

Kindergarten Readiness Parent Focus Group Summary

Enterprise, Wallowa County

Focus Group Snapshot



9 participants



Have lived in the community from less than 6 months to over 20 years



Have children ages birth to 11



Live in a frontier community¹, population 1,872²

“I like the different programs that the community offers for children and parents. It keeps us involved.”

What does it mean for you and your child to be ready for school?

Ready Children

Parents emphasized the importance of social, emotional skills of children, over pre-academic skills such as letters and numbers. Participants also gave voice to concerns about bullying in the community and talked about teaching “respect” for both elders and other children, as well as how to recognize and prevent bullying.

Social-emotional skills such as sharing, being able to identify and verbalize their feelings, caring for others, making friends, and enjoying playing with other children.

“Being able to recognize their emotions and how they feel and verbalize them to friends, and recognize people in need.”

Oregon Office of Rural Health designation file, www.ohsu.edu/xd/outreach/oregon-rural-health/data/rural-definitions/index.cfm¹

Welcoming and inclusive of children or adults who might be different from themselves. Parents talked about their children being able to befriend and stand up for people who have disabilities, or who come from different socioeconomic backgrounds than their own.

“Making people feel comfortable, if they get bullied or picked on. I want my kids to be there and make them feel welcome.”

Racial/cultural identity and pride. Some parents also talked about their worries for their children, who might be perceived as “different” in the community based on “hair or what they look like or their skin color.” These participants want to help their child embrace who they are, and also be prepared to navigate discrimination they may face from other children or adults in early learning programs, schools, or the community at large.

Executive functioning skills such as being able to focus attention, remember instructions, and self-regulate.

Pre-academic skills such as knowing letters, numbers, shapes, and colors.

Ready Families

Parents mainly talked about the need to know their individual child’s needs and strengths, and to be able to advocate for their child with providers and teachers.

Develop ways to support their child’s learning at home, such as being attuned and reflexive to support their individual child’s needs, strengths, and interests.

² U.S. Census Bureau, 2012-2016 American Community Survey 5-Year population estimate factfinder.census.gov/faces/nav/jsf/pages/community_facts

“I think as a parent, it is important to understand where your child is at and what you need.”

Provide a variety of play and learning opportunities for children to explore their interests without the pressure of forcing activities on them that they may not enjoy.

“I read books to my daughter every night before bed. She loves it and embraces that. But, then again, she doesn’t want to do coloring.”

Establish relationships with early learning providers and teachers in order to be able to communicate about and advocate for their child’s needs and strengths.

“We had really great rapport with the [program] staff and administrators. I’m probably a pushier mom...I don’t really care if I ruffle some feathers. I will go in and advocate for my kid.”

What are trusted sources of information about school readiness?

Parents identified a range of people and resources that serve as trusted sources of information about school readiness.

People in professional roles such as early learning providers, parent educators, family support advocates and resource referral staff, teachers, and doctors.

Personal connections, including family members, friends, and peers.

Additional resources included **Apps** such as ABCmouse and ClassDojo.

“[Through Head Start’s ClassDojo] you will get a picture of your kid doing something, and then an explanation of what she did today.”

What kind of early learning supports have you participated in and how do they support school readiness?

Parents have participated in a wide range of early learning programs or services for families with children ages birth to 5.

Parent-child groups include play groups and library story times.

Parenting education series and Parent Cafes through Building Healthy Families.

Home visits through early childhood, preschool, and Early Intervention programs.

Preschool programs include Early Head Start and Head Start.

Nutrition supports through the Women, Infants & Children (WIC).

Faith-based activities such as Awana Club child and youth ministries.

How do these early learning programs help you and your child be ready for school?

Although most parents talked about participating in one or more of these programs, some group participants emphasized that they do not have the time or resources to participate in early learning or family support programs available in the community. They described doing things at home that support their child’s learning, such as reading, singing, and counting as part of everyday activities.

Ready Children

Executive functioning and social-emotional skills development through opportunities for children to interact and play with other children in a group setting, and practice listening to an instructor.

“For me, it’s the social aspect, a lot of it. Getting my child out and feeling comfortable with different kids. Getting her to play with other kids.”

Opportunities to gain independence for children to get used to having time apart from their parents, as well as giving parents a “break” from the responsibilities of parenting. Parents also appreciated that their children can build and strengthen skills to feel successful in group or classroom settings.

“[Child] created kind of her own space, where she can say, ‘This is my school and this is where I go.’ I just really appreciate that because...that is a big part of being able to grow.”

Ready Families

Affirms parents’ efforts and also **provides new information** to strengthen the entire family. Parents expressed gratitude for providers’ abilities to suggest new parenting strategies without criticizing individuals.

“[Provider] just knows how to communicate things well and not put you down, but just kind of bring you up.”

Some participants described the experience of having one person, often a family support program staff, who was able to **help coordinate services** for the family, including health service access and other family support programs. Participants expressed how happy they were to have someone who could advocate for, coach, and encourage them through challenges of parenting. Further, participants viewed early learning and family support providers as responsive and “personal” for families. They appreciated being able to call or text and get timely and supportive responses or tangible supports, such as diapers or clothing.

