Connecting Home and the Pediatrician’s Office to Achieve School Readiness in Silicon Valley
Introduction

School Readiness in Silicon Valley

Children begin learning the minute they are born. The care and education they receive in their first years of life are the building blocks to future success in the classroom, in the workforce and in life.

In Silicon Valley, approximately 30,000 children enter public school kindergarten every year.\(^1\) Local studies conducted over the last decade indicate that approximately 18,000 children, or 60 percent of Silicon Valley’s entering kindergarteners, are not ready for school, meaning they do not have the requisite academic or social-emotional skills to thrive in school.\(^2\)

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\(^1\) Dataquest, California Department of Education web-based data reporting system: https://dq.cde.ca.gov/dataquest

Pediatricians are Families’ Most Trusted Source for Support

In 2014, SVCF’s Center for Early Learning (CEL) released findings from the *Parent Story Project* – the first local study of its kind to investigate what it is like to be a parent or caregiver of a young child in Silicon Valley. One of the questions asked was, “Who is your most trusted source for support on raising your child?” Overwhelmingly, the response was, “My child’s pediatrician.”

Similarly, over the past six years, pediatricians and researchers from the Department of Pediatrics at Stanford School of Medicine have increasingly recognized the importance of promoting school readiness among all low-income patients.³

Center for Early Learning at Silicon Valley Community Foundation

We advocate tirelessly for the needs and best interests of babies and young children from birth to age eight, because we know that children’s experiences in their first few years of life can determine the course of their entire lives. We advocate for a society that works better for children—across government, philanthropy, health and education. We work with leaders in every sector to enact policy and put in place programs that help families access the resources they need. We uncover knowledge, test ideas and push conversations forward so that in Silicon Valley, every child has the foundation to flourish.

Stanford School of Medicine

The Pediatric Advocacy Program in the Department of Pediatrics at Stanford School of Medicine aims to improve the health of children while reducing health disparities locally, statewide, and nationally. The Advocacy Program team partners with community-based organizations, public entities, and policy leaders to effect change through an array of education, service, research, and advocacy efforts. The issues addressed are driven by community-identified priorities and solutions.
**Purpose of this Report**

By virtue of their profession, pediatricians regularly interact with young children, birth through age 5, through well-child visits. As trusted care providers in the community, pediatricians are well positioned to offer families valuable support around early child development, including school readiness. However, the health care system, and in particular, pediatric offices have traditionally been under-utilized in providing families with information regarding community resources, linkages to high-quality early learning programs, and opportunities for parents to promote school readiness.

CEL and the Department of Pediatrics at Stanford School of Medicine see the opportunity and value in exploring the ways in which the pediatrician’s office can be a trusted channel for reaching parents and caregivers about how to support their children’s readiness for kindergarten. We believe this emphasis could increase school readiness in Silicon Valley.

This report highlights the findings from two recent collaborative, community-engaged studies conducted by the Department of Pediatrics at Stanford School of Medicine. The studies – published in the *International Journal of Environmental Research and Public Health* (Peterson, 2018) and the *Journal of Developmental and Behavioral Pediatrics* (Steinberg, 2018) – found the following key findings:

- Despite parents’ near universal understanding that their role in supporting their child’s readiness for school was important, they reported a number of barriers that prevented them from being able to play this role.

- Parents wanted their child’s pediatrician to help make the connection between child development, early learning and later school success and to offer actionable parenting strategies that promote their young child’s learning.

- Parents supported the idea that their child’s pediatric clinic could serve as an early child learning hub, offering parenting guides and learning tools, and that the pediatrician could offer community resources, recommendations, and strategies to advocate for their child’s access to early learning resources.
Research Findings

Study 1: Parental Attitudes, Behaviors, and Barriers to School Readiness among Parents of Low-Income Latino Children

The first study, conducted in 2012 in collaboration with the Fair Oaks Health Center (FOHC), was a cross-sectional survey of parents of 3- and 4-year-olds to identify knowledge, attitudes and barriers regarding school readiness. The survey was used to develop new and innovative interventions for low-income families attending Fair Oaks Health Center, which is located in Redwood City, California.

