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STRENGTHENING SOCIAL AND
EMOTIONAL HEALTH

Pre-K PACE Community Report

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MAY 2009

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Highlights

This first Pre-K PACE Community Report reflects the efforts of many initiatives, starting with the Kindergarten PACE measure, created more than a decade ago. Schools in a number of U.S. communities employ the K-PACE, thereby setting the stage for future development of other age-appropriate PACE measures. Each of the PACE measures has two purposes: first, as an individual screening measure to assess a child's functioning in multiple domains, and second, as a community-wide survey of health, family functioning and children's development.

Based on this initial implementation, there are a number of important findings that we wish to highlight as specific community needs:

- ❖ The rate of incarcerated parents was 17% from this sample; parents/guardians reported that their children were already experiencing compromised functioning in the social and emotional areas. *Additional research is needed to tell us more about this vulnerable population.*
- ❖ Three quarters of the surveyed children (75%) had warm, close relationships with three or more adults, while 3% reportedly had **no** such relationship. *Children with no significant relationships are particularly vulnerable, and require immediate attention by social support systems – educators, medical professionals, clergy, etc.*
- ❖ Approximately six out of ten respondents in this sample stated they felt safe in their homes or in their relationships with other adults, which indicates that approximately 40 percent did not feel safe! *This is a startling finding and should be pursued by community leaders for specific policies to strengthen and support neighborhoods, families and adult-relationship building strategies.*
- ❖ Many Pre-K parents, similar to Kindergarten parents on the K-PACE, recognized concerns in their child's development, and indicated the need for help on behalf of their child. The areas of greatest need in this sample were communication, behavior and fine motor. *This suggests that those who work with Pre-K parents should attend to parents' observations and make sure appropriate evaluations and services are provided as early as possible.*
- ❖ The addition and integration of the play skills into the Pre-K PACE serves as a pre-academic predictor, as well as social and emotional functioning. *Relationships between these variables and other conditions in the child's life will provide a basis for additional research and understanding competencies.*

Administration of the Pre-K PACE Measure

Developed at Children's Institute, Pre-K PACE is a measure that serves two functions, first as an individual screening measure and second as a community-wide survey of health, family functioning and children's development. Currently in the piloting stage, it was administered during the 2007-2008 school year to more than 1000 parents of children attending preschool in Rochester, New York. Specifically, the measure was administered through the pre-k quality assessment system, called the Rochester Early Childhood Assessment Partnership (RECAP), which is a partnership among the Rochester City School District, community-based early-education providers and Children's Institute.

As this was the first year's administration of the Pre-K PACE, there are no comparison data available for some of the questions that were piloted; some areas of questions, however, have been utilized in several of Children's Institute's measures, such as the Child Health Information (CHI), Kindergarten PACE and a recently conducted national survey. Kindergarten PACE has been administered to parents of incoming kindergarten students in the Rochester City School District for the last 11 years, and a recent national survey using the K-PACE was administered by Harris Interactive in 2007 to 1,200 parents in the United States.

In this first year's report of the Pre-K PACE measure, findings within the respective sections are described. A brief description on the development of the measure is provided in the next section.

Development of Pre-K PACE

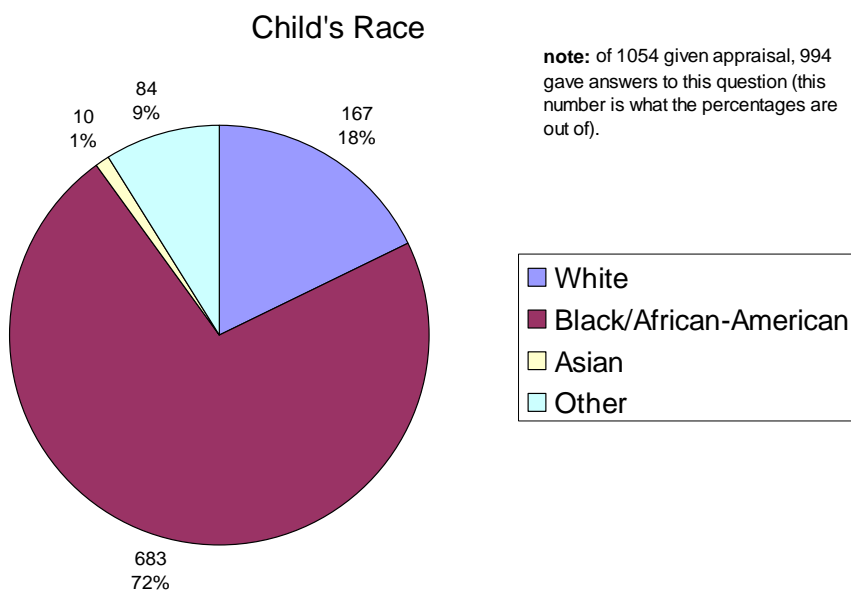
The series of Parent Appraisal of Children's Experience (PACE) screening measures originated with Kindergarten PACE. The Kindergarten PACE, now in version 2.1, similarly serves the dual role of an individual screening measure and a community-wide survey of health, family functioning and children's development. The PACE captures information from multiple domains of a child's functioning, with the eight domains that include family demographic information, child care history, general health information, motor and sensory functioning, speech and language development, home environment and play skills.

Following the development and implementation of the initial PACE, now commonly referred to as Kindergarten PACE, two similar screening measures for other ages were developed. This emerged from the increased recognition for the need of a prompt-identification mechanism to facilitate the coordination of services to children developing with delayed milestones or families requiring additional support services. To address this need, Children's Institute's developed additional age-appropriate screening measures, including the Elementary PACE and the Youth PACE. Given the tremendous developmental growth and needs of the young child, however, it became necessary to develop two measures: ToddlerPACE, which targets the 12-24 month old, and Pre-K PACE, which targets the preschool age child, approximately 24-48 months old.

Both of these measures were developed using literature reviews, developmental-assessment guides and multiple interviews. Staff members at Children's Institute interviewed early intervention practitioners, special educators, Head Start teachers, physicians, amongst others. The interview data were then reviewed in tandem with developmental milestones. From this comprehensive qualitative review, certain trends emerged, providing the layout for measure sections, and culminating in the early versions of these two measures. Sections on demographics, health indicators and life experiences, were taken from the Kindergarten PACE.

Demographics

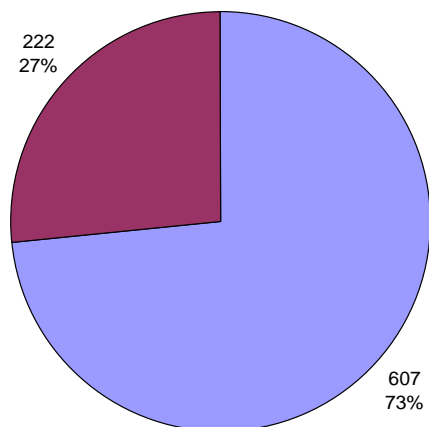
The Pre-K PACE collects demographic information that informs school districts, community-health agencies and policymakers, regarding the characteristics of the population. This section collects information on the child's race, child's ethnicity, household language, father's and mother's education level, mother's and father's age, etc.



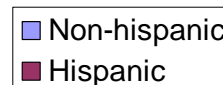
Child's Race

In the RECAP pre-k sample of 994, the largest group is the Black/African-American group (72%); the second largest group is the white group (18%). The smallest group is Asian (1%).

Child's Ethnicity



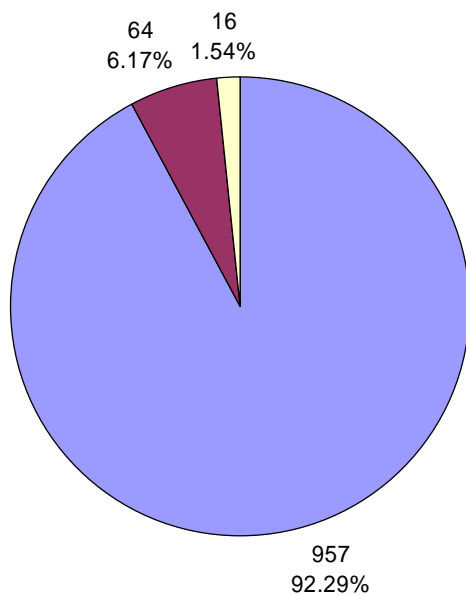
note: of 1054 given appraisal, 829 gave answers to this question (this number is what the percentages are out of).



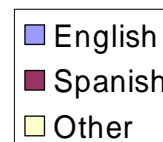
Child's Ethnicity

Of the 829 respondents, 73% are non-Hispanic, and 27% are Hispanic.

Household Language



note: of 1054 given appraisal 1036 gave answers to this question (this number is what the percentages are out of).

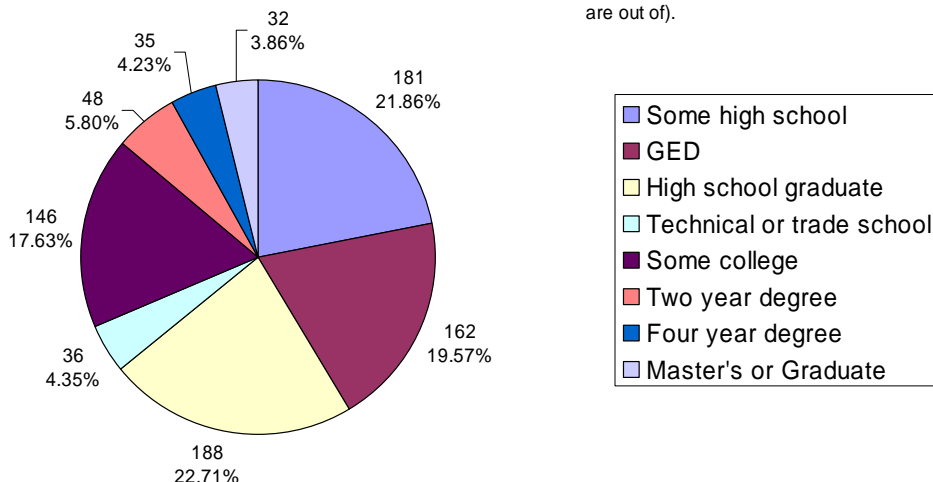


Household Language

The most common household language is English at 92%, followed by Spanish at 6%.

Father's Education Level

note: of 1054 given appraisal 881 answered from which 53 were unsure. 828 gave sure answers to this question (this number is what the percentages are out of).

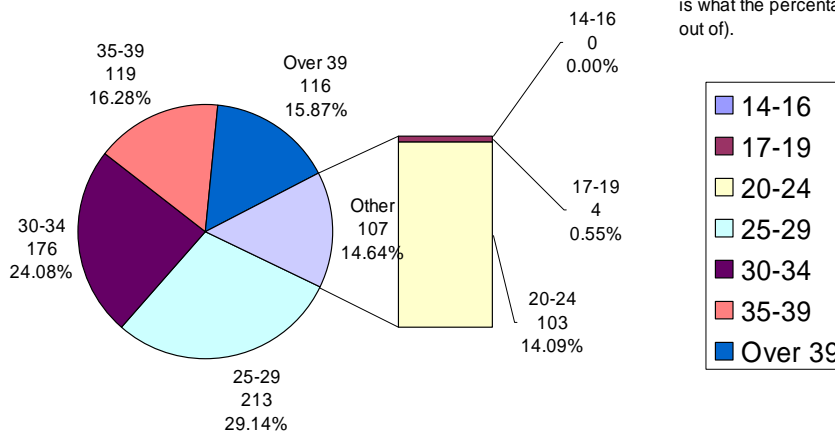


Father's Education Level

For fathers, the most common reported amount of attained education is the high-school graduate level of 23%, followed by “some high school” at 22%. The third most frequently-reported level of education is the GED. “Some college” makes up 18 percent of the sample. The smallest category is approximately 4%, who earned a master’s or graduate-degree level.

Father's Age

note: of 1054 given appraisal 731 gave answers to this question (this number is what the percentages are out of).

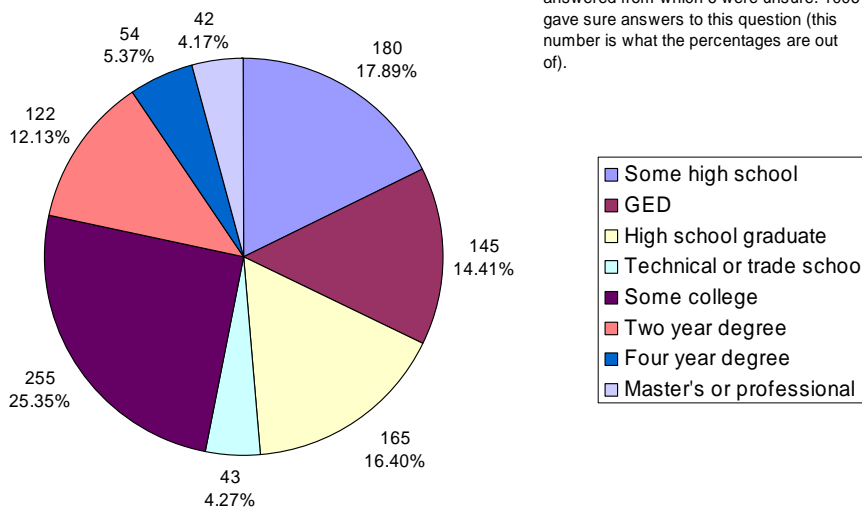


Father's Age

The three largest groups are as follows: most fathers fall into the 25-29 (29%) age group; the second most frequently-reported age group is the 30-34 (24%), followed by the 30-34 age group (24%).

Mother's Education Level

note: of 1054 given appraisal 1012 answered from which 6 were unsure. 1006 gave sure answers to this question (this number is what the percentages are out of).

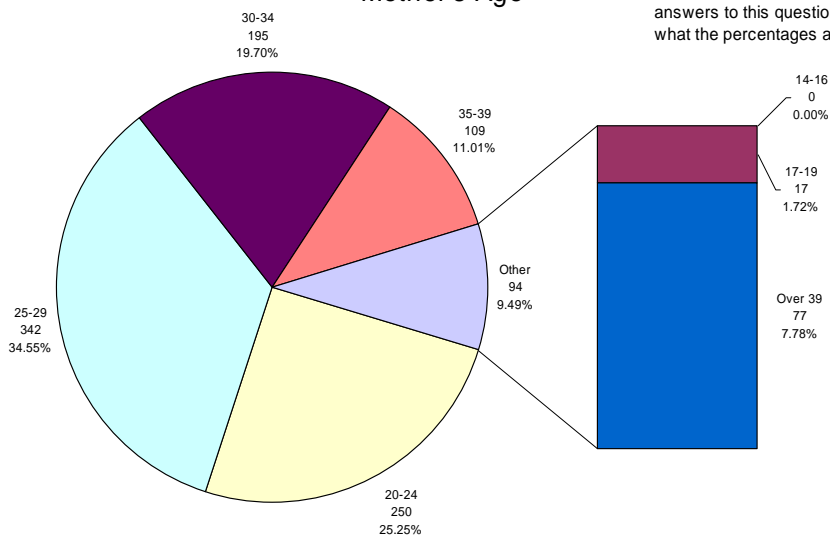


Mother's Education Level

For mothers, the most common amount of attained education is some college, at 25%. The second most frequently reported level is some high school (18%), followed by high-school graduate (16%). Approximately 4% report achieving a master's or professional degree.

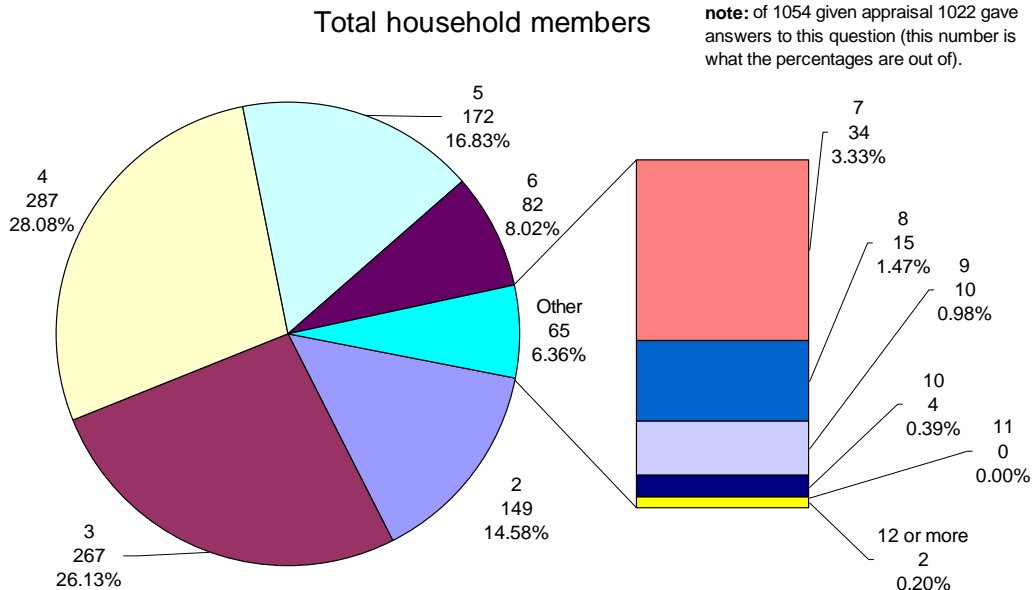
Mother's Age

note: of 1054 given appraisal 990 gave answers to this question (this number is what the percentages are out of).



Mother's age

The age group that most mothers fall into is 25-29 (35%); the second most frequently-reported age group is the 20-24 group (25%), followed by the 30-34 age group (20%). Of particular note is the 17-19 age group, at approximately 2%.



Total household members

The most frequently-occurring family size is four (28%); the second most frequently-occurring family size is three (26%), followed by five family members (17%).

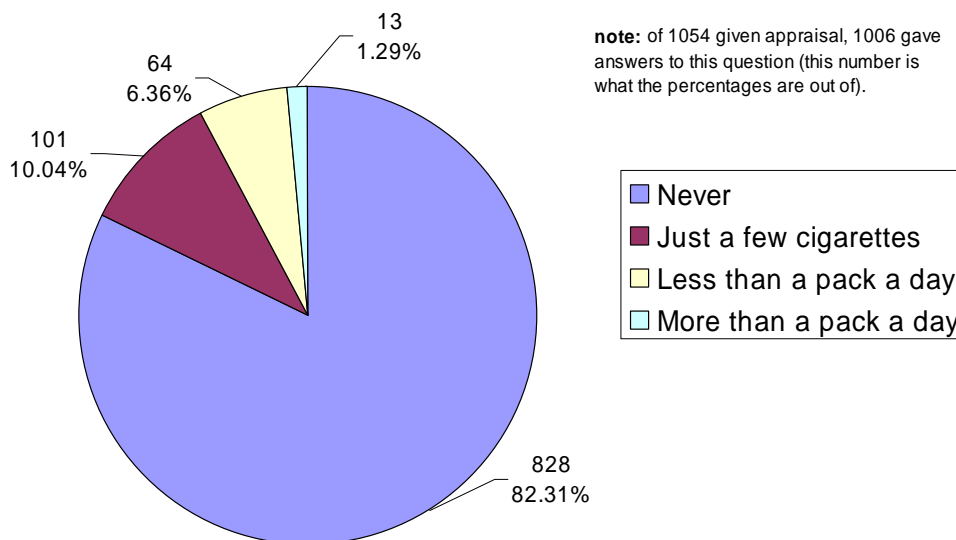
General Health

As with the Kindergarten PACE, Pre-K PACE has a series of comprehensive questions that collect health information on health-related items. These include the birth history, health events, allergies and the frequency of medical visits. In addition there is a comprehensive series of questions that addresses asthma.

