

EXECUTIVE SUMMARY

**BIE FAMILY AND CHILD
EDUCATION (FACE) PROGRAM
2018 Report**



**Report Prepared for:
U. S. Department of the Interior
Bureau of Indian Affairs
Bureau of Indian Education**

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EXECUTIVE SUMMARY

In 1990, the Bureau of Indian Education (BIE) initiated the Family and Child Education (FACE) program, an integrated model for an American Indian early childhood education/parental involvement program. The FACE program primarily serves families with children prenatal to 5 years of age by providing early childhood, parenting and adult education services. The goals of the FACE program are to:

- ◆ Support parents/primary caregivers in their role as their child's first and most influential teacher.
- ◆ Strengthen family-school-community connections.
- ◆ Increase parent participation in their child's learning and expectations for academic achievement.
- ◆ Support and celebrate the unique cultural and linguistic diversity of each American Indian community served by the program.
- ◆ Promote school readiness and lifelong learning.¹

Program Design and Implementation

The FACE program is implemented through a collaborative effort of the BIE, Parents as Teachers (PAT), and the National Center for Families Learning (NCFL). Programs are located at BIE schools. PAT provides the home-based model and NCFL provides the center-based model. Home-based and center-based models have been integrated and infused with American Indian language and culture to achieve the FACE model. PAT and NCFL provide the training and on-site technical assistance to implement their components; additional on-line training occurs throughout the year.

Home-based services are delivered by parent educators primarily to families with children ranging from prenatal to 3 years of age, although they also serve children from 3 through 5 if their family cannot participate in center-based services or other preschool services. Parent educators are trained and certified to use the PAT *Foundational, Model Implementation* and *Foundational 2 Curriculum–3 Years through Kindergarten* curricula in planning services for families. PAT's approach to parent education and family support includes three key areas of emphasis throughout the curricula: development-centered parenting, parent-child interaction, and family well-being. The blend of personal visit plans and guided planning tools allow parent educators enough flexibility to individualize services for families while maintaining consistency required to produce desired outcomes. This approach and the curricula also help to organize discussions around family well-being, child development, protective factors, and parenting behavior to strengthen the parent educator and family relationships. Services are delivered through weekly or bi-weekly personal visits that are usually 60-90 minutes in duration, monthly FACE Family Circles, periodic screening of overall health and development of the child, and referrals to school and community services. On average, home-based services were provided for 110 days in PY18.

NCFL provides training and technical assistance for center-based services for 3- to 5-year-old children and their parents. Services are offered four days a week using a four-component model

¹ Bureau of Indian Affairs, Bureau of Indian Education. (2017). *Family and Child Education (FACE) Guidelines* (p. 1). Washington, DC: Author.

based on the comprehensive family literacy model developed by NCFL. The components are early childhood education (preschool), adult education, Parents and Children Together Time® (PACT Time), and Parent Time. FACE preschoolers participate with an adult in BIE-funded elementary school facilities; the number of preschoolers served is defined by the availability of space at these schools. Adults can participate in center-based services full-time, part-time or flex-time. Full- and part-time participation includes attendance in adult education as well as PACT Time and Parent Time. Flex-time attendance includes the minimum weekly requirement of at least two hours of parent engagement (in PACT Time and Parent Time) but does not require participation in adult education. During PY18, center-based preschool services were offered four days per week at most sites and five days a week at a few sites for an average 127 days.

Home- and center-based staffs collaborate to provide comprehensive services to all FACE families and to support family transitions, such as children transitioning to preschool or kindergarten, and adults transitioning to employment or other educational programs. The center-based staff also supports teachers and parents in elementary school classrooms where parents engage in PACT Time with their child.

FACE Participation

During the 28-year history of FACE, the number of schools implementing FACE increased from the initial six programs to 46 programs in PY18. FACE has served 50,690 participants, including 27,213 children and 23,477 adults in approximately 22,500 American Indian families. Since the inception of the FACE program, 60% of adults and children participated in only the home-based component, 21% participated in only the center-based component, and 19% participated in the full FACE model (receiving both home- and center-based services). Of the 21,422 FACE children who received home-based services since the inception of FACE, 22% transitioned into center-based preschool, comprising 45% of the children who received center-based services.

