> funding was coincident with expansion of on-reserve child care services in this region, first stimulated by creation of a collaborative childcare training model introduced through the University of Victoria approximately a decade ago (see Ball & Pence, this issue). The TLC<sup>3</sup> program uses the services of childcare coordinators and a speech-language pathologist to educate and provide consultation to daycare providers and parents about the developmental needs of infants and preschoolers. A variety of techniques are used: assessment and consultation for children with language delays, dental screening, parent-infant interactional programs including a version of You Make the Difference

that has been adapted for First Nations communities (Van Wyck & Kewayosh-Jacobs, 1996), parent groups, public education, parent-child interactional programs It Takes Two to Talk (Manolson, 1992), Bright Start (Haywood, Brooks, & Burns, 1992), a literacy program, Come Read with Me (Hoffman & Klassen, 1998), and provision of resources from an extensive toy and book lending library. Book and toy resource fairs are also held in the various communities to provide information to families on the benefits of childcare. Because of the importance of engaging parents in the process, two parenting programs, Second Step, a violence prevention program (Committee for Children, 1991) and Nobody's Perfect (Health & Welfare Canada, 1988), a program focused on developing self-esteem, were added.

**Saskatchewan: Regina Early Learning Centre.** The Regina Early Learning Centre works cooperatively with low income families to provide programs that foster the healthy development of children from birth to five years of age. The Centre operates a half-day educational program for three- and four-year-old children. It has four classrooms staffed by qualified teachers and teacher associates. Teachers build curriculum around culturally sensitive play based activities. At least 80% of the children are First Nations or Métis. Wherever possible, parents are involved in their children's education. Parents are engaged in their children's education in a variety of ways. Home visits are a regular part of the program and the Centre has an open door policy for parents to visit their child's classroom. An Outreach Program works to maximize parents' participation and focuses on building home and school relationships as well as developing parenting and life skills. Some parents are in school and some are working toward their General Equivalency Diploma through tutoring offered by the Early Learning Centre volunteers. The TLC<sup>3</sup> funding has been used to enhance and develop programs in the following three areas. Curriculum strategies from the High/Scope Foundation have been integrated into the preschool program. Children's organization, language, and cognitive skills are enhanced by implementing the plan-do-review cycle (Hohmann & Weikart, 1995). There are also family literacy programs (Parents' Roles Interacting with Teacher Support; PRINTS; Fagan & Cronin, 1998; Come Read with Me; Hoffman & Klassen, 1998). Finally, parent workshops around language and cognitive development, stimulation, and understanding child development also are offered.

The TLC<sup>3</sup> Project has enabled the Early Learning Centre to expand its programming to parents with children from birth to three years by offering the Parents as Teachers Program described earlier.

**Ontario: Growing Together.** Growing Together is a prevention, health promotion and early intervention project in the St. James Town area of Toronto, populated primarily by new immigrants and refugees, and particularly families with a Tamil or Filipino background. There are multiple programs delivered through Growing Together including newborn risk screening, home visiting, a variety of parenting groups, job skills training for parents, a community kitchen, and individual and family therapies. This is the only TLC<sup>3</sup> program that is focused on children with identified developmental delays and is embedded in the larger Growing Together universal access early intervention program. Many of the children come from cultures in which early exploration and verbal communication are not valued. Yet, all parents are concerned about preparing their children for entry to school and welcome experiences that can facilitate their children's readiness. Working with children zero to four years, it includes developmental assessment, provision of a preschool experience, consultation to community daycare, parent groups focused on facilitating language development, home visits to demonstrate techniques and provide resources, and referral for speech-language and other remedial services. Parent-child interactional programs, including You Make the Difference (Manolson et al., 1995) and Parent-Child Mother Goose (Lottridge, 1994) also are available.

