"What We Do Together: The State of Social Capital in America Today"
Joint Economic Committee
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Chairman Tiberi, Vice Chairman Lee, Ranking Member Heinrich, and other members of the committee, I thank you for the invitation. I appreciate the opportunity to help begin a discussion of how better understanding social capital can help Congress both identify problems facing the nation and develop potential solutions.

I will make three points. First, social capital is a characteristic not just of nations but also of individuals. Second, individuals who have access to and who use their social capital have been shown to do better, by multiple measures, than those who do not. Third, recent studies suggest that early education and childcare programs may be an especially effective venue to help low-income parents generate social capital. This social capital may, in turn, benefit both parents and children. I will focus much of my testimony on the potential for early education and childcare programs to increase the social capital, and overall wellbeing, of low-income parents and children.

SOCIAL CAPITAL

Social capital is a characteristic not only of nations but also of individuals

To have a productive conversation about social capital, it is important to be clear that the term can refer to a characteristic of either nations or individuals.[1] As a characteristic of nations, social capital has been understood as a country's degree of connectedness, sense of community, and civic participation. There is an ongoing debate over whether this kind of social capital has declined over the last forty or fifty years in American society. There is strong evidence that some practices have declined—these include participation in voluntary organization and several forms of informal but important social engagement, such as joining bowling leagues and hosting dinner parties.[2] There is also strong evidence that some conditions have not declined—these include the number of confidants people report and the degree to which people spend time with friends.[3] And there is also strong evidence that some practices have increased—a notable example is the extent of participation in political communities outside one's local neighborhood or town.[4] The debate over whether the nation's social capital has declined is ongoing.

Most of my comments will be about the social capital not of nations but of individuals. In this context, social capital refers to the resources that individuals have access to by virtue of their social

[1] Portes, Alejandro, 1998, "Social Capital: Its Meaning and Applications in Modern Sociology," *Annual Review of Sociology*, 24:1-24; Portes, Alejandro, 2000, "The Two Meanings of Social Capital," *Sociological Forum*, 15(1):1-12.
[2] Putnam, Robert, 2000, *Bowling Alone* (New York: Simon and Schuster).
[3] Fischer, Claude, 2011, *Still Connected* (New York: Russell Sage Foundation).
[4] Rainie, Lee and Barry Wellman, 2012, *Networked* (Cambridge, MA: MIT Press).

networks.[5] These "resources" can be of many different kinds.[6] I focus on three resources that are especially important: information, social support, and the reinforcement of social norms.[7]

To avoid ambiguity, I will use an example. Consider someone who has decided, after reaching an age milestone, that they must now take exercise seriously. The person joins a gym and begins lifting weights, with the objective of attaining, and maintaining, a strength milestone while remaining injury-free. In this venture, the beginning weight-lifter has some unknown probability of success. Social capital theory would suggest that the probability increases to the extent that the lifter can access and make use of social capital from her or his networks. Specifically, the person is more likely to succeed if he or she finds a partner, because of three resources, or kinds of social capital, available from that connection, (a) information, (b) social support, and (c) the reinforcement of social norms.

(a) Consider information. The beginning weightlifter will have some knowledge about nutrition, proper form, and other matters essential to a successful weightlifting program. So will the partner. Each is also likely to consult the internet, doctors, and others. As a result, the lifter and the partner will each have some information that the other does not have on matters essential to their objective, such as how much weight to lift during each session, how to ensure good nutrition, and how to avoid injury. This information will increase the lifter's odds of success.

(b) Consider social support. While a person can lift weights alone, having a partner means having access to a valuable form of support. Weight-lifters call a "spotter" a person who stands near the lifter to assist with the weights in case the lifter is unable to complete a repetition. A person lifting with a spotter has a kind of support that helps the lifter reduce injury rates and press heavier weights, again increasing the odds of success.

(c) Consider the reinforcement of norms. To succeed in a new weight-lifting venture, a person must stick to a routine. Doing so can be difficult, and the presence of a partner helps reinforce the importance of sticking to the routine. A lifter having a difficult morning is less likely to skip the pre-dawn trek to the gym if he or she knows that the partner will be there waiting. The consistency produced by the reinforcement of norms also increases the odds of success.

These three resources—information, social support, and the reinforcement of norms—are not money; they are not economic capital. They are social capital. It is important to note that social capital is unlikely to be a substitute for economic capital in many contexts, particularly among low-income individuals. For many objectives, money is a necessary condition of success. For example, the lifter must be able to afford the necessary changes in nutrition, new clothing, shoes, and gym membership. But social capital can also be essential, as it increases the odds that a person who has already committed to an objective—whether it is finding a job, managing the difficulties of poverty,

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[5] Bourdieu, Pierre, 1986, "The Forms of Capital," pages 241-58 in J.G. Richardson (ed) *Handbook of Theory and Research for the Sociology of Education* (New York: Greenwood); Coleman, James, 1988, "Social Capital in the Creation of Human Capital," *American Journal of Sociology*, 94:S95-S120.

[6] Bourdieu, "Forms of Capital"; Coleman, "Social Capital in the Creation of Human Capital"; Portes, "Social Capital"; Lin, Nan, 2001, *Social Capital: A Theory of Social Structure and Action* (New York: Cambridge University Press). Researchers have debated whether certain resources, such as social support, should be labeled "social capital"; however, there is little debate at this point over whether the resources themselves matter.