Prenatal and Neonatal Outcomes

In this section, prenatal and neonatal questions are asked. Two questions target unhealthy habits during the mother's pregnancy with the surveyed child: her frequency of drinking alcoholic beverages and her frequency of smoking. The parents who completed the Pre-K PACE reported these percentages: 96% of the mothers did *not* drink alcohol during their pregnancy; while 17.7% reported the mother did smoke during her pregnancy with the child. Breastfeeding was reported by 57%, with only 15% breastfeeding more than six months. Another health indicator is the number of premature births; this Pre-K PACE sample reports a prematurity rate 8.7%. The next four pie charts show this information graphically.

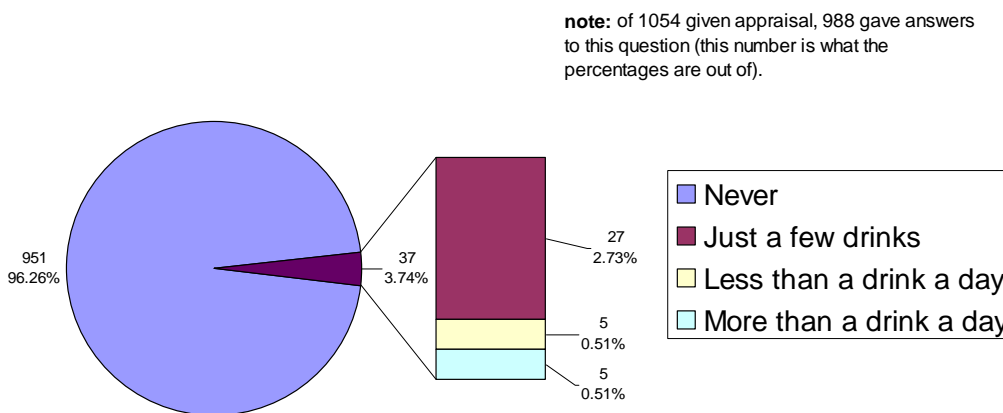
Mother's smoking habits during pregnancy



Smoking during pregnancy

More than three quarters (82%) of mothers reported that they did not smoke during their pregnancy, however, nearly one-tenth (8%) reported that they smoked more than a few cigarettes each day.

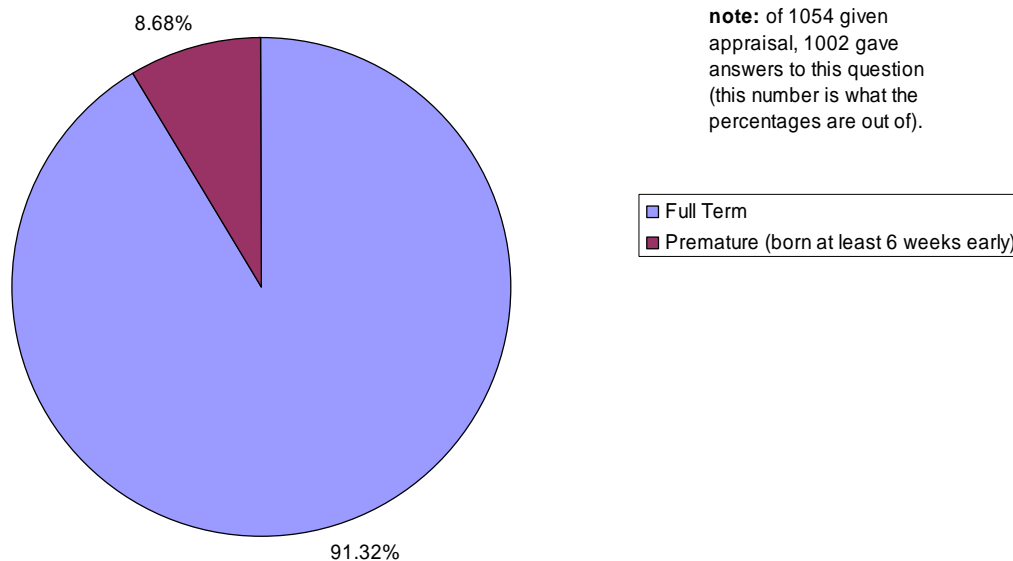
Mothers drinking habits during pregnancy



Drinking during pregnancy

Almost all of the women (96%) reported not drinking during their pregnancy, though 4% report that they had at least a few drinks throughout their pregnancy.

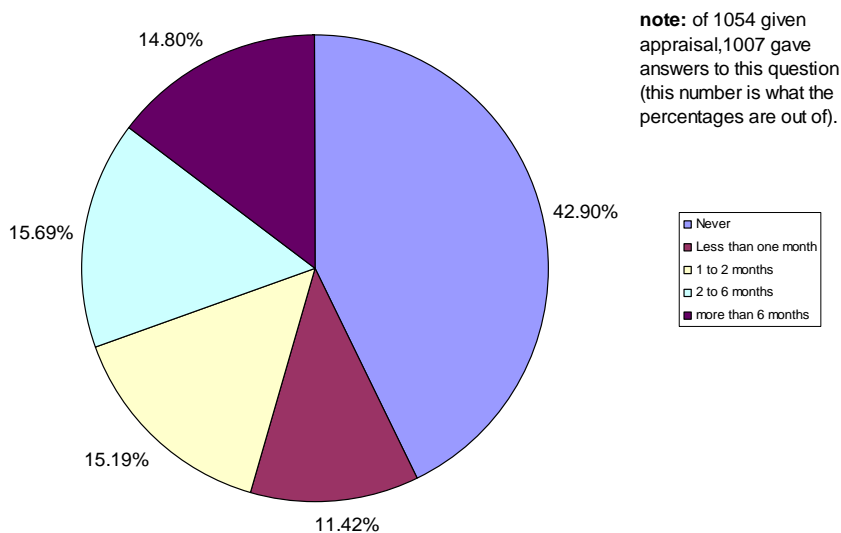
Child's Birth was ...



Full term and premature births

Full-term births account for more than 9 out of 10 (91%) births, and premature births were 9%.

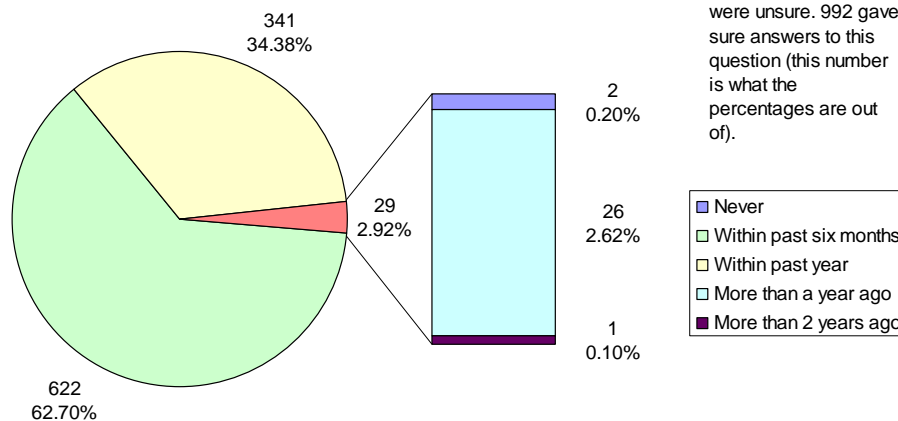
Duration child was breast-fed, if at all



Breastfeeding

More than half of all mothers (57%) reported at least some breastfeeding, with approximately one in ten (11.42%) breastfeeding more than six months.

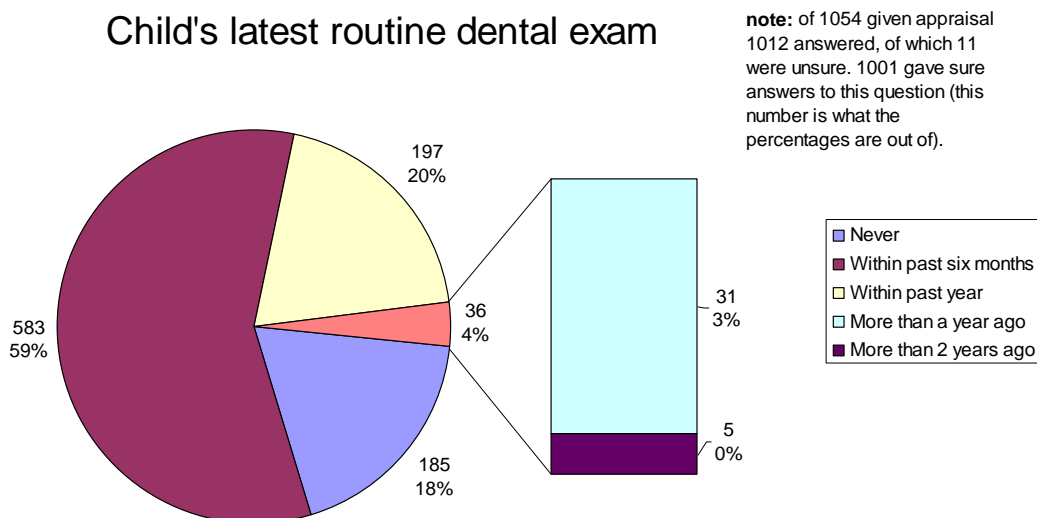
Child's latest routine physical



Child's latest routine physical

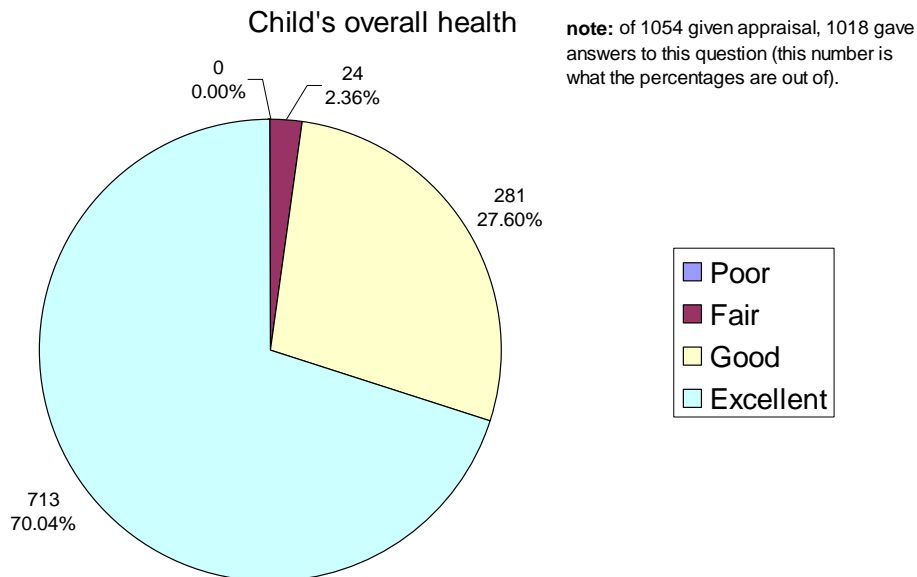
Almost all of the respondents' children (97%) have had a routine physical, though a very small group (3%) had not.

Child's latest routine dental exam



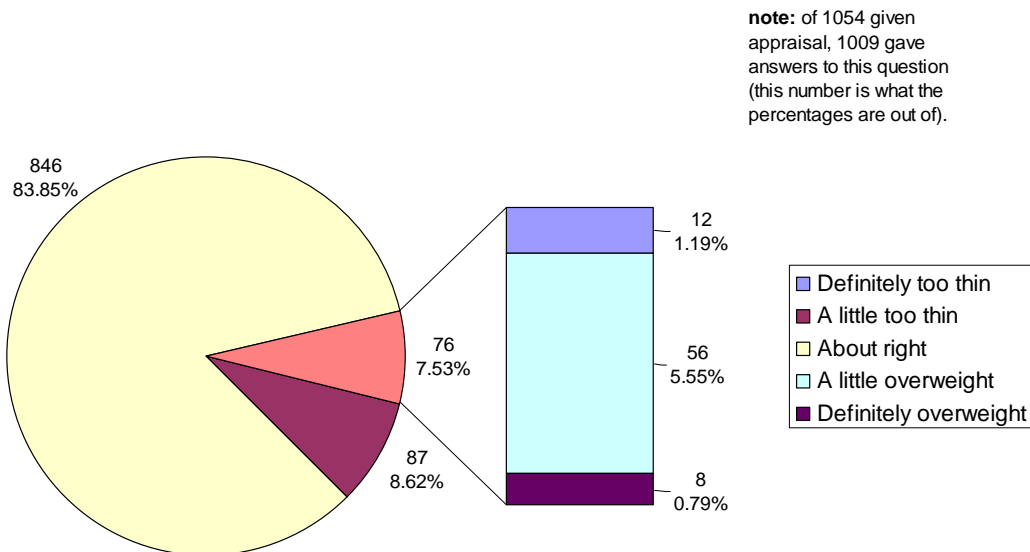
Child's latest routine dental exam

Within the past year, approximately three-fourths (79%) of the children have had a routine dental exam, while 18% never have had an exam. A very small group (4%) had a dental exam more than two years ago.



Nearly 98% of all parents/guardians have described their child's health as "good" or "excellent;" approximately 2% are saying their child's health is "fair." In this sample, no one reported their child's health as "poor."

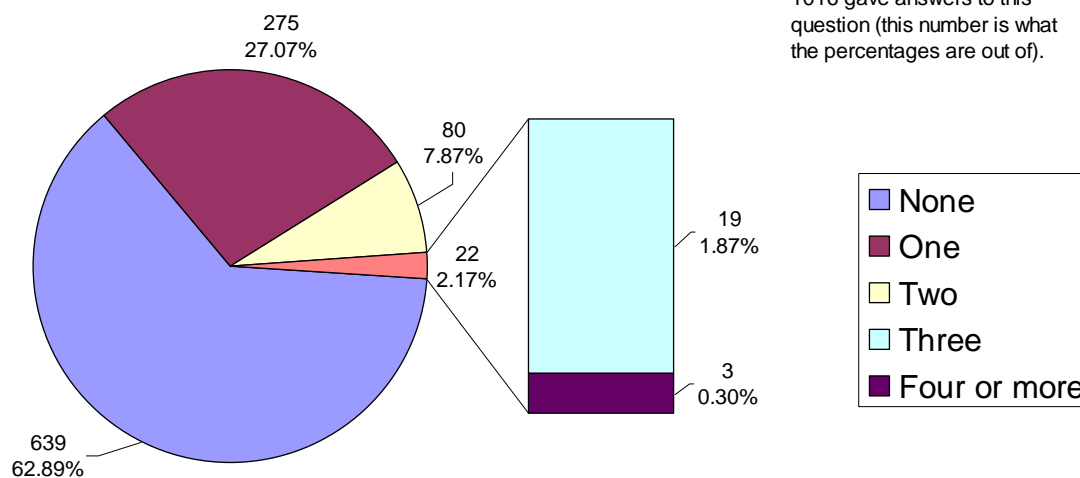
Parent/Guardian thinks child is...



Parental perception of child's weight

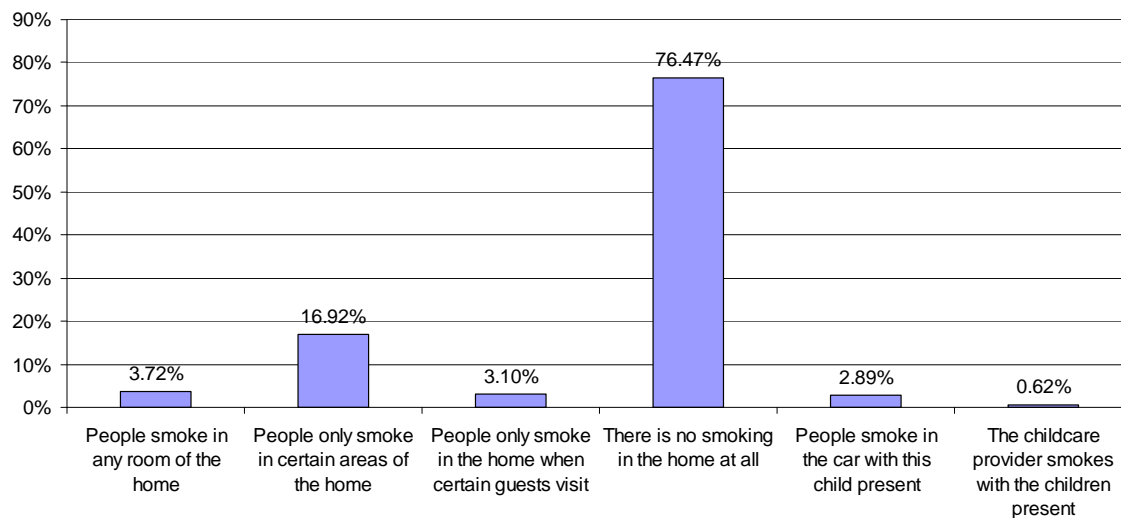
More than three quarters (83.85%) of the parents reported believing their child's weight was "about right," though 6.4% of the parents believe their child is overweight.

Smokers in home



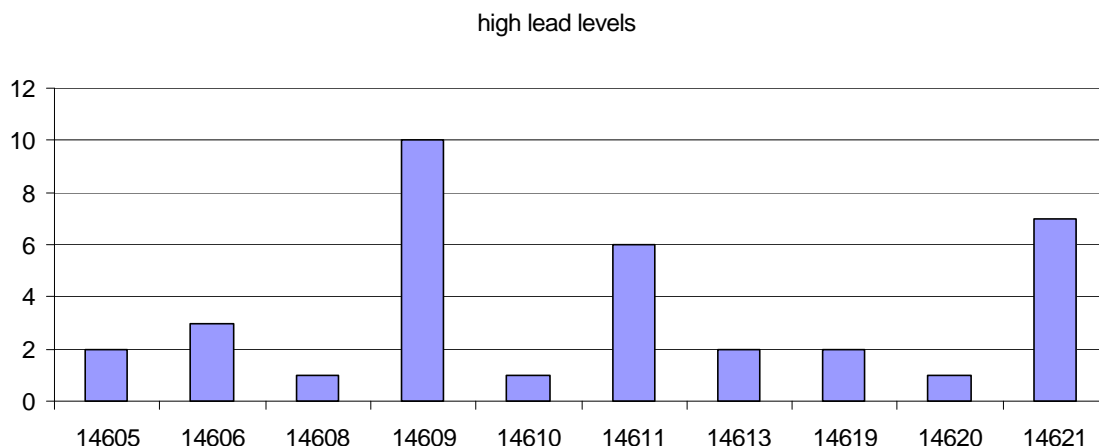
Smoking in child's environment

note: of 1054 given appraisal, 969 gave answers to this question (this number is what the percentages are out of).



