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# An Investigation of Literacy Environments in Pediatric Offices

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AN INVESTIGATION OF  
LITERACY ENVIRONMENTS  
IN PEDIATRIC OFFICES

THESIS

Submitted to the Graduate Committee of the  
Department of Education and Human Development  
State University of New York  
College of Brockport  
in Partial Fulfillment of the  
Requirements for the Degree of  
Master of Science in Education

by

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## Abstract

The primary purpose of this study was to determine if pediatricians' offices are offering a literacy-rich environment to their patients. A secondary goal was to observe patients' interactions within the environment of a pediatrician's office.

The study involved 10 pediatricians' offices. All of these offices were surveyed by the researcher in order to examine whatever literacy materials were available to the patients. An employee from each office also took part in the research by answering a set of questions specifically related to the inner workings of the office. From the initial observations and data, five offices were utilized for field observations of patients' interactions within their environment.

Materials were available in all offices, but there was a range of quantity and quality. Some offices had an abundant supply of books, magazines, toys and newspapers that were current and handled. Other offices had a minimum supply of materials. Within these offices common titles of books and magazines were found. It was found that the materials in an environment play a significant role with how children

interact with them while waiting. If reading materials were accessible children utilized them. When an office had a television set turned on the children were observed to watch the program.

## Table of Contents

	Page
Chapter I	
Statement of the Problem . . . . .	1
Purpose . . . . .	1
Need for the Study . . . . .	1-5
Questions to be Answered . . . . .	5-6
Definition of Terms . . . . .	6-7
Chapter II	
Review of the Literature . . . . .	8
Literacy Experiences from Birth to	
Preschool . . . . .	8-13
Parents' Role in Literacy . . . . .	13-17
The Impact of Environmental Matls	17-19
Book Experiences . . . . .	20-24
Chapter III	
Design of the Study . . . . .	25
Purpose . . . . .	25
Questions . . . . .	25
Methodology . . . . .	25
Subjects . . . . .	25-26
Materials . . . . .	26

Procedure . . . . .	26-27
Analysis . . . . .	28
Chapter IV	
Analysis of Data . . . . .	29
Purpose . . . . .	29
Analysis of the Survey Ques Part A	29-33
Analysis of the Survey Ques Part B	34-41
Analysis of Observations of Waiting	
Rooms . . . . .	41-42
Chapter V	
Conclusions and Implications . . . . .	43
Conclusions . . . . .	43-45
Implications for Research . . . . .	45-46
Implications for Application . . . . .	46-48
References . . . . .	49-52
Appendices	
Appendix A . . . . .	53-54
Appendix B . . . . .	55-56

## List of Tables

	Page
Table 1: Observations to Statement One: Materials Available in the Offices' Waiting Rooms . . . . .	30-31
Table 2: Observations to Statement Two: Condition of Materials . . . . .	31
Table 3: Observations to Statement Three: Titles of Children's Magazines . . . . .	32
Table 4: Observations to Statement Four: Presence of Adult Reading Materials . . . . .	33
Table 5: Observations to Statement Five: Television . . . . .	33
Table 6: Responses to Question One: Who is completing this survey? . . . . .	34
Table 7: Responses to Question Two: Age range of patients that visit this office . . . . .	35
Table 8: Responses to Question Three: Estimate the average amount of time spent by a patient in the waiting room	35
Table 9: Responses to Question Four: Are these materials used by patients?	.36



Table 10: Responses to Question Five:	
	Who is responsible for selecting these materials? . . . . . 37
Table 11: Responses to Question Six:	
	Where do these materials come from? . 37
Table 12: Responses to Question Seven:	
	Do you feel this office could use some help in determining what materials should be made available to promote literacy? . . . . . 38
Table 13: Responses to Question Eight:	
	Do I have permission to observe children's behavior while they wait in your waiting room? . . . . . 38

## Chapter I

### Statement of the Problem

#### Purpose

The primary purpose of this study was to determine if pediatricians' offices are offering a literacy-rich environment to their patients. A secondary goal was to observe patients' interactions within the environment of a pediatrician's office.

#### Need for the Study

Goodman (1982) believes, "Children discover and invent literacy as they participate actively in a literate society" (p. 102). A literate society can be found in many different environments, such as the home, day-care, school, library, and pediatricians' offices. What a child does in these environments largely depends on materials provided, the child's interest, and interaction with an adult. Goodman (1986) states:

Children in a literate society grow up with literacy as an integral part of their personal, familial, and social histories. Interacting with their literate environment, children invent their own literacies, and their inventions often parallel the inventions by society as a whole (p. 1).