[7] Small, Mario, 2009, *Unanticipated Gains* (New York: Oxford University Press).

returning to school after childbearing, or something else—will succeed. Many people have difficulty attaining their own objectives because of insufficient social capital.

There are times when commentators have used the term "social capital" to refer to core values such as the importance of hard work, marriage, or education. However, values and social capital are different things. Values are beliefs; social capital is a tool. People can strongly value something but have difficulty achieving it in the absence of effective tools. Just as the weightlifter my fail not out of lack of motivation but out of lack of social capital, so may a highly motivated person pursuing other life goals have difficulty meeting them due to a lack of information, support, or norm-reinforcement available through social networks. In fact, some cognitive psychologists have suggested that poverty makes it especially difficult to attain goals because the mind is concerned constantly with the perils of poverty.[8] In such contexts, social capital can be an especially valuable tool.

Individuals with greater social capital tend to do better

The social scientific evidence supports the claim that social capital is as beneficial as the analogy I have used suggests. At this point, the evidence is overwhelming that access to information, social support, and reinforced norms from social networks makes a difference in people's lives, affecting their economic, physical, and mental wellbeing. For example, researchers have documented extensively that social networks help people get jobs and move up the occupational ladder, because of the information the networks provide.[9] Similarly, they have documented repeatedly that social networks help buffer against the physical and mental health consequences of major life stressors, because of the social support the networks provide.[10]

Nevertheless, there is probably no effective way for government to increase people's social capital by telling them they should. Even informing people of the benefits of social capital is unlikely to be sufficient, since the demands of work and family life that many people experience today means that few of them believe they have extra time to make friends for the sake of their likely benefits. However, it is possible for effective policy to help individuals in targeted contexts to develop networks with beneficial social capital.

I will devote the rest of my testimony to discussing evidence that suggests that early education and childcare programs may be a powerful venue to improve conditions for not only children but also parents; I will show that mothers who enroll their children in such programs often generate social capital, that this social capital is beneficial, and that there is reason to believe that targeted interventions may help such programs maximize these benefits.

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[8] Mullainathan, Sendhil and Eldar Shafir, 2013, *Scarcity* (New York: Henry Holt and Company).

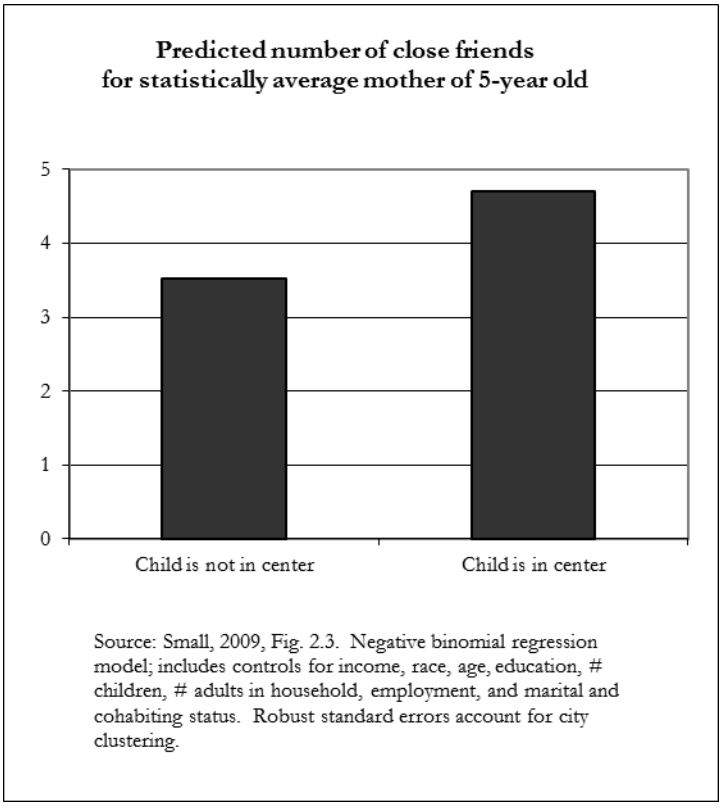
[9] Burt, Ronald, 1992, *Structural Holes* (Cambridge, UK: Cambridge University Press); Granovetter, Mark, 1995, *Getting a Job*, 2nd edition (Chicago: University of Chicago Press); Brian Rubineau and Roberto M. Fernandez, 2017, "How Do Labor Markets Work?" In *Emerging Trends in the Behavioral and Social Sciences*, edited by Robert A. Scott and Marlis Buchmann (New York: John Wiley & Sons, Inc .).

[10] Berkman, Lisa F., and S. Leonard Syme, 1979. "Social Networks, Host Resistance, and Mortality: A Nine-Year Follow-up Study of Alameda County Residents," *American Journal of Epidemiology* 109(2):186–204; House, James S., Karl R. Landis, and Debra Umberson, 1988, "Social Relationships and Health," *Science* 241(4865):540–45.