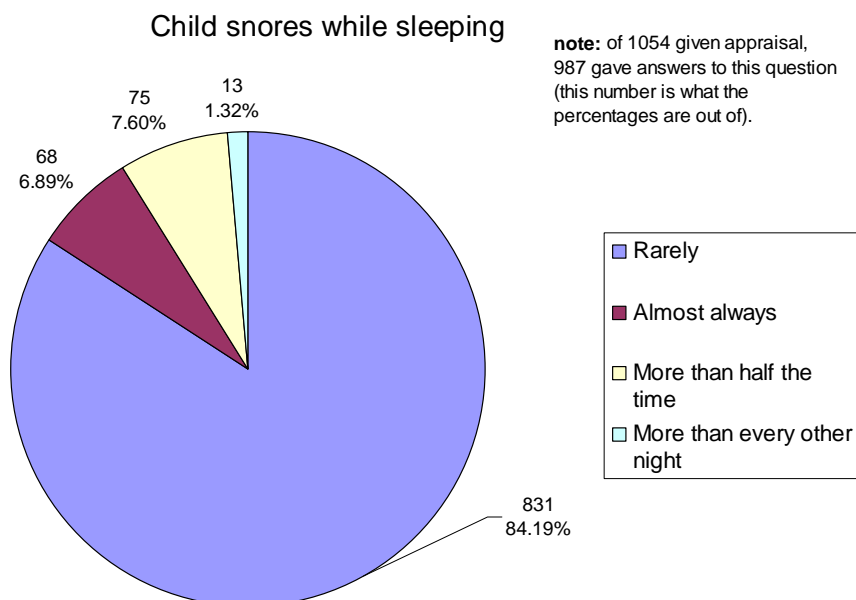
Smokers in home

Approximately 63% have reported that there were NOT any smokers in the home, though 70% report that there was not any smoking in the home at all.



Lead levels

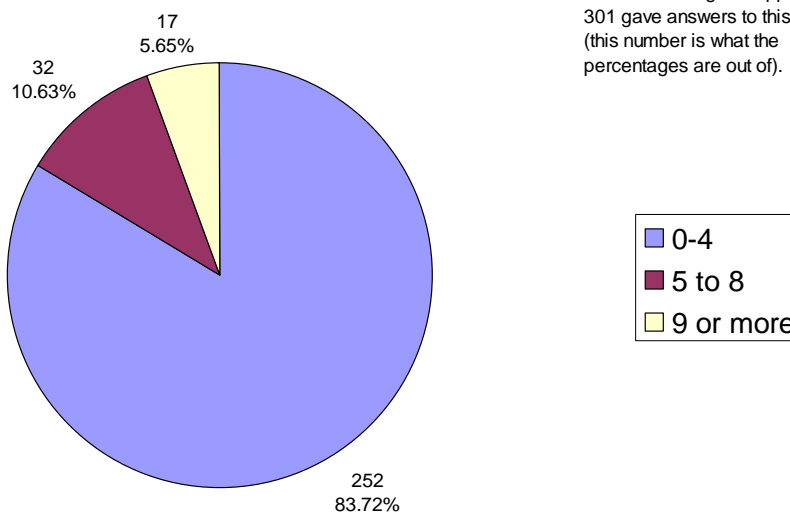
Three ZIP Code areas had very high lead levels: 14609, 14621, and 14611. Children living in these areas were especially vulnerable to lead poisoning, *which suggests to early-childhood professionals that children and their families require additional blood testing to assess the status of lead poisoning.* High levels of lead in the body can cause problems with the brain and other organs, and even very low levels can cause difficulties with learning and attention.



Snoring

Many parents reported that their child is NOT snoring (84%), with the balance (16%) of children as having some type of sleep disturbance/interruption (quality-of-sleep concern) as a result of snoring with some regularity.

Child's ear infections to date



Ear Infections

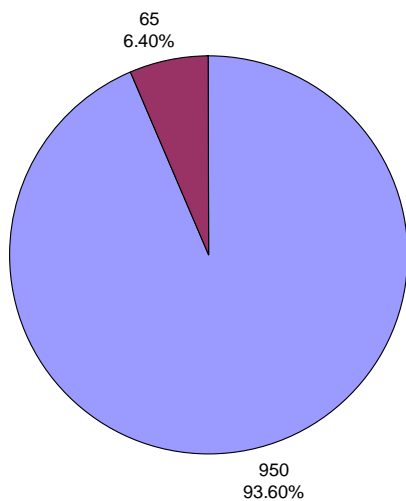
Not quite one third (28.55%) of the parents reported that their child has experienced multiple ear infections, with the breakdown as follows: 0-4 infections at 84%; 5-8 infections at 10.6%; and 9 or more at 5.6%.

Asthma

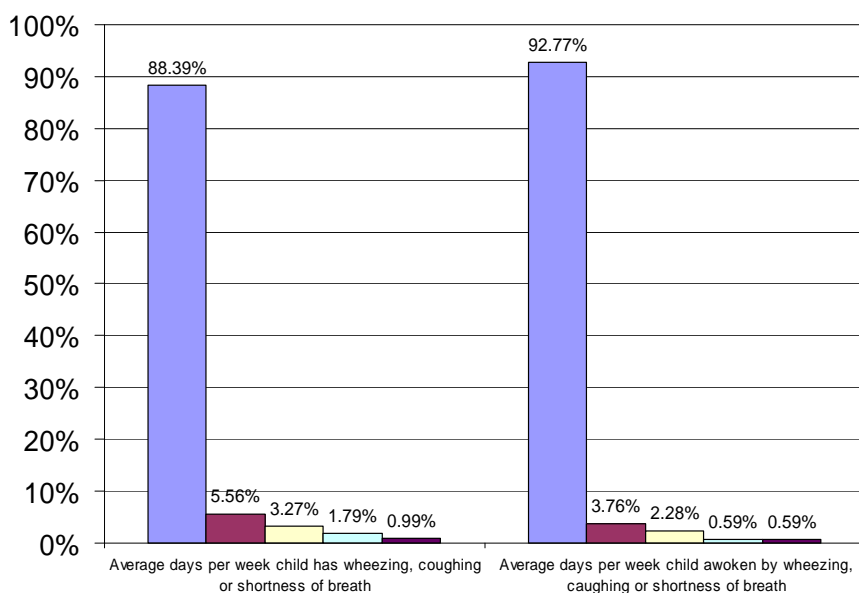
As in the Kindergarten PACE, the Pre-K PACE asks six questions about asthma. This series of questions addresses the physician diagnosis, the frequency of asthmatic symptoms within a given week, and the status of daily medication. Nearly one fifth (19.72%) of this sample reported that their child has been diagnosed with asthma. Approximately 8% take daily medication to prevent symptoms and almost 10% (9.9%) children have required emergency medical visits for asthma.

The following charts illustrate these asthma rates.

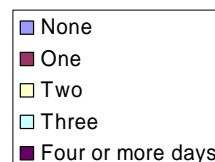
Play interrupted by child's breathing problems

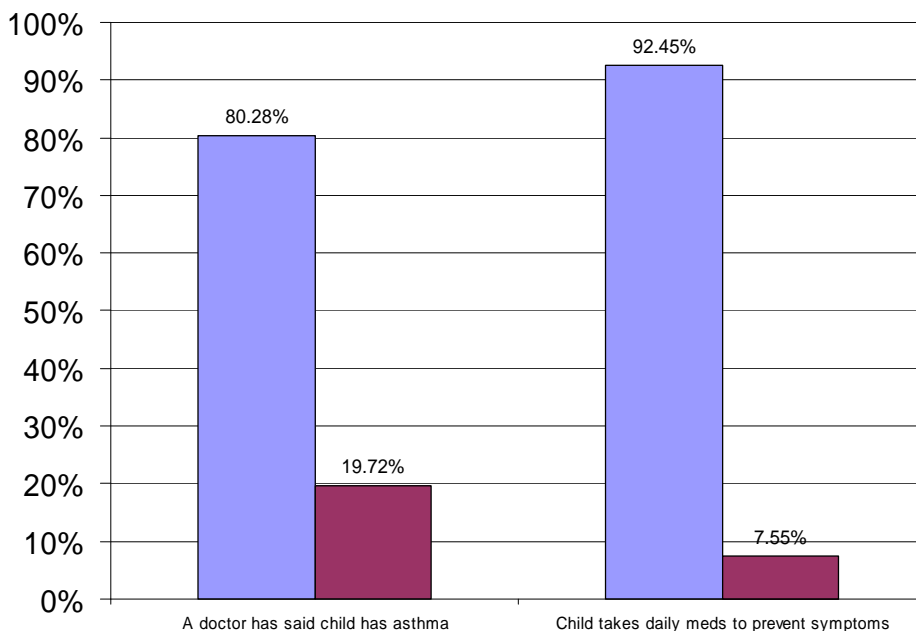


note: of 1054 given appraisal, 1015 gave answers to this question (this number is what the percentages are out of).



note: of 1054 given appraisal, consecutively: 1008 and 1010 gave answers to this question (this number is what the percentages are out of).

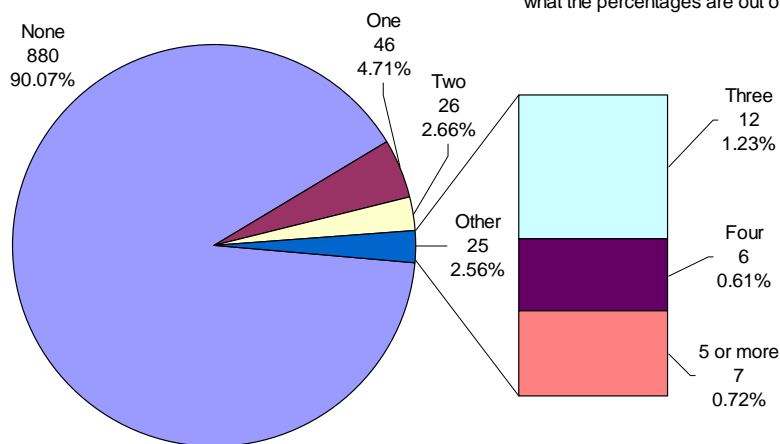




note: of 1054 given appraisal, consecutively: 1004 and 980 gave answers to this question (this number is what the percentages are out of).



During past year child has needed emergency medical visits for asthma



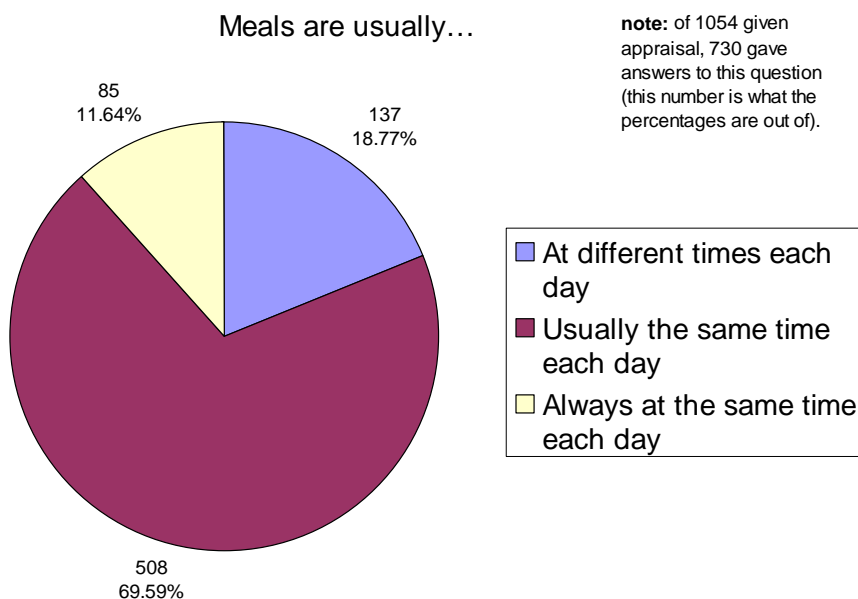
note: of 1054 given appraisal, 977 gave answers to this question (this number is what the percentages are out of).

Family and Life Experiences

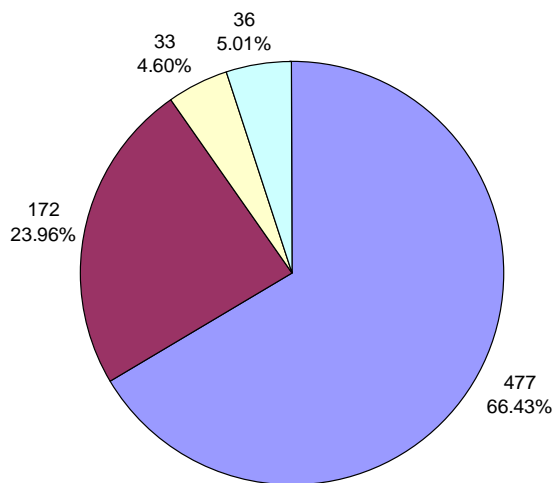
This next section consists of multiple areas that illustrate the child's experiences within his or her family's life: routines, home environments, the mental-health inventory of the parent/guardian, development of play skills and life experiences.

Routines

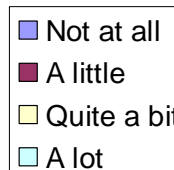
Most children have experienced stable routines in their daily life, with more than three quarters having had meals at regular times (81.2%), regular bathing (99%), and a regular bedtime schedule (84.8%). For 15%, however, their bedtime schedule is at different times or is later than 9 p.m. (indicating perhaps insufficient sleep).



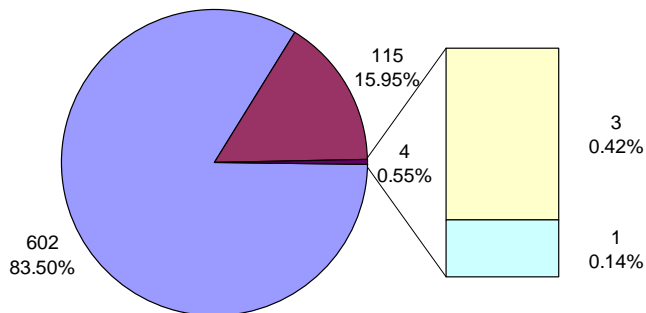
Concerned about child's eating habits



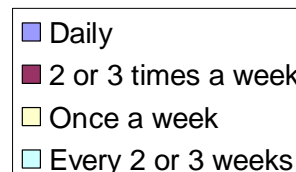
note: of 1054 given appraisal, 718 gave answers to this question (this number is what the percentages are out of).



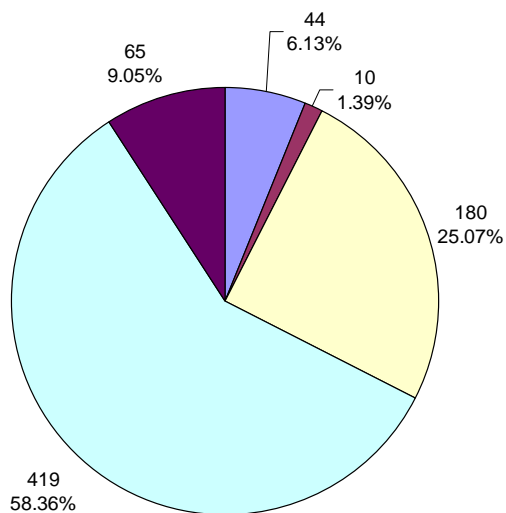
Child is given a bath...



note: of 1054 given appraisal, 721 gave answers to this question (this number is what the percentages are out of).



Bedtime is usually...



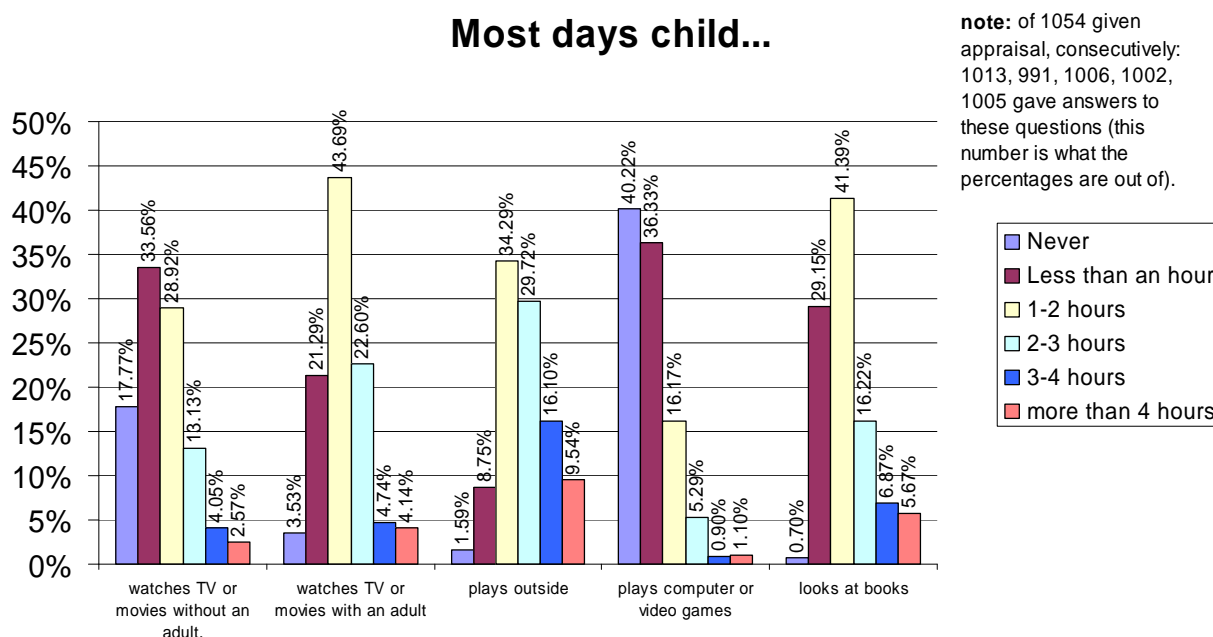
note: of 1054 given appraisal, 718 gave answers to this question (this number is what the percentages are out of).