Leichter (1982) emphasizes, "The relation of familial education to that in other institutions, including

neighborhoods, museums, the media, health institutions, and school, must be considered" (pp. 38-39). According to Balaban (1987), it seems that children are our priority and we need to carry out our commitment to children not only to and in the classroom but beyond it. Morrow and Smith (1990) state, "Learning literacy is seen as a continuous process, ... with exposure to oral language, written language, books, and stories beginning in the home and extending to other environments" (p. 1).

Teale's work (1986) shows that children in literate societies encounter print in their daily activities. Two and three year olds have a specific idea about what written language is and how the process of reading and writing work. Strickland and Morrow (1989) concluded that, "Observations of children in literate environments suggest that it is the dynamic interaction between people and materials that encourages and shapes the learning" (p. 722). McKenzie (1977) points out, "Children have met written language in imaginative and functional and practical forms; thus they already have some knowledge of purpose of reading and the satisfaction to be found in the enjoyment of books and stories" (p. 45).

Butler and Clay (1979) state, "It is in the preschool years that we have the opportunity to prepare our children by providing informal one-to-one learning situations in everyday life where the child learns his language and learns how to learn" (p. 37). According to Hill (1989), "In the daily routine of family living we have helped them master crafts, learn family values; have a sense of heritage; assume a role in society; and learn to talk, listen, read and write" (p. 1). Early experiences with literacy are part of the relationships, activities, and settings of children's everyday lives. People make reading interesting and meaningful to children. Adults play crucial roles by serving as models, providing materials, demonstrating their use, reading aloud, offering help, praise, and expectations. Through interactions such as these, attitudes and expectations are brought to the child's consciousness about the eventual development the child will engage in to become a reader (McLane and McNamee, 1990).

McLane and McNamee (1990) continue:

It is both what children and what other people bring to these interactions that shapes what children learn and how they come to see the eventual place of literacy in their own lives. Young children stand the best chance of

developing a good foundation for writing and reading if their learning about literacy is anchored in their relationships with caretakers, peers, and other community members, and if it is tied to contexts and activities that have personal meaning and value for them (pp. 143-144).

According to Morrow (1989):

The schools also need to take on the responsibility of getting information to homes about the need for rich literacy environments. Information can be disseminated through special meetings for expectant parents, in hospital maternity wards, in obstetricians' and pediatricians' offices, and through churches, synagogues, and community agencies (pp. 35-36).

It is a fact of life that part of a child's experience involves visiting the pediatrician. Inevitably, during these visits the patient will encounter a waiting period. During this wait, what options does the child have to occupy his/her time?

If the environment is literacy-rich a child will have some choices to make. The child could initiate his/her own reading by selecting books or magazines. If adult reading materials are available and utilized by the care-giver, the child could imitate the observed behavior. Shared storybook reading could occur between parent and child especially if this is a common practice for them. Manipulatives such as paper or

coloring books and writing instruments could be another avenue of literacy enrichment for the child.

If these materials are non-existent, inappropriate, or stale, then from what does the child have to select? If the parent does not take the initiative to plan ahead and supply interesting materials for the child, who will?

Based on comments made by parents, the waiting room experience can be positive or negative. If there are materials such as books and magazines, the child could become involved with them alone or with the adult. If no materials are in this environment, precious time is wasted by doing nothing. There is no purpose to the time, and negative behavior or restlessness may occur as a result of boredom by the child.

Initial observations made by the researcher in several waiting rooms made the question of what happens while waiting in this setting valid and necessary for investigation.

#### Questions to be Answered

Huck and Kuhn (1961) state, "Concern for the development of lifetime reading habits is not the sole responsibility of the school or library" (p. 590).

They continue, ... "the philosophy that the home, school, and community should work cooperatively to create an effective reading environment" (p. 591). In view of this statement the following questions must be explored:

1. What materials that help promote literacy are in a pediatrician's office?
2. If literacy materials are provided in a pediatrician's office, how are they being utilized by patients?

#### Definition of Terms

Literacy-rich environment Materials within an environment that foster growth in literacy. These materials include books, magazines, pamphlets, newspapers, toys, writing instruments and paper. Factors that are a consideration for a literacy-rich environment are quality, age appropriateness, and real literature found within these materials.