CHILDCARE CENTERS

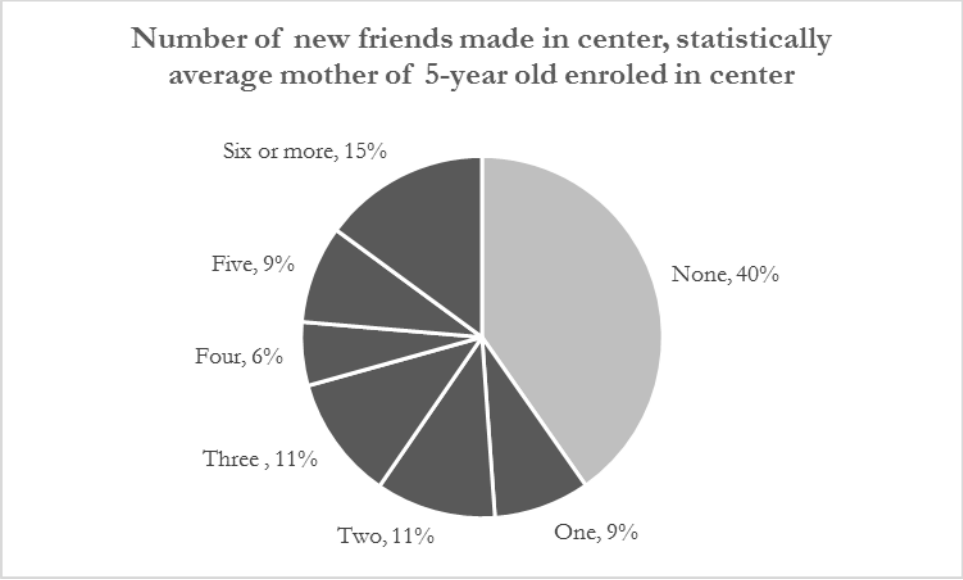
Mothers who enroll their children in childcare centers tend to have greater social capital
For the sake of brevity, I will use the term "childcare center" to describe daycare, pre-school, Head Start, and early-education centers, even though these entities differ widely in the kinds of services they provide. Enrolling a child in a childcare center may expand a mother's network of close friends. This was the conclusion of a recent study based on a nationally representative survey of urban mothers of young children.[11]

The survey, the Fragile Families Study, asked all mothers, regardless of whether they used childcare centers, how many close friends they had. A comparison of mothers whose children were enrolled in a center ("enrolled mothers") and those who were not ("non-enrolled mothers") shows major differences. The comparison is based on a statistical analysis that adjusted for variables affecting whether mothers were likely to enroll their children in centers in the first place.[12] As shown in the figure below, statistically average enrolled mothers have about 4.7 close friends; non-enrolled mothers have about 3.5 close friends. This difference of 1.2 friends is statistically significant.[13]



[11] These and all figures in the following sections are reported in Small, 2009.
[12] The variables are income, race, age, education, number of children, number of adults in the household, employment status, marital and cohabiting status, and city location. The estimates also adjust statistically for several important elements of the survey design.
[13] If these models are re-estimated after adjusting for whether the mother had specifically made friends in the center, the difference is reduced to 0.2 friends and no longer statistically significant. This finding is consistent with the idea that enrolled mothers have more friends specifically because of the friends they made in centers.

These results are based on survey, not experimental, data. They cannot definitively state that enrolling in a center causes the average mother to increase her network size. However, the observational data make clear that the activities in the centers themselves must be part of the story. As shown in the figure below, 60% of mothers who enrolled their child in a pre-school, daycare, or pre-kindergarten made at least one new friend there; 51% made two or more friends; 40% made three or more. Most mothers in childcare make friends there, and many of them expand their social networks dramatically. In addition, statistically adjusting for whether the mother made a friend in the center eliminates the observed difference between enrolled and non-enrolled mothers, which is consistent with the idea that enrolled mothers have more friends precisely because they made them in the centers (rather than because they were more likely to expand their network even if they had not enrolled in a center).



Source: Fragile Families Survey; Small, 2009.

A different way of understanding this question is by considering the extent of social isolation, the probability of having no close friends whatsoever. The story is similar. Very few mothers, fewer than 10% of the nationally-representative sample, are this radically isolated, so the question is whether enrolling in a center reduces that probability even further. As shown below, this appears to be the case. The predicted probability of having no close friends is about 8% for a non-enrolled mother, and 6% for an enrolled mother. The reduction, which is about 25% of the baseline probability, is statistically significant.[14]

[14] As before, adjusting for whether friends were made in centers reduced the difference and rendered it statistically insignificant.

Predicted probabiliy of being socially isolated, urban mothers of 5-year olds

Child is in center	5.8%
Child is not in center	7.7%

Difference statistically significant at 0.05 level.
Source: Small, 2009, Table 2.2. Logistic regression model; includes controls for income, race, age, education, # children, # adults in household, employment, and marital and cohabiting status. Robust standard errors account for city clustering

In sum, most mothers with children in childcare centers make friends there, and these friends are associated with an increase in size of the close network and a reduction in probability of being socially isolated.