210 parents of children, ages 3 to 6, who had a well-child check in a high-density, San Mateo County-operated health clinic

Pediatric clinic’s patients are:

- 94% Latino
- 2% White
- 1% Black

87% of children rely upon Medicaid or the Children’s Health Insurance Program

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5 Funding from the American Academy of Pediatrics Access to Child Health (CATCH) Program
Parental attitudes, behaviors and barriers around school readiness

Nearly all parents agreed that their role and the role of the family in helping their child be school-ready was important and that it would help their child succeed later in school. Parents also agreed that their child should have specific skills before entering school, such as being able to take turns, use a pencil and know letters.

Despite near universal understanding that their role in supporting their child’s readiness for school was important, parents reported a number of barriers that prevented them from being able to play this role.

• One out of three parents indicated they did not know what their child needs to know for kindergarten
• Close to one out of three parents reported not having books in the home
• One out of five parents reported not knowing how to complete school registration forms
• One out of five parents stated their job makes it difficult to spend time with their child
TABLE 1. Parent attitudes and behaviors regarding school readiness of their preschool aged children (n= 210).

<table>
<thead>
<tr>
<th>Domain 1: Parent attitudes regarding school readiness skills</th>
<th>Percent %*</th>
</tr>
</thead>
<tbody>
<tr>
<td>How important is it for a child to be able to do the following before they start kindergarten:</td>
<td>Very Important</td>
</tr>
<tr>
<td>Take turns and share</td>
<td>67.3</td>
</tr>
<tr>
<td>Use a pencil</td>
<td>66.8</td>
</tr>
<tr>
<td>Know letters of the alphabet</td>
<td>64.6</td>
</tr>
<tr>
<td>Count to 20</td>
<td>66.8</td>
</tr>
<tr>
<td>Recognize 5 basic colors</td>
<td>59.5</td>
</tr>
<tr>
<td>Recognize 5 basic shapes</td>
<td>58.7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Domain 2: Parent attitudes regarding their role in school readiness</th>
<th>Percent %*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please indicate level of agreement with the following statements about preparing your child for kindergarten:</td>
<td>Strongly Agree or Agree</td>
</tr>
<tr>
<td>It is important to me and my family</td>
<td>94.3</td>
</tr>
<tr>
<td>It will help my child succeed later in school</td>
<td>93.3</td>
</tr>
<tr>
<td>It is my responsibility as a parent</td>
<td>89.3</td>
</tr>
<tr>
<td>It is the responsibility of the school</td>
<td>41.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Domain 3: Parent behaviors to promote school readiness</th>
<th>Percent %*</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last week, did anyone do the following with your child:</td>
<td>Yes</td>
</tr>
<tr>
<td>Teach your child songs or music</td>
<td>91.8</td>
</tr>
<tr>
<td>Teach your child the letters of the alphabet</td>
<td>87.1</td>
</tr>
<tr>
<td>Tell your child a story</td>
<td>87.1</td>
</tr>
<tr>
<td>Read to your child every day</td>
<td>81.6</td>
</tr>
<tr>
<td>Do arts and crafts with your child</td>
<td>75.5</td>
</tr>
<tr>
<td>Visit a library with your child</td>
<td>55.2</td>
</tr>
</tbody>
</table>

*Percentages in rows and columns may not sum to 100% because of rounding.
There was a gap between parental awareness of local resources that support children and families’ readiness for school and utilization of these resources.

- 63% of parents were aware of Head Start, yet only 27% utilized Head Start in the preceding year.
- Approximately 50% of parents were aware of comprehensive family support resources such as parenting groups, kindergarten prep courses, free family preschools, and a clinic-based school readiness program, yet less than 20% utilized the resources in the preceding year.