Print in the environment The books, magazines, and newspapers that are in any given setting. In this study, it must be noted that environmental print such as labels and signs within the environment are not part of this definition.

Waiting time The amount of time spent when arriving at

a pediatrician's office in the waiting room.



## Chapter II

### Review of the Literature

The primary purpose of this study was to determine if pediatricians' offices are promoting literacy by offering a literate environment to their patients. A secondary goal was to observe patients' interactions within the environment of a pediatrician's office. For the purpose of organization, the review of the literature was organized into the following areas: the development of literacy from birth through the preschool years, parents' role in literacy development, the impact of environmental materials, and book experiences.

#### Literacy Experiences From Birth Through Preschool

"Learning literacy is seen as a continuous process, beginning in infancy with exposure in the home and extending to other environments" (Morrow & Smith, 1990, p. 1). Morrow (1989) believes that from the moment of birth babies begin to acquire information about literacy. As they go through early childhood,

they continue to build on their knowledge of oral language, reading, and writing. This process continues throughout life.

"Preparation for reading begins at birth" (Larrick, 1975, p. 18). Four weeks old is not considered too early to start. The first way to prepare children for literacy is to talk to them and to share pleasure in human sounds. She continues, "Linguists explain that an infant is born with the capacity to acquire the language he hears spoken around him" (p. 18). Silvern and Silvern (1990) point out, "Literacy does not have to be taught; it grows naturally through literate interactions" (p. 8).

Butler's research (1979) proves how early literacy can develop. She studied a four-month-old girl who was multi-handicapped, chronically-ill and needed constant care. Her early childhood was filled with such illnesses and crises that doctors diagnosed her as having a future of severe retardation. She began her literacy experience at four months of age when her parents showed her pictures in books and read to her. Her family made sure her contact with language and books became a central part of her life. At six and a half she was reading at a level well beyond her actual

age and still had all her original handicaps. She was nurtured in an environment of language and stories, and she learned.

In Morrow's case study of her daughter (1989), evidence is given for the importance of early literacy development. From Stephanie's birth, a routine of being read to was established. By five months of age, Stephanie would listen as she was being read to. At times her eyes would focus intently on the brightly colored pictures. Sounds were occasionally made that seemed to be attempts at imitation of the reading voice. Stephanie became familiar with story readings and welcomed them.

Before she could talk, she pointed to pictures and made sounds as if naming characters or objects. As an oral vocabulary was acquired she labeled things in the book as reading took place. Morrow's daughter responded with pleasure and with focused attention and understanding of the concepts. Explanations were given that went beyond the words in the book.

At fourteen months, Stephanie could be found sitting on the floor reading a book. She knew how to correctly hold the book, where the beginning and ending of the book was, and how to turn the pages. She looked

at the pictures and uttered tones that mimicked Morrow's reading sounds. Most of the language was not understandable, but she was demonstrating early literacy behavior.

By ages three and four, story readings became more interactive. Stephanie asked questions and made comments about pictures and story events. Morrow responded with answers and comments that expanded on the discussion. She started to narrate familiar stories as Morrow read to her. Stephanie began to focus more attention on print and asked about certain words.

At the age of four and a half, Stephanie was reading on her own. Her ability to read didn't just happen. It developed naturally within a rich literacy environment.

In another case study, Bissex (1980) examined her son's literacy development. At two and a half years old, Paul was rehearsing reading by turning pages in a book while "reading" the familiar story from the pictures. He did not have the ability to decode words. By five years old he began identifying words by using nonverbal context clues and later by matching spoken to printed words by using initial and final letter-sound relationships. As a five year old beginning reader he

moved into decoding using sound-symbol relationships to help him figure out words in short texts. When reading longer texts, he made more use of verbal context clues.

Through Teale's observations (1986) he notes that, "Children in a literate society begin learning to read and write very early in life" (p. 2). When observed during their first few years of life, children in literate societies encountered print in their daily activities, and even two and three year olds had a specific idea about what written language was and how the processes of reading and writing worked.

Scientists point out that without a doubt the first five years are extremely important for the development of intelligence and learning (Butler & Clay, 1979). Kontos' many years of experience in preschool allow her to suggest, "That the preschool years are a time when children acquire a significant amount of knowledge about written language" (p. 65).