Ethnographic data and survey data on center directors make clear that mothers expand their networks in part because of the opportunities for interaction provided by field trips, spring cleanings, fundraising events, and all of the parent meetings required to make such activities happen.[15] The centers most effective at creating social capital host many such activities, and these are often, if not primarily, organized by parents themselves. The centers most effective at generating social capital are hubs of activity, but these activities are not there for the sake of creating social capital; they are there because the centers have committed to numerous fieldtrips and other activities that, in order to be successful, require parental participation. Centers that do a lot require parents to get involved. Involvement, in turn, generates social capital.

The social capital created in centers appears to reduce material hardship

These networks make a difference. My research has examined two separate indicators of wellbeing, material hardship and mental hardship, and the evidence suggests that the social capital generated through the connections in childcare centers helps reduce the former among low-income households and the latter among all mothers. Consider, first, material hardship.

Overall material hardship

An important indicator of wellbeing is the experience, or avoidance, of material hardship. The standard measure of poverty in place since the 1960s has been known for years to measure only crudely the true material hardship that individuals face, such as their inability to obtain food or housing. For example, the value of real estate has risen dramatically over the past 50 years, outpacing inflation. Rent and mortgage costs account for a greater share of the incomes of middle- and low-income populations than they did a generation or two ago. For this and other reasons, examining the actual experience of material hardship is a clearer indicator of the difficulties associated with low incomes.

[15] Small, 2009, Chapter 3.

Acquiring the resources needed to avoid or reduce material hardship is not simply a matter of having enough income. In fact, there are many ways to acquire such resources. Researchers have found that income may account for as little as a quarter of the variation in material hardship (measured by food, housing, and health care insecurity).[16] People use resources such as food banks and soup kitchens, Medicaid, and emergency utility coverage to avoid material hardship. However, people have to know these resources exist and know how to obtain them, and networks are effective means to acquire such information. The data suggests that the networks mothers form in childcare centers help them acquire such resources.

Material hardship is not rare among households with young children. The table below exhibits the weighted proportion of respondents in the national survey who experienced each of eight different measures of material hardship in the year roughly encompassing the focal child's age 4 to 5. The first four measures identify home-related hardship. Eleven percent of mothers, for example, did not pay the full amount of rent at least once; small proportions of mothers—fewer than 10%—were forced to move in with others or into a shelter. Recent research suggests that the 2008 collapse of credit markets might have led to particularly high rates of housing instability and eviction.[17] A very small proportion of households needed but were unable to receive the care of a doctor. The larger proportions are in the subsequent measures, which indicate whether the mother did not pay the utility bills or had to borrow money from friends or family to pay such bills. While the proportion that was forced to borrow in order to pay bills is relatively high at about 22%, the proportion that had their gas or electricity cut off is relatively low, probably due to protections in many local laws against cutting some utilities as well as emergency utility coverage provided by local governments.

[16] Mayer, Susan E. and Christopher Jencks, 1989, "Poverty and the Distribution of Material Hardship." *Journal of Human Resources* 24(1):88–114.
[17] Desmond, Matthew, 2016, *Evicted* (New York: Crown).

Experience of hardship over the previous twelve months, households with 5-year olds, as reported by mothers

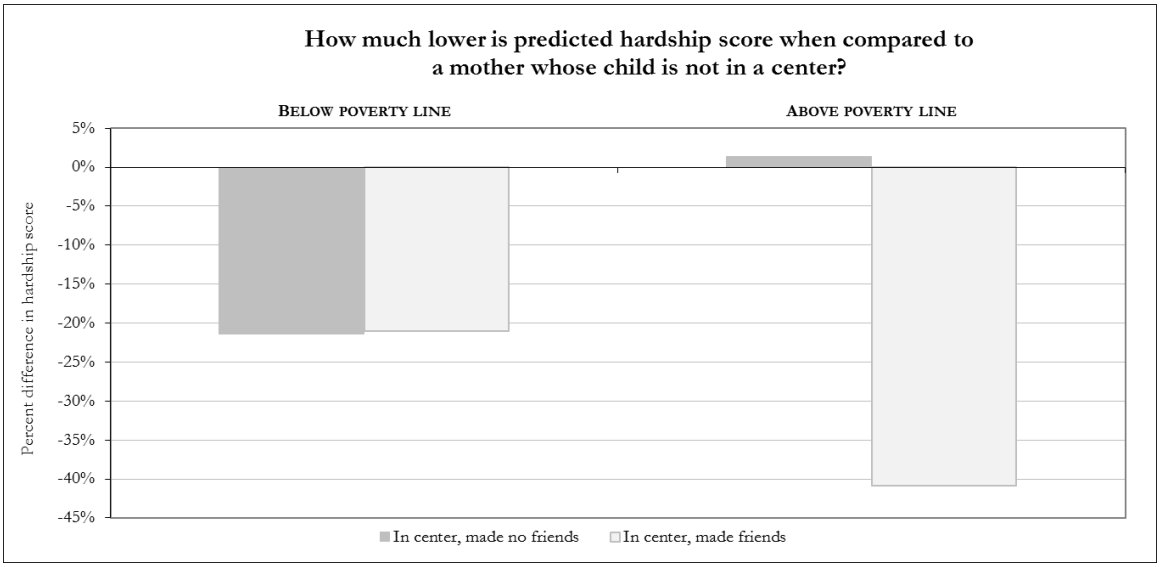
Measure of hardship	*Proportion of households*
1. Did not pay the full amount of rent or mortgage payments	11.3%
2. Was evicted from home or apartment for not paying the rent or mortgage	2.2%
3. Moved in with other people even for a little while because of financial probems	6.5%
4. Stayed in a shelter, abandoned building, automobile, or other place not meant for regular housing, even for one night	2.8%
5. Needed to see doctor or go to the hospital but couldn't go because of cost (anyone in household)	3.3%
6. Did not pay the full amount of a gas, oil, or electricity bill	17.5%
7. Borrowed money from family or friends to help pay the bills	21.9%
8. Had gas or electricity cutoff, or heating oil not delivered by company, because there wasn't enough money to pay the bills	3.9%
9. Was hungry but didn't eat because couldn't afford enough food	5.0%