PY18 participants include 2,050 adults and 2,124 children from 1,811 families served at 46 sites (see Table 1). Two-thirds of participants received home-based-only services, 29% participated in center-based-only services and 5% participated in both home- and center-based services. Of the PY18 center-based children, more than half had previously participated in FACE home-based services.

Table 1. Number and Percentage of Participants by FACE Services Received During PY18

	Center-based only		Home-based only		Both Center- & Home-based		All Services (N)
	#	%	#	%	#	%	
Adults	585	28	1,289	63	176	9	2,050
Children	613	29	1,459	69	52	2	2,124
All Participants	1,198	29	2,748	66	228	5	4,174

In PY18, 1,511 children and 1,465 adults received home-based services, participating in an average nine personal visits and four group meetings during the year. Center-based services were provided to 665 children who attended FACE center-based preschools, and to 761 adults who participated in center-based services (adult education, PACT Time, and Parent Time). A total of 596 adults (78% of center-based adults) attended an average 144 hours of adult education, 695 adults (91%)

participated in an average 46 hours of PACT Time, and 665 adults (88%) participated in an average 38 hours of Parent Time.

Characteristics of PY18 participants are similar to prior years with one exception: the percentage of adults receiving financial assistance from federal, state or tribal agencies increased from 40% in PY16 to 51% in PY17 and 59% in PY18.

Early Detection and Screening for FACE Children

Maintaining health records that include prenatal information and periodic screenings provide the means for early prevention, detection, and intervention, thereby increasing the chance for normal development for every child. Ninety-three percent of children—including 94% of home-based children and 93% of center-based children—were screened during PY18, the fourth consecutive year that at least 90% of FACE children in each component received screening services. The FACE program identifies issues and concerns in the areas of prenatal care and birth, environmental safety, immunization and insurance, general health, dental health, and special needs (Individualized Education Program/Individualized Family Service Plan—IEP/IFSP).

Prenatal Care and Birth

- ◆ For 21% of the children (298 children), their mother's pregnancy was a high-risk pregnancy. The mothers of 43% of the children took Folic acid and 88% took multi-vitamin supplements as recommended for a healthy pregnancy.
- ◆ Parents reported that 12% of FACE children (199 children) were exposed to neurotoxins before birth, somewhat more than the number reported in PY17. Of these children, 38% were exposed to more than one neurotoxin. Fifty-eight percent of the children were exposed to nicotine and other toxins found in tobacco products because their mothers smoked during pregnancy, 27% were exposed to alcohol, and 23% were exposed to marijuana.
- ◆ Twenty-six percent of children (422 children) exhibited special conditions at birth. Of these children, 83% were jaundiced at birth. Twenty-four percent of the children that exhibited special conditions at birth were reported to have various other conditions, including issues with the respiratory, circulatory, urinary/excretory, digestive/gastro-intestinal, and/or immune systems. Other conditions included premature birth, drug withdrawal resulting from mother's drug usage, and blood sugar problems.
- ◆ Parents were asked to report on breastfeeding if their child was 12 months or younger. Breastfeeding is promoted for children's health and well-being at the start of life. Of the 1,171 responding parents, 68% reported their child is breastfed.

Environmental/Safety Concerns

- ◆ Seventy-three percent of the children live in homes with at least one smoke detector on each floor where the family resides. Sixty-nine percent of children live in homes that are reported as childproofed, and 51% live in homes where the family has a plan and supplies for emergencies.

- ◆ Children’s safety while sleeping is promoted through practices such as placing children on their backs to sleep, avoiding soft bedding to prevent suffocation, and awareness of potential dangers when infants share beds. For children up to the age of 12 months, 83% are *always* placed on her/his back to sleep, 13% are *sometimes* placed on his/her back, and 4% *never* are. For 38% of the children who are up to the age of 12 months, there is *never* soft bedding in the area the child sleeps, *sometimes* there is soft bedding in the area where 22% of the children sleep, and it is *always* in the area where 40% of the children sleep. Thirty-three percent of children up to the age of 12 months *never* share a bed, 41% *sometimes* share a bed, and 26% *always* share a bed.
- ◆ During PY18, 12% of children (183 children) were exposed to second-hand smoke—similar to PY17 reports. This is much lower than the 40% of children aged 3-11 reported by the Center for Disease Control and Prevention (CDC) who experience second-hand smoke.² However, the differences in ages of children for the FACE and CDC comparison should be noted. Of the FACE children exposed to second-hand smoke, 90% are exposed *sometimes*, but 10% are *always* exposed.
- ◆ Parents reported that 88% of the children use an approved car seat according to State law. This is a 10 percentage-point decrease compared with the previous year. Appropriate use of car seats for children is a focus in parenting education in FACE.
- ◆ Thirty-eight percent of children were screened for lead poisoning. For the children whose test results were available, only one child’s level was reported as *a little high*.