"Children enter school with a remarkable knowledge of oral language" (Strickland, 1990, p. 19). Butler and Clay (1979) state, "Well-prepared children seldom fail to learn to read and it is in the preschool years that we have the opportunity to prepare our children by providing informal one-to-one learning situations in

everyday life where the child learns his language and learns how to learn" (p. 37). They continue, "We believe that all parents have their children's future largely in their hands. So much development has taken place before children enter school that the teacher's role can be viewed as only supplementary to what has gone before at home" (p. 7).

#### Parents' Role in Literacy Development

"Parents are the first teachers children meet. They are also children's teachers for the longest periods" (Morrow, 1989, p. 23). Early literacy does not simply happen; it is a social process, embedded in relationships the child has with parents, siblings, grandparents, caretakers, friends, and other family members (McLane & McNamee, 1990). According to Teale (1986):

"Engaging in reading activities with literate persons is a key factor in the child's development in reading. The child cannot do this task by himself or herself. It is the language and social interaction that surrounds the reading that make literacy 'take' in the child" (p. 17).

From Goodman's literacy work (1982) she points out, "Children's development of literacy grows out of their experiences, and the views and attitudes toward literacy that they encounter as they interact with

social groups" (p. 103).

McLane and McNamee (1990) maintain, "Parents play a crucial role in children's early literacy development by providing materials, communicating assumptions and expectations, and giving help and instruction—all in the context of the most significant relationships children have" (p. 112). Parents give their children the tools and opportunities for reading and also give them reasons to read and the desire to master reading. This is backed by McLane's observations of Asian refugee children and inner-city black families. Based on this research, it matters how printed materials are used by adults, how they are made available to children, and the messages about their use and importance.

Observational research recently conducted supports a strong link between home environment and children's acquisition of school-based literacy (Paratore, 1990). Identified specific home practices such as shared reading and reading aloud, making a variety of print materials available, and promoting positive attitudes towards literacy have had a significant impact on children's literacy learning (Durkin, 1966; Holdaway, 1979; McLane & McNamee, 1990; Schuman & Relihan, 1990;

and Teale, 1984). Parents should continue to read aloud long after children can read to themselves. Children enjoy hearing stories that are far beyond their reading level (Lindskoog & Lindskoog, 1978).

Research by Clark (1976) shows that parents matter. This study looked at children who were referred shortly after commencing school as being fluent readers. They were observed over a period of years. Their initial and later attainment and other characteristics were studied together with their experiences and home background. A common thread with the thirty-two children was that they were surrounded by books and people who read for pleasure. The interested adult had time to devote to the child either by reading to them, talking with them, or answering questions. Holdaway (1979) noted that an adult is present and supportive of the child and is ready to answer questions without interfering with what the child is doing, based on his observations of early readers. Durkin's longitudinal studies (1966) also support the findings of Clark and Holdaway. The conclusions reached were the role of early achievement is found in the parents, the home, the examples shown, time given to their children, and their concept of



their role as educator in the home.

Literacy develops in a context of adults who use reading in their daily lives. They enjoy books of their own as well as reading to children (Bababan, 1987; Greaney, 1986; and Kontos, 1986). According to Hess, Holloway, Price, and Dickson (1982), "Children's reading performance is correlated with the amount of reading done by their parents, the quality of parents' reading material, and the value placed on reading by parents" (p. 93). Kontos (1986) cited Morrow, stating that parents who read books and magazines for leisure are more likely to have children with a high interest in literacy. The work of Butler and Clay (1979) found that if a child sees a parent utterly absorbed in a book, he or she is likely to feel that such an experience is worth striving for. "Ideally children should see both parents reading and even hear their parents talk about books" (Lindskoog & Lindskoog, 1978, p. 23). Butler and Clay (1979) point out, "Young children want to be like their parents. If you read, your preschoolers will want to copy you. But they need to be plugged in and switched on' early in life if the habit is to endure" (p. 15). According to Smith (1983), "Children learn from people they would like to

emulate...children engage in learning with someone who does something that they want and expect to do themselves and who will help them do so" (p. 145). An earlier finding of Smith (1978) revealed that children need adults as models. Children will learn and understand what adults do as long as they see adults enjoying it. "Thus, parents are the major influence in a child's development as a reader" (Larrick, 1975, p. 3).

