

>> From the JAMA Network, this is JAMA Pediatrics' Author Interviews, conversations with authors exploring the latest clinical research, reviews, and opinions featured in JAMA Pediatrics.

>> Hi, this is Aaron Carroll and I'm the digital media editor for JAMA Pediatrics. In this podcast, they talked about interesting articles featured in the journal and what they might mean to you. This week, I'm focusing on preschool home visiting, [inaudible] school readiness and reduces need for services in elementary school, a randomized program evaluation by Karen Bierman, Janet Welsh, and Barbara Heinrichs. Home visiting programs can deliver services to many parents who otherwise face challenges that make raising kids harder. Usually such programs are delivered when babies are in the first few years of life. Research has suggested these programs can improve parenting and reduce the risk of neglect or abuse. We don't know, on the other hand, how much these programs improve kids' academic achievement or readiness for school years later. We'd like to think they make things better, but we don't know for sure. We also don't know as much about home visiting programs that are aimed at older kids, think 4 to 5-year-olds, right before they start kindergarten. And for this study, the research based developmentally informed parent, or Ready P, home visiting program was designed for kids in preschool. It was focused on getting parents to help improve kids' language literacy and social-emotional development. It gave parents learning materials, coaching, and support in helping their kids academically. This study looked at the long-term follow-up of kids in the Ready P Program. The program, itself, involved 10 home visits in the spring of a child's pre-kindergarten year and six more visits in the fall, after they started kindergarten. During these visits, parents were given activity boxes of play materials and stories. They watched videos on using the materials, reading interactively with their kids, and parenting positively. Free intervention assessments were done while the kids were in preschool. Outcome assessments were at the end of third grade though, years later. They included academic performance in reading and math, social-emotional adjustment, as measured by social understanding, attention, impulse control, and mastering motivation; home problems, measured through a number of parent questionnaires, and service needs, as reported by teachers in the school. Two hundred students were initially enrolled in the study from 24 Head Start centers. They were randomized to either get the Ready P intervention or usual care. Almost all of the families were living in poverty. Some attrition occurred over time, mostly because people moved, but that attrition wasn't different between the groups. Outcomes in third grade were available for 80% of those who started the trial. Ready P led to improvements in child sight-word reading fluency and teacher rated academic performance. It improved task orientation and social understanding. It led to reductions in home problems, as well as reductions in parental stress and hassles. Finally, kids who received Ready P needed and used fewer services than kids who didn't. In other words, it made things better in pretty much every area that the researchers were measuring. Let me say that again, this study showed that a home visiting program at 4 years of age produced effects that we're still seeing four years later in terms of better academic performance, better social-emotional functioning, better home life, and fewer needs at school. Still, there are limitations in this study. There could have been some self-selection into the original work, there's about 40% of those approached declined to participate in the original study. Everyone in the program was also getting Head Start and it's not clear how Ready P would function without it. But look, this was a randomized controlled trial, let's not minimize that. They're not easy to do and they're

expensive. They're also one of the few ways to get at causality and they did here. And they showed that Ready P, added to preschool education, improved things in many domains many years later. What did it cost? Is it worth the cost? That's not quite as clear. That could be the focus of future research. But programs that improve outcomes years after they're delivered, sometimes good things cost money. The article though is free this week so please do go read it at [jamanetwork.com/journals/jamapediatrics](http://jamanetwork.com/journals/jamapediatrics).

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