- Different time each day
- 6 to 7 p.m.
- 7 to 8 p.m.
- 8 to 9 p.m.
- Later than 9 p.m.

Home Environment

Daily Activities and Discipline

This section on the home environment reveals a lot about the activity on typical days in the children's lives: 89.6% were playing outside at least one hour and almost all (99%) were looking at books daily, with most (96.5%) children watching TV with an adult. "Screen-time" habits – watching TV or playing the computer/video games at least three hours a day – were high for some children: 6.6% were watching TV *without an adult*, 8.9% were watching *with an adult*, and 2% were playing computer or video games.

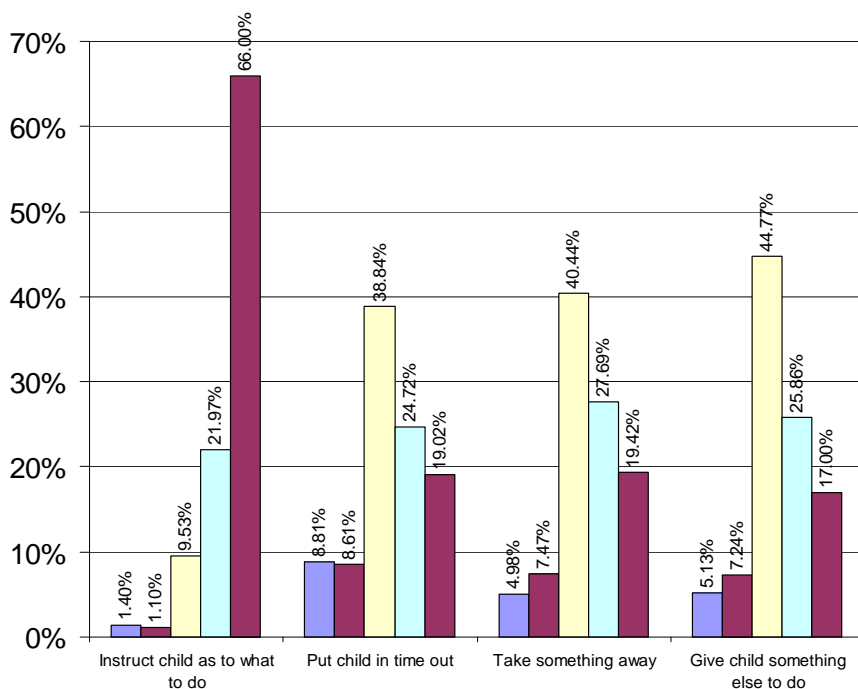


The total average TV time for this group of children was 2.85 hours, and the total average screen time was 3.48 hours (screen time is the combined TV and computer/video time). In a given day, the total average play time (without screen) was 4.18 hours.

Discipline in the home

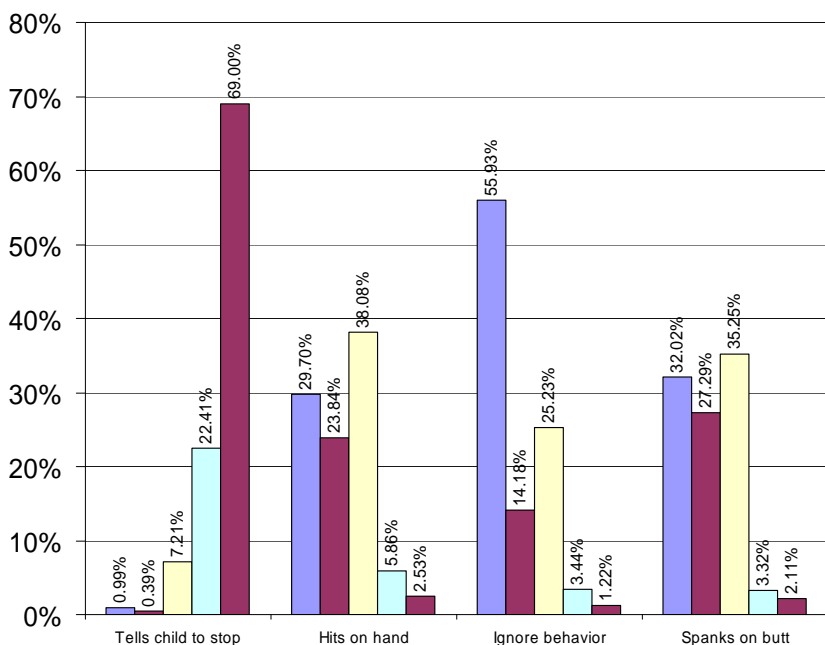
Eight questions ask about discipline with the header, "When this child misbehaves, I ...". For the frequencies presented here, responses of "usually yes" and "always" were grouped together. Several methods were used very frequently, where the most popular form was reported as "tell child to stop" (91.4%). Strategies on redirecting the child had the following frequencies: "take away something" (47.1%); "put child in timeout" (43.7%); "give child something else to do" (42.8%). The three least frequently reported – but also where the opportunity for parent/guardian education exists – were "hit on hand" (8.4%), "spank on butt" (5.4%) and "ignore behavior" (4.6%).

When this child misbehaves caretaker...



note: of 1054 given appraisal, consecutively: 1013, 990, 987, 993, 997, 999 gave answers to these questions (this number is what the percentages are out of).

When this child misbehaves caretaker...

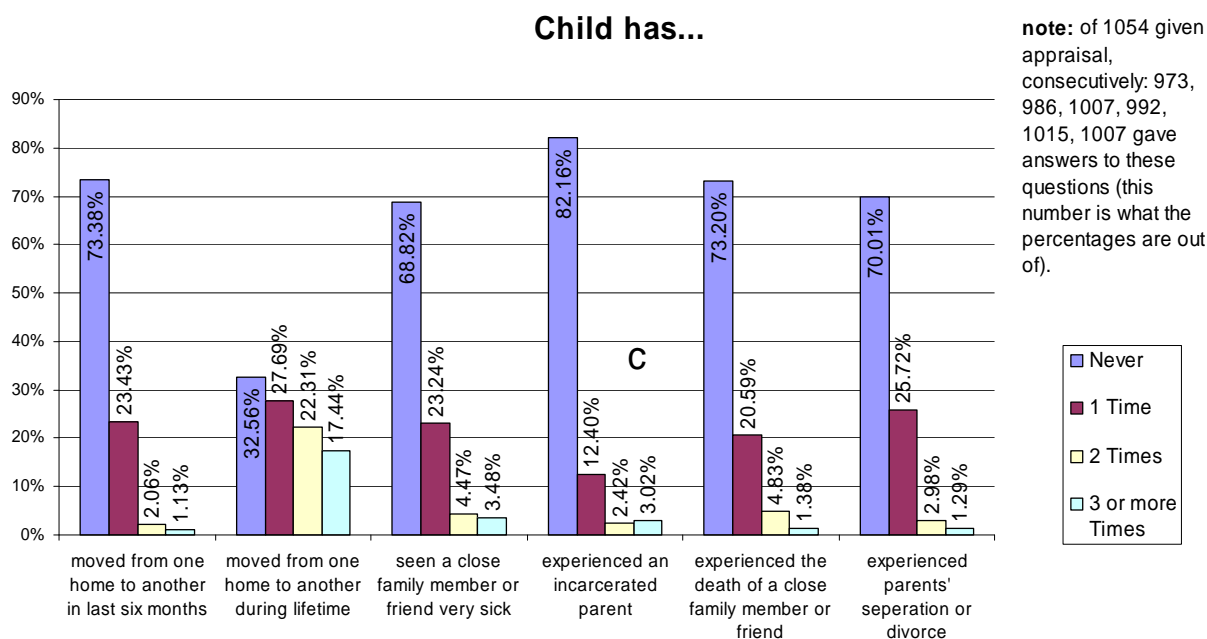


note: of 1054 given appraisal, consecutively: 1013, 990, 987, 993, 997, 999 gave answers to these questions (this number is what the percentages are out of).

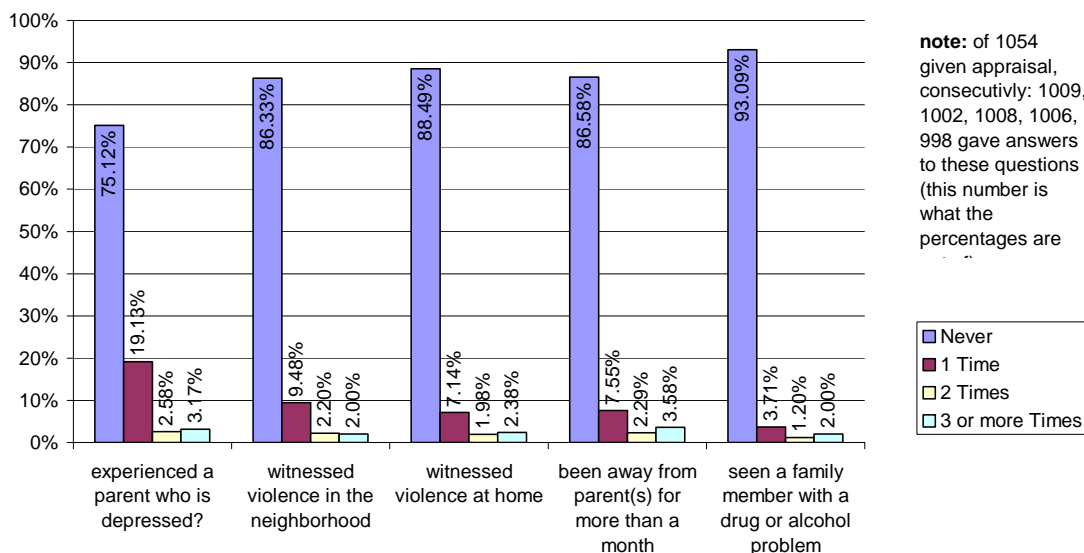
Family Life and Experiences

These two bar charts depict negative life experiences in the surveyed child's life. Where a child has experienced any of these life stressors, as indicated by these eleven questions in the Life-Experiences Scale, the child is likely to encounter additional difficulty in both school preparedness and social and emotional functioning. For children who have experienced two or more stressful life events, at-risk behavior develops in the form of lowered functioning, particularly in the areas of frustration tolerance, peer sociability and adaptive assertiveness (Sterling, Cowen, P., Lotyczewski, & Boike, 1985).

In this sample, "moving from one home to another" – one or more times – is the life-experience area with the highest incidence, occurring at 39.75%; the second highest area, at 31.18%, is "seen a close family member or friend who is very sick," followed by "experienced the death of a close family member or friend." Of interest with this Rochester sample is the high level (17.84%) of incarcerated parents.

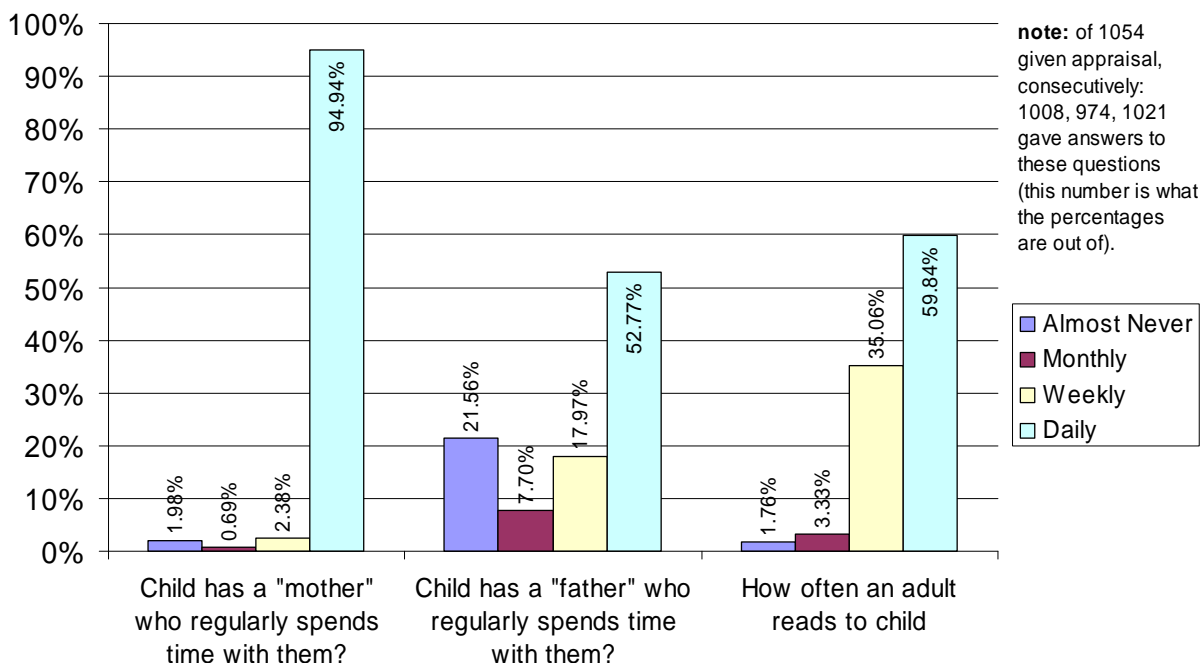


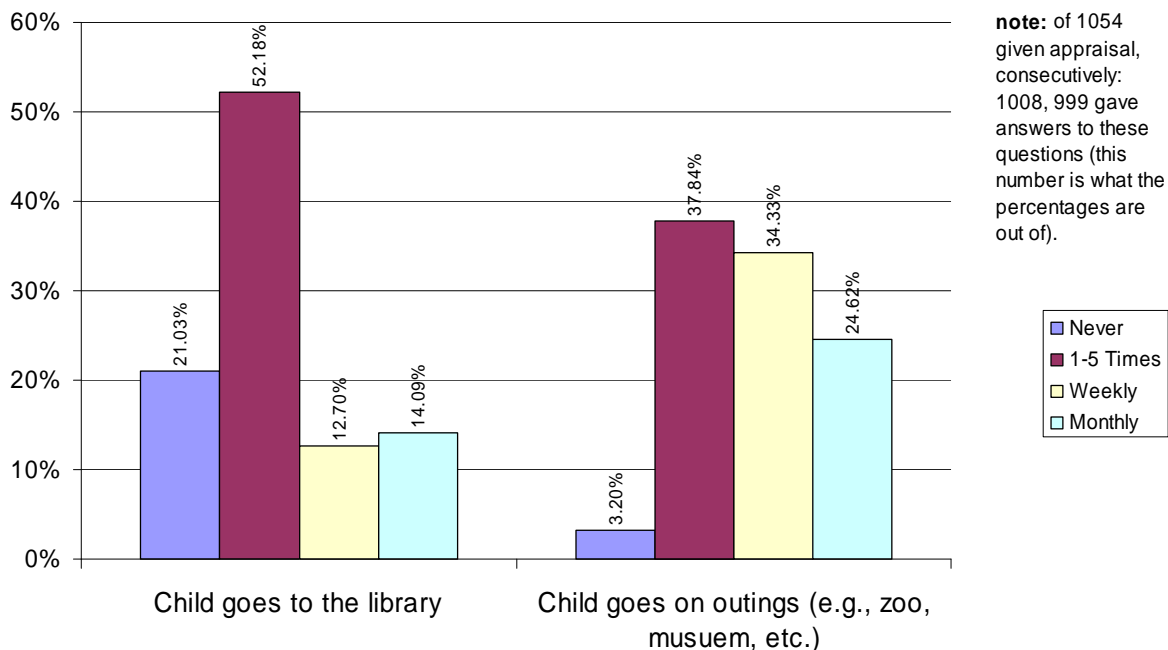
Child has...



Protective Factors

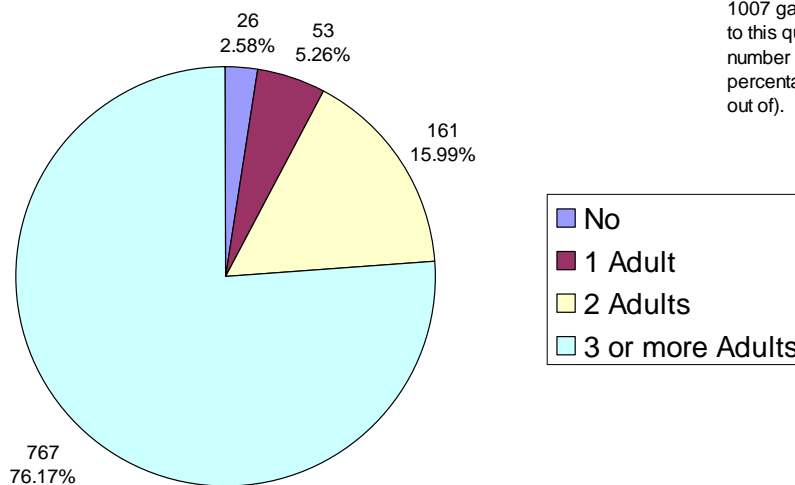
For positive life experiences, or “protective factors,” many of the children have experienced either going to the library at least a few times (86%), or going on an outing (96.8%). In terms of parent/guardian involvement, 94% of “mothers” spend time daily with their child, while just half (53%) of “fathers” were spending time regularly. Most children (94.9%) were being read to either weekly or daily.