#### The Impact of Environmental Materials

A literate household as described by Silvern and Silvern (1990) would be well furnished with books, magazines, newspapers, video tapes, records, audiotapes, paper, pens, crayons, and markers. They continue that talking and listening are related to developing literacy. Parents must interact with their children in a literate manner. Cullinan, Greene, and Jaggar (1990) found "That children who learn to read early and who continue to enjoy books come from homes with a print-filled environment. Hall (1987) claims:

"Children have to experience language being used by people in appropriate ways, and appropriate ways are those which enable the creation of meanings and the sharing of meanings...Children must have access to people using print in appropriate ways. Thus the naturalness is a function of social

experiences where literacy is a means to a variety of other ends...Within such environments all kinds of people—adults, siblings, and friends—help children in their learning" (p. 9).

McLane and McNamee (1990) wrote, "Children learn about reading and learn how to read from encountering print in their environment and from participating in reading activities with more competent readers" (p. 65).

"Literacy develops out of real life settings in which reading and writing are used to get things done." (Teale, 1986, p. 9). According to Strickland and Morrow (1989):

Firsthand experiences with a variety of materials; listening and responding to literature read aloud; conversations, and group discussions with peers and adults about topics of interest; independent writing, and discussions about print including charts, signs, and symbols in and out of school must not be left to chance but planned as important daily opportunities" (p. 722).

Strickland (1990) explains, "Learning to read and write requires active participation in activities that have meaning in the child's daily life" (p. 21). Goodman (1990) wrote:

In the past twenty years, researchers and scholars working in early literacy have constructed a powerful knowledge base, concluding that children come to know literacy through their daily and mundane experiences in their particular social, cultural, religious, economic, linguistic, and literate societies" (p. 124).

According to Strickland (1990), "Young children who live in a print-rich environment are constantly observing and learning about written language. Most of their learning occurs as a natural part of their daily lives, not as something rare or mysterious" (p. 20).

In many cultures children are initially introduced to print in their everyday environment by the literacy around them (Clay, 1991). Children know about the world of print from their environments. They form primitive hypotheses about letters, words, or messages found in books or handwritten messages. If these preschool literacy experiences are part of a child's background learning to read and write in school will be easier.

"As children interact with print, they not only begin to read and write—that is, actually use reading and writing for various purposes—they begin to develop principles about the nature and meanings of written language" (Goodman, 1983, p. 73). She continues, "Many two, three, and four year old children are learning to read by themselves through their interactions with print. This self-teaching happens only in literate societies and cultures where print bombards the senses of children" (p. 69).

### Book Experiences

"Families that send their children out of the home knowing good books of many kinds-honest, dependable books, sensibly written and absorbing, written with imagination and beauty of fun-have given their children a lifelong source of strength and enjoyment" (Arbuthnot, 1969, p. 13).

Kontos (1986) quoted Morrow's 1983 study showing that kindergarten children who showed a high interest in literacy had been read to more frequently and had more storybooks in their homes compared to children with low interest. Morrow's work was done through case study observations. Clark (1976) also supports this finding explaining that evidence shows that the children who request stories most often and show interest in books in nursery school are those children from homes that provided a variety of book-related experiences. In Becoming a Nation of Readers, the committee points out after having reviewed hundreds of research studies, "Reading begins in the home..children acquire knowledge before coming to school that lays the foundation for reading...they acquire concepts for understanding things, events, thoughts, and feelings and the oral language vocabulary for expressing these

concepts" (p. 21).

The foundation of literacy as stated by Silvern and Silvern (1990) is through an understanding, appreciating and enjoying of books. This occurs through active interaction with hundreds of books. According to Snow and Ninio (1986), "Books are a source of enchantment and wonder" (p. 121). "The basic way to interest children in good books is to have good books in the home (Lindskoog & Lindskoog, 1978, p. 23).

From Holdaway's research (1979), he concluded, "Children with a background of book experience since infancy develop a complex range of attitudes, concepts, and skills predisposing them to literacy. They are likely to continue into literacy on entering school with a minimum of discontinuity" (p. 49). He continues, "Almost all book experiences have been highly satisfying so that the children gradually develop unshakably positive expectations of print and powerful motives to learn how to interpret it for themselves" (p. 52).

