Perceptions of School Readiness in Georgia
2017 BUILD Evaluation

GEEARS
GEORGIA EARLY EDUCATION
ALLIANCE FOR READY STUDENTS

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The purpose of Georgia's 2017 BUILD evaluation was to describe perceptions of school readiness among a range of stakeholders across the state. An online survey was completed by nearly 2,000 respondents, including early childhood educators and administrators, elementary educators and principals, families, health care providers, and others. We sought to address the following questions:

- **How is "school readiness" conceptualized within and across stakeholder groups in Georgia?**

- **How do respondents perceive the role and importance of various stakeholder groups in promoting school readiness?**

- **How do stakeholders perceive the importance of various child-level domains (i.e., physical, social-emotional, language and literacy, approaches to learning, and cognition and general knowledge) to children's school readiness?**

Background

Since 1991, when the National Education Goals Panel (NEGP) adopted as its first goal that "all children will enter school ready to learn," policymakers, researchers, and practitioners have stated commitments to and sought to define school readiness. While a great deal of attention has been paid to the concept in recent years, there remains little consensus on how to define or measure school readiness, perhaps because it is often contextually defined, varying across organizations, communities, or stakeholder groups (Graue, 1992; Piotrkowski, Botsko, & Matthews, 2001).

Initiatives including the NEGP and the 17-state *National School Readiness Indicators Initiative* have conceptualized school readiness broadly, emphasizing the role that families, communities, and schools play in promoting readiness and, at the child level, identifying multiple dimensions of readiness, including health and motor development; social-emotional development; language and literacy development; approaches to learning; and cognition and general knowledge. Despite this articulation of readiness as a multidimensional construct, there is limited evidence that such a view has permeated the diverse array of stakeholder groups that educate, care for, and implement policies for young learners. For example, kindergarten teachers' views of school readiness as a condition internal to the child have remained stable despite public efforts to conceptualize school readiness as the shared responsibility of families, schools, and communities (Grace & Brandt, 2006; Wesley and Buysse, 2003).

While recent years have seen a greater emphasis on the importance of schools' readiness for children and the role of families and communities in promoting school readiness, it is unknown whether members of these stakeholder groups, including educators, school and community leaders, families, and service providers, share this view. How individuals perceive the role of various stakeholder groups—including their own—in promoting school readiness remains a question.

There is also limited consensus among stakeholders regarding the importance or relevance of specific child-level skills or developmental domains to children's readiness for school, with families, early childhood, and elementary educators emphasizing different skills. For example, parents and families tend to emphasize academic skills, like counting or alphabet knowledge, more than teachers (Barbarin et al., 2008; Harradine & Clifford, 1996; Knudsen–Lindauer & Harris, 1989; Piotrokowski et al., 2001; West, Hausken, & Collins, 1993). Early childhood and elementary educators often prioritize different child-level skills, leading Abry and colleagues (2015) to assert that "a clear pattern of misalignment in preschool and kindergarten teachers' beliefs [about school readiness] has emerged (p. 79)." While both preschool and kindergarten teachers tend to view social-emotional skills as important, early childhood teachers often assign greater weight to academic skills than their kindergarten counterparts (Abry et al., 2015; Hains, Fowler, Schwartz, Kottwitz, & Rosenkoetter, 1989; Piotrokowski et al., 2001). Such discrepancies have important implications for policymakers and practitioners supporting the transition to kindergarten.

Finally, previous research indicates that perceptions of school readiness vary *within* stakeholder groups, as well. For example, parents with less education were found to hold higher expectations regarding academically oriented skills than their more educated counterparts (West et al., 1993); younger kindergarten teachers placed greater value on such academic skills than older teachers (Lin, Lawrence, & Gorrell, 2003); and among both early childhood and elementary educators, more African American and Hispanic teachers viewed such skills as crucial for readiness than white, non-Hispanic teachers (Heaviside & Farris, 1993; Piotrkowski et al., 2001). Different stakeholders may attend to or endorse specific components of the "whole child" message more than others, underscoring the idea that views on readiness can vary from community to community.

In sum, perceptions of school readiness vary within and across stakeholder groups. The majority of research examining school readiness beliefs has queried teachers and, to a lesser extent, families. In light of broader efforts to communicate readiness as the responsibility of not only families and teachers but also school systems and communities, it is necessary to understand how other stakeholder groups, including health providers, community organizations, school leadership, and an array of early childhood professionals, define readiness and view their role in the school readiness "equation."
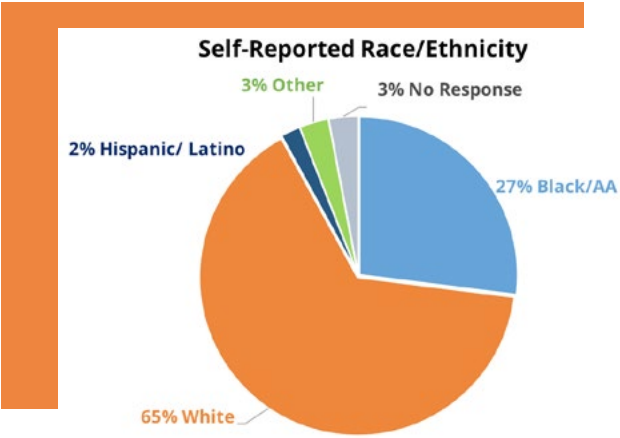
Over the course of the last few decades, many states have adopted definitions of school readiness in order to align efforts of the various entities supporting young children. With such work underway in Georgia, we sought to understand how diverse stakeholders across the state conceptualized school readiness, providing an opportunity to explore current attitudes, identify potential disparities, and, ultimately, lay the foundation for the development of a common, statewide framework for readiness. Because a range of stakeholders may be in a position to influence school readiness, we cast a wide net, soliciting feedback from families, early childhood educators and administrators, elementary educators and principals, school system leadership, pediatricians and other health care providers, higher education/researchers, and community organization staff.