Immunization and Insurance

- ◆ Immunizations are up to date for 93% of PY18 FACE children—a dramatic increase since PY01 when fewer than half of children were current. Nationally, 70% of children aged 19-35 months are current with their immunizations.³ By comparison, 96% of PY18 FACE children in this age group are current with the recommended immunizations.
- ◆ At least 96% of the FACE children are covered by a health insurance plan, an 11 percentage-point increase compared with PY17 and a large increase over the PY14 percentage when only half of the children had medical insurance coverage.

² Retrieved on 6/25/2018 from website <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6404a7.htm>..(David M. Homa, PhD, Linda J. Neff, PhD, Brian A. King, PhD, Ralph S. Caraballo, PhD, Rebecca E. Bunnell, PhD, Stephen D. Babb, MPH, Bridgette E. Garrett, PhD, Connie S. Sosnoff, MA, and Lanqing Wang, PhD.) Vital signs: disparities in nonsmokers' exposure to secondhand smoke — United States, 1999–2012. Morbidity and Mortality Weekly Report from Center for Disease Control and Prevention, February 6, 2015/ 64(04);103-108.)

³ <https://www.cdc.gov/nchs/data/hus/2017/066.pdf> Table 66. Vaccination coverage for selected diseases among children aged 19–35 months, by race, Hispanic origin, poverty level, and location of residence in metropolitan statistical area: United States, selected years 1998–2016 — United States, 2016. Report from Center for Disease Control and Prevention, National Center for Health Statistics, 2017.

General Health

- ◆ Parents reported a medical condition for 12% of their FACE children (198 children) including asthma, prematurity and low birth weight, feeding difficulties in early childhood, hearing impairment, and heart defects or disease.
- ◆ Allergies were reported for 14% of PY18 children, compared with 9% of children in PY17.
- ◆ At least one emergency room visit was made for 18% of FACE children in PY18. Two-thirds of the children were taken to an emergency room for an illness, and 18% sustained an injury. Respiratory system issues, seizures, allergic reactions, and digestive system issues were among the reasons cited.

Developmental Screening

- ◆ Screening records indicate that 93% of FACE children received some type of developmental screening in PY18. Twenty-six percent of these children were identified with concerns. Almost half of these children (or 12% of all screened children) were referred for services. At the end of PY18, concerns remained for 9% of screened children, similar to percentages in the previous nine years.
- ◆ Fourteen percent of all screened children (19% of screened center-based children and 13% of screened home-based children) were identified with language/communication concerns, the most frequently identified concern.
- ◆ Seventy-six percent of home-based children and 13% of center-based child were assessed for social-emotional development in PY18. Of these children, 5% (58 children) were identified with social-emotional delays or concerns. About 35% of children who were identified with delays or concerns were less than 24 months of age; 65% were 24 months or older. No unresolved concerns were identified at the end of the year.
- ◆ Five percent of PY18 FACE children had an IEP or IFSP. The most frequently identified type of concern is a speech or language delay, reported for 65% of these children. Of the children who were ready to exit FACE preschool and enter kindergarten, 10% had an IEP/IFSP.