“The home visits for me are really important. They [home visitors] are people with a lot of information, connecting you.”

Opportunities for parent-child interaction through activities designed for the entire family and that can also easily be done at home to support children’s learning and the parent-child relationship.

“I like that a lot of these [activities] you get to do with your kids. It is not like you just send them to school and the teachers are working with your kids. You get to go home and participate with them and I think it helps doing more things at home together.”

Help with goal setting and support for child’s learning. Parents with children in Head Start appreciated the weekly goals for their child to know where, and how, they should focus their efforts at home.

Create routine for children to get accustomed to a daily and weekly schedule with predictability and stability.

“[Early learning programs] create stability. When we go to the library every week for my daughter, she can look forward to those types of things.”

What would help improve early learning programs to support school readiness?

Parents largely had positive experiences with early learning programs. The main suggestion was to **retain staff** who were skilled at supporting parents and children, and who had established strong relationships in the community with families and other providers, and were seen as effective at navigating education, health, self-sufficiency, and child welfare systems.

Additionally, participants want to see an **increase in quality, availability and affordability of child care and preschool**. While some parents who utilize Head Start appreciated this experience for their child, they also recognized a greater need than there is capacity. And if families face additional challenges at home such as single parenting or balancing multiple jobs and are unable to provide support for learning at home, they described their

children as losing out on opportunities available to others.

“There are not [enough programs] so parents are forced to put their kids with someone who isn’t ready to educate their child for kindergarten, so then their child struggles.”

What kind of health services have you participated in and how do they support school readiness?

Although parents described being able to access **in-office services** from medical practitioners in Enterprise for their family, they also noted the lack of specialists in the area. Most participants reported accessing services at Winding Waters Clinic in Enterprise, with several accessing services at Mt. View Medical, also in Enterprise.

Health insurance coverage limits where families can access services. All parents in this group had utilized Oregon Health Plan (OHP) during the past year. Some participants felt they were provided with lower quality care as a result, compared to previous experiences with private insurance plans. They talked about having fewer fully-covered referral options, experiencing long wait times to see referred providers, and feeling that the region loses some “good doctors because OHP doesn’t pay” well.

“Yeah, we are all on OHP because we are either low income or don’t qualify for regular health care. It is not by choice. We are all as important, so is our health.”

Home visiting was utilized by some parents, including Early Head Start, Healthy Families Oregon, and Early Intervention.

Developmental screenings conducted through home visiting, WIC, and medical services.

Nutrition and breastfeeding supports through Women, Infants & Children (WIC).

How do these health services help you and your child be ready for school?

Parents largely described positive experiences with their health care providers and many felt that communication between the medical clinic and other early learning supports was helpful. This was primarily a result of home visitors who take on a service coordination role for families, and facilitate the flow of information between early learning programs, health care providers, and other family supports, such as Self-Sufficiency or Child Welfare, for example.

However, parents also described situations where they experienced needing specialty care during pregnancy or post-partum, in particular, that they were unable to access, which led to serious maternal health complications.

Providers who take time to hear parents out was described as making the difference for many parents. When parents felt they had a relationship with their or their child’s provider and felt heard, known, and trusted, they were able to raise questions and concerns and get the information they were seeking about child development and ways they can support their child.

“If I have any issues or anything, or if [my provider] has a concern about my children, we talk about it. She will refer me to wherever I need to go. She is awesome.”

Ensuring up-to-date immunization schedules for children was important for being able to register for and attend early learning programs and school.

Tracking developmental milestones through Ages & Stages Questionnaires (ASQ) was seen as helpful. Parents talked about reviewing the ASQ results with different providers and feeling more informed about how to support their child, or connect with additional referrals when needed. For example, one parent described how she learned that her child could benefit from more “tummy time” so is building that into their family routine.

Coordinated information and referral system, including processes for data sharing among providers, was described by some parents. For example, several participants described completing an ASQ through a home visiting program, and since they had signed a Release of Information, the ASQ results were sent directly to their child’s health provider and/or WIC specialist. Not only did this help all providers receive the information about the child’s development, but also relieved the family of the burden of completing the ASQ multiple times for the same child in the same developmental period.

“It just eliminates so much time and stress for me, so I really appreciate that.”

In addition, one participant talked about completing an ASQ at the health clinic for their child, and worked with the staff person responsible for screening and referral. As a result, the family was connected to Early Intervention for further assessment.

What would help improve health services to support school readiness?

Parents largely focused on wanting to see more advocates who can help families navigate what was described as the complicated and frustrating set of rules around Oregon Health Plan coverage, as well as help connecting needed health care referrals. Participants also want to see expanded care and service options locally to specialty care services as ways to improve health services and the system overall in supporting school readiness.

Spend more time with families to get to understand their needs, strengths, and values, especially as related to parenting and being seen as a whole family.

“If I take my [youngest] in for her well-child check, [doctor] asks about the other two [children] and if there is anything going on with them. He is asking how our family is doing.”