Source: Fragile Families Survey; Small 2009. Households may be single or dual-headed.

Assessing fully whether the social capital built in childcare centers helps households reduce hardship requires multiple methods, including both surveys and randomized control trials. At the moment, I know of no such trials. However, the survey data suggest that social capital helps reduce material hardship.

The indicators discussed above were used to create a standard material hardship scale in which each indicator was worth one point.[18] To determine based on survey data whether enrolling in centers helps mothers reduce their hardship score, it is important to take into account the possibility of "selection bias" from unobserved factors. The figures below follow a lagged dependent variable model approach, which involves statistically accounting not only for the demographic variables known to matter but also for the mother's wellbeing prior to enrolling in the center. This approach greatly increases confidence that the effect is not biased due to selection, since it explicitly takes into account how well mothers were doing before the time of enrollment, thereby accounting for fundamental but time-invariant unobserved differences. The models also take into account differences in mothers' natural sociability or propensity to form friends by adjusting for the number of friends they had in general (regardless of whether they were formed in centers).

[18] This is a more logical strategy than performing factor analysis. The items in the scale measure different types of hardship; they are not elements of a single underlying construct. As Mayer and Jencks (1989:98) argue, the "items that compose the hardship measures are not supposed to measure the same underlying construct, so we cannot estimate the measure's reliability from the inter-item correlations, any more than we could estimate the reliability of an income measure from the intercorrelations among various kinds of income." To include the "lagged" measure of hardship from the earlier wave, the indicators of hardship had to be restricted to those questions included in both waves of the survey; measures 1 through 7 fit this criterion. For details, see Small, 2009.



Source: Fragile Families Survey. See Small 2009 for details.

The figure shows how much lower the enrolled household's predicted hardship score is when compared to non-enrolled households, as reported by the mothers. The figure separates those living below and above the federal poverty line. As shown, among households below the poverty line the predicted hardship score is about 20% lower for mothers enrolled in centers than for non-enrolled mothers, both for those who made friends in centers and those who did not.[19] Among households above the poverty line, the predicted hardship score is about 40% lower when mothers enrolled in centers and expanded their networks there. (The percent reduction is large among non-poor mothers because far fewer of them are likely to experience hardship in the first place, so the difference is based on a much smaller baseline.[20])

Note that for low-income mothers, enrolling a child in a center reduces the predicted hardship score regardless of whether they made friends there. This result appears to be due to the fact that centers serving low-income children, such as Head Start centers, often connect parents to service-providing organizations in their communities. This kind of social capital, which results from organizational rather than social ties, also represents a valuable resource to the poor.

Specific measures of material hardship: housing

Some of the indicators of hardship in the table above measure hardship imperfectly. For example, the first measure asks whether the mother did not pay the rent or mortgage at least once during the previous twelve months. Sometimes, people do not pay their rent or mortgage because they do not have the money to do so. But sometimes, they simply forget. Other times, people decide to withhold payment, such as renters who want to punish the landlord for not fixing the radiator, or those generally exercising their legal rights in the face of neglectful management. Therefore, while

[19] The differences between each condition and the baseline are marginally significant, at the .06 level for making not friends in the center vs. not being in the center, and at the .09 level for making friends there vs. not being in a center. Among enrolled mothers, there is no statistically significant difference between the effects of enrolling while making friends and enrolling while not making friends.

[20] For full analysis, see Small, 2009.

some measures of hardship indicate material *difficulty*, others confound material difficulty with other conditions. There are three indicators of actual housing difficulty: being evicted, having to move in with friends or family, or having to move to a shelter or sleep in an abandoned building or in a car. Four percent of non-poor mothers, and 16% of poor mothers reported experiencing at least one indicator of true housing difficulty.

The following analysis shows the relationship between center enrollment and actual experience of housing difficulty.[21] The table focuses only on low-income mothers, and is based on statistical analyses that account for the variables described earlier. It shows that the probability of experiencing one of those forms of housing-related hardship is lower for a statistically average enrolled poor mother than for one not enrolled, even after taking into account *prior* experience of these difficulties.

Predicted probability of experiencing housing-related hardship for a statistically average urban poor mother of a 5-year old

Child not in center	8.8%
Child in center, mother made no friends	3.9%
Child in center, mother made friends	4.0%

Source: Fragile Families Survey; Small 2009, Table 2.4. Logistic regression model; includes all previous controls plus total number of close friends and lagged version of the dependent variable. Robust standard errors account for city clustering.