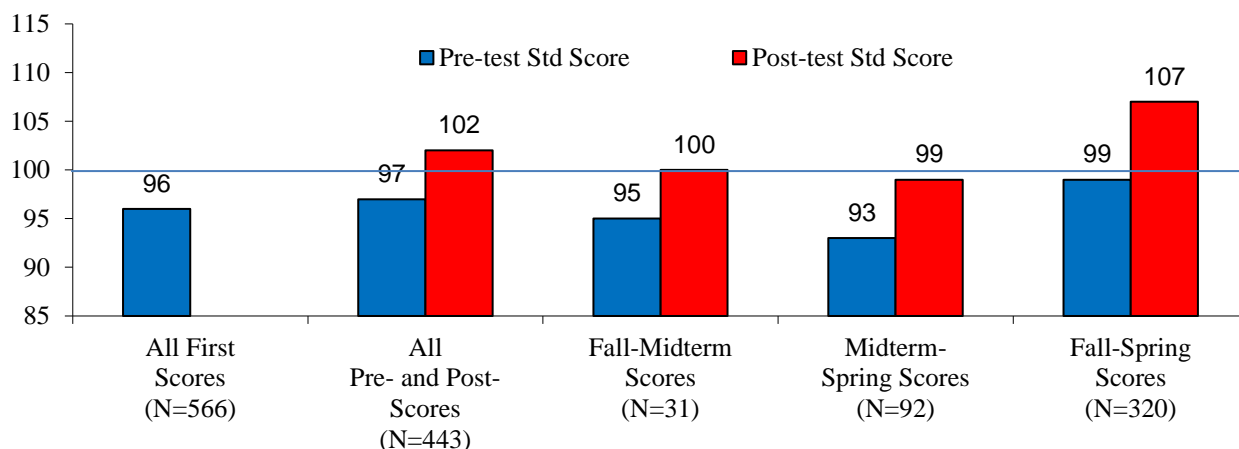
Cognitive Outcomes for FACE Children

Center-based staff members and parents are trained to implement a reading strategy that is designed to increase the vocabulary and language comprehension of young children. FACE preschool children are assessed with the *Expressive One-Word Picture Vocabulary Test* (EOWPVT) to measure growth in expressive vocabulary.⁴ Teachers administer the assessment in the fall, at midterm, and in the spring. Scores are standardized to a mean of 100 and a standard deviation of 15.

- ◆ The average first score for 566 children entering preschool was 96, 4 standard scores lower than the national average of 100 and equivalent to the 39th national percentile. See Figure 1.

⁴ Published by Academic Therapy Publications.

Figure 1. Average First PY18 EOWPVT Standard Score Overall and Matched Pre-Post Scores Overall and by PY18 Testing Cycle



- ◆ FACE center-based preschoolers significantly and meaningfully increased their performance at post-test. Among the 443 children with pre- and post- scores in PY18, the average pre-test score of 97 (equivalent to the 42nd national percentile) significantly and meaningfully increased to an average post-test score of 102 (equivalent to the 56th national percentile and above the national average).
- ◆ FACE center-based preschoolers who attended preschool the entire year and were tested in the fall and spring of PY18 demonstrated the largest gains, with an average increase of eight standard scores (one-half of a standard deviation), rendering them at the 66th national percentile at the end of the school year. FACE preschoolers who attended or were tested fall-midterm or midterm-spring demonstrated gains of 5-6 standard scores (one-third of a standard deviation), rendering them at or near the national average.
- ◆ Age and gender are typically related to preschoolers' performance. Preschoolers who are 3 years of age score significantly lower at pre-test than do 4-year-olds (with average pre-test standard scores of 96 and 99); however, no significant differences exist at post-test. Similarly, no significant differences are found by gender for FACE center-based preschoolers at pre-test or post-test.
- ◆ FACE center-based preschoolers with IEPs scored significantly below other preschoolers at pre-test, with a standard score of 90. At post-test, children with IEPs increased their average score to 99, a significant and meaningful increase of two-thirds of a standard deviation, thereby rendering them on a level playing field with children nationally.

Early childhood teachers also assess developmental progress of FACE preschoolers using Meisels' *Work Sampling System (WSS)* for indicators of proficiency in each of eight domains.⁵

⁵ WSS domains include personal and social development, language and literacy, language and literacy for English learners, mathematical thinking, scientific thinking, social studies, the arts, and physical development. The rating scale is *not yet, in process* and *proficient*.

