#### INTRODUCTION

Reach Out and Read is a primary care clinic-based program that promotes early childhood literacy through providing books and advice within pediatric wellchild visits. Prior studies show that-par ents who participate in the program read aloud to their children more often, own more children's books, and enjoy reading together as a family more than families who do not participate3 In addition, children participating in Reach Out and Read were found to have higher vocabulary scores and higher expressive and receptive language scores than their peersThese skills are crucial for children's social, cognitive, and emotional developmenDespite evidence supporting Reach Out and Read, remarkitive, an

# METHODS

This study involved a qualitative descrip tive evaluation of the effects of Reach Out and Read on clinic attitudes, values, and knowledge relating to early childhood lit eracy. Key informant semistructured inter views were the primary research method ology. The Institutional Review Board of the University of Wisconsin classified this study as exempt.

### Study Population

Two different clinic groups were used in this study: (1) a study group consisting of e descrip by the same interview *Sete* Appendices A and B at www.wmjonline.org for interview questions.

### Data Analysis

With appropriate permissions and informed consent, phone interviews were recorded and transcribed, then analyzed accord ing to qualitative methods following the protocol of Taylor-Powell and RennerTranscripts were openly coded by 1 coder, and core themes were developed based on the interview questions and emergent patterns from the transcript codes. Major codes were developed based on content repetition and word frequency. Further analysis looked specifically at how employees at the study clinics perceived the program affects their clinic.

## RESULTS

Of the 26 clinics with Reach Out and Read that were contacted initially, 10 participated in phone interviews. Of the 25 clinics contacted in the control group, 7 participated in interviews: 5 via phone and 2 via email (per physician request based on scheduling constraints). Table 1 shows a comparison of the study and control group demographics.

Clinics involved in Reach Out and Read that were not stud

ity bias. Although the clinics were explicitly informed that evREFERENCES thing stated in the interview would remain confidential, there in a state of /w have been reluctance to give negative feedback, especially given the involvement of the medical director of Reach Out and Read Wisconsin, although he only saw anonymized transcripts. In addition was tion, as many of the clinics interviewed are affiliated with Health, results may be biased towards a more positive experience ediatr2005 as this organization provides full funding for Reach Out and Read.

Since this was a self-report study, it is possible the key to the way to the self-report study. mants did not provide entirely accurate descriptions of their gram use. Selection bias was introduced by the research team in the creation of strict exclusion/inclusion requirements for Blaiscontome study. In addition, due to study limitations, only 1 coder analy the interview transcripts. 7. CONDEPARTION

#### CONCLUSION

Despite the small sample size and limitations, there are hand the implications for clinics and systems considering Reach Out and Read. First and foremost, these data provide support-for cur rent Reach Out and Read programs and can help sustain fund ing for this valuable community program. In addition, based on this study, clinics considering implementing Reach Out and Read can understand some of the positive changes seen in other clinics after program implementation. This research also may encourage more clinics to apply for Reach Out and Read because-it show cases the program's many advantages and very few disadvantages. Finally, large clinic systems that support early childhood literacy promotion may consider offering full-system financial support for Reach Out and Read, knowing that funding is the main barrier to execution in many clinics. They also may consider investing in the program, knowing the benefits of improving employee morale and engaging around the mission to improve child health.

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Conflict of InteresDipesh Navsaria, MPH, MSLIS, MD, is the medical di rector of Reach Out and Read Wisconsin and is on the Medical Leadership Committee and Board of Directors of Reach Out and Read National Center.

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