

# Kindergarten Readiness Parent Focus Group Summary

## Gresham-Fairview, Multnomah County

### Focus Group Snapshot



16 participants



Have lived in the Portland area from 2 years to over 20 years



Have children ages birth to 16



14 participated in Spanish, and 2 participated in English but had a home language of Chuukese



Live in an urban area<sup>1</sup>, Gresham-Fairview combined population 119,257<sup>2</sup>

“Darle la confianza que él necesita y hacerle saber que si no se siente seguro allí que también va a contar con nuestro apoyo para protegerlo. Si él no se siente bien, siempre vamos a estar con ellos.”

*[Give [son] the confidence he needs and make sure he knows that if he doesn't feel safe [at school], that he count on our support to protect him. If something's not ok, we are always going to be there for him.]*

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

#### Ready Children

Parents emphasized the importance of children being able to be independent and spend the day away from them in a classroom setting. Parents felt it was important that their children be able to communicate with both other children and adults in English. Parents also wanted their children to be able to know classroom rules and expectations, as

well as follow teacher instructions. Related, participants stressed the importance of children's social-emotional skills. Finally, parents felt it was important that their children learn and know some letters and numbers before starting school, as well as be able to write their own name.

**Be independent** and feel comfortable being away from their parents for the day in a classroom setting. This is both related to being able to do personal care activities such as use the bathroom on their own, as well as feel okay without their parents throughout the day and not crying at separation.

“También que sean independientes. Y también enseñarles que tienen que hacer las cosas por ellos mismos.”

*[For them to be independent. Teach them that they need to be able to do things on their own.]*

**Feel confident and comfortable communicating** with other children and adults in English. Both to understand as well as to voice any needs they may have.

“No hablábamos el inglés...Fue bien difícil para ella porque cuando ella empezó a ir al kínder ella llegaba como frustrada y me decía, ‘es que yo no les entiendo a los niños.’ El idioma fue una barrera muy grande para ella.”

*[We didn't speak English...It was really hard for [daughter] because she went to kinder and would come home frustrated and mad, saying ‘I don't understand the kids.’ The language was a big barrier for her.]*

<sup>1</sup> Oregon Office of Rural Health designation file, [www.ohsu.edu/xd/outreach/oregon-rural-health/data/rural-definitions/index.cfm](http://www.ohsu.edu/xd/outreach/oregon-rural-health/data/rural-definitions/index.cfm)

<sup>2</sup> U.S. Census Bureau, 2012-2016 American Community Survey 5-Year population estimate [factfinder.census.gov/faces/nav/jsf/pages/community\\_facts](https://factfinder.census.gov/faces/nav/jsf/pages/community_facts)

**Understand classroom expectations and school routines** such as how to ride the bus, sit in a circle, go to lunch, and recess. One parent who also volunteers in the classroom shared an observation:

“Cómo es la rutina de su escuela. Me ha tocado niños que están durmiendo, están recargados porque no conocen la rutina de la escuela.”

*[[Know] what the school routine is like. I have seen children sleeping, they're overwhelmed, they fall asleep because they don't know the school routine.]*

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

“Saber escuchar a la maestra, saber obedecer las órdenes. Y ser respetuosos.”

*[Know how to listen to the teacher, obey orders. And be respectful.]*

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

“Es muy importante que ellos sepan compartir con sus compañeros.”

*[It's important that they know how to share with their classmates.]*

**Pre-academic skills** such as knowing letters, numbers, shapes, and colors in both English and Spanish. Parents also felt it was important that children know how to spell and write their name before starting kindergarten.

“Que sepan por lo menos algo como escribir su nombre. Sabiendo el abecedario y los números de 1 al 20 de contar.”

*[They should at least know something like how to write their name. Know the alphabet and count from 1 to 20.]*

## Ready Families

Parents primarily wanted to be able to know what services and supports are available to them and their children, as well as know the process for enrolling their child in kindergarten and meet school staff.

**Learn about and access support** for them and their children. Parents wanted to be sure that they are accessing all the early learning programs they can, both to help them help their child, as well as to help their child directly, prepare for and make the transition to school.

“También saber cómo prepararlos para lo que les espera ellos cuando van a ir a la escuela.”