- ◆ For each of the eight domains, both 3- and 4-year-old FACE preschoolers demonstrate statistically significant improvement in ratings.
- ◆ For each of the domains, most FACE preschoolers were rated *in process* or *proficient* (approximately 80% or more).
- ◆ For both 3- and 4-year-olds, preschoolers with high attendance score significantly higher than do preschoolers with low attendance on every domain.

Parents believe that FACE has a considerable impact on the cognitive development of their home- and center-based children.

- ◆ Seventy-eight percent of parents indicated that FACE participation has a *large* impact on increasing their child's interest in learning; 21% reported *somewhat* of an impact.
- ◆ Approximately three-fourths of parents reported that FACE participation has a *large* impact on increasing their child's interest in reading, increasing their child's verbal/communication skills, increasing their child's self-confidence, and preparing their child for school. Approximately one-fourth reported *somewhat* of an impact.
- ◆ Sixty-five percent of parents reported a *large* impact on improving their child's ability to get along with other children, while 32% reported *somewhat* of an impact.

Home Literacy Practices

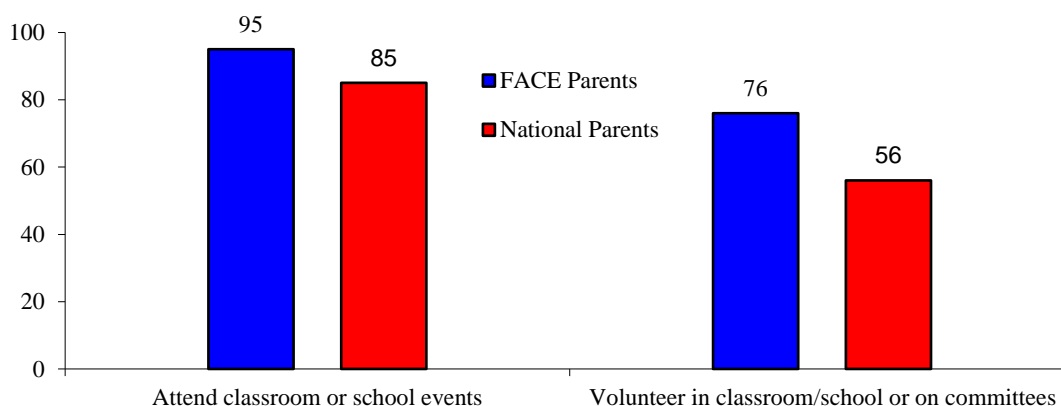
- ◆ The number of children's books in the home reported at the time of initial enrollment increased significantly by the end of PY18. The percentage of households with 31-50 books increased from 19% to 22%, and households with more than 50 children's books increased from 20% to 35%. Forty-three percent of FACE households had 20 or fewer children's books initially, but by the end of PY18 that percentage decreased to 25%.
- ◆ Almost 70% of parents reported that FACE helped them *a lot* to increase their reading to their child.
- ◆ Nationally, 81% of children ages 3-5 who were not yet in kindergarten have parents who read to them three or more times in the past week.⁶ Seventy-four percent of FACE center-based parents read to their 3- to 5-year-old children *daily or almost daily*.
- ◆ Nationwide, 33% of pre-kindergarten children aged 3-5 have parents who tell them a story *three or more times in the past week*. Seventy-four percent of FACE parents tell stories to their child on a *daily or almost daily* basis.

⁶ Corcoran, L., Steinley, K., & Grady, S. (2019). *Early Childhood Program Participation, Results from the National Household Education Surveys Program: 2016* (NCES 2017-101.REV, p. 6). Washington, DC: U.S. Department of Education, Institute of Education Sciences.

Parent Involvement in Children’s Education

The FACE program's focus on increasing parent involvement in children’s education is supported by a long history of research which indicates that a parent’s involvement in their child’s school increases literacy achievement—and matters most for children at greatest risk. The involvement of PY18 FACE parents in the education of their K-2nd grade children is compared with national involvement.⁷ See Figure 2. FACE parents continue to be more involved in their child’s education than are parents nationally.

Figure 2. Percentage of FACE Parents of K-2nd Grade Children and a National Comparison Group of Parents Reporting Involvement in Their Child’s Education



- ◆ Almost all (95%) of FACE parents with K-2 children attend classroom or school events, compared with a lower percentage of parents nationally (85%).
- ◆ Seventy-six percent of PY18 FACE parents with K-2 children volunteer in the classroom or school or participate on school committees; 56% of parents nationally do so.