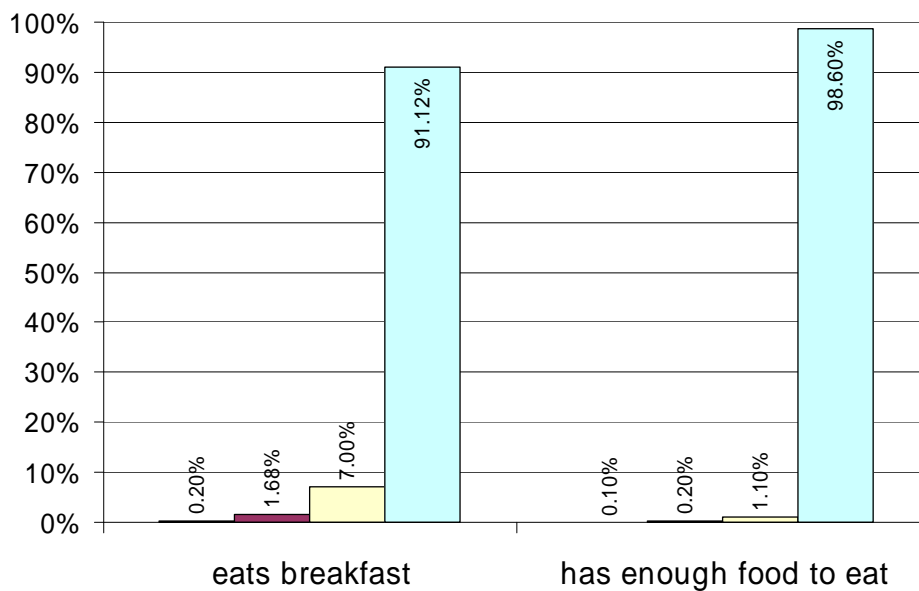
Child's Relationships

Child has a warm close relationship with some adults

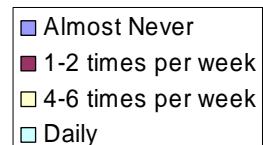


Three quarters (76.17%) of the surveyed children had warm, close relationships with three or more adults, while 3% reportedly had **no** such relationship. *These children are particularly vulnerable and require immediate attention by social support systems – educators, medical professionals, clergy, etc.*

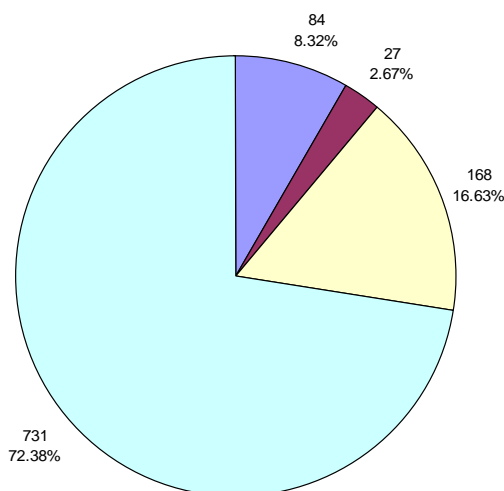
How often child...



note: of 1054 given appraisal, consecutively: 1014, 999 gave answers to these questions (this number is what the percentages are out of).



frequency child talked about with other family members

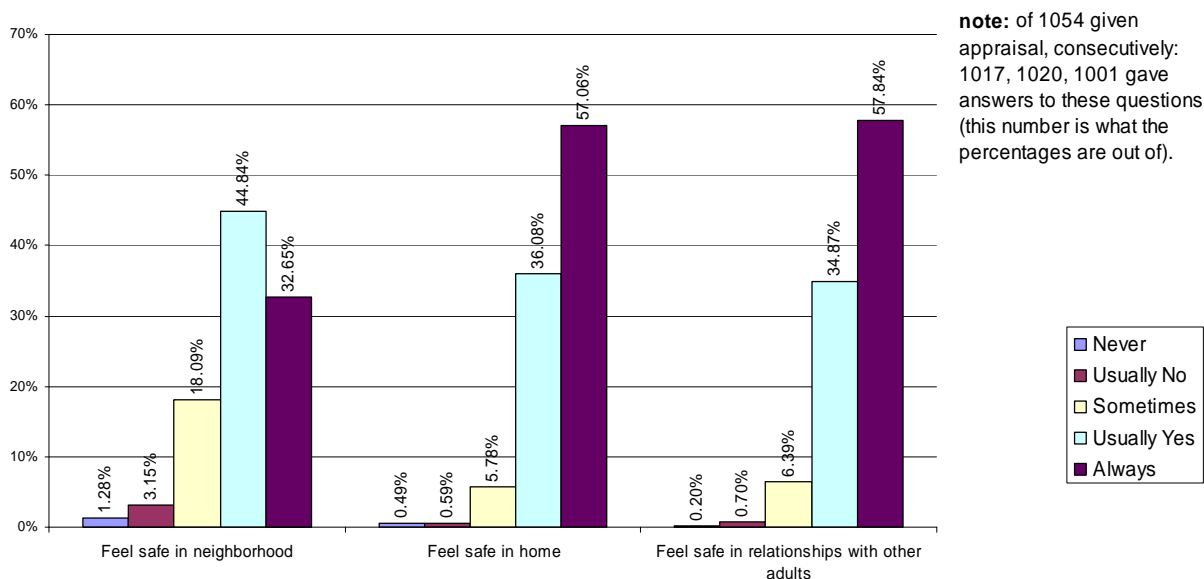


note: of 1054 given appraisal, 1010 gave answers to this question (this number is what the percentages are out of).



Safety within the Environment

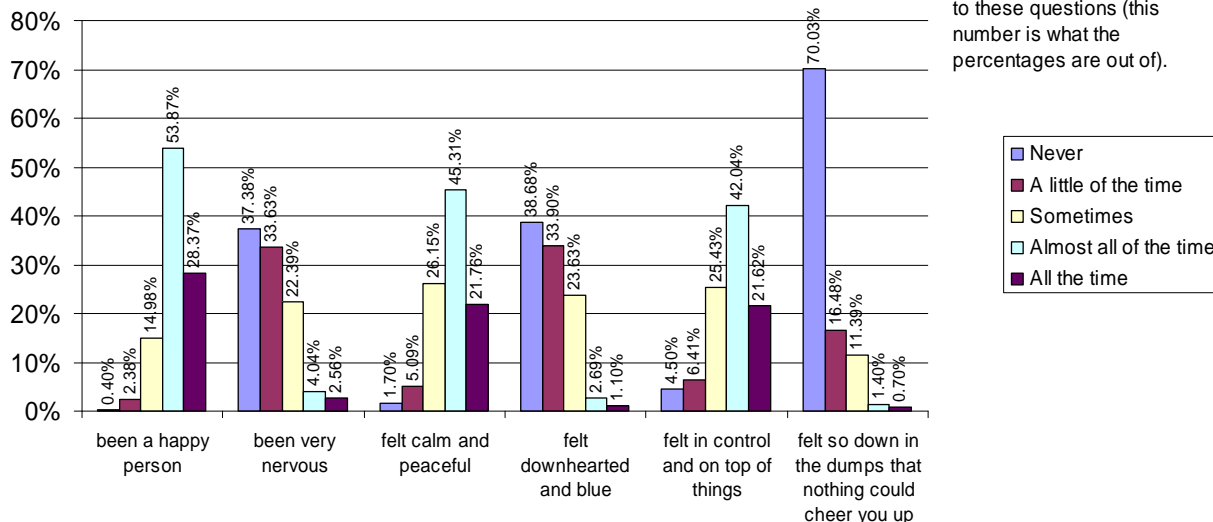
Does applicant...



The surveyed parents/guardians were asked about safety within the environment as well as their mental-health status (through the mental-health inventory). In terms of safety, the survey respondents who answered the “always” category were the ones who were truly experiencing safety in the areas of neighborhood (33%), home (57%) and with other adults (58%). Therefore, approximately 40% of respondents in this sample were saying that they did not feel safe in their homes or in their relationships with other adults. *This is a startling finding and should be pursued by health and community leaders for specific policies to strengthen and support neighborhoods, families and adult-relationship building strategies.*

In the last month applicant has...

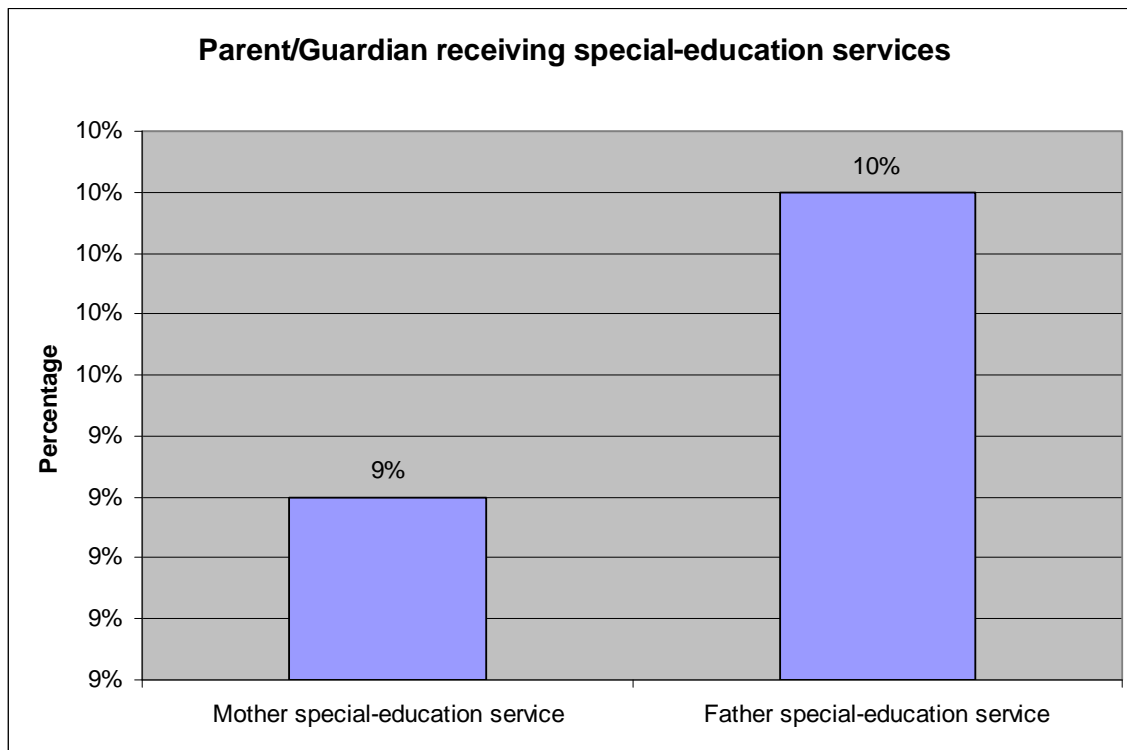
note: of 1054 given appraisal, consecutively: 1008, 1014, 1002, 1003, 999, 1001 gave answers to these questions (this number is what the percentages are out of).



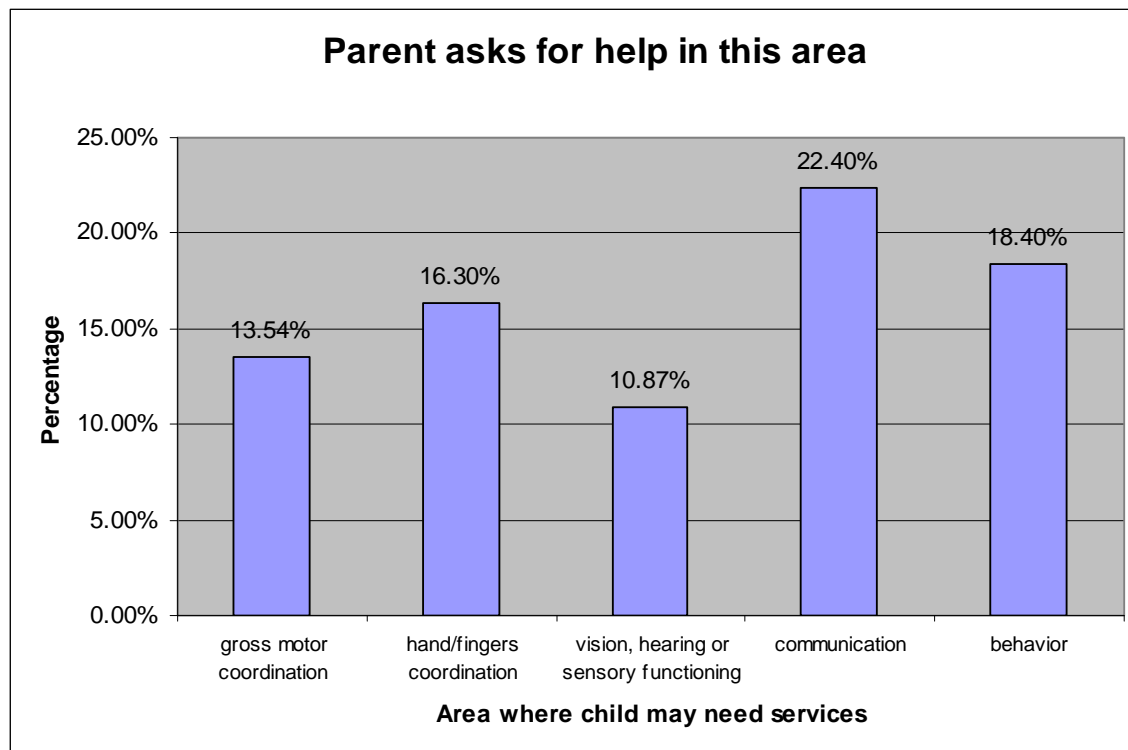
The mental-health inventory (MI – 5) serves as an indicator for depression for the surveyed parents/guardians. This helps screen parents who may require additional attention. In this sample, there may be a small group who were demonstrating the need for quick and immediate attention by health professionals. This was specifically the case for those who answered that they felt so down in the dumps that nothing could cheer them up *and* felt downhearted and blue *and* been very nervous.

Status of Familial Extra Help

Participation in Special Education Services



Participation in special-education services for both mothers and fathers was similar, 9% for mothers and 10% for fathers.

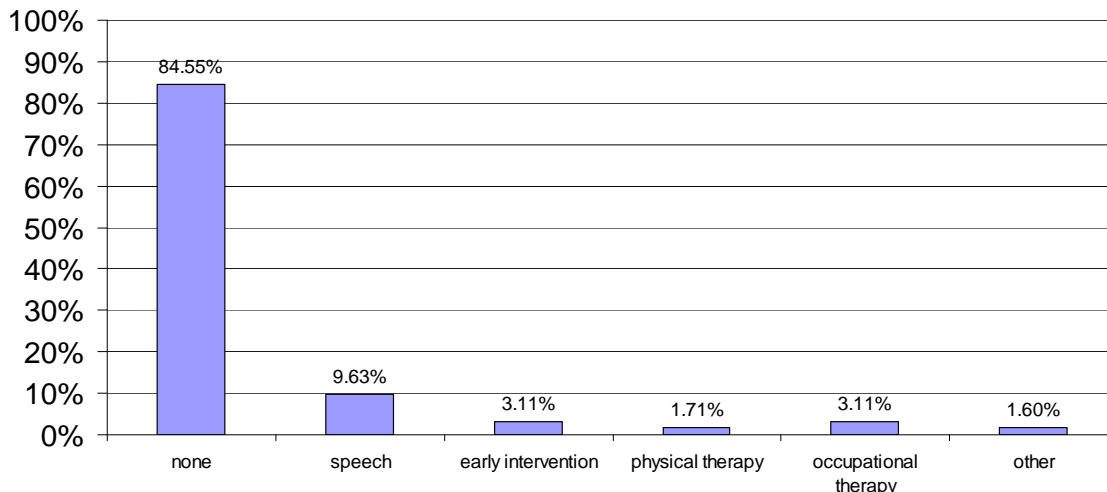


Developmental area where parent asks for help

Overall, parents believe their children may need the most assistance in communication skills (22%), followed by controlling their behavior (18%), fine motor (16%), gross motor (14%) and sensory functioning (11%).

Services currently received by child

note: of 1054 given appraisal, 953 gave answers to this question (this number is what the percentages are out of).



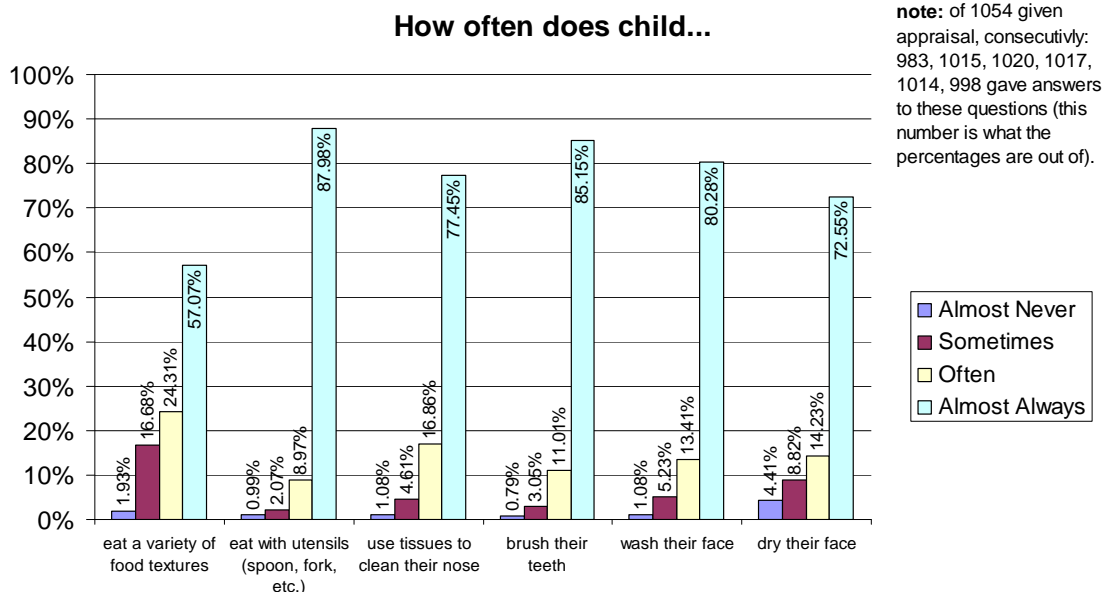
Services received

At entry into prekindergarten, many children have received no additional services (85%). However, 10% have received speech/language services, approximately 3% have received occupational therapy and 2% have received physical therapy.

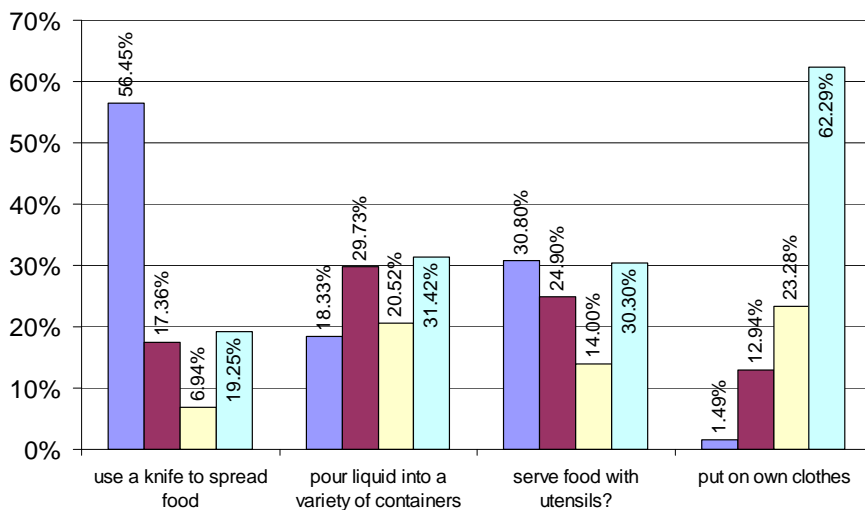
Skill Development

Adaptive skills

Adaptive skills generally have motor, social and cognitive components and three areas of daily-life functioning: meal time, personal hygiene, and dressing/undressing. Adaptive skills are practiced throughout the daily life of the child in a variety of settings (home, school, church, etc.). On the Pre-K PACE there are ten questions that address the area of adaptive functioning. Parents/guardians reported the three highest levels of functioning as eat with utensils (87.9%), brush their teeth (85%), and wash their face (80%). The adaptive skill area that was reportedly least practiced was using a knife to spread food (26%). This likely stemmed from parents not wanting their 4-year-old child to use a knife. Children who demonstrated low-skill functioning on these questions may be referred for an assessment by Early Intervention services.