**Quebec: 1,2,3GO! St. Rémi.** In Quebec, TLC<sup>3</sup> is part of a larger provincial project, 1,2,3GO!, that aims to promote the well being of children aged zero to five years in the community, working jointly with community members to develop programs. The TLC<sup>3</sup> program is focused on low income rural families who are relatively isolated and uses home visiting to deliver a reading program that facilitates parent-child interactive reading (Dialogic Reading; Whitehurst et al., 1988) and delivered through programs called Ali (*Activité de lecture interactive*). Ali has been adapted for three age levels: 0 to 15 months (Ali-bébé), 15 to 36 months (Ali-bambin) and three to four years (Ali-explorateur). Interventionists deliver the program in parents' homes and demonstrate interactive reading techniques to parents. Diaries, telephone follow-up, and repeat visits are used to monitor the program. The Dialogic Reading program is also offered in the community daycare centres. Toddlers and preschoolers with delayed language are assessed by a speech-language pathologist and referred for remediation through a program called DAC (*detection action corrective*). Materials for Ali activities, such picture books without words, are also available in the local library.

### *Nova Scotia: Dartmouth Family Resource Centre.*

The Dartmouth Family Resource Centre was established through the Canadian Action Plan for Children to respond to community identified needs. The mission is to offer a range of services and activities that contribute to parents' social support and education and promote a nurturing and enabling community environment in order to enhance the well-being of children aged zero to five years and their families who are at risk in the low income community of North Dartmouth. TLC<sup>3</sup> has enabled the development of a partnership between the Dartmouth Family Resource Centre and a local preschool managed by the Dartmouth Boys and Girls Club. It benefits children whose parents are financially unable to send their child to a private preschool. The TLC<sup>3</sup> funding has permitted the introduction of a stronger language component into the preschool through such programs as Involving Teachers as Language Facilitators (Learning Language and Loving It; Weitzman, 1992), which is used by the speech-language pathologist to facilitate teachers' interactions with the children. A speech-language pathologist acts as a consultant to both the Dartmouth Resource Centre and the Dartmouth Boys and Girls Preschool. In the resource centre, she is primarily responsible for developing a parent-tot song and story program modelled after some of the activities used in the Parent-Child Mother Goose Program (Lottridge, 1994) as well as parent-child interactional programs such as You Make the Difference (Manolson et al., 1995) and Keys to Caregiving (Keys to Caregiving, 1990) which builds parenting confidence. Additionally, TLC<sup>3</sup> funding permitted the amalgamation of language development principles into a well-known behavioural management program for children (Strengthening Family Capacity) (Adaptation, Webster-Stratton, 1977, 1989).

### The Evaluation

There is pressure for community-based programs to demonstrate their effectiveness. It is important to know whether programs achieve the outcomes they identified and also whether the sites can demonstrate the impact of their different programs on the skills of the service providers and parents. The goals of the evaluation are to: (1) describe characteristics of site participants in TLC<sup>3</sup>; (2) measure outcomes in terms of language and cognitive development and test the various models for achieving these outcomes; and (3) evaluate the application of knowledge in terms of enhanced staff and parent skills and wider community understanding of and activities in relation to early language and cognitive development.

The Hincks-Dellcrest Institute is responsible for coordinating the project evaluation. Initially, the Hincks-

Dellcrest Institute was to take full responsibility for planning and implementing the evaluation protocol at all sites. This plan proved to be both unrealistic and undesirable. First, the variability across sites in both specific programs and age groups made a common protocol difficult to design. Second, and more important, to ensure local involvement and buy-in to the evaluation results, collaboration in planning the design and implementation at the local level was essential. To this end, each site sought collaboration with a local researcher, which in five of the seven sites comprises a university-community collaboration. The remaining sites involve a research consultant. These collaborations not only provide information relevant to a local project but also build a bridge between research, practice, and policy for young children (Denner, Cooper, Lopez, & Dunbar, 1999).

Site evaluations began in September 1999, at the beginning of the third year of the programs, a point at which all sites could say that their program was "proud" and feel confident that what they were evaluating was the outcome of the intended plan. The progress toward meeting the goals of evaluation can be briefly summarized as follows.

1. To obtain a picture of project participants, a computerized Management Information System has been developed for use at all sites and individuals from the sites have been trained in administration and data entry.

