

# Reach Out and Read

Review: [Foundations for Life](#), July 2016

**Note on provider involvement:** This provider has agreed to EIF's terms of reference, and the assessment has been conducted and published with the full cooperation of the programme provider.

**Reach Out and Read (ROR) is a clinic-based paediatric literacy intervention for parents with a child from infancy through to five years and is focused on, but not restricted to, families living in disadvantaged communities.**

The programme is delivered individually to parents and their children by clinicians, including paediatricians, nurse practitioners and primary care physicians, at each of 10 routine health checkups. Practitioners talk with families about the importance of reading aloud and engaging with their young children as an integral part of the checkup. They show the parents how to look at books with their children and encourage them to read together at home and build routines around books. The child is given a new developmentally appropriate book to take home and keep. The aim of the programme is to both improve the child's language development and to encourage parent-child bonding through reading aloud that has both cognitive and social-emotional outcomes.

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Evidence  
rating: 2+

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Cost rating: 2

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## EIF Programme Assessment

Reach Out and Read has **preliminary evidence** of improving a child outcome, but we cannot be confident that the programme caused the improvement.

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Evidence  
rating: **2+**

### What does the evidence rating mean?

**Level 2** indicates that the programme has evidence of improving a child outcome from a study involving at least 20 participants, representing 60% of the sample, using validated instruments.

This programme does not receive a rating of 3 as its best evidence is not from a rigorously conducted RCT or QED evaluation.

### What does the plus mean?

The plus rating indicates that a programme's best available evidence is based on an evaluation that is more rigorous than a level 2 standard but does not meet the criteria for level 3.

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## Cost rating

A rating of 2 indicates that a programme has a medium-low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of £100–£499.

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Cost rating: **2**

# Child outcomes

According to the best available evidence for this programme's impact, it can achieve the following positive outcomes for children:

## Enhancing school achievement & employment

### Improved receptive vocabulary

Based on study 1

### Improved expressive vocabulary

Based on study 1

This programme also has evidence of supporting positive outcomes for couples, parents or families that may be relevant to a commissioning decision. Please see the 'About the evidence' section for more detail.

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# Key programme characteristics

## Who is it for?

The best available evidence for this programme relates to the following age-groups:

- Infants
- Toddlers
- Preschool

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## How is it delivered?

The best available evidence for this programme relates to implementation through these delivery models:

- Individual

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## Where is it delivered?

The best available evidence for this programme relates to its implementation in these settings:

- Out-patient health setting

The programme may also be delivered in these settings:

- Out-patient health setting

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## How is it targeted?

The best available evidence for this programme relates to its implementation as:

- Targeted selective
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## Where has it been implemented?

United States

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## UK provision

This programme has not been implemented in the UK.

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## UK evaluation

This programme's best evidence does not include evaluation conducted in the UK.

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## Spotlight sets

EIF does not currently include this programme within any Spotlight set.

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## About the programme

### What happens during delivery?

#### How is it delivered?

- Reach Out and Read is delivered by one practitioner (QCF-7/8) to individuals.
- Read Out and Read is delivered over 13 sessions of 20 minutes each.

### What happens during the intervention?

- Reach Out and Read (ROR) is a clinic-based paediatric literacy intervention for parents with a child from infancy through to age five, and is focused on, but not restricted to, families living in disadvantaged communities.
- The programme is delivered individually to parents and their children by clinicians, including paediatricians, nurse practitioners and primary care physicians, at each of 10 routine health check-ups.
- Practitioners talk with families about the importance of reading aloud and engaging with their young children as an integral part of the check-up.
- They show the parents how to look at books with their children, and encourage them to read together at home and build routines around books.
- The child is given a new developmentally appropriate book to take home and keep.

### What are the implementation requirements?

#### Who can deliver it?

- Reach out and Read is delivered by a physician, nurse practitioner or physician's assistant with recommended QCF-7/8 qualifications.

## What are the training requirements?

- The practitioner receives one hour of programme training. Booster training of practitioners is recommended.

## How are the practitioners supervised?

- It is recommended that practitioners receive supervision from a host-agency supervisor with QCF-7/8 level qualifications.

## What are the systems for maintaining fidelity?

*Not available*

## Is there a licensing requirement?

There is no licence required to run this programme.

## How does it work? (Theory of Change)

### How does it work?

- Reach Out and Read (ROR) is based on the assumption that children's early language is supported through book sharing.
- Parents experiencing economic and social disadvantage are less likely to read out loud and share books with their children. Parents are taught how to read books with their children and are encouraged to read together at home and build routines around books.
- In the short term, ROR aims to improve the child's language development and to encourage parent-child bonding through reading aloud.
- In the long term ROR aims to improve the child's cognitive thinking abilities.

## Intended outcomes

## Contact details

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## About the evidence

Reach Out and Read's most robust evidence comes from one QED, which was conducted in the USA.

This study identified statistically significant positive impact on a number of child and parent outcomes.

A programme receives the same rating as its most robust study, which in this case is the Mendelsohn et al. (2001) study, and so the programme receives a Level 2+ rating overall.

## Study 1

**Citation:** Mendelsohn et al (2001)

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**Design:** QED

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**Country:** United States

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**Sample:** 138 families attending two urban paediatric clinics for well-child care

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**Timing:** Post-test

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### Child outcomes:

- Improved receptive vocabulary
  - Improved expressive vocabulary
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### Other outcomes:

- Increased frequency of parent-child reading
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### Study rating: 2+

Mendelsohn, A. L., Mogilner, L. N., Dreyer, B. P., Forman, J. A., Weinstein, S. C., Broderick, M., Cheng, K. J., Magloire, T., Moore, T., & Napier, C. (2001). The impact of a clinic-based literacy intervention on language development in inner-city preschool children. *Pediatrics*, 107, 130-134.