How often does child...

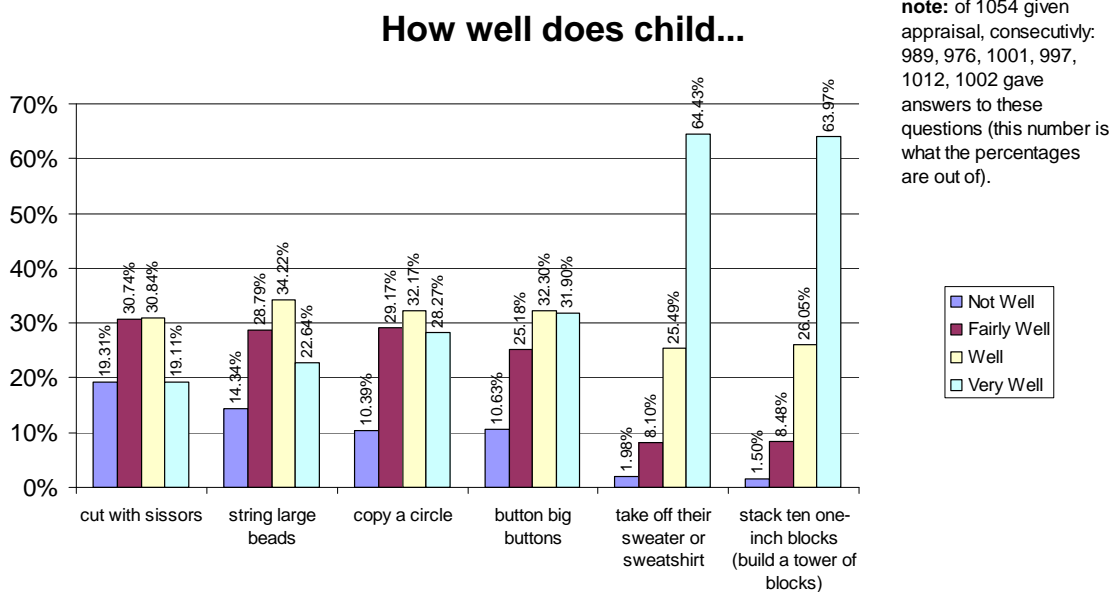


note: of 1054 given appraisal, consecutively: 1008, 1009, 1000, 1005 gave answers to these questions (this number is what the percentages are out of).

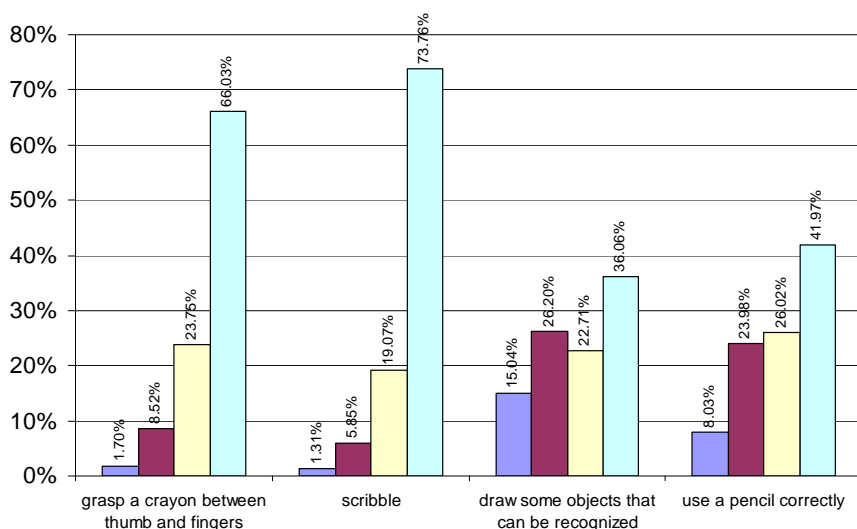


Fine Motor Skills

Pre-K PACE collects milestone developmental data in the fine-motor skills area with ten questions. Parents reported that their children have the most success in these three areas: scribble (92.8%); stack ten one-inch blocks (build a tower) (90%); take off sweatshirt (89.9%). Areas where the largest percent of children are not performing well on a given task are: cut with scissors (19.3%), string large beads (14.3%), and draw some objects that can be recognized (15%). Where parents report that their child is not able to scribble, nor take off a sweater/sweatshirt, nor stack ten one-inch blocks, then those children may be experiencing difficulty in the fine-motor skill area and may need monitoring or referral for a more complete assessment.



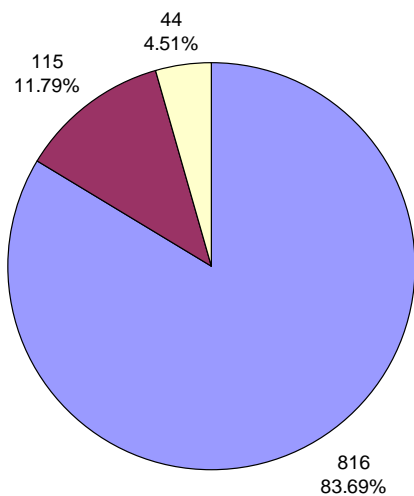
How well does child...



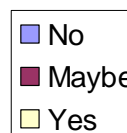
note: of 1054 given appraisal, consecutively: 998, 991, 1004, 984 gave answers to these questions (this number is what the percentages are out of).



Does applicant want to talk to someone about child's hand/fingers coordination



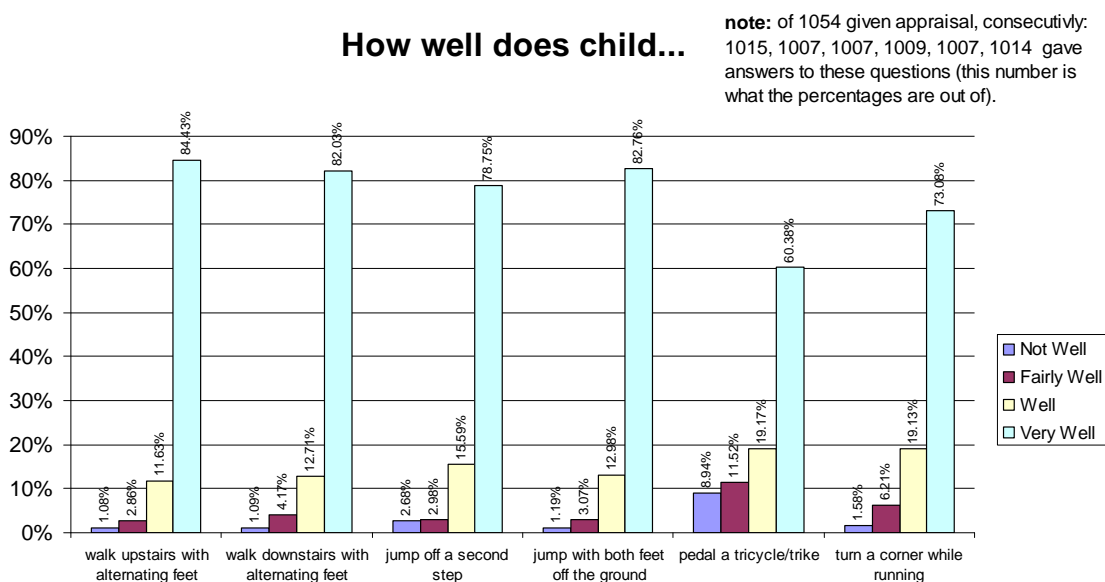
note: of 1054 given appraisal, 975 gave answers to this question (this number is what the percentages are out of).



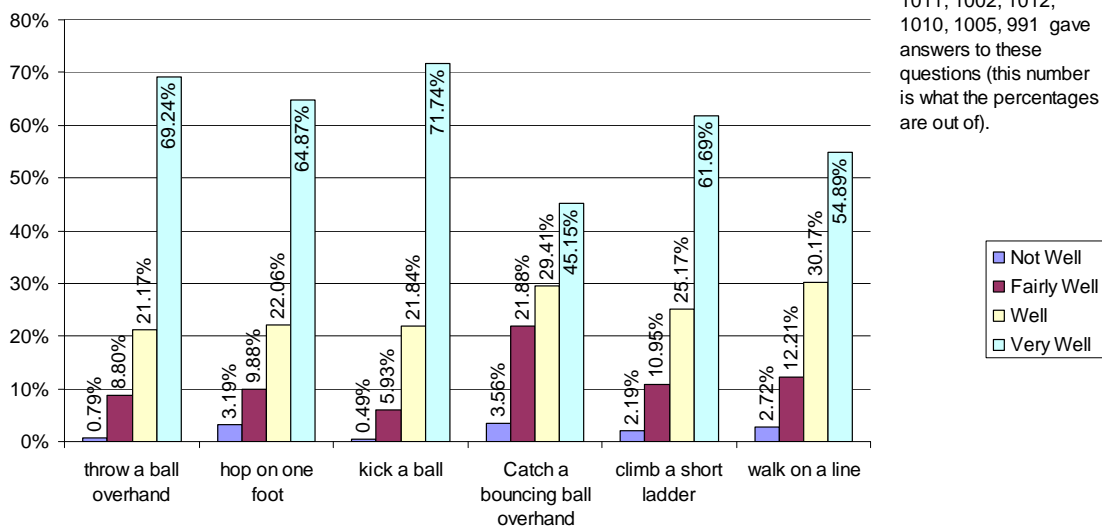
Gross motor skills

In the gross motor skills area, children have the greatest skill level of “walk upstairs with alternating feet” (84.3%), followed by “jump with both feet off the ground” (82.76%), and then “walk downstairs with alternating feet” (82%). Alternatively, where a child is not able to perform these three movements, then an assessment may be warranted.

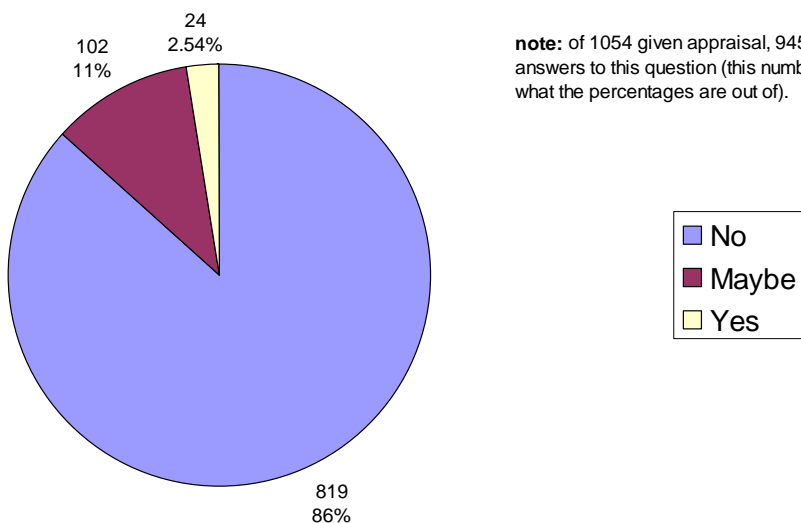
The three areas where children’s skill level is emerging (where the response category of “not well” and “fairly well” are combined) are “catch a bouncing ball overhand” (25.44%), “pedal a tricycle” (20.46%) and “walk on a line” (14.93%). A little more than one in ten (13.54%) parents expressed concern about their child’s gross-motor skills and wanting to talk about their child’s development.



How well does child...



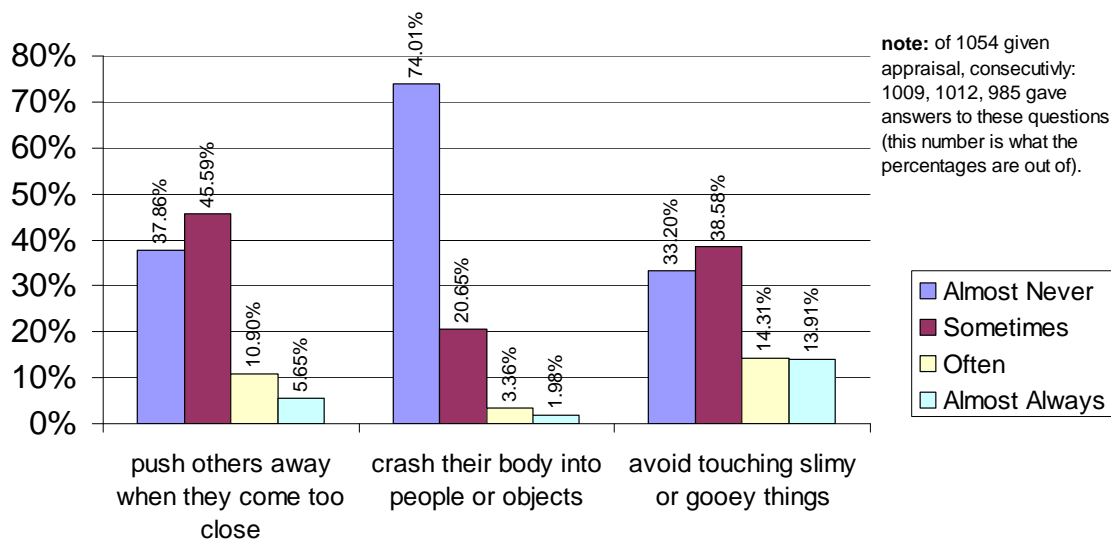
Does applicant want to talk to someone about child's coordination?



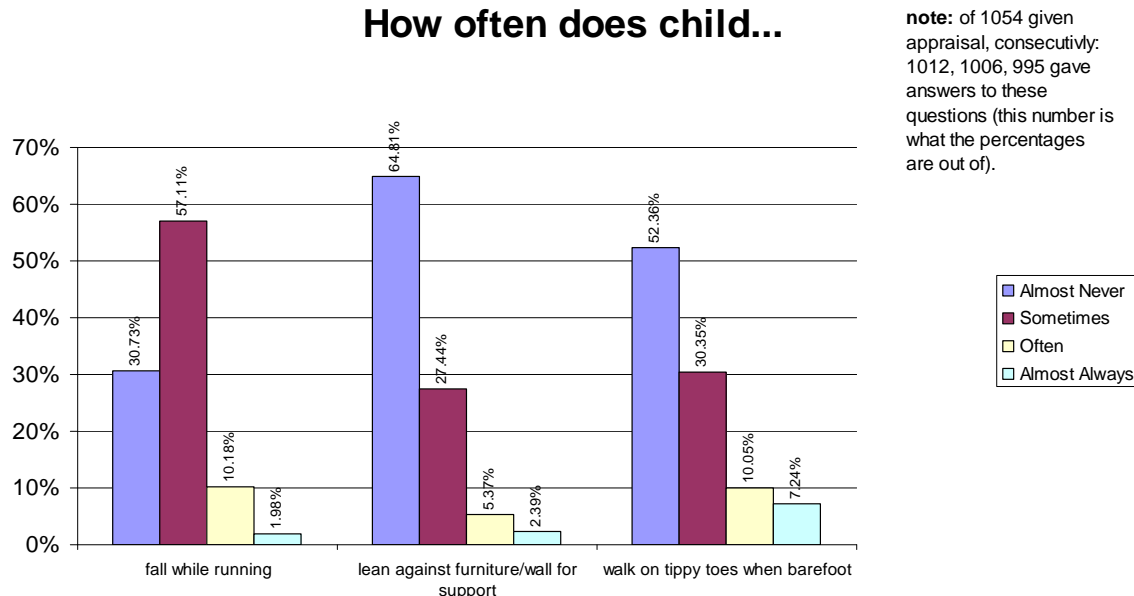
Sensory Functioning

The Pre-K PACE collects developmental milestones in the sensory arena. This area, while including the typical sensory areas of vision and hearing, also includes information on the vestibular, proprioceptive, and tactile areas of functioning. The three items indicating the greatest difficulty or compromised functioning are “avoid touching slimy or gooey things” (13.91%), “walk on tippy toes when barefoot (7.2%), and “push others away when they come too close” (5.65%). Approximately one in ten parents (10.87%) wished to talk to someone about his or her child’s sensory functioning.

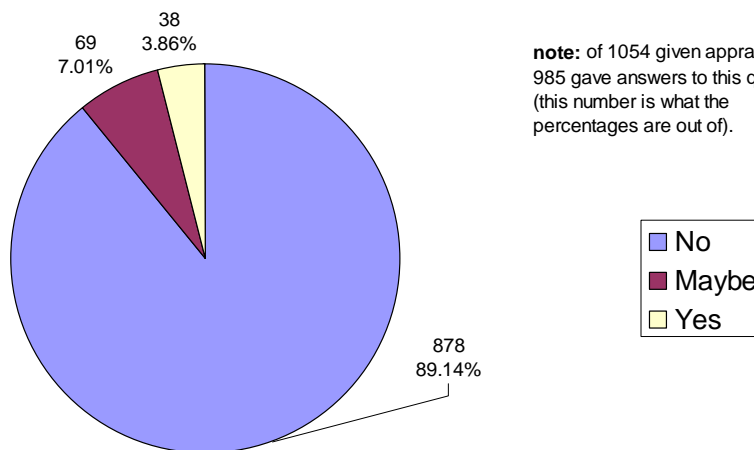
How often does child...



How often does child...



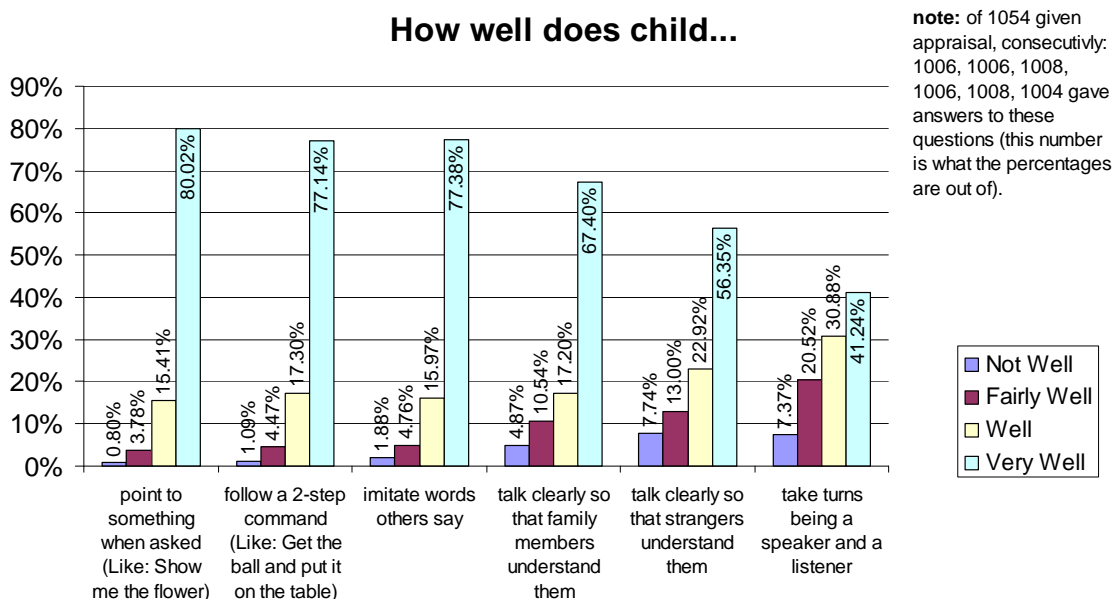
Does applicant want to talk to someone about child's vision, hearing or sensory functioning?