2. To test program models intended to achieve enhanced language and cognitive developmental outcomes, at the end of the first year of the project, with consultation from a member of the National Advisory Committee, each site completed a workbook to develop a program logic model (David, 1997; Porteous, Sheldrick, & Stewart, 1997). This workbook required participants to list the desired outcomes for children, parents, and other community members as a result of TLC<sup>3</sup> programming, to articulate indicators or signposts of those achievements, and the specific activities that are required in their model to achieve the goals. Further steps included choosing specific measures and the timing of measurement.

3. To determine the impact of TLC<sup>3</sup> on staff, parents and the community, during annual site visits semi-structured interviews were conducted with staff, parents, and advisory committees. These interviews examined the process of project development, implementation, and applications.

At the end of the project, what has been learned from the approaches to enhancing language and cognitive development will need to be pulled together in a coher-

ent way so that a comprehensive dissemination plan can be implemented. Syntheses of findings from each site, will be done using "cluster evaluation" techniques designed by the Kellogg Foundation (Sanders, 1997). Cluster evaluation is a way of pulling together information from different sources to address questions common to the Project such as: Overall, have changes occurred in the desired direction? What is the nature of these changes? In what contexts have different types of changes occurred and why? Are there insights to be drawn from failures and successes that can inform future initiatives, policy, and planning? What is needed to sustain changes that were worth continuing? Ultimately, components of cluster evaluation will include information about the process of implementing TLC<sup>3</sup> obtained from interviews during site visits and the sites' annual reports, demographic data from the Management Information System, responses from key informant interviews, findings from the sites' data collection, and networking conferences to share, integrate, and synthesize information from each contributor. Key stakeholders including but not limited to sites and the Hincks-Dellcrest Institute will work collaboratively to address the above questions and to learn from each others' experience.

### *Communication*

An essential part of the TLC<sup>3</sup> Project is dissemination of what has been learned. In the short-term, the goals of communication are to link seven TLC<sup>3</sup> programs with one another and with the Hincks-Dellcrest Institute and the National Advisory Committee, and to communicate within communities. A second goal is to develop a short- and medium term communication strategy to link the program with a public awareness campaign and through this to policy makers.

The first two years of the Project focused primarily on the internal short-term communication goals. Particularly in the early stages of the project, sites preferred direct contact by telephone or during site visits. Increasingly, sites have gained comfort with using e-mail, and an internet bulletin board for the project is being developed. The sites themselves also communicate within their communities via brochures, flyers, community events, local newspapers, and the radio.

In this past year, we have moved into the second phase of communications planning. Planning began by hiring a consultant to design a broader scale strategic communication plan to disseminate learnings externally, at the local and national levels, to the public, to educators and academics, to funders, to organizations concerned with child development, and to policy and decision makers in government. A colorful brochure describing the project and the seven sites has been circu-

lated nationwide and information about early child development has been provided to sites in the form of "fast facts" for local distribution and use in site communications. Currently, steps toward establishing a Website and a list of readings on TLC<sup>3</sup> related issues is being developed. Ultimately, it is planned to develop community guidebooks on how to set up TLC<sup>3</sup> programming and examples of resources (e.g., story booklets) for parents.

### *Lessons Learned*

Although TLC<sup>3</sup> is only in the third of its five years, nevertheless, lessons about establishing and operating a national project of this type are beginning to emerge. First, a major insight is that by selecting sites with an existing administrative structure and capacity for innovation it is possible to bring best practices to children and families in a timely manner. Sites had the benefit of their larger umbrella program already being accepted and valued in the community and thus were able to avoid the struggles that often accompany community based initiatives in their early stages. Moreover, the TLC<sup>3</sup> sites, chosen for their administration and community development experience, also brought with them the problem solving abilities to apply to inevitable conflicts and unforeseen changes. These organizational and community strengths help to keep problem solving at the community level and provide a model for other programs that are going through changes or just becoming established.