### TABLE 2. Parent barriers to school readiness (n = 210).

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree or Agree</th>
<th>Neutral</th>
<th>Disagree or Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I do not know what my child needs to know for kindergarten</td>
<td>34</td>
<td>23.9</td>
<td>42</td>
</tr>
<tr>
<td>English is difficult for me</td>
<td>31.4</td>
<td>15.5</td>
<td>53.1</td>
</tr>
<tr>
<td>We do not have books in our home</td>
<td>24.1</td>
<td>11.3</td>
<td>64.6</td>
</tr>
<tr>
<td>We do not have time to read every night before bed</td>
<td>23.7</td>
<td>10.3</td>
<td>66</td>
</tr>
<tr>
<td>I do not know how to complete school registration forms</td>
<td>19.9</td>
<td>14.3</td>
<td>65.8</td>
</tr>
<tr>
<td>My job makes it difficult to spend time with my child</td>
<td>19.6</td>
<td>12.4</td>
<td>68</td>
</tr>
<tr>
<td>Reading is hard for me</td>
<td>18.1</td>
<td>9.8</td>
<td>72</td>
</tr>
<tr>
<td>Transportation to places like the library is difficult</td>
<td>16.8</td>
<td>14.7</td>
<td>68.4</td>
</tr>
<tr>
<td>I have to take care of other children</td>
<td>12.6</td>
<td>12</td>
<td>68.6</td>
</tr>
<tr>
<td>Other responsibilities take priority</td>
<td>12.5</td>
<td>12.5</td>
<td>75</td>
</tr>
</tbody>
</table>

**Awareness and utilization of school readiness resources**

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Study 2: Early Childhood Learning and the Pediatrician: A Qualitative Study Among Diverse, Low-Income Caregivers

The second study, conducted in 2015, was a qualitative examination of parent and caregiver expectations and understanding of school readiness, as well as their perceptions of the pediatrician and pediatric office’s role in providing information and resources on early learning and school readiness. This study was informed by extensive feedback from stakeholders from prominent community organizations interested in supporting early childhood development among children in their respective communities.

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Pediatricians and pediatric clinics as trusted resource for early learning and school readiness

Parents and caregivers stated that previous pediatric interactions solely focused on health care, such as ensuring their child met kindergarten health requirements (i.e. immunizations, physical exam). Despite concerns of already limited time with their child's pediatrician, parents and caregivers expressed high regard for pediatricians and indicated they could view pediatricians as a trusted source of information on early childhood development and learning.

Parents acknowledged their gaps in knowledge on important developmental milestones for children younger than 5 and shared their worries that these gaps in knowledge hinder their child's success.

Parents wanted their child's pediatrician to help make the connection between child development, early learning and later school success and to offer actionable parenting strategies that promote their young child's learning. They wanted specific information on their own child's strengths and needs as compared to other children of the same age.

Parents and caregivers supported the idea that their child's pediatric clinic could serve as an early child learning hub, offering parenting guides and learning tools, and that the pediatrician could offer community resources, recommendations, and strategies to advocate for their child's access to early learning resources.

WHO DID WE HEAR FROM?

69 caregivers participated in 12 focus groups in San Mateo and Santa Clara counties

39% Latino/Hispanic
30% Black/African-American
36% Asian-American

Some participants identified as more than one race/ethnicity.

Mean age was 39 years. Asian-American participants included the oldest caregivers and greatest representation of grandparents (mean age 50 years)

41% reported a high school degree or less

59% had insufficient annual income to meet basic needs of a family of their size ($72,113 for a family of 4),
26% declined to report

28% used any form of paid or subsidized child care in the past month

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What Can We Do as a Community?

The early education sector and health sector have yet to leverage pediatricians’ unique position in the community to provide early learning resources and recommendations to their patients and their families. These findings show that parents and caregivers across diverse cultural groups trust their child’s pediatrician and value their pediatrician’s position in the community to provide families with early learning resources, activities and information that might otherwise be inaccessible. Pediatricians have a clear and unique role to play in improving how ready Silicon Valley’s young children are to enter school.