*[Knowing how to prepare them, what waits for them when they start school.]*

**Meet school staff** to know who they can talk to and turn to with questions, as well as understand daily and school year schedules. This includes the child's teacher, school principal, and school social workers.

## 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 teachers and other school staff, early learning providers, home visitors, parent educators, and health care providers.

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

**Additional resources** included **online resources** such as the school website, as well as educational or enrichment **videos**.

## 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. Participants especially valued those that are bilingual English-Spanish.

**Parenting education series**, especially those described as culturally relevant. Examples included Juntos Aprendemos [*Together We Learn*], and others provided by El Programa Hispano and Catholic Charities.

**Home visits** through Early Intervention, Healthy Families Oregon, Early Head Start, and Parents as Teachers.

**Preschool programs** such as Head Start and those administered through Oregon Child Development Coalition (OCDC), including Early Head Start and public preschool.

**Kindergarten transition programs**, specifically designed to help children and parents learn school and classroom expectations, meet school staff, and how to support learning at home.

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

### Ready Children

**Gain comfort with reading and books**, to enjoy story time in early learning and school settings, as well as at home. Parent emphasized the importance of building children's comfort in English, as well as connecting with Spanish-language books and culturally relevant content.

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"No sabe cómo leer las palabras, pero mira las imágenes y está explicándolos."

*[[Son] doesn't know how to read the words but he looks at the pictures and is explaining the pictures.]*

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**Gain comfort and confidence** with school-like routines and activities through experiences in a classroom setting.

**Opportunities to have time away from parents** was seen as helpful so children can learn to experience and develop comfort with increased independence.

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"En mi caso lo llevé a mi niño al Head Start y no quiso apartarse de mí, pero cuando fue a kínder estuvo muy feliz. Siente más independiente."

*[In my case, I brought my son to Head Start and he didn't want to separate from me, but when he went to kindergarten, he was really happy. He feels more independent.]*

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**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.

### Ready Families

**Build in opportunities for teaching and learning** through every day activities, such as counting or paying attention to shapes and colors when cooking, or going to the grocery store, for example.

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"Early Intervention fue muy buena ayuda. Y me dio mucho apoyo para ayudar a mi hijo. Yo pensaba que no tenía tiempo para ayudarlo, para enseñarle cosas como letras. Ellas me dieron muchas ideas de cómo hacerlo. Después íbamos en el carro cantando el abecedario. Y me ayudaron ellos y pude ayudar a mi hijo."

*[Early Intervention was a great help. They helped me and supported me a lot, for me to help my son. I thought, 'I don't have time to help him, to teach him things like letters.' They gave me a lot of ideas on how to do it. After, we would be in the car and singing the ABC song. They helped me a lot, and how I could help my son.]*

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**Opportunities to build relationships** with both early learning providers, teachers, and other parents was important for families to know who to talk with about questions or concerns about their child's learning.

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“Cuando empiecen a comunicarse con los papás, van conociendo mejor a los niños.”

*[When [teachers] start communicating with the parents, they get to know the child more.]*

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

Parents largely had positive experiences with the early learning programs they have accessed. The main suggestion for improvement was **to expand availability and access** of early learning programs, especially those at no- or low-cost, and those that are delivered bilingually English-Spanish. Parents most frequently mentioned wanting to see more children be able to be served by Head Start. However, families also wanted to see Plan ‘n’ Learn groups, for example, also be offered more frequently, rather than just for a few hours once a week.

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“Debería haber más programas que más gente tuviera la oportunidad de meter a los niños y a temprana edad aunque sea un tiempo para que aprendan antes de entrar en la escuela.”

*[There should be more programs for more people to have the opportunity to enroll their kids in early childhood programs before they start school.]*

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**Improve community awareness and outreach** of existing programs. Many participants felt that they learned about some programs too late for their child to participate, e.g., child was too old for them to participate in home visiting programs, or they were unaware of where to find information about programs in their home language.

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“O sea, más publicidad para la comunidad. Como hay muchas mamás que son mamás primerizas, apenas va un niño a la escuela y no se dan cuenta.”