Outcomes for FACE Adults

The FACE program encourages home- and center-based adults to set explicit goals for themselves to help guide their participation in FACE. Almost 90% of adults in both home-based and center-based components completed the goals they set. Goals were set in the areas of improving parenting skills, understanding child development, improving their family’s well-being, increasing community involvement, and accessing community resources.

Adults most frequently set goals to improve parenting skills and to understand their child. This is consistent among both home- and center-based adults. Goals varied dependent upon the services in which adults participated and the age of their child.

More than 90% of home- and center-based parents reported that FACE impacts their parenting skills *somewhat* or *a lot* in all areas that are measured. Almost 70% or more of all parents believe FACE participation helped them *a lot* on all measures of impact.

⁷ National Household Education Surveys Program. First Look. (2016). Parent and family involvement in education. p. 8. Retrieved March ed 29, 2017 from: <https://nces.ed.gov/pubs2017/2017102.pdf>

- ◆ Eighty percent of parents indicated that FACE helped them *a lot* to increase the amount of time they spend with their child.
- ◆ Almost 80% of parents reported that they became *a lot* more involved in their child's education because of their participation in FACE.
- ◆ Approximately 75% of parents reported that FACE helped them *a lot* to more effectively interact with their child, to become a better parent and to increase their understanding of child development.
- ◆ Slightly more than 70% of parents indicated that FACE helped them *a lot* in learning how to encourage their child's interest in reading. Almost 70% of parents reported that FACE helped them *a lot* in increasing their ability to speak up for their child.

The academic achievement of adults is an important focus for the center-based component of FACE. In FACE adult education, teachers assess academic achievement with the *Comprehensive Adult Student Assessment System (CASAS)* or the *Test of Adult Basic Education (TABE)*. Parents also report impacts on their academic skills.

- ◆ Seventy-three percent of assessed adults demonstrate CASAS reading gains, and 72% demonstrate gains in mathematics. Thirty-six percent of adults increased their reading score at least one level, and 35% advanced at least one level in mathematics.
- ◆ At six programs, teachers assessed academic achievement using the TABE. All adults with pre- and post-reading (7 adults) and mathematics scores (6 adults) demonstrate statistically significant gains.
- ◆ Seventy-nine percent of center-based adults reported improved academic skills for personal growth; 47% reported that they were helped *a lot* in this area. Sixty-one percent reported improved academic skills for advanced education; 28% reported that they were helped *a lot*.
- ◆ FACE staff reported that 77 adults completed their GED or high school diploma requirements during PY18. Since the inception of FACE, approximately 1,600 FACE adults have obtained their GED or high school diploma.
- ◆ That FACE promotes life-long learning is demonstrated by 72 home-based adults and 108 center-based adults who enrolled in college or vocational courses during the year. Twenty percent of the PY18 adults who reported they planned to discontinue FACE participation at the end of the year also planned to enroll in college or technical school after leaving the FACE program.
- ◆ During PY18, 367 adults became employed; 56% were home-based adults and 44% were center-based adults. Throughout the history of FACE, approximately 7,400 adults gained employment during their FACE participation.
- ◆ Some FACE participants earn the required credentials to become employed in FACE. Almost 30% of FACE staff members are former participants in FACE.

- ◆ As a result of FACE participation, most FACE adults reported feeling better about themselves, having more self-direction and self-discipline, having increased frequency of interactions with other adults, and gaining improved communication skills (83-94%).
- ◆ Almost 75% of FACE adults reported that FACE participation helped improve their physical fitness. The opportunity to make the greatest impact resides in the center-based component; 79% of center-based adults reported this impact. A high percentage of home-based adults (68%) also reported this impact.

Integration of American Indian Language and Culture

A goal of the FACE program is to *support and celebrate the unique cultural and linguistic diversity of each American Indian community served by the program*. Each year, the FACE program demonstrates renewed efforts to support staff and participants in acquiring skill in their American Indian language and knowledge of their tribal culture. These efforts are distinctively part of the FACE program.

Over time, tribal members have obtained the qualifications to predominantly staff the FACE programs. American Indian language and culture are infused throughout the FACE program.