Through a brief survey consisting of both open-ended and ranking items, we sought to better understand stakeholders' perceptions of and beliefs about school readiness. First, we considered how respondents define school readiness in their own terms, analyzing trends across and within stakeholder groups, including how narrowly or broadly the concept was defined. Second, we sought to understand how respondents perceive the responsibility of various stakeholder groups, including families, early childhood programs, school systems, community organizations, health care providers, and policymakers, in promoting school readiness. Finally, we wished to understand how various stakeholder groups prioritize child-level readiness domains (i.e., physical, social-emotional, language and literacy, approaches to learning, and cognition and general knowledge).

Method

A brief survey (see Appendix A) was distributed informally through GEEARS' community, state agency, school system, and philanthropic partners, targeting the following stakeholder groups: early childhood educators and administrators, elementary educators and administrators, physicians, parents and families of young children, community organization staff, and higher education and researchers. A total of 1,963 survey responses were included in analysis, representing stakeholders in the following categories: early childhood (birth – age 3) teacher ($n = 63$), early childhood administrator ($n = 516$), Pre-K teacher ($n = 784$), early childhood technical assistance provider ($n = 53$), family child care provider ($n = 138$), elementary teacher ($n = 157$), elementary principal ($n = 44$), parent or family ($n = 80$), community organization or family support staff ($n = 54$), health care provider ($n = 22$), and higher education/research ($n = 52$). The majority of respondents were female (96%; $n = 1,882$) and white (65%; $n = 1,276$). The mean age of respondents was 45.58 years.

Self-Reported Race/Ethnicity

- 3% Other
- 3% No Response
- 2% Hispanic/ Latino
- 27% Black/AA
- 65% White

What Does School Readiness Mean to You?

Participants were first asked to respond to the open-ended question, "What does school readiness mean to you?" The vast majority defined school readiness in very *child-centric* terms (e.g., "a child arriving at school with the academic and social skills required for success in kindergarten"). Of those responding to the open-ended question ($n = 1,785$), only 9% ($n = 169$) referenced the role, responsibility, or contribution of stakeholders, programs, or entities external to the child (e.g., "school readiness means that the **school** is ready to embrace incoming children" or "school readiness means that **parents** have prepared their children for a formal learning environment"). Those most likely to identify external influences included community organization and family support staff (31% of total respondents in this category) and health care providers (19%), while family child care providers (5%) were least likely to include such references[1].

These 169 responses were further coded to identify the type of stakeholder group or category referenced, including families (e.g., "parents," "home"), health and related services (e.g., "immunizations," "screening"), schools or teachers, communities, and early learning programs. The most commonly cited stakeholder group was families, included in 53% ($n = 89$) of the responses that identified the role of entities outside the child, followed by schools (50%; $n = 84$), early learning programs (13%; $n = 22$), health (10%; $n = 17$), and communities (8%; $n = 13$). Note that approximately one-fourth of respondents ($n = 46$) cited more than one group or category in their response.

> **Only 9% referenced the role, responsibility, or contribution of stakeholders, programs, or entities *external* to the child.**

[1]To determine reliability of coding, two independent coders both blindly coded a random 20% of the total responses. Inter-rater reliability was very high (Cohen's kappa = .99).

3   4   4

Family

- "…children are trainable in partnership with parents to listen, respect, and learn."
- "It means that children are ready for school and parents are ready to support their children in school."
- "School readiness means that all children and families will be properly prepared for their educational journey."

Health and Related Services

- "The child will have a clean bill of health and any developmental issues identified and a plan of care developed before school begins."
- "Children are ready for school when possible communication, social/emotional, physical or mental health concerns have been addressed."
- "Having physical health barriers identified and corrected to the best of our ability."

Schools and Teachers

- "How prepared a school is to help children learn at the best levels to their best capabilities."
- "Schools must be ready for children in terms of being able to accommodate the full range of developmental needs."
- "Qualified teachers, properly equipped classrooms, training for staff."
- "School readiness is when the teachers, administrators, and faculty are ready to receive students in the class and to teach them."
- "Is the school ready for the students? Are the teachers ready? Do we have qualified/effective teachers? Do we have the materials, updated technology, programs, curriculum to teach and help/excel the students? Are we up to date with curriculum and strategies to teach the students?"