Available at <https://www.ncbi.nlm.nih.gov/pubmed/11134446>

### Study design and sample

The first study is a QED.

Eligible families presenting to two paediatric clinics in an urban US setting were enrolled into this quasi-experimental study retrospectively. Participants at one of the clinics had all previously received Reach Out and Read, and participants at the other had received business-as-usual only.

This study was conducted in the US, with a sample of 138 children. Children were between two and 5.9-years old when enrolled into the study, though it is unclear what age they were when they began the intervention. Although the populations in each of the clinics are made up of a large number of ethnic groups, Latino and African-American families together make up more than 85% of registered families.

### Measures

The child's home environment was assessed using the READ subscale of StimQ (parent report). Child receptive and expressive vocabulary were measured using the One-Word Picture Vocabulary Test (direct assessment).

### Findings

This study identified statistically significant positive impact on a number of child and parent outcomes.

Child outcomes include:

- Improved receptive vocabulary
- Improved expressive vocabulary

The conclusions that can be drawn from this study are limited by methodological issues pertaining to non-blind data collection and the treatment condition not being modelled at the level of assignment, hence why a higher rating is not achieved.

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## Other studies

The following studies were identified for this programme but did not count towards the programme's overall evidence rating. A programme receives the same rating as its most robust study or studies.

Golova, N., Alario, A. J., Vivier, P. M., Rodriguez, M., & High, P. C. (1999). Literacy promotion for Hispanic families in a primary care setting: a randomized, controlled trial. *Pediatrics*, 103, 993-997 - **This reference refers to a randomised control trial, conducted in the USA.**

Needlman, R., Fried, L. E., Morley, D. S., Taylor, S., & Zuckerman, B. (1991). Clinic-based intervention to promote literacy: A pilot study. *American journal of Diseases of Children*, 145, 881-884 - **This reference refers to a quasi-experimental design, conducted in the USA.**

High, P., Hopmann, M., LaGasse, L., & Linn, H. (1998). Evaluation of a Clinic-Based Program to Promote Book Sharing and Bedtime Routines Among Low-Income Urban Families With Young Children. *Arch Pediatr Adolesc Md*, 152, 459-464 - **This reference refers to a quasi-experimental design, conducted in the USA.**

High, P. C., LaGasse, L., Becker, S., Ahlgren, I. & Gardner, A. (2000). Literacy promotion in primary care pediatrics: Can we make a difference? *Pediatrics*, 105, 927-934 - **This reference refers to a randomised control trial, conducted in the USA.**

Jones, V. F., Franco, S. M., Metcalf, S. C., Popp, R., Staggs, S., & Thomas, A. E. (2000). The Value of Book Distribution in a Clinic-Based Literacy Intervention Program. *Clinical Pediatrics*, 39, 535-41 - **This reference refers to a quasi-experimental design, conducted in the USA.**

Sanders, L. M., Gershon, T.D, Huffman, L. C., & Mendoza, F. S. (2000). Prescribing books for immigrant children: a pilot study to promote emergent literacy among the children of Hispanic immigrants. *Arch Pediatr Adolesc Med*, 154, 771-7 - **This reference refers to a quasi-experimental design, conducted in the USA.**

Sharif, I., Rieber, S. & Ozuah, P. O. (2002). Exposure to Reach Out and Read and vocabulary outcomes in inner city preschoolers. *Journal of the National Medical Association*, 94, 171-177 - **This reference refers to a quasi-experimental design, conducted in the USA.**

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## Guidebook

The EIF Guidebook provides information about early intervention programmes that have at least preliminary evidence of achieving positive outcomes for children. It provides information based on EIF's assessment of the strength of evidence for a programme's effectiveness, and on detail about programmes shared with us by those who design, run and deliver them.

The Guidebook serves an important starting point for commissioners to find out more about effective early interventions, and for programme providers to find out more about what good evidence of impact looks like and how it can be captured. As just one of our key resources for commissioners and practitioners, the Guidebook is an essential part of EIF's work to support the development of and investment in effective early intervention programmes.

Our assessment of the evidence for a programme's effectiveness can inform and support certain parts of a commissioning decision, but it is not a substitute for professional judgment. Evidence about what has worked in the past offers no guarantee that an approach will work in all circumstances. Crucially, the Guidebook is not a market comparison website: ratings and other information should not be interpreted as a specific recommendation, kite mark or endorsement for any programme.

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[How to read the Guidebook](#)

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[EIF evidence standards](#)

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[About the EIF Guidebook](#)

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## EIF

The Early Intervention Foundation (EIF) is an independent charity and a member of the What Works network. We support the use of effective early intervention for children, young people and their families: identifying signals of risk, and responding with effective interventions to improve outcomes, reduce hardship and save the public money in the long term.

We work by generating evidence and knowledge of what works in our field, putting this information in the hands of commissioners, practitioners and policymakers, and supporting the adoption of the evidence in local areas and relevant sectors.

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[www.EIF.org.uk](http://www.EIF.org.uk) | [@TheEIFoundation](https://twitter.com/TheEIFoundation)

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## Disclaimer

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