Second, it has become apparent that awareness of the importance of the early years is widespread. All sites thought that they would have to do a hard selling job. This proved not to be so. Instead, the sites shared the "positive problem" of a high demand for their programs. Families were pleased that activities were available for them and their young children within the community and were eager to participate. In this climate, sites also enjoyed an expanded relationship with external agencies and professionals. On the downside, because demand was so high, it became difficult to meet all requests, not only from within the TLC<sup>3</sup> community but from neighbouring communities that had heard about the TLC<sup>3</sup> program. Also, program staff were concerned that they were not reaching high need families who are less likely to commit to a program.

Third, site leaders came to recognize that it is necessary to make time for planning and review and for facilitating communication with staff and external agencies in order to build on existing resources and community capacity. All sites reported the challenge of having to make decisions rapidly without feeling there was adequate time to reflect and plan. Staff were concerned about extra work and pressures to learn new techniques

while at the same time meeting the needs of young children. There were also the practicalities of merging programs.

Fourth, TLC<sup>3</sup> highlighted the need for an increased role of speech-language pathologists in prevention services throughout Canada with their expertise in language development. At the same time, it has to be acknowledged that funding for intervention, to say nothing of prevention, is already stretched.

Fifth, a common observation was to expect the unexpected. There were a number of unanticipated positive outcomes of launching the TLC<sup>3</sup> program at the various sites. One of these was the offer of services in kind by other community programs and professionals. For instance, TLC<sup>3</sup> programs are now linked with dental screening in Meadow Lake and in Regina. This is important as the dental health in both of these communities is very poor and even young children have serious dental problems which interfere with speech development. Sites also have had contributions of time from psychologists and speech-language pathologists. As well, TLC<sup>3</sup> funds were used to leverage additional funding for specialized programs (e.g., literacy programs).

Sixth, because many excellent demonstration programs disappear when special project funding ends, from the beginning, sites should be expected to actively plan for sustainability. There are already some hopeful signs. For one thing, staff, students, and community professionals have received formal training in programs delivered through TLC<sup>3</sup>. Community schools and libraries also have shown an interest in receiving training. As well, most programs have trained parents to facilitate TLC<sup>3</sup> programs or plan to do so. It is also understood that staff and parent training must include a follow-up maintenance component to ensure that what has been learned is sustained and synthesized. Finally, sites are exploring external collaborators and funding sources that can be engaged in the plans for sustainability.

Seventh, by bringing sites together regularly at an annual two-day symposium the project has become a national collaboration rather than a national project with seven sites. The symposium is attended by three site representatives, Hincks-Dellcrest Institute TLC<sup>3</sup> staff, National Advisory Committee members, and members of the funding foundation (usually the board Chair and Executive Director). Symposia provide an opportunity to engage in collaborative planning around program and community development, sustainability, project evaluation, and communication strategies. Each site also has had an opportunity to work with a member of the National Advisory Committee who served as a consultant to their site evaluation. In this process, members

of the National Advisory Committee, most of whom work in academic settings, gained a deeper appreciation of the challenges that the sites must grapple with on a daily basis. In turn, the sites came to appreciate that academics/researchers could work together with them on the same turf to clarify and articulate the conceptual frameworks underlying their project without introducing barriers to the process based on different orientations and priorities. Further, at each symposium, presentations are made by members of the National Advisory Committee to share knowledge from their own area of expertise related to early language and cognitive development. Sites have used information from these presentations either to implement specific activities or to gain a deeper understanding of the developmental processes they are seeking to enhance. The symposia are also a time to celebrate achievements and to continue to forge collaborative bonds between members of the seven sites, the Hincks-Dellcrest Institute, the National Advisory Committee, and the foundation.

### Conclusion

TLC<sup>3</sup> is a complex and ambitious project. It presents both tremendous possibilities and tremendous challenges. Many of the possibilities and challenges stem from the same sources, the diversity of models and populations, the complications of embedding a program into an already complex organization and community context, forging community-university collaborations, and the difficulties of evaluating the outcomes of a multifaceted process. Some issues may be more difficult to address than others and there will be limits on what can be concluded at the end of the process. But there is much to learn, at the end of the TLC<sup>3</sup> Project there will be much to say and the lives of young children and their families will be enriched on the way.

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