Gibson (1989) quotes Heath, Teale, and Wells, "Recent research confirms that the child's early experiences in sharing storytimes are significant to their future literacy development" (p. 29). "The

experience of listening to books not only develops positive attitudes toward reading but also has beneficial effects on children's cognitive and academic growth" (Prater, 1985, p.3). Kontos (1986) quotes Teale stating:

Story reading has been shown to promote positive attitudes toward reading. Reading to children gives them a sense of what reading is about, introduces them to the form and structure of written language, and acquaints them with literacy conventions (p. 63).

Wells (1990) believes that anyone can help a child become literate by reading to him or her. The observations made by Martinez and Raser (1985) of repeated readings urge those who share books with children, such as teachers, librarians, and parents might want to expose children to as many books as possible.

McLane and McNamee (1990) advocate:

Whether at home or in child-care or school settings reading books to children is a way of using written language to create shared experiences in thinking about ideas, and a way of making connections between children's personal worlds and the larger group they are part of--be it their family, their classmates, or a neighborhood group of friends. It also is a way to give children an appetite for stories, and therefore for reading. Children learn that storybooks bring them special pleasures that cannot be gotten any other way. Their delight in what books have to offer can become one of their main sources of

motivation for learning the more technical aspects of decoding print-which is necessary for learning to read (p. 77).

Butler and Clay (1979) suggest that parents should introduce their children to the world of books from the earliest days. Parents should take a look at themselves as readers and should read often. Arbuthnot (1969) explains that children who like to read come from families where reading is taken for granted and books are all about the house.

According to Strickland (1990):

Learning to read and write is particularly enhanced by shared book experiences. Family storybook reading plays a special role in young children's literacy development, and researchers have learned much through observations of this familiar ritual. Sharing books with young children has long been recognized as a crucial aid to socializing process within families (p. 20).

Reading a bed-time story to young children is a good thing (Holdaway, 1979). Hill sums up, "For many of us, the story at bedtime is a time to cuddle up next to our youngsters, to enjoy a moment of peace and relaxation, to build values through discussion, and to store up some good memories" (p. 32). Prater, Warren, and Griswold (1985) conclude:

Children throughout the world settle on laps or snuggle in beds anticipating the pleasure of storytime. They listen eagerly as adults transform the printed page into scenes of



enchantment. These children start their formal education nourished by years of happy experiences with books and for them the task of learning to read is clearly worth the effort" (p. 3).

## Chapter III

### Design of the Study

#### Purpose

The primary purpose of this study was to determine if pediatricians' offices are promoting literacy by offering a literate environment to their patients. A secondary goal was to observe patients' interactions within the environment of a pediatrician's office.

#### Questions

In view of the research conducted on children's early literacy development, the present study was designed to explore the following questions focusing on a specific literacy opportunity environment.

1. What materials that help promote literacy are in a pediatrician's office?
2. If literacy materials are provided in a pediatrician's office, how are they being utilized by patients?

#### Methodology

##### Subjects

This study involved 10 pediatricians' offices in a western suburban area in Monroe County in western New

York. Patients and their parents were the subject of observation for their literacy interactions.

### Materials

The materials for this study included a survey formulated by the researcher. A survey had been developed by the researcher to target specific areas of interest that arose from initial observations of waiting situations in doctors' offices. This survey consisted of two sections, Part A (see Appendix A) and Part B (see Appendix B). A cover letter accompanied each survey describing the purpose of the study as well as giving an introduction about the researcher. An observational note sheet was utilized by the researcher for the purpose of recording patient's interactions within the environment of a pediatrician's office.

### Procedure

A listing of pediatricians was obtained by the researcher using directories of two Health Maintenance Organizations as well as pediatricians associated with a Monroe County hospital. The doctors were chosen randomly from the lists. Many of the pediatricians listed were on all three directories. The researcher personally delivered the survey to each office. An oral introduction was made to the receptionist

regarding the researcher's background and purpose.

The survey consisted of two sections. Part A was completed by the researcher in order to maintain unbiased responses pertaining to the literacy materials. Part B of the survey was completed by someone within the office. A cover letter was attached to the survey because the survey might not have been completed at the time it was delivered. Self-addressed envelopes were provided for the return of the completed survey.

Based upon review of the surveys, as well as initial observations, the researcher determined what five offices would be utilized for field observations of patients' interactions within their environment. Arrangements were made for ninety minutes observational time within each office. This time frame allowed for a respectable flow of patients. An observational note sheet was formulated by the researcher to ensure ease of note-taking without compromise to the observation.