Specific measures of material hardship: utilities

As with housing, people may have failed to pay a bill for a number of reasons, not merely because they could not afford it. The table below limits hardship indicators about utilities to borrowing money in order to pay bills and having one's utilities cut off, both of which denote actual difficulty. The table presents results of a model estimating the probability of experiencing either of the two purest forms of utilities hardship for a statistically average poor mother. All previous controls are included, including prior utilities-related hardship.[22]

[21] The first four measures in the earlier table are indicators of housing-related hardship. The first, which asks mothers whether rent or mortgage was paid, is clearly the least pure indicator of hardship. The remaining three are appropriate measures, since they indicate eviction, which is not a person's choice; having to move in with others *because of* financial difficulty; and staying in a shelter, an abandoned building, a car, or some other place not meant for regular housing.

[22] Since there was no measure in the previous wave for item 8 (having one's utility cut off), the lagged dependent variable is only for whether they borrowed money in order to pay the bills.

Predicted probability of experiencing utilities-related hardship for a statistically average urban poor mother of a 5-year old	
Child not in center	33.3%
Child in center, mother made no friends	30.5%
Child in center, mother made friends	26.8%

Source: Fragile Families Survey, Small, 2009, Table 2.5. Logistic regression model; includes all previous controls plus total number of close friends and lagged version of the dependent variable. Robust standard errors account for city clustering.

As the table makes clear, the statistically average urban poor mother has between a 25% and 35% probability of experiencing material hardship with regard to her utilities. The probability is lower if her child is in a childcare center, and even lower if she made friends there. The social capital effect is statistically significant.[23]

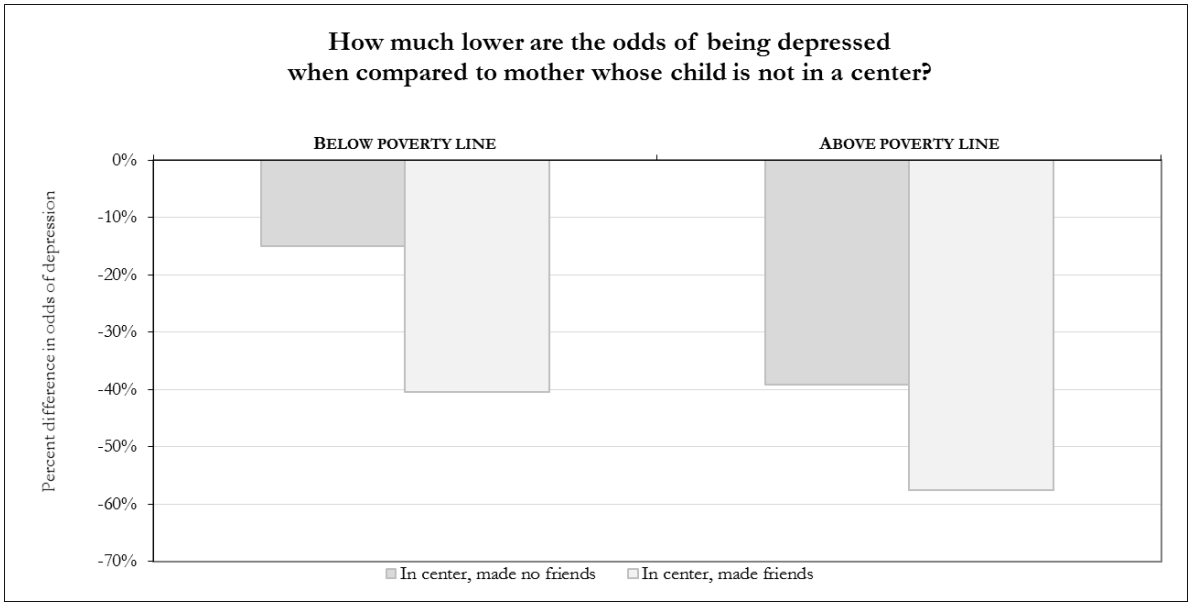
In sum, the findings suggest that social networks developed by mothers in childcare centers help reduce material hardship. The ethnographic evidence suggests that the networks provide information and social support, two forms of social capital, that help mothers temper some of the negative consequences of poverty. It also suggests that the organizations to which centers such as Head Starts are connected provide valuable information and resources to low-income parents. I now consider the relationship between social capital and mental hardship.

The social capital created in centers appears to reduce mental hardship

Depression affects the ability to maintain a job, raise children, and contribute productively to the functioning of society. Respondents to the survey were asked a series of eight diagnostic questions to ascertain the experience of a major depressive episode over the previous twelve months. The questions were derived from the Composite International Diagnostic Interview, Short Form, Section A.[24] Respondents who reported seven symptoms for half a day or who reported taking depression medication were counted as depressed. The figure below assesses the predicted odds of being depressed, controlling for prior depression and for friendliness, as before. It compares mothers in centers, and those who made friends there, to those who did not.