Recommendations

Health Sector

- Provide families information on local community resources, such as the county library, Head Start, Early Head Start, First 5, Pre-to-Three, Nurse Family Partnership
- Provide families information on early brain development and the importance of promoting literacy from birth
- Distribute books at clinic visits using evidence-based programs such as Reach Out and Read. Promote awareness campaigns like Talk, Read Sing that encourage early learning throughout the community
- Use valid and evidence-based developmental screening tools, such as PEDS-DM or ASQ, and ASQ-SE
- Strengthen ties with the education sector to form collaborations and stimulate cross-sector innovations
- Educate local policymakers about the science that supports the benefits of high-quality early child care and education and the linkages to child and family health
- Advocate for more high-quality, affordable child care and universal preschool in the local community
- Advocate for and encourage implementation of child care and early learning safety standards

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Kinder-Ready Clinics

Stanford researchers are exploring the development and implementation of “kinder-ready clinics” in pediatric settings to promote school readiness. The goals are to 1) empower parents, 2) provide access to tools of early childhood learning, and 3) change the clinic and community narrative around the promotion of school readiness.
KINDER-READY CLINICS may include:

1. **LITTLE LIBRARIES.** Children awaiting their clinic visit can choose a book and then take the book home when they leave.

2. **CLINIC STORY TIMES.** Community volunteers read stories to children in the clinic waiting area, modeling how to engage children while reading.

3. **TALK READ SING** materials. Talk Read Sing is a public awareness and action campaign of Too Small to Fail and First 5 California aimed at reaching the broader community to convey the importance of talking, reading and singing to children.

4. **EDUCATIONAL MURALS.** Decorative and engaging murals prompt children to explore their surroundings.

5. **REACH OUT AND READ.** A longstanding evidence-based program that provides books to children during pediatrics visits. Pediatricians discuss the importance of early literacy and model reading behaviors.

In addition, kinder-ready clinics are studying emerging, innovative strategies to support parents such as offering an on-site school readiness coach⁸ and sending parents texts they can use to support their child’s language development⁹.

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**Policymakers**

- State and county governments can design programs to incentivize pediatric care providers to work with early childhood educators around school readiness, incentivizing a “kinder-ready clinic” orientation within health care systems.
- State and county governments can work toward integrating health care and early learning systems and data, with shared accountability and metrics.
- State and county governments can create and adopt a metric for Medi-Cal programs that relates to children’s school readiness.
- Pediatric residency and professional development programs should include components/certifications on early brain development and school readiness.

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**OREGON AND NEW YORK: TWO STATES WORKING TOWARD HEALTH CARE AND EARLY LEARNING SYSTEMS ALIGNMENT**

In 2011, Oregon established a statewide initiative to integrate health care and early learning systems to promote health equity. Oregon has taken steps to align the newly transformed early learning and health care systems through joint staffing and advisors, blended funding and shared metrics and expectations. One example of the alignment of these systems was the launch of the Kindergarten Readiness Technical Workgroup, whose purpose is to identify at least one metric for Medicaid programs that will further incentivize the health care sector to take a role in school readiness. At present, 12 metrics are under review for implementation in 2019-2020.

In 2017, the New York Department of Health launched its First 1,000 Days on Medicaid initiative. The state also launched a two-year value-based payment pilot program to incentivize pediatric providers to work with early childhood educators around school readiness. Data from this pilot are being used to build the case for earmarking Medicaid funds for school-readiness programs going forward.

* https://www.healthaffairs.org/do/10.1

**Acknowledgements**

We would like to acknowledge the community partners who hosted and recruited families for the studies:

- African American Community Service Agency
- Asian Americans for Community Involvement
- African American Community Initiative San Mateo
- Black Infant Health Program, San Mateo and Santa Clara counties
- Church of Christ, East Palo Alto
- ICAN
- PCRC, Peninsula Conflict Resolution Center
- San Mateo Medical Center: Fair Oaks Health Center
- SOMOS Mayfair
- St. Francis of Assisi Church, East Palo Alto

To learn more about SVCF's Center for Early Learning, visit siliconvalleycf.org/center-for-early-learning, email CEL@siliconvalleycf.org or call 650.450.5400

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