*[More publicity for the community. There are a lot of moms who are sending their first child to school, and they don't find out about the programs.]*

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Offer **bilingual programs**, or continue to **prioritize and provide translation and interpretation** if programs are not bilingual. This includes ensuring that materials are translated. For example, one parent described her experience with the Play ‘n’ Learn Group she and her child participates in:

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“Tienen como papeles e información en nuestro idioma, y eso es muy importante. Y ahora, en cuanto uno llega a la escuela, siempre hay alguien que habla nuestro idioma. Entonces nos sentimos cómodos y en confianza de hablar en nuestro idioma.”

*[They have information in our language and that is very important. As soon as we get [to the school] there is always somebody who speaks our language. The songs are in Spanish and they welcome us in our own language. We feel comfortable with the trust that we can speak in our own language.]*

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

Parents described a range of health care services and support they have accessed in the area. Some participants described accessing private payer health care services, and others utilized Oregon Health Plan.

**Having health insurance** meant that families and children could be more likely to access regular services. Some participants described not being able to afford health coverage for everyone in the family, and would instead utilize the Emergency Room if they needed to see a doctor.

Participants accessed **in-office** health care services at the following locations:

- Kaiser Permanente clinics
- Legacy Emanuel
- Multnomah County East County Health Center
- Native American Rehabilitation Association (NARA) clinic
- Providence Gateway Medical Center

**Home visiting** was utilized by some participants, consisting of Early Intervention, parenting education, and other early childhood home visiting programs.

**Breastfeeding support classes** through clinics were utilized by some participants.

**Nutrition supports** through WIC were described as health supports to help their child grow and be healthy.

**School-based health services** included vision and hearing checks, as well as oral health exams.

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

Parents primarily talked about health services supporting their child's physical health and development through monitoring and check-ups. However, participants also described ways that health services helped them as parents monitor their child's growth and support their learning and development.

**Healthy development and nutrition supports** through WIC help children be healthy and therefore more likely to be ready for school.

**Home visiting** programs were described as supporting a healthy pregnancy and birth as well as monitoring developmental milestones and providing parents with information to help their child stay on a positive developmental path.

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*“Te dan muchas ideas para ayudarlo, como las actividades motoras, y están chequeando también que el niño esté bien, como actividades motoras. Cada vez que van ven si el niño hace todo en base su edad.”*

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*[[Home visitor] gives you a lot of ideas on how to help, like motor skills, and checking if your child is okay in their motor skills. They look to see he can do everything based on his age.]*

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**Maintaining up-to-date immunizations** was described by parents as a key role of health services, to ensure that children could participate in early learning programs and attend school.

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*“Los niño van temeroso porque tiene temor a la jeringa. Las doctoras que les van a poner las vacunas siempre le mete al niño algo, como algo positivo, de que ‘Mirá, es que tienes prepararte porque sin la vacuna, no vas a la escuela.’”*

*[The children are always afraid of the needle. The doctors always give the children something positive to prepare them. For example, ‘You have to get ready, because if you don’t get the vaccine, you can’t go to school.’]*

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One participant also had the experience of her health provider **supporting reading** at home. She shared:

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*“A mí en la clínica me daban tiempo de leer desde pequeños. Yo pienso que eso les ayudó a mis hijas porque a la más grande le gusta mucho leer.”*

*[The clinic also taught me to read to them starting when they were young. I think this helped them a lot because my oldest loves to read.]*

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## What would help improve health services to support school readiness?

Parents largely focused on improving the linguistic responsiveness of providers and health services overall.

**Build bilingual workforce** at all levels of providers. Participants expressed a preference for being able to speak Spanish with intake staff, nursing staff, as well as doctors, and appreciated clinics where materials were available in, and staff could speak, families' home language.

In the absence of bilingual health providers, **guarantee interpretation services** for families in their preferred language. Participants expressed disbelief that they were often in medical visits without any interpretation services, even after expressing a preference for speaking in Spanish. They felt that they miss important health information for themselves and/or their children.

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“No hablamos inglés, por lo que tratamos de ir a la cita y no ofrecen un intérprete en español. No hablan español y en la clínica no ofrecen. Eso es algo que es difícil, porque no podemos obtener detalles, por lo que podemos entender lo que está sucediendo.”

