Summary Table: Review of the Research Literature and Implications for Targeted Activities to Improve School Readiness

AREAS FOR TARGETED INTERVENTION ACTIVITIES	WHAT WORKS	WHAT DOESN'T WORK	MIXED REVIEWS	"BEST BETS"
CHILD HEALTH				
Health in the Early Years	- At-home parenting videos for 1, 3, 5, 7, 10, & 12 months [leads to fewer severe illnesses] - Home visits, pediatric monitoring, attendance of infant in child development center, group meetings for parents (IHDP) [but different cognitive outcomes for different birth weight groups] - Prenatal care (doctor's visits, nurse home visits, proper nutrition) [guards against LBW births]			- Reduce unintended pregnancy (target female teens and males of all ages)
Immunizations	- Monetary incentives - Client-specific prompts - Increase access to public health institutions			- Create an effective immunization tracking system (IOM recommendation, 2000)
Nutrition	- Provide food vouchers (WIC, Food Stamp Program)			
Unintentional Injury	- For vehicle restraints: clinic-based parent education plus subsidies and/or positive reinforcement; Community-based, multiple pathway approach (effective for low-income families only) - For hot tap water safety: clinic-based parent education alone works - For smoke alarm ownership: clinic-based parent education alone works - For bicycle helmet use: Community-level interventions that use multiple pathways (e.g., legislation, community-wide education campaign, etc.)	- For child proofing a home: no good interventions found	- For general, unintentional injury: Community-based, multiple pathways (e.g., parent & community education, TV programs, school-based education, etc.)	
Child Emotional and Behavioral Problems				- "Two generation programs" - treat maternal and child depression - Alleviate family stress - Focus on the parent-child relationship
FAMILY FACTORS				
Family Economic Risk	- Job training and education for parents [improves children's cognitive outcomes] - Providing child care subsidies alone [leads to more use of formal child care arrangements]		- Raising family incomes above the poverty level [confounded with providing child care subsidies] - Job training and education for parents [mixed results for child behavioral and emotional outcomes, but impacts for cognitive outcomes]	
Family Structure	- Two involved parents, regardless of marital status [improves children's cognitive and social outcomes]		- Encouraging involvement between children and nonresident parents [need to take account of the quality of the interactions]	- Reducing unintended pregnancy - Reducing teen pregnancy - Financial contributions from

AREAS FOR TARGETED INTERVENTION ACTIVITIES	WHAT WORKS	WHAT DOESN'T WORK	MIXED REVIEWS	"BEST BETS"
Family Structure (cont'd)	- Low conflict two-parent families [improves children's socioemotional outcomes] - Nurse Home Visitation (not paraprofessionals) beginning in pregnancy and continuing through child's second birthday [leads to wider birth spacing and fewer births over time; see additional outcomes below]			nonresident parent [associated with children's cognitive and social outcomes]
The Home Environment	- Nurse Home Visitation: home visits by a nurse (not paraprofessional) beginning in pregnancy and continuing through child's second birthday to discuss parental health habits, parenting behaviors, and home safety [leads to reduction in child abuse, increase in child health, better academic and social outcomes for both parent and child] - Good parenting practices (e.g., sensitive response to child, non-coercive discipline) [leads to better socioemotional child outcomes]		- Other home visitation models using either professionals or paraprofessionals (Parents as Teachers; Family, Infant, Preschool Program; Healthy Families America; Home Instruction Program for Preschool Youngsters) [improved parent-child interactions, reduced maternal depression, increased child cognitive abilities, but typically small and inconsistent gains in child outcomes, or gains for only some subgroups of families]	- Focusing on the parent-child relationship
EARLY CHILDHOOD CARE AND EDUCATION	- Emphasis on multiple areas of child development (cognitive, language, social & emotional) - Stimulating environments - Quality care for children in poverty - Small student/teacher ratios - Parent involvement - Collaboration with community services - Close, caring student/teacher relationships - Stable child care arrangements	- Providing basic care in which simple routine needs are met but children aren't stimulated to learn	- Beginning care in infancy [depends on quality of the care]	
SCHOOL TRANSITIONAL PRACTICES	- Preschool attendance (especially for children in poverty)	- Redshirting (holding children out of kindergarten for a year)		- Contact between kindergartens and preschools - Contact between kindergartens and homes - Connections between schools and community resources - In-depth, careful screenings - Schools ready for all children
COMMUNITY/ NEIGHBORHOOD FACTORS				
Community Economic Factors	- Having affluent neighbors [predicts higher IQ]		- Not living among poor neighbors [mostly mediated by family-level factors] - Reducing concentrated poverty	- Investing in community infrastructure - Increasing jobs for men in inner-cities, municipalities, and rural areas
Community Organizational Factors			- Increasing racial diversity within neighborhoods	

Supplemental table prepared by **Child Trends** taken from their longer report, *Background for Community-Level Work on School Readiness: A Review of Definitions, Assessments, and Investment Strategies.*