Communities

- "School readiness requires the collaborative efforts of the family, the school and the community."
- "The bridging of families, resources and communities to support a child's growth, development and future success."
- "…communities have a responsibility to provide support to students so they can have success in school."
- "When a community makes sure school age children are prepared for school."

Early Learning Programs

- "Reading, writing, math, etc…should have been introduced through play in childcare, preparing the child to learn in a more abstract manner in grade school."
- "A child has been introduced to or mastered the Georgia Early Learning Standards [sic] for their age. A partnership between school and family is formed in early learning care."
- "Children have been exposed to books starting at birth, read to often, attended preschool, and have highly engaged parents who understand their role in helping build their child's brain."
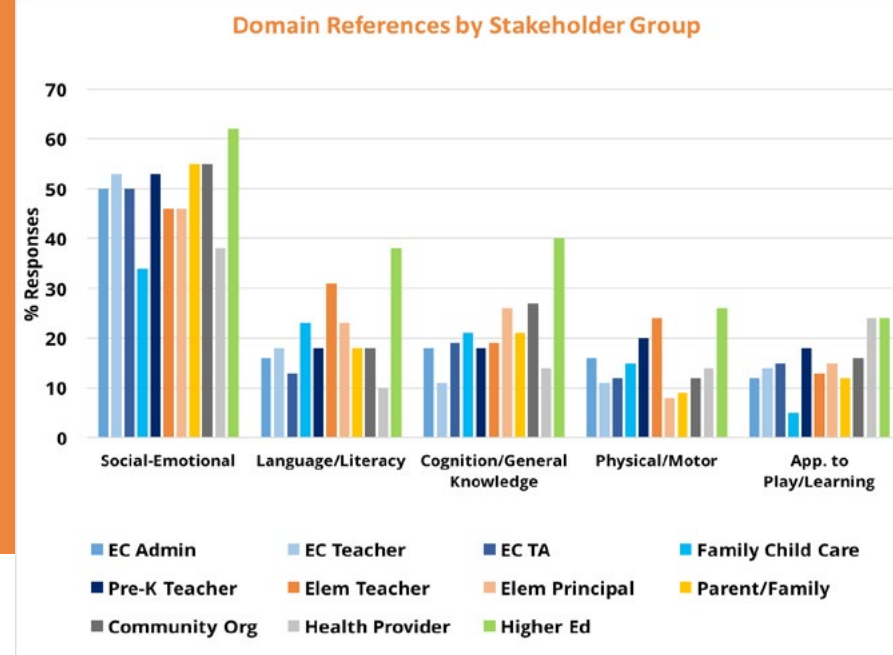- "A child that goes to Pre-K has the opportunity to be ready for Kindergarten."

Some respondents did not reference a specific group or entity but still seemed to acknowledge actors or forces outside the child without identifying the responsible party by name (e.g., *"giving children the tools* they need to succeed in kindergarten" or "children have had *exposure* to numbers, letters, books, and writing."). Thirteen-percent (n = 229) of participants provided such responses, bringing the total number of replies directly and indirectly acknowledging "external" forces to 398, or 22% of all respondents. In other words, the majority (68%; n = 1,387) of respondents, across stakeholder group categories, defined school readiness as a condition inherent to the child or as a set of skills a child ought to be able to display without explicit mention or indirect reference to other entities.

When describing school readiness at the child-level, respondents cited skills and attributes across developmental domains. Responses were coded according to the five domains identified in the Georgia Early Learning and Development Standards (GELDS): physical development and motor skills; social-emotional development; approaches to play and learning; language, literacy, and communication; and cognition and general knowledge (see Appendix B for a summary of the coding scheme). Across all responses, the most commonly cited domain was social-emotional development, referenced in over half of total responses (51%; n = 902). Furthermore, this domain was identified more frequently than any other across *all* stakeholder groups. The second-most-often referenced domain was language, literacy, and communication (20%; n = 349), followed very closely by cognition and general knowledge (19%; n = 346), and then physical development and motor skills (18%; n = 316) and approaches to play and learning (15%; n = 264)[2].

Relative to other stakeholder groups, those in higher education were most likely to identify *each* of the five domains in their responses. After higher education professionals, those most likely to reference **social-emotional development** in their responses were parents and family members, while family child care providers were the *least* likely to include references to this domain. Those most likely to cite **language, literacy, and communication** skills were higher education professionals and elementary teachers, respectively, while the least likely to cite this domain were health care providers. **Cognition and general knowledge** was referenced most by higher education professionals, followed by community organization and family support staff; this domain was least likely to be cited among early childhood teachers. References to **physical development and motor skills** were most likely among higher education professionals and then elementary teachers, while principals were least likely to include such references. Finally, after higher education professionals, health care providers were most likely to include references to **approaches to play and learning**, while family child care providers were least likely to cite this domain. See the table below for a summary of coded responses by stakeholder group.