Confidentiality was guaranteed for the surveys, yet it was necessary for the researcher to make notations about specific offices so that field observations can be made at targeted offices.

### Analysis

Quantitative analysis was used to report the data from the survey sheets. Areas of examination were common patterns, trends, or absences of materials. Notations were made regarding the most common materials in the office as well as the least available materials. It was recognized that other patterns might become apparent only after the data collection. Significant findings were extracted and reported.

## Chapter IV

### Analysis of Data

#### Purpose

The purpose of this study was to determine if pediatricians' offices are promoting literacy by offering a literate environment. A secondary goal was observations of how selected patients interacted with the materials available.

#### Analysis of the Survey Questions - Part A

This study was the researcher's attempt to review the types of literacy materials within pediatricians' offices. The data in the following tables summarize the responses to the various questions asked from the survey. Each response was in a checklist format for ease of completion. Space was provided for any additional notations that might have been necessary.

Table 1

Observations to Statement One: Materials Available in  
the Offices' Waiting Rooms

---

	<u>Yes</u>	<u>No</u>	<u>Sometimes</u>
Children's books	10	0	0
Children's magazines	9	1	0
Children's pamphlets	9	1	0
Newspapers	2	8	0
Toys	7	3	0

\*discrepancy\* One office checked Yes for Toys, but the researcher did not observe any in the waiting room. One office checked No for toys, but the researcher observed toys were in the waiting room.

	<u>Yes</u>	<u>No</u>	<u>Sometimes</u>
Coloring books	2	7	1
Writing paper	1	9	0
Writing instruments	1	9	0
Television	5	5	0

---

Note: Regarding children's pamphlet's this was misinterpreted by the person completing Part B. Of the nine "yes" responses to children's pamphlets, six were intended for adults to read, while three were geared

for children to read themselves.

Table 2

Observations to Statement Two: Condition of Materials

---

	<u>New</u>	<u>Handled</u>	<u>Old</u>	<u>Not Avail.</u>
Children's books	0	9	0	1
Children's magazines	0	9	0	1
Children's pamphlets	3	1	0	7
Newspapers	0	2	0	8
Toys	0	8	0	2
Coloring books	1	0	0	9
Writing paper	0	0	0	10
Writing instruments	0	0	0	10

---

Note: In one office, under coloring books, the researcher did not list condition due to the fact that they were in the inner offices.



Table 3

Observations to Statement Three: Title of Children's  
Magazines

---

<u>Highlights</u>	9
<u>National Geographic World</u>	1
<u>Ranger Rick</u>	3
<u>Sesame Street Magazine</u>	2
<u>Spark Creative Fun for Kids</u>	2

Observations to Statement Three: Are the magazines  
current?

---

<u>Yes</u>	9	<u>No</u>	1
------------	---	-----------	---

---

Table 4

Observations to Statement Four: Presence of Adult Reading Materials

-----

Titles of Adults' Magazines

<u>Baby</u>	1	<u>Life</u>	1
<u>Catholic Digest</u>	1	<u>Living Well</u>	1
<u>Child</u>	7	<u>National Geo.</u>	2
<u>Consumer Report</u>	1	<u>Newsweek</u>	4
<u>Family Circle</u>	1	<u>Parents</u>	4
<u>Field &amp; Stream</u>	1	<u>People</u>	5
<u>Health Advisor</u>	1	<u>Redbook</u>	1
<u>Healthy Kids</u>	2	<u>Self</u>	1
<u>House Beautiful</u>	1	<u>Success</u>	1
<u>Smithsonian</u>	1	<u>Time</u>	6
<u>Special Report</u>	4	<u>Woman's Day</u>	1
<u>Sports Illustrated</u>	1	<u>Working Mother</u>	1
		<u>Your Family</u>	1

Table 5

Observations to Statement Five: Television

-----

Yes            5                    No            5

If yes, what channel? - Healthlink 3      Special Report 2

Analysis of the Survey Questions - Part B

This part of the study was an attempt by the researcher to learn from office employees the basic set up of their specific pediatric office in which they work. Each response was in a checklist format for ease of completion. The exception to this was a fill-in for the age range of patients that visit the office. The researcher did not limit the choices that could be made by the person completing the survey. Responses are summarized on the following eight tables.

Table 6

Responses to Question One: Who is completing this survey?

---

Receptionist	7	
Nurse