*[We don't speak English, so we try and go to the appointment, and they don't provide a Spanish interpreter. They don't speak Spanish, and at the clinic, they don't provide translators. That is something that is difficult, because we cannot get details, so we can understand what is going on.]*

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Further, participants wanted to **develop a stronger relationship** between the family and their child's provider, which would make it easier for families to raise questions and concerns about their child. Participants described feeling that they could not generally turn to their child's provider since overall, they did not have strong relationship with health care providers. However, one participant felt this did exist for them, and that they were better able to receive or ask for information about their child's development.

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“En las clínicas la doctora da información. O uno les pregunte y ellos dan información.”

*[At the health center, the doctor gives us information, or if we ask, they give us information.]*

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## Focus Group & Community Profile

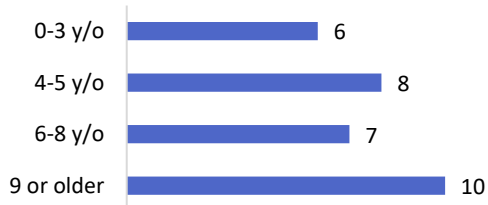
On February 7, 2018 Early Learning Multnomah (ELM), in partnership with EI Program Hispano and Metropolitan Family Services, hosted a Kindergarten Readiness Parent Focus Group in Fairview with 16 parents, including 12 moms and 4 dads. All reported parenting with a partner.

Participants were invited by the two Prenatal-through-3<sup>rd</sup> Grade (P3) Coordinators serving Salish Ponds and Wilkes Elementary schools, who coordinate family engagement activities and Play ‘n’ Learn groups. The format of the group was adapted to include Parent Café<sup>3</sup> elements, facilitation was in Spanish with simultaneous English translation, and discussion took place in 3 small groups.

The **average participant age was 36** and ranged from 25 to 47.

The **average number of children per household was 3** and ranged from 2 to 5.

### Ages of Children of Focus Group Participants

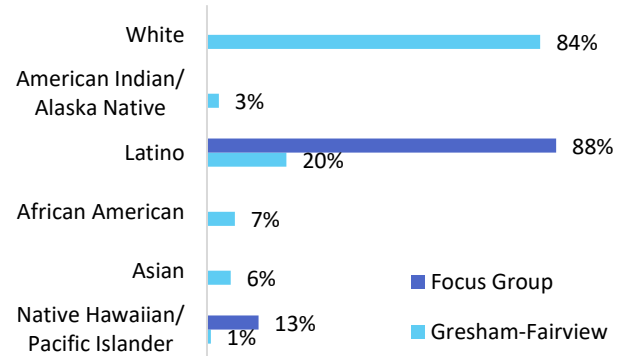


*“Aquí hay mucha gente de dónde estoy yo, eso me hace sentir como en mi pueblo.”*

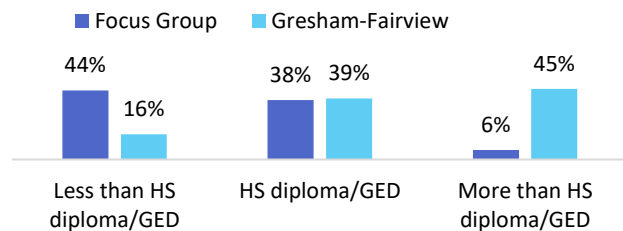
*There are a lot of people here from where I’m from and that makes me feel at home.*

Participants reported that they like raising their children in the community because of the sense of **connectedness, feeling supported** by people and programs, and **having family** members nearby.

### Race/Ethnicity of Focus Group Participants & Gresham-Fairview<sup>4</sup>



### Educational Attainment of Focus Group Participants & Gresham-Fairview<sup>5</sup>



Services Utilized by Focus Group Participants	% Yes
Public library	94%
SNAP	56%
TANF	38%
OHP	75%
WIC	63%
Early Head Start	13%
Head Start	6%
EI/ECSE	38%

<sup>3</sup> For more about the Parent Café model, visit: [www.beststrongfamilies.net/build-protective-factors/parent-cafes/parent-cafe-model/](http://www.beststrongfamilies.net/build-protective-factors/parent-cafes/parent-cafe-model/)

<sup>4</sup> 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](http://factfinder.census.gov/faces/tableservices)

<sup>5</sup> 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](http://factfinder.census.gov/faces/tableservices); Note, 2 participants did not provide educational attainment information