> **The most commonly cited domain was social-emotional development, referenced in over half of all responses and identified more frequently than any other domain across all stakeholder groups.**

Domain References by Stakeholder Group

## Perceived Stakeholder Group Responsibility in Promoting School Readiness

We asked respondents to consider the role of six key stakeholder groups—families, early childhood programs, local school systems, community organizations and initiatives, health care providers, and policymakers—in promoting school readiness and to rank the perceived importance of each. Respondents ranked each group on a five-point Likert scale where a "1" represented "no responsibility," and a "5" represented a "very high level of responsibility." A Friedman test was conducted to evaluate differences among "responsibility" rankings of early childhood programs (M*= 4.61), families (M = 4.59), school systems (M = 4.31), policymakers (M = 3.91), community organizations and initiatives (M = 3.60), and health care providers (M = 3.55). The test was significant, χ^2 (5, 1,980) = 3,323.20, p < .001, and the Kendall coefficient of concordance was .34, indicating fairly strong differences in rankings among the six categories. Follow-up pairwise comparisons indicated that rankings for all groups were significantly different from one another, with the exception of health care providers and community organizations and early childhood programs and families.


Overall Ranking - Stakeholder Group Responsibility
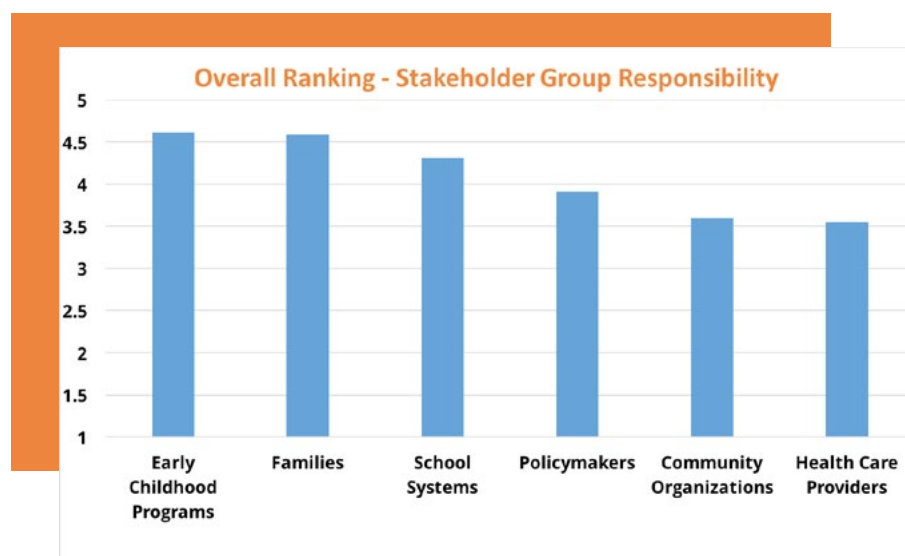
Means should be interpreted with caution given the nature of Likert data. Non-parametric tests were employed to examine group differences.

In order to evaluate differences in how individual stakeholder groups—including early childhood professionals (i.e., early childhood (birth – age 3) teachers, Pre-K teachers, family child care, early childhood administrators, and early childhood technical assistance providers), elementary educators, principals, higher ed., health care providers, families, and community organization and family support staff—ranked each of the six categories, a series of Kruskal-Wallis tests were conducted. The test was significant for early childhood programs (χ^2 (10, 1,980) = 41.07, p < .001), community organizations and initiatives (χ^2 (10, 1,980 = 51.95, p < .001), health care providers (χ^2 (10, 1,980) = 45.63, p < .001), and policymakers (χ^2 (10, 1,980) = 62.92, p < .001), meaning that there were differences in the way various respondent groups perceive the responsibility of these four categories but not the remaining two (families or school systems). Post-hoc analyses were conducted to evaluate pairwise differences among the various stakeholder groups.
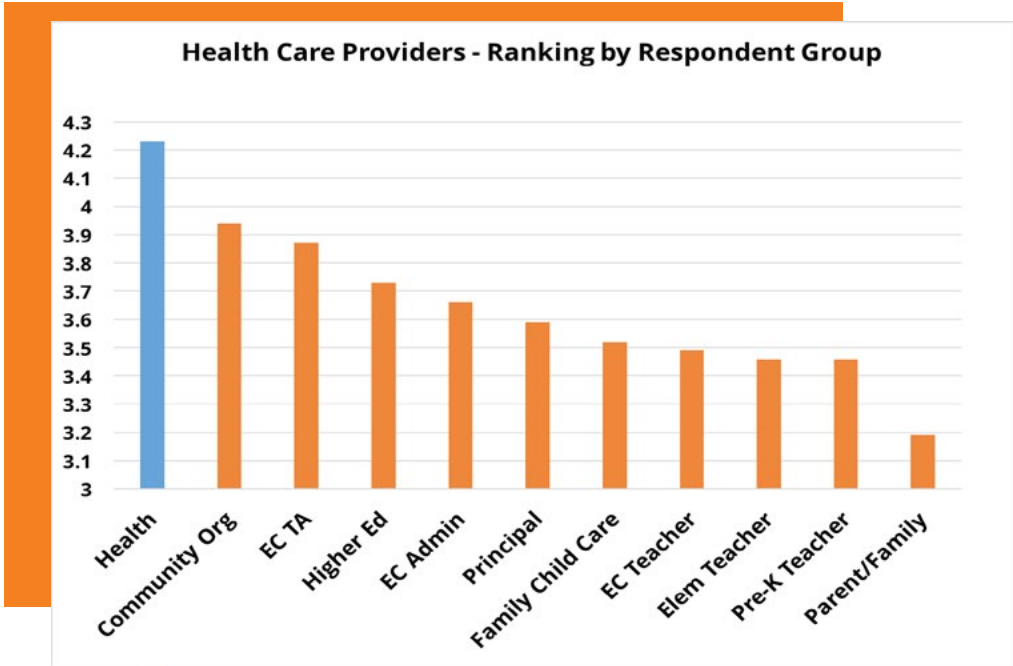
Regarding early childhood programs, family child care providers (M = 4.36) supplied the lowest rankings, significantly lower than Pre-K teachers (M = 4.63), early childhood administrators (M = 4.69), and early childhood technical asistance providers (M = 4.81). Elementary teachers (M = 4.45) provided the second-lowest rankings of early childhood programs, significantly lower than both Pre-K teachers and early childhood administrators.