Increase local access to health services, especially prenatal and specialty care providers so families can access timely and quality care. Long travel times and distances were a barrier for families, especially those with limited financial resources or with young children. Some participants described difficult pregnancies and pre-term births, which required emergency transport due to services not available locally. Participants experienced life-threatening complications and felt that had services been available locally, they would have had better health outcomes for themselves and their children.

Some parents described putting off care for their children because of the difficulty and cost of obtaining specialty services. Referrals to out-of-town locations such as La Grande (64 miles away), Boise, Idaho (230 miles and 1 time zone away), The Dalles (240 miles away), or Portland (over 300 miles away) were often experienced as incomplete or taking months to obtain an appointment.

“My son was supposed to get a referral [for a specific surgery] and [local provider] wanted to send him to Boise. I’m not going to take him to Boise and then put him in a car seat afterwards and drive back home. So they were supposed to put in a referral for [a different procedure] months ago. That still hasn’t gone through.”

Improve prenatal, delivery and postpartum care. In addition to complications during pregnancy and delivery, which required out-of-area transport, participants talked about the quality of care. For example, some participants felt that their local health care provider could have more closely monitored their pregnancy to avoid pre-terms, emergency transport, and procedures. Other participants felt pressured to have a Caesarian section even if it was not deemed medically necessary, when they would have preferred a vaginal birth. For them, that meant a more difficult post-partum recovery period, especially for those who described having limited social or financial supports.

Have more patient advocates who can help families effectively navigate insurance and health care service systems. Participants felt it would be helpful to have advocates be able to challenge providers if they are recommending a procedure or course of action that is in conflict with the parent's interests or would result in large out-of-pocket expenses. Parents also expressed how difficult it is to find the time and energy to figure out how to navigate the health care system on their own.

“Moda tells you one thing, OHP tells you one thing, and your doctor tells you another. I don’t think it’s that they don’t care, but no one knows how the system works.”

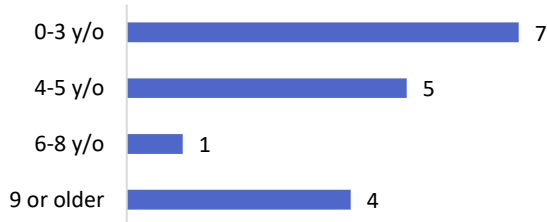
Focus Group & Community Profile

On January 30, 2018 Building Healthy Families staff hosted a Kindergarten Readiness Parent Focus Group in Enterprise with 9 parents, including 8 moms (1 who also identified as a stepmother) and 1 stepfather. Eight reported parenting with a partner. Participants were recruited by Building Healthy Families staff and were known to them through families' involvement in home visiting, preschool, or parenting education programs.

The **average participant age was 33** and ranged from 26 to 40.

The **average number of children per household was 2** and ranged from 1 to 3.

Ages of Children of Focus Group Participants

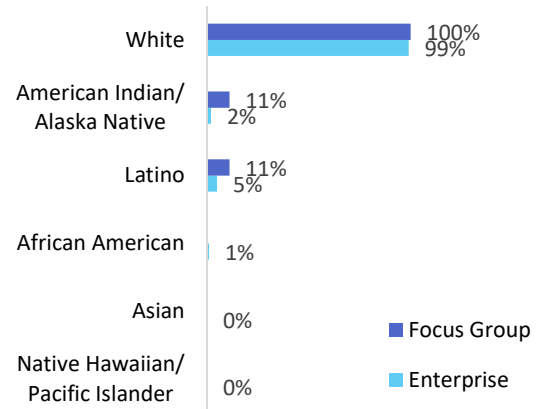


“Being just a smaller community, most everybody at least knows who everybody else is and tends to look out for their kids.”

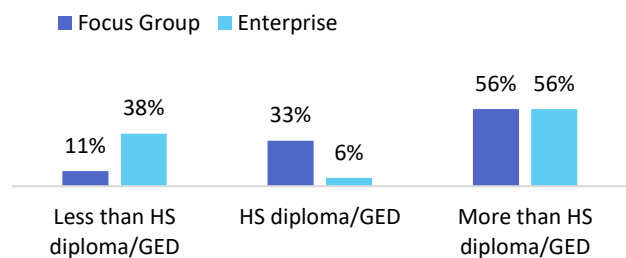
Participants reported that they like raising their children in the Enterprise area. Because there is a **strong network of people** and organizations that look out for their kids, they feel their children get more **individualized attention** in the community and at school, and that there are **more available early learning programs** for young children.

³ U.S. Census Bureau, 2012-2016 American Community Survey 5-Year Estimates, Race alone or in combination with one or more other races, Total may not equal 100% because individuals may endorse more than one category
factfinder.census.gov/faces/tableservices

Race/Ethnicity of Focus Group Participants & Enterprise³



Educational Attainment of Focus Group Participants & Enterprise⁴



Services Utilized by Focus Group Participants	% Yes
Public library	78%
SNAP	89%
TANF	44%
OHP	100%
WIC	89%
Early Head Start	56%
Head Start	44%
EI/ECSE	22%

⁴ U.S. Census Bureau, 2012-2016 American Community Survey 5-Year Estimates, Educational Attainment among 18 to 24 year olds, factfinder.census.gov/faces/tableservices