[23] Nevertheless, the effect of being enrolled does not attain the level of statistical significance if the mother made no friends in the center; if she did, the difference is marginally significant at the 0.09 level. Mothers may use centers to acquire resources from the state. For example, in New York City, the Home Energy Assistance Program "assists low-income households with their fuel and /or utility costs. Emergency assistance is also available to HEAP-eligible households that pay directly for heat and are faced with "shut-off" notices. The Department for the Aging also administers the Weatherization, Referral and Packaging Program (WRAP) which provides low-income senior homeowners with free home energy-related services that can lower energy bills and increase the comfort of their homes. For more information or to apply, please call 311." New York City Department for the Aging. Frequently Asked Questions. http://home2.nyc.gov/html/dfta/html/faq/faq.shtml. Accessed 7/23/06.

[24] Kessler, Ronald C., Hans-Ulrich Wittchen, Jamie M. Abelson, Katherine Mcgonagle, Norbert Schwarz, Kenneth S. Kendler, Barbel Knauper, and Shangyang Zhao, 1998, "Methodological Studies of the Composite International Diagnostic Interview in the US National Comorbidity Survey." *International Journal of Methods in Psychiatric Research* 7(1):33–55. The entire interview is not conducted. Instead, a portion of the interviews are used, and, on this basis, estimates are created of the probability that the respondent would be categorized as depressed if given the full interview.



Source: Fragile Families Survey. See Small 2009 for details.

The effect of enrolling in a center is statistically significant only when mothers made friends there. The effect is large. The odds of being depressed are between 40% and 55% lower for mothers who enrolled in centers and made friends there than for comparable mothers who did not enroll in centers, even after taking into account their history of depression and their latent friendliness. As in all other results, randomized control trials would be necessary to ascertain whether there are true causal effects. However, the findings are consistent with the many studies across the social sciences suggesting that social capital effects are real.

The social capital created in centers can be used to increase attendance

Though government cannot tell people whom to be friends with, social policy in early education and care programs can affect whether people have greater opportunities to create valuable social capital. A recent intervention in a Head Start center suggests this possibility. A team of researchers developed an innovative pilot study to examine whether a near-zero-cost intervention that did not overly burden parents could increase social capital and maximize children's attendance. The results of the pilot study, published last fall, were promising.[25]

For Head Start to work, children need to attend classes consistently. When attendance is low, children are naturally less exposed to the education needed for kindergarten readiness. In addition, when children are enrolled but not attending class they still occupy slots that could have been taken up by other children, which is an inefficient use of resources. Maximizing Head Start attendance makes both educational and economic sense by improving cognitive development and reducing waste.

[25] Sommer, Teresa Eckrich, Terri J. Sabol, P. Lindsay Chase-Lansdale, Mario Small, Henry Wilde, Sean Brown & Zong Yang Huang, 2016, "Promoting Parents' Social Capital to Increase Children's Attendance in Head Start: Evidence From an Experimental Intervention," *Journal of Research on Educational Effectiveness* (online first). See also, "The Two Generation-Approach," http://ascend.aspeninstitute.org/pages/the-two-generation-approach.

The intervention was conducted in a large, 18-classroom Head Start center that had experienced problems maintaining high attendance. At the center, average daily attendance over the course of the previous years had typically exhibited a u-shaped pattern: it was high in September; it dipped gradually to its lowest point in February; it and climbed back up slowly and not quite fully in May. (It began to dip again in June as families began their summer vacations.) At its lowest point, the average daily attendance rate, or the proportion of children who attended each day, was around 70%.

Sometimes, low-income parents have difficulty meeting the objective of maximizing their children's attendance as a result of a lack of social capital, particularly social support and norm reinforcement from other parents, because unexpected emergencies often faced by the poor get in the way of transporting their children to the center. The intervention was designed to promote parental social capital and, in turn, to increase attendance. When families arrived over the summer and fall to enroll their children for the academic year, they were randomly assigned to one of three conditions.

(a) Families in the first condition were assigned to a neighborhood classroom, one in which all children were residents of the same neighborhood, one of four neighborhoods served by the center. Parents were informed that children in their classroom were of the same neighborhood. Sharing a neighborhood with other parents might make it easier to ask one of them to take one's child to the center in case of an emergency (social support).

(b) Families in the second condition were also assigned to a neighborhood classroom; in addition, they were given the opportunity to form a partnership with another parent to help maximize attendance. To do so, the center held a few social gatherings at the beginning of the year to allow parents to select an "attendance buddy." No parents were required to select attendance buddies; about half of them chose to do so.[26] In addition, attendance buddies had no formal requirement; parents were merely asked to let their attendance buddy know if they would be unable to attend on a particular day (norm reinforcement and the possibility of social support).

(c) Families in the third condition, the control, were merely assigned to a classroom as the center normally had, wherein children in the classroom hailed from all neighborhoods in the service area.

In all three conditions, parents held the regular meetings with teachers and other parents that were part of the Head Start operation. For parents in all three conditions, social capital was measured in the early fall and in the late spring. Attendance was recorded daily.