Early Childhood Programs - Ranking by Respondent Group
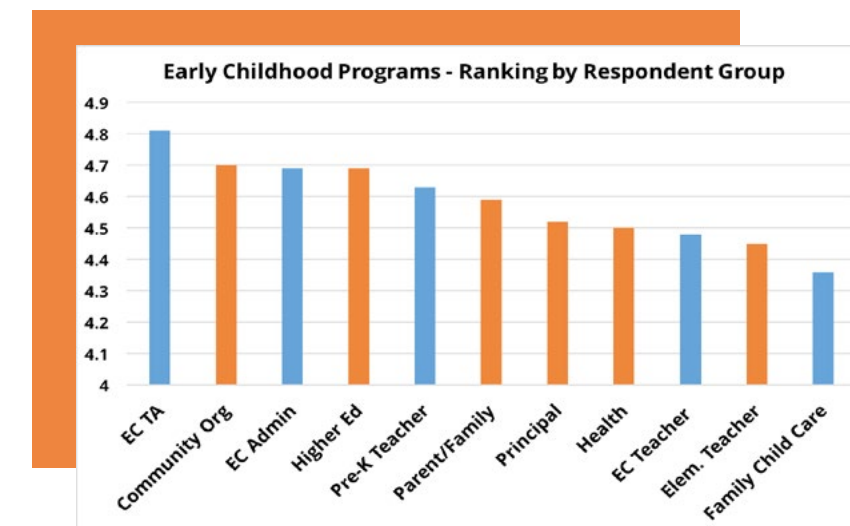
Community organization and family support staff (M = 4.15) and early childhood technical assistance providers (M = 4.09) provided the highest rankings of "community organizations and initiatives," significantly higher than families (M = 3.26), early childhood teachers (M = 3.44) and administrators (M = 3.68), Pre-K teachers (M = 3.54), family child care providers (M = 3.49), and elementary teachers (M = 3.52). Families provided the lowest rankings for this category, significantly lower than early childhood administrators, early childhood technical assistance providers, and community organization and family support staff.

Community Organizations & Initiatives - Ranking by Respondent Group
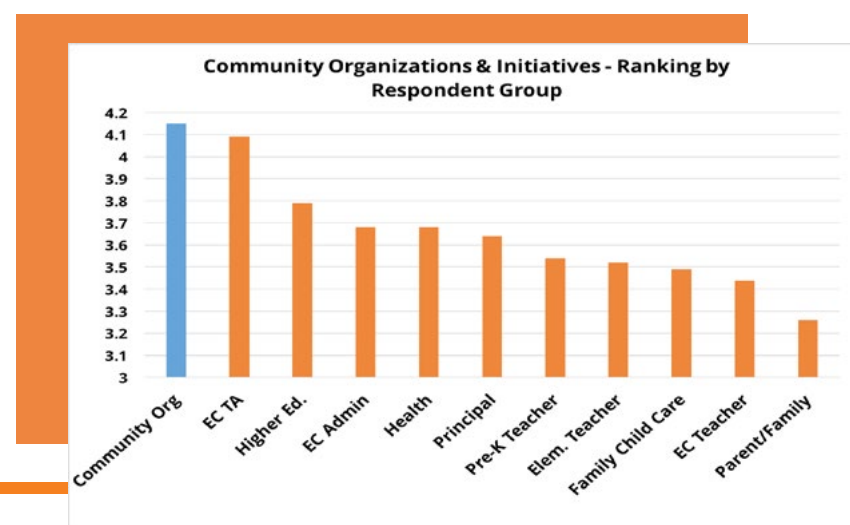
Health care providers (*M* = 4.23) provided the highest rankings for their own stakeholder group, significantly higher than both families (*M* = 3.19) and Pre-K teachers (*M* = 3.46). Families provided the lowest rankings, significantly lower than not only health care providers but also early childhood administrators (*M* = 3.66) and technical assistance providers (*M* = 3.87) and community organization and family support staff (*M* = 3.94).