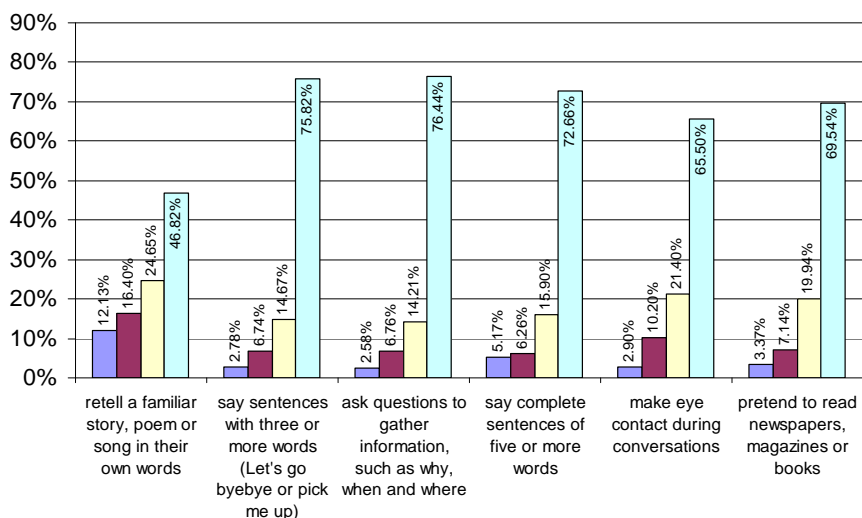
note: of 1054 given appraisal, 985 gave answers to this question (this number is what the percentages are out of).

Communication and Language Skills

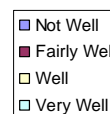
The communication and language skills area on the Pre-K PACE has 15 questions. The three items where parents reported the greatest level of communication and language proficiency were: “point to something when asked (95.4%),” “follow a 2-step command (94.4%),” “imitate words others say (93.3%).” Children’s skill level is still emerging in the areas of (where the response categories of not well and fairly well were grouped together) “retell a familiar story, poem, or song in their own words (12.13%),” followed by “use rhyming words in play activities (19.15%)” and “recognize his/her own name in print (23.43%).” Children who are not pointing, nor imitating words that others say, may need to be referred for more in-depth speech and language assessment. Almost one quarter of the parents (22.46%) indicated that they want to talk to someone about their child’s language or communication difficulty.



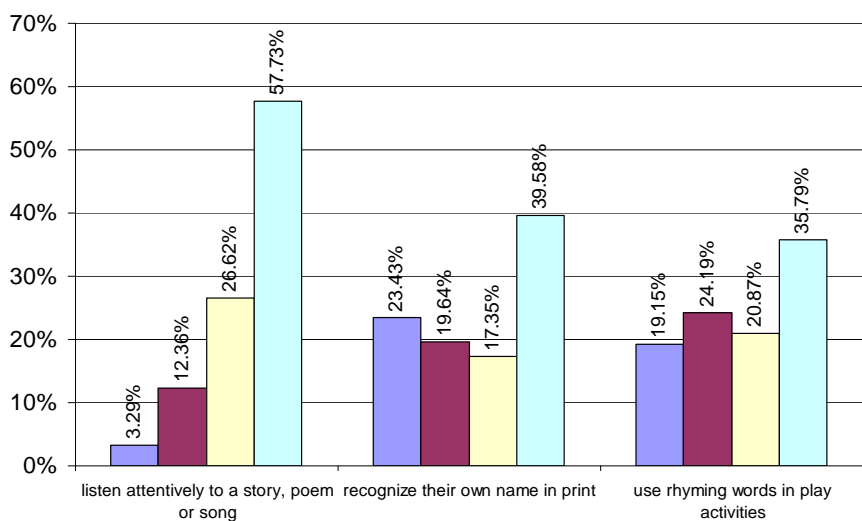
How well does child...



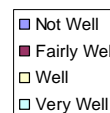
note: of 1054 given appraisal, consecutively: 1006, 1009, 1006, 1006, 1000, 1008 gave answers to these questions (this number is what the percentages are out of).



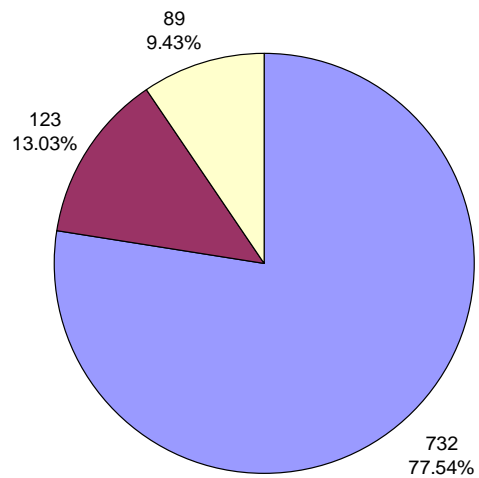
How well does child...



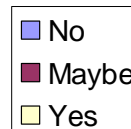
note: of 1054 given appraisal, consecutively: 1003, 1003, 992 gave answers to these questions (this number is what the percentages are out of).



Want to talk to someone about child's communication and language skills



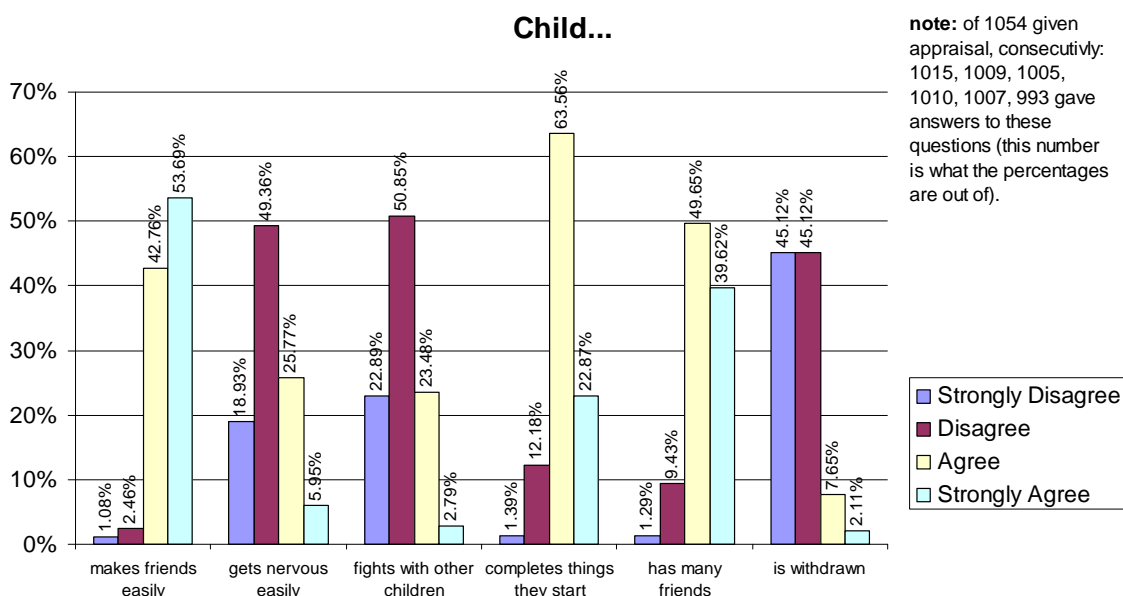
note: of 1054 given appraisal, 994 gave answers to this question (this number is what the percentages are out of).



Social and Behavioral Skills

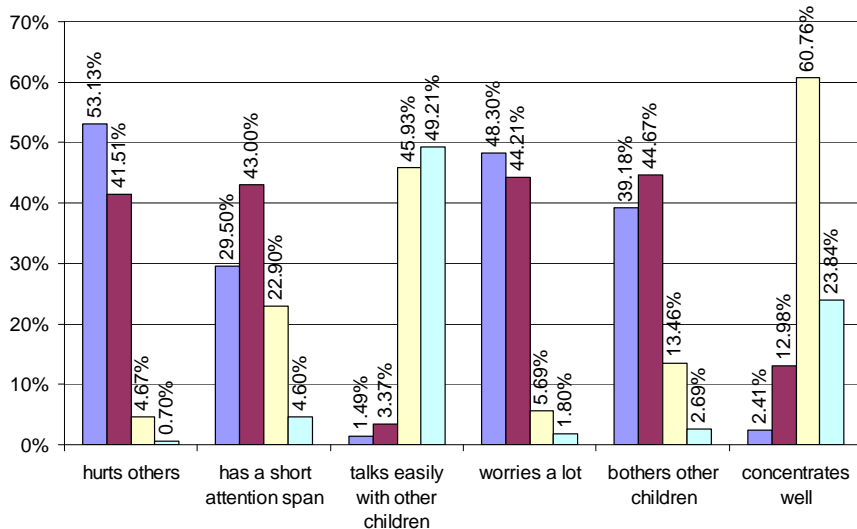
On the Pre-K PACE, there are 20 social-and-behavioral items. Sixteen of these originate from the Parent-Child Rating Scale¹; the ones asked here fall into four categories: shy/anxious, positive peer social, negative peer social and task orientation.

The following bar charts show the frequency distribution for these 20 items. Where children presented with behaviors that are likely to make school adjustment more difficult, they may be monitored for possible intervention or assessed for the likelihood of learning differences. Those behaviors include gets nervous easily, fights with other children, difficulty in completing things they start (attention/focus), withdrawn, hurts others, and worries a lot. Almost one in five (18.4%) parents wanted to talk with a professional regarding his or her child's behavior.

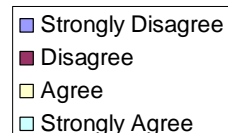


¹ The Parent-Child Rating Scale (P-CRS) presently has 39 items that measure seven different behavioral or skills sets: positive peer social skills, task orientation, disposition, shy-anxious/withdrawn, assertive social skills, frustration tolerance, and negative peer social skills.

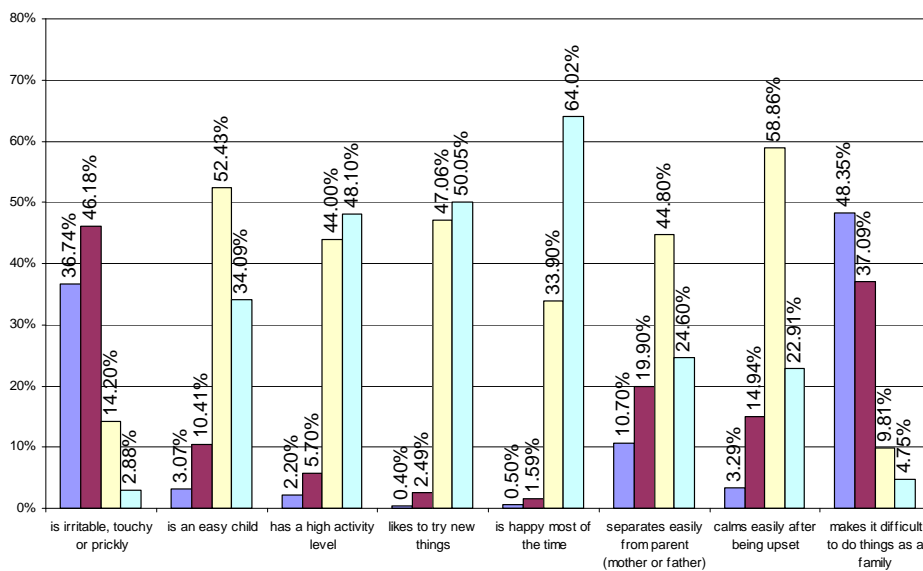
Child...



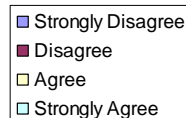
note: of 1054 given appraisal, consecutively: 1007, 1000, 1008, 1002, 1003, 994 gave answers to these questions (this number is what the percentages are out of).



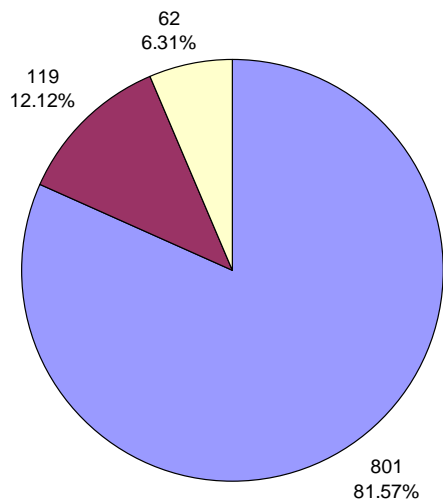
Child...



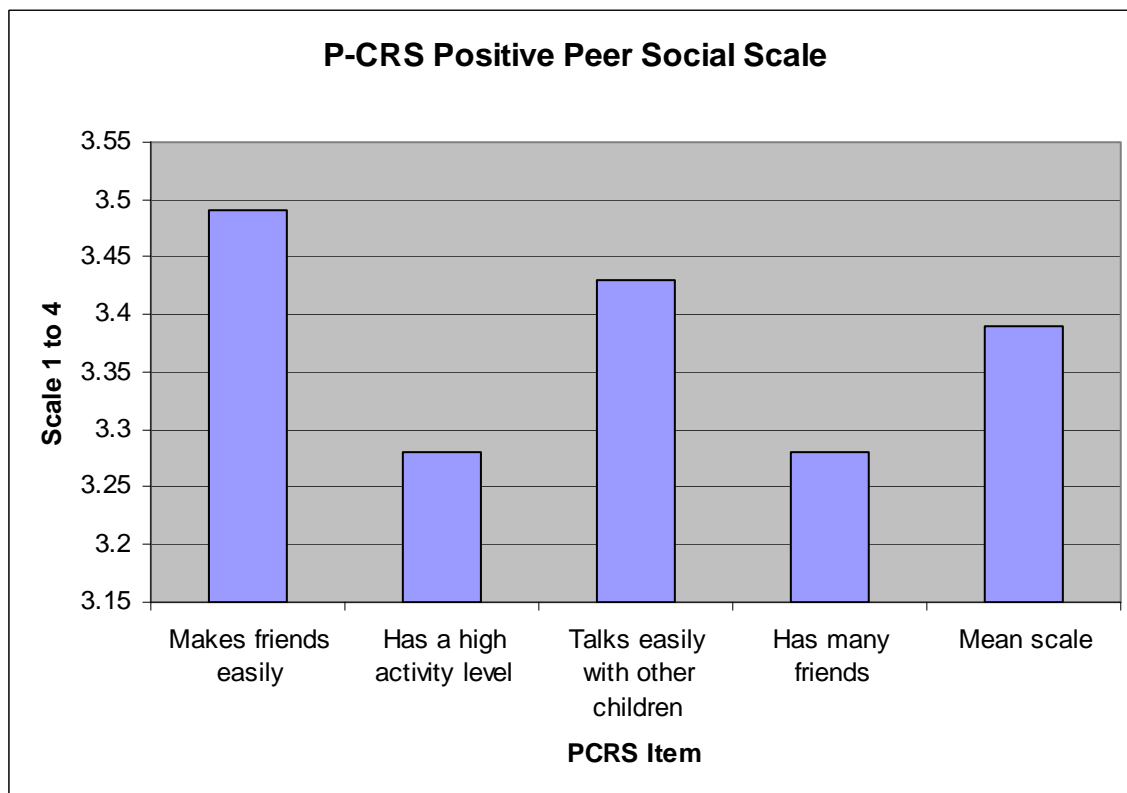
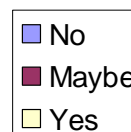
note: of 1054 given appraisal, consecutively: 1007, 1009, 1000, 1003, 1006, 1000, 1004, 968 gave answers to these questions (this number is what the percentages are out of).