- ◆ The FACE program prioritizes the hiring of tribal and community members. Eighty-one percent of all PY18 FACE staff positions are held by American Indians. Ninety-five percent of parent educators, 69% of coordinators, 70% of adult education teachers, 74% of early childhood teachers, and 84% of early childhood co-teachers are American Indian.
- ◆ Approximately 90% of FACE programs reported that language and/or cultural traditions and values are integrated *sometimes* or more frequently in each of the FACE components.
- ◆ All programs integrate language and culture in preschool, and for each of the other center-based components, only two to five programs reported that they *never* or *almost never* integrated language and culture.
- ◆ In slightly more than 80% of the 37 FACE schools that have a culture teacher, the teacher assists the FACE staff in efforts to integrate native language and culture. The culture teacher provides classroom instruction for FACE preschoolers in 22 of the programs and for FACE adults in 17 schools.
- ◆ At the end of the year, adults rated the FACE program on its impact in helping them increase their usage of their American Indian language. Sixty-eight percent of adults indicated that participation in FACE helped increase their use of their American Indian language.
- ◆ At the end of the year, parents also rated the frequency with which they talk, read or tell stories to their child in their American Indian language. Forty-six percent of parents reported that they talk, read, or tell stories to their child *almost daily* or more frequently. Thirteen percent of parents reported that they do so *once or twice a week*, and another 13% of parents do so *a few times a month*. Twenty-eight percent *never* or *almost never* talk, read, or tell stories to their child in their American Indian language.

FACE Sites in Program Year 2017-2018

Alamo Navajo Community School, Magdalena, NM
American Horse School, Allen, SD
Aneth Community School, Montezuma Creek, UT
Atsa Biyaazh Alternative School (Shiprock), Shiprock, NM
Baca/Dlo'ay azhi Community School, Prewitt, NM
Beclabito Day School, Shiprock, NM
Blackwater Community School, Coolidge, AZ
Bread Springs Day School, Gallup, NM
Casa Blanca Community School, Bapchule, AZ
Chi Chi'l Tah-Jones Ranch Community School, Vanderwagen, NM
Chief Leschi School, Puyallup, WA
Dunseith Indian Day School, Dunseith, ND
Dzilh-Na-O-Dith-Hle, Bloomfield, NM
Enemy Swim Day School, Waubay, SD
Fond du Lac Ojibwe School, Cloquet, MN
Gila Crossing Community School, Laveen, AZ
Greasewood Springs Community School, Ganado, AZ
Hanaadli Community School, Bloomfield, NM
Hannahville Indian School, Wilson, MI
John F. Kennedy Day School, White River, AZ
Kayenta Boarding School, Kayenta, AZ
Kha'p'o Community School, Espanola, NM (formerly Santa Clara)
Kin Dah Lichi'i Olta', Ganado, AZ
Lac Courte Oreilles Ojibwe School, Hayward, WI
Leupp Schools, Winslow, AZ
Little Singer Community School, Winslow, AZ
Little Wound School, Kyle, SD
Many Farms Community School, Chinle, AZ (formerly Chinle Boarding School)
Mariano Lake Community School, Crownpoint, NM
Na'Neelzhiin Ji'Olta Day School (Torreon), Cuba, NM
Nazlini Community School, Inc., Ganado, AZ
Oneida Nation Elementary School, Oneida, WI
Pearl River Elementary School, Philadelphia, MS
Pine Ridge School, Pine Ridge, SD
Pueblo Pintado Community School, Cuba, NM
Ramah Navajo School, Pine Hill, NM
Rough Rock Community School, Chinle, AZ
Salt River Elementary School, Scottsdale, AZ
St. Francis Indian School, St. Francis, SD
Tate Topa Tribal School, Fort Totten, ND
Theodore Jamerson Elementary School, Bismark, ND
T'iis Nazbas Community School, Teec Nos Pos, AZ
T'iis Ts'ozi Bi'Olta' Community School (Crownpoint), Crownpoint, NM
To'Hajiilee-He Community School (Canoncito), Laguna, NM
Tse 'ii' ahi' Community School, Crownpoint, NM
Wingate Elementary School, Fort Wingate, NM