Health Care Providers - Ranking by Respondent Group

Regarding the role of policymakers, families (*M* = 3.60), elementary teachers (*M* = 3.61), and Pre-K teachers (*M* = 3.78) provided the lowest rankings, significantly lower than early childhood administrators (*M* = 4.11) and technical assistance providers (*M* = 4.45) as well as community organization and family support staff (*M* = 4.46).

Policymakers - Ranking by Respondent Group
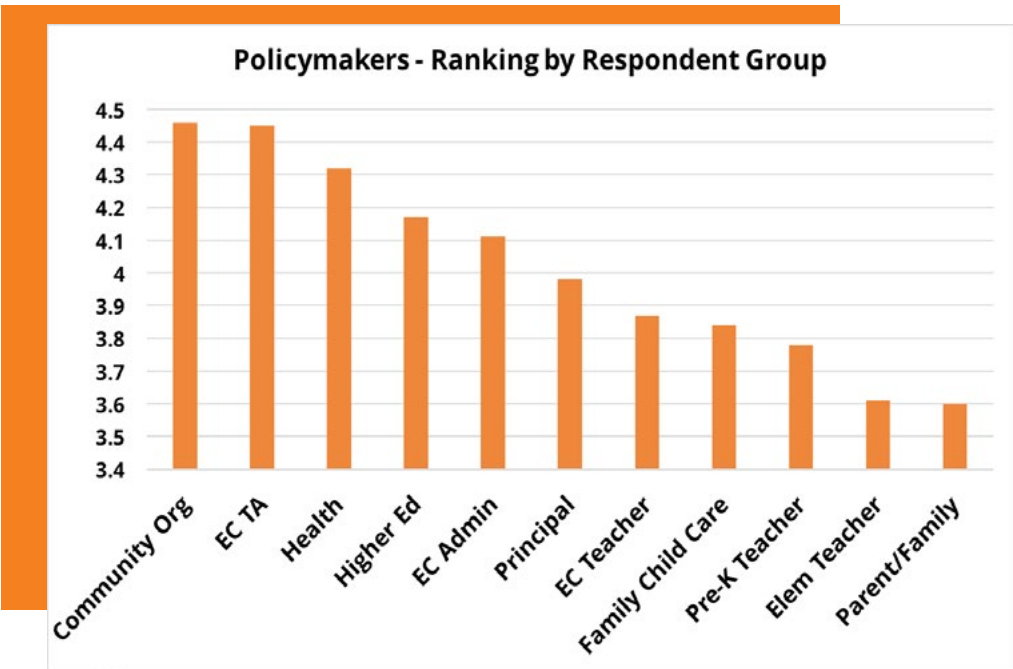
Perceived Importance of Child-Level Domains

We also asked respondents to rank the importance of five developmental domains—cognition and general knowledge, social-emotional development, language and literacy development, physical well-being and motor development, and approaches to learning—for children's readiness for school. Unlike the initial open-ended "*What does school readiness mean to you?*" prompt, respondents were asked to rank each domain on a five-point Likert scale where a "1" represented "not at all important" and a "5" represented "extremely important." A Friedman test was conducted to evaluate differences among rankings of cognition and general knowledge (*M** = 4.42), social-emotional development (*M* = 4.77), language and literacy development (*M* = 4.50), physical well-being and motor development (*M* = 4.54), and approaches to learning (*M* = 4.57). The test was significant, χ^2 (4, 1,980) = 471.45, *p* < .001, and the Kendall coefficient of concordance was .06, indicating relatively weak differences in rankings among the five domains. Follow-up pairwise comparisons indicated that rankings for cognition and general knowledge were significantly lower than all other domains, while rankings for social-emotional development were *higher* than all others. No significant differences were observed among the language and literacy development, physical well-being and motor development, and approaches to learning domains.

In order to evaluate differences in how respondent groups ranked each of the five domains, a series of Kruskal-Wallis tests were conducted. The tests were significant for cognition and general knowledge (χ^2 (10, 1,980) = 26.28, *p* = .003), language and literacy development (χ^2 (10, 1,980) = 22.34, *p* = .013), and approaches to learning (χ^2 (10, 1,980) = 20.86, *p* = .022), meaning that there were differences in the way various stakeholder groups perceive the importance of these three domains but not the others (social-emotional development and physical well-being and motor development). Post-hoc analyses were conducted to evaluate pairwise differences among the various stakeholder groups. For cognition and general knowledge, families provided the lowest rankings (*M* = 4.09), significantly lower than both family child care providers (*M* = 4.51) and Pre-K teachers (*M* = 4.49). For language and literacy development, families (*M* = 4.18) provided significantly lower rankings than Pre-K teachers (*M* = 4.57). For approaches to learning, families (*M* = 4.34) provided significantly lower rankings than early childhood technical assistance providers (*M* = 4.77), who provided the highest rankings for this category.