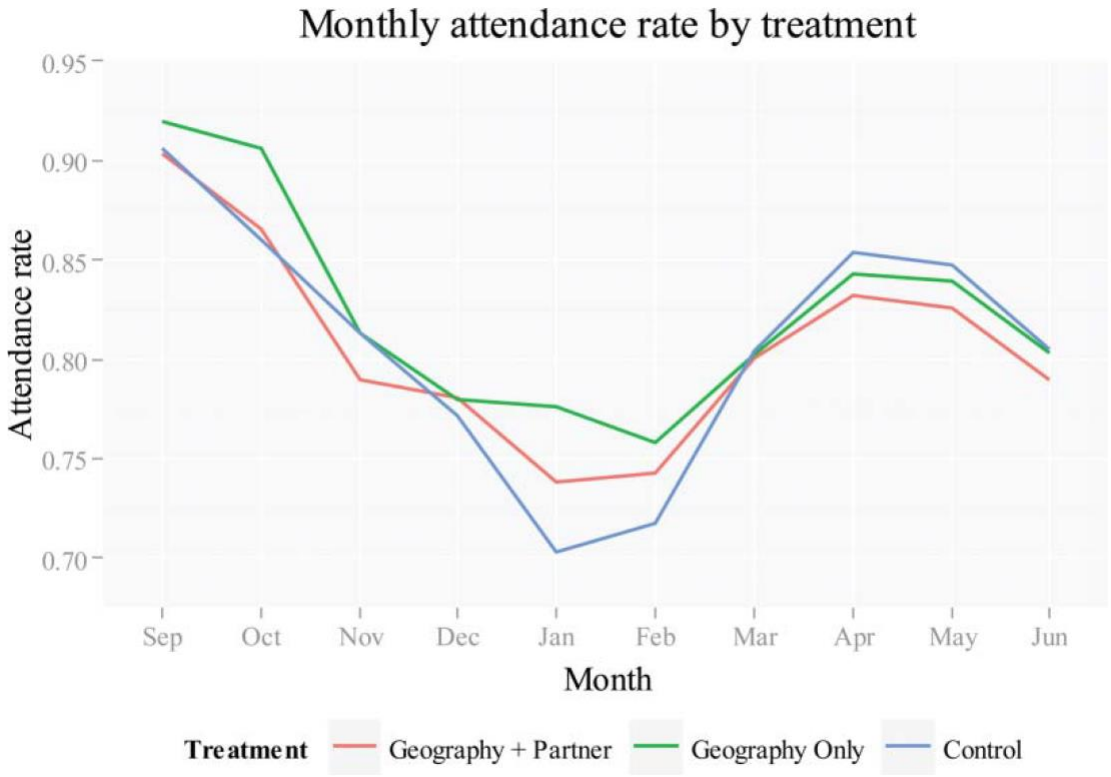
The results were promising. First, the intervention increased access to social capital dramatically. Parents assigned to the second condition increased their personal network by about one person, from a baseline number of about 3 people. The effect was statistically significant. In addition, parents assigned to either treatment condition increased the number of other parents in the center whom they were willing to ask for help (with taking care of their child, for information on doctors, or for a loan).[27] The increase was about three parents, from a baseline of about four. That is, the

[26] "All participants in the combined treatment group were invited to attend a kick-off meeting in which they learned the broad goals of the program and socialized with other parents in their child's classroom in order to begin to form partnerships. In most cases, parents selected partners voluntarily. In a few instances, family support staff assigned parent pairs (e.g., when both parents missed the orientation meeting)" (Sommer et al 2016:11).

[27] "For willingness to ask for help, parents were given a list of all children in the classroom and were then asked to

intervention dramatically increased both the number of people in parents' networks and their willingness to go to others for help.

Second, the intervention produced moderate but statistically significant increases in attendance during the most difficult months of the year. The intervention produced no effects in the fall or spring. But in the winter, where attendance was typically lowest, children in the first and second treatment conditions had between 5% and 7% greater average daily attendance, a statistically significant result.



Source: Sommer et al. 2016. "Geography" refers to assignment to a neighborhood classroom

The intervention was small in scale and exploratory in nature. Still, the results are promising, because the cost of this intervention was close to zero dollars, and it made no extraordinary request of parents. Even minimal investments, a slightly more intensive request, and a refined program are likely to produce much stronger effects. A larger intervention might determine whether the federal government can maximize the effectiveness of its early education dollars by mobilizing the power of social capital.

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indicate (yes/no) whether or not they would feel comfortable asking the child's parent or guardian: (a) to watch their child for an hour; (b) for information about a doctor; (c) for $200 as a loan.... The number of times a parent indicated "yes" for any of the three categories across all children in the classroom was summed within each category" (Sommer et al 2016:12).

CONCLUSION

Social capital matters. It can be particularly beneficial for low-income parents and children. At a time when the improvement and expansion of early education programs have been topics of serious policy debate, thinking more expansively about the role of parents may prove valuable.[28] Many early education programs try to get parents involved. However, what I have described is getting parents involved *with one another*. Mobilizing social capital involves making greater use of the resources that parents and their ability to connect with each other bring to the table. Social capital is no panacea, but creating opportunities for parents to expand their networks and supporting incentives for them to meet collective goals may prove beneficial for both parents and children. I recommend that Congress explore the potential of interventions focused on social capital in contexts such as early education programs.

[28] Heckman, James, 2006, "Skill Formation and the Economics of Investing in Disadvantaged Children," *Science* 312:1900-02; Duncan, Greg and Katherine Magnuson, 2013, "Investing in Preschool Programs," *Journal of Economic Perspectives* 27(2):109-32.