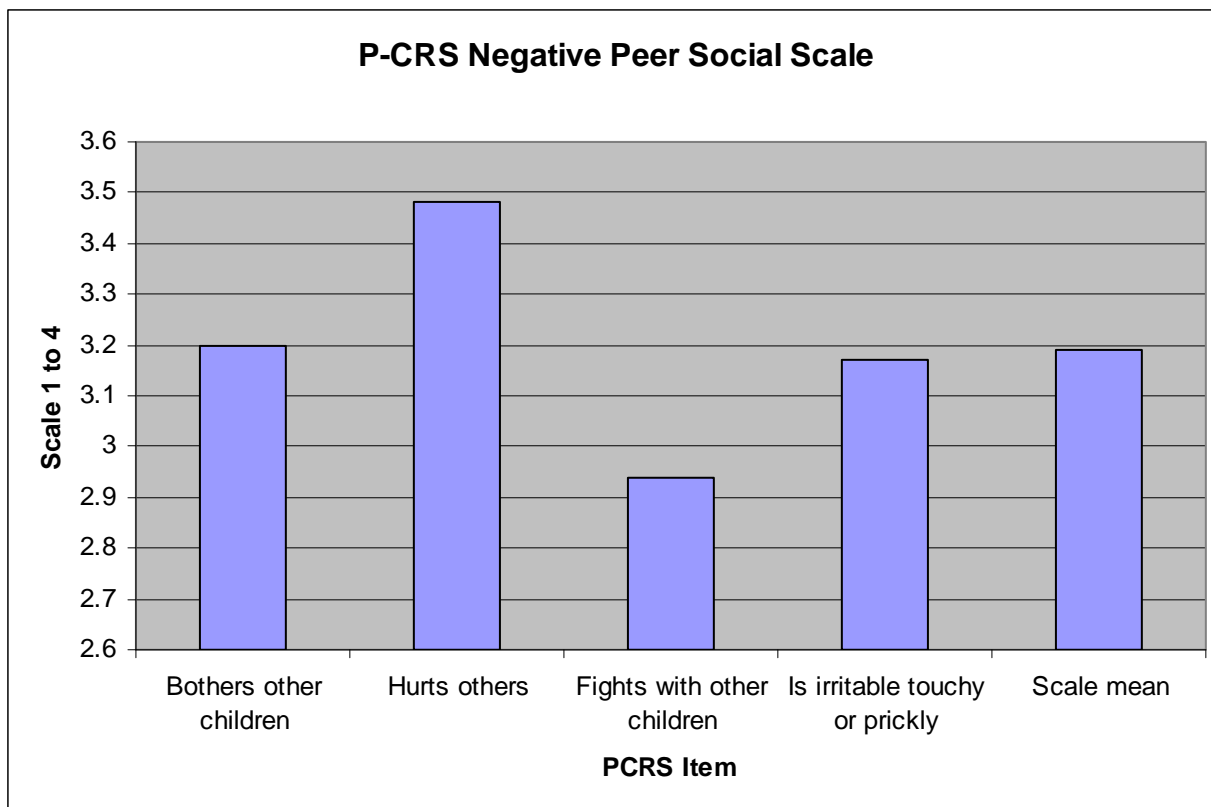


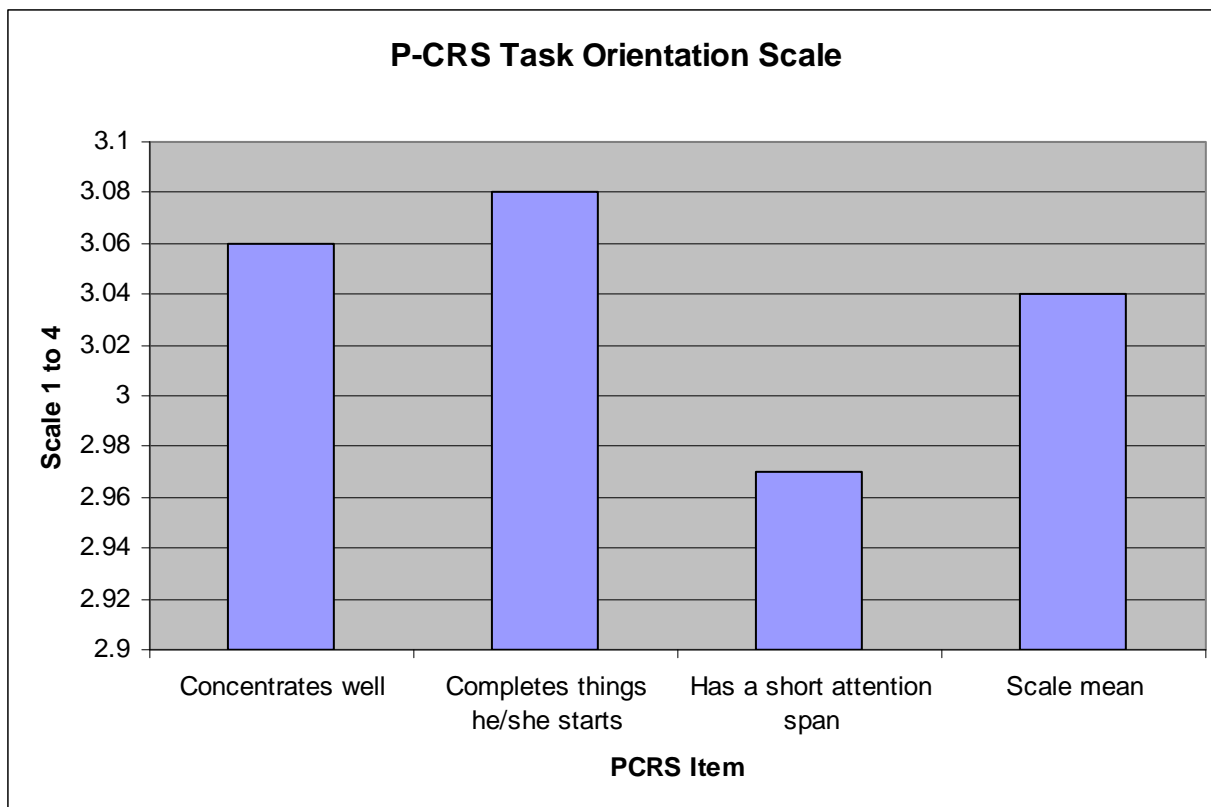
Want to talk to someone about child's behavior

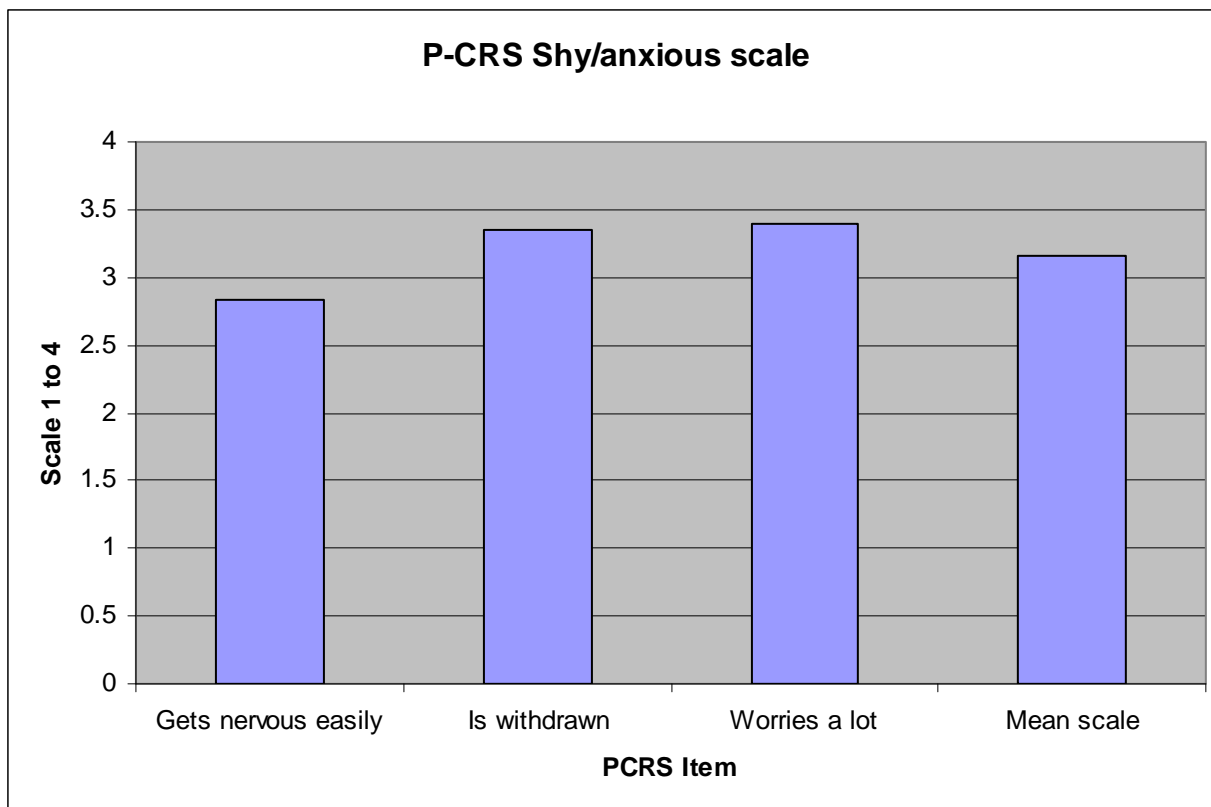


note: of 1054 given appraisal, 982 gave answers to this question (this number is what the percentages are out of).









Play Skills

Play in the young child's life has been associated with critical developmental growth in many areas. Recently, however, there is increasing societal pressure for academic standards to be imposed upon the younger child with appreciably less focus on time for play. In tandem with this new trend, there is the call to understand the importance and relevance of play in the young child's life. Play theorists and literacy researchers are studying the relevance of play in the child's academic and social-emotional development, and finding that play is a critical component in the child's development of skills that will scaffold academic learning skills. Play serves as a meaningful predictor for many aspects of the young child's development – sharing, role playing, boundary and limit setting; indeed, “play activity is essential in the preschool years because it leads development, giving rise to abstract thinking (thought separate from action or object), self-awareness and self-regulation. Play, in other words, is a process particularly influential in the preschool age for achieving cycles of self-organization and development that contribute to cognition.” (Christie & Roskos, in press)

By studying the combination of play elements along with literacy and academic skill development the following questions emerge: “... how can play help children meet important early literacy outcomes that are the building blocks of school reading and writing achievement, and . . . which types of play are most effective in accomplishing this.” (Christie & Roskos, in press)

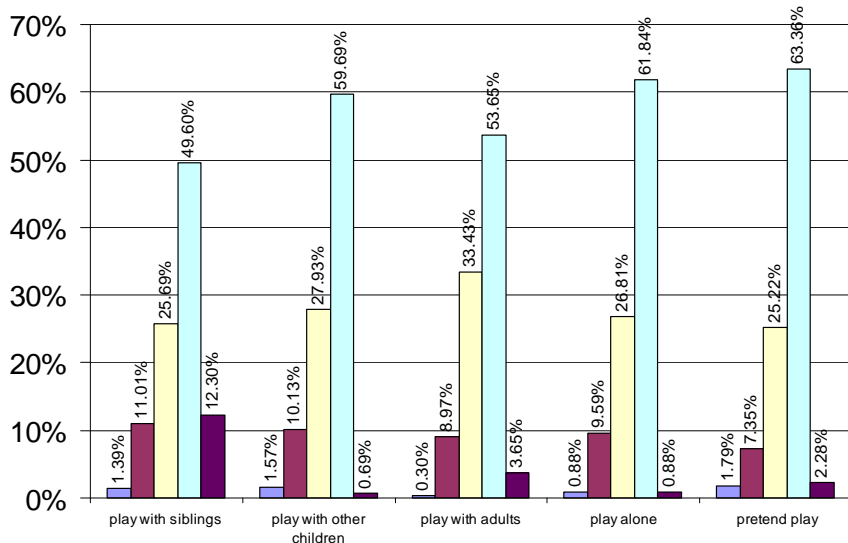
Recognizing the importance of play, and how it serves as a vehicle toward social and emotional functioning and cognitive development, the Pre-K PACE includes two series of play questions: the play environment in the home, and the play scale with other children. In this next section, the frequencies of these play variables are presented.

Play Environment in the home

Pre-K PACE has questions surrounding the play environment in the child's home, such as the quantity of play time between parent and child, the playing environment, and the quality of play interaction with siblings, friends and adults.

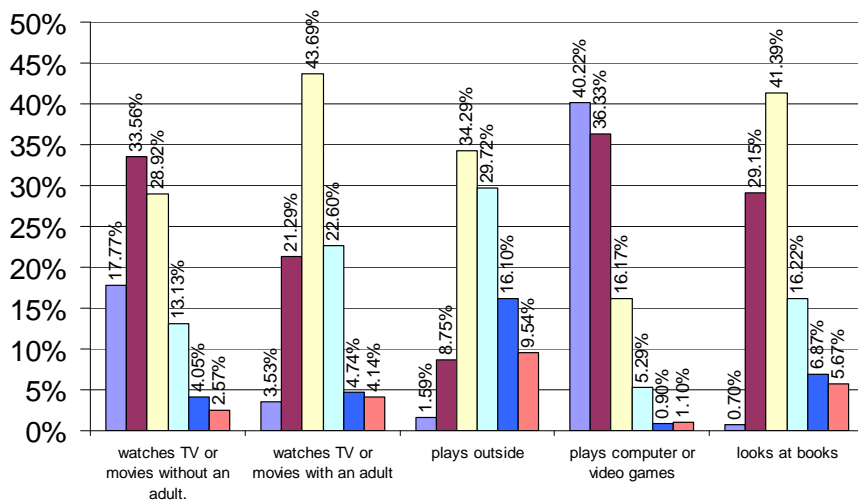
For this sample in Rochester, NY, the play scale consists of five items: play with siblings, play with other children, play with adults, play alone, and pretend play. The parent/guardian rated the quality of play on a scale from one to four, “not well” to “very well.” The overall play scale score was 3.48, where the lowest score was 3.41, “play with siblings,” and the strongest score was 3.54, “pretend play.”

How well does child...



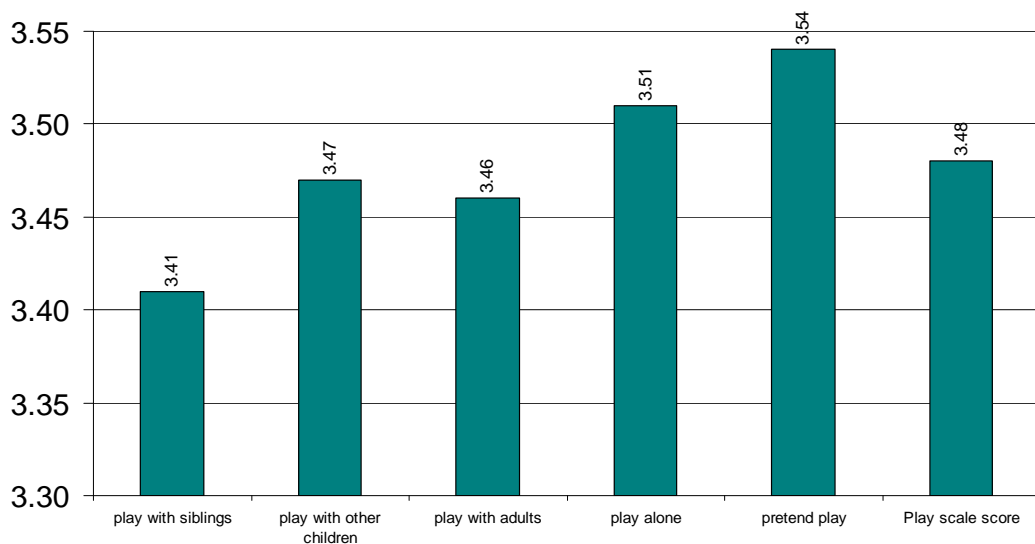
note: of 1054 given appraisal, consecutively: 1008, 1017, 1014, 1022, 1007 gave answers to these questions (this number is what the percentages are out of).

Most days child...



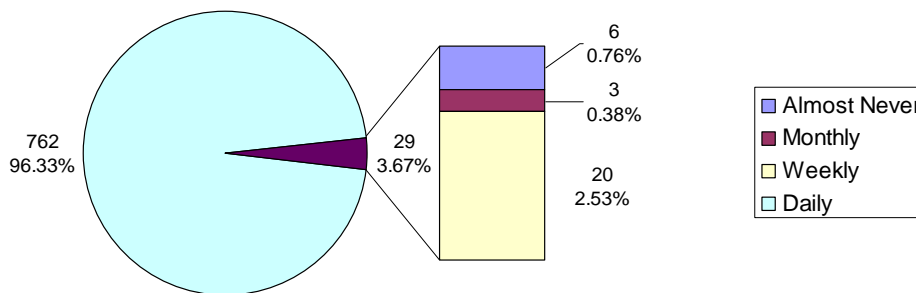
note: of 1054 given appraisal, consecutively: 1013, 991, 1006, 1002, 1005 gave answers to these questions (this number is what the percentages are out of).

Play item and scale scores



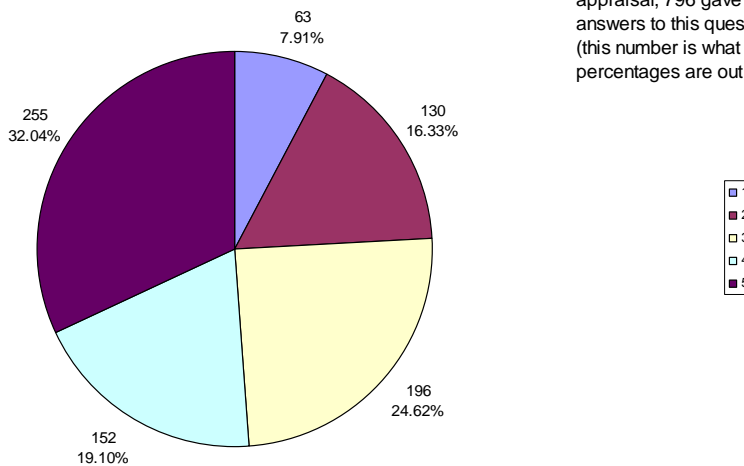
Mother (or female caregiver) plays with child...

note: of 1054 given appraisal, 791 gave answers to this question (this number is what the percentages are out of).

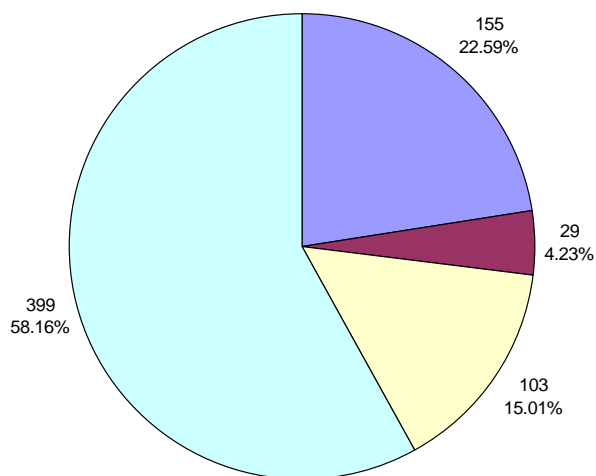


... if daily how much time?

note: of 1054 given appraisal, 796 gave answers to this question (this number is what the percentages are out of).



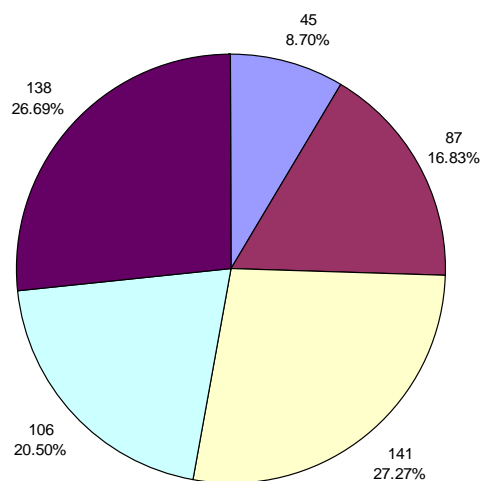
Father (or male caregiver) plays with child...



note: of 1054 given appraisal, 686 gave answers to this question (this number is what the percentages are out of).



... if daily how much time?



note: of 1054 given appraisal, 517 gave answers to this question (this number is what the percentages are out of).



References

Christie, J. F., & Roskos, K. A. (In press). Standards, science, and the role of play in early literacy education. In D. Singer, R. M. Golinkoff & K. Hirsh-Pasek (Eds.), *Play=Learning: How play motivates and enhances children's cognitive and social-emotional growth*
New York, NY: Oxford University Press

Sterling, S., Cowen, E. L., P., W. R., Lotyczewski, B. S., & Boike, M. (1985). Recent Stressful Life Events and Young Children's School Adjustment. *American Journal of Community Psychology*, 13(1), 87-97.