Discussion

This study sought to better understand perceptions of school readiness among stakeholders across the state of Georgia. In general, and consistent with previous research among educators and families, survey results revealed that beliefs about school readiness vary both across and within stakeholder groups. This study incorporated a broader sample of stakeholders than previous studies, surveying early childhood educators and administrators, elementary educators and administrators, health care professionals, parents, community organization staff, and those in higher education.

Our first question asked respondents to describe school readiness in their own terms. When presented with an open-ended request to define readiness, respondents provided overwhelmingly child-centric replies, typically identifying skills or characteristics children ought to display or possess without mention of forces outside the child, such as schools or families. This is perhaps not unexpected but is worthy of note, particularly as initiatives in Georgia and around the nation have sought to portray school readiness as broader than a condition intrinsic to the child.

Stakeholder groups varied in their likelihood to identify external influences in descriptions of school readiness. For example, nearly a third of community organization staff and health care providers included such references, while only 5% of family child care providers did. Such findings suggest that some stakeholders, including those directly serving children, may not universally perceive school readiness as a multifaceted construct that relies on support from and coordination among a variety of entities.

Of those that *did* identify external forces (< 10% of total responses), the most commonly referenced group or category was families, followed by schools, early childhood programs, health and related services, and communities. When asked later in the survey about the responsibility of various stakeholder groups in promoting school readiness, respondents provided the highest rankings for early childhood programs and families. It may be that individuals can identify the relevance of particular groups' efforts to school readiness when presented with specific options but that such entities don't immediately come to mind when asked to simply describe the term.

Examining the stakeholder group rankings by respondent role uncovered some noteworthy differences in how individuals view their own role and that of others in promoting school readiness. In most cases, respondents tended to provide high rankings for their own category of stakeholder group. For example, among all respondent groups, community organization and family support staff provided the highest rankings for "community organizations and initiatives," and health care providers supplied the highest rankings for "health care providers." A notable exception was family child care providers, who supplied the lowest rankings for their own category, "early childhood programs."

We examined perceptions of the various child-level domains (i.e., physical, social-emotional, language and literacy, cognition and general knowledge, and approaches to learning) in two ways: first by coding open-ended responses for references to the domains and second by analyzing the Likert-scale item that asked respondents to rank the importance of each domain. In both cases, social-emotional development emerged as the most frequently cited or highest ranked domain. Over half of the open-ended responses included references to the domain, and the mean ranking for social-emotional development was significantly higher than all other domains. It is worthy to note that mean rankings for all five domains were relatively high, ranging from 4.42 to 4.77 on a five-point scale, although rankings for cognition and general knowledge were significantly lower than all other domains. In contrast, open-ended responses included many references to cognition and general knowledge, on-par with references to language and literacy. Approaches to learning, with the second highest mean ranking among domains, was referenced least often in open-ended responses (e.g., "able to pay attention and maintain focus on tasks" or "motivated and eager to learn new things). In contrast to prior research, parents and families provided the lowest rankings for the more "academic" domains: language and literacy and cognition and general knowledge, indicating that Georgia parents' priorities may differ from those of other stakeholder groups in the state, including teachers.

In sum, respondents seemed to view all domains as relevant, especially when presented with all five domains to rank, but social-emotional development consistently came out on top, perhaps reflecting a more recent focus on social-emotional learning across the P-3 continuum. Across the other domains, discrepancies exist—both among and within stakeholder groups as well as by question type (i.e., open-ended vs. ranking). It may be that some concepts are more difficult to describe or come to mind less immediately than others, accounting for the latter difference. Of note, the cognition category received significantly lower rankings but still appeared frequently in open-ended responses (e.g., "numbers and measurement" and "content knowledge and critical thinking skills").

This study sought to elucidate perceptions of school readiness among a diverse group of Georgia stakeholders. The findings are nuanced and many; this report merely summarizes key results from nearly 2,000 survey responses. Results seem to indicate that most stakeholders appreciate the notion of a multifaceted conceptualization of school readiness and may believe that some stakeholder groups and child-level domains are more relevant than others. Despite this, most stakeholders failed to provide an explanation of school readiness that was similarly broad in scope. The large number of generic responses to the request to describe school readiness (e.g., "a child being ready for school") underscore the potential value of more explicit communications regarding what school readiness is and which parties are involved in promoting it.

These survey findings can be used in a variety of contexts to improve coordination among stakeholder groups and, ultimately, outcomes for children and families. The specific discrepancies observed across stakeholder groups may serve as important levers for action as such groups (e.g., elementary and early childhood professionals) seek to work together to promote school readiness in communities across the state. The survey findings suggest that child-serving professionals, families, and administrators may not be on the same page when it comes to defining and promoting school readiness but also represent an important first step in aligning the efforts and initiatives of these groups.

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Appendix A

Online Survey
We invite you to share your thoughts on school readiness. This survey is voluntary, and all responses are confidential. It will take about 5 minutes to complete.

1. Ideas about what it means to be "ready for school" vary. What does "school readiness" mean to you? [open-ended]

2. Which of the following best describes your role?
- ◼ early childhood (0-3) teacher
- ◼ Pre-K teacher
- ◼ early childhood administrator (e.g., center director)
- ◼ family childcare provider
- ◼ elementary school teacher
- ◼ elementary school principal
- ◼ superintendent
- ◼ school board member
- ◼ health care provider
- ◼ community organization staff (e.g., Boys & Girls Club)
- ◼ higher education
- ◼ parent/family (note: if you are both a parent and a member of an above group, please select one of the options above for the purposes of this survey)
- ◼ other: _____

3. How would you describe the role of [stakeholder group identified above] in promoting school readiness?

4. Consider the groups below. Please rank each on a scale of 1 to 5, showing how responsible you think the group is for promoting school readiness. A 1 represents "no responsibility," and a 5 represents a "very high level of responsibility.

	1 (no responsibility)	2 (low responsibility)	3 (some/moderate responsibility)	4 (high level of responsibility)	5 (very high level of responsibility)
Parents and families	◯	◯	◯	◯	◯
Early childhood programs (including Pre-K)	◯	◯	◯	◯	◯
Local school systems	◯	◯	◯	◯	◯
Community organizations/initiatives	◯	◯	◯	◯	◯
Health care providers	◯	◯	◯	◯	◯
Policymakers	◯	◯	◯	◯	◯

5. There are many skills that may be important for children to learn before and during kindergarten. Consider the five domains, or areas, below. For each, please rank its importance for children's readiness for school. A 1 represents "not at all important," and a 5 represents "extremely important."

	not at all important	slightly important	moderately important	very important	extremely important
Cognition and General Knowledge (e.g., number sense, shapes and colors, problem solving, classification, etc.)	◯	◯	◯	◯	◯
Social and Emotional Development (e.g., understanding and expressing emotions, self-regulation, developing positive relationships with peers, etc.)	◯	◯	◯	◯	◯
Language and Literacy Development (e.g., rhyming, letter names, vocabulary, awareness of print, etc.)	◯	◯	◯	◯	◯
Physical Well-Being and Motor Development (e.g., fine/gross motor skills, health status, etc.)	◯	◯	◯	◯	◯
Approaches to Learning (e.g., persistence, curiosity, attentiveness, etc.)	◯	◯	◯	◯	◯

Thank you for taking the time to complete our survey. We'd appreciate you sharing a little more about yourself.

6. What is your age?

7. What is your sex?
- ◼ Male
- ◼ Female

8. Do you consider yourself:
- ◼ White
- ◼ Black/African American
- ◼ Asian American
- ◼ Hispanic/Latino
- ◼ Indian/Alaskan Native
- ◼ Native Hawaiian/Other Pacific Islander
- ◼ Other (please specify)

9. Please list your home ZIP code: _____

Appendix B

Coding Scheme – Qualitative Question 1 – Child-Level Domains

Domain	Key Terms/Characteristics	Examples
Physical Development and Motor Skills	• Health and well-being (including nutrition, safe/healthy habits, personal care) • Use of senses • Motor skills (fine and gross)	"Healthy and physically prepared for school" "Able to use scissors and hold pencil properly" "Health barriers that block learning have been detected and suspected physical or mental disabilities have been addressed"
Social-Emotional Development	• Sense of self (self-expression, self-awareness, self-confidence) • Self-regulation (self-control; following rules/routines or listening to instructions) • Sense of self with others (relationships/social skills with adults, with peers)	"Able to work cooperatively in a group of other students." "Being prepared, socially and emotionally, to succeed in school." "Able to self-regulate and follow directions."
Approaches to Play and Learning	• Initiative and exploration (interest, self-direction, curiosity) • Attentiveness and persistence (including sustained engagement in activity) • Play (imaginative play, cooperative/flexible approach to play and learning)	"Able to pay attention and maintain focus on tasks" "Motivated and eager to learn new things." "Experiencing learning through play."
Language, Literacy, and Communication	• Receptive language (vocabulary and comprehension in conversations/activities/stories/books) • Expressive language (spoken language, non-verbal communication) • Early reading (phonological awareness, alphabet knowledge, concepts of print, acquiring meaning) • Early writing	"Able to speak, listen, answer questions, participate and knowing the ABC's, and how to write and spell their name aloud." "A strong language and literacy foundation (listening comp, phonological awareness, phonics, speaking)." "Having enough vocabulary acquisition and language skills in order to grasp pre-reading and other foundational skills."
Cognition and General Knowledge	• Math (#/quantity, measurement, comparison, geometry/spatial, mathematic reasoning) • Science (physical, scientific skills/method) • Social Studies (family, community/people, history/events) • Creative development (movement/dance, visual arts, music, dramatic play) • Cognitive processes (thinking, problem-solving skills)	"Students have experienced numbers and quantity, classification, patterns, weight and measurement." "Having problem solving and critical thinking skills." "Able to demonstrate the knowledge, skills and behaviors in, science development, social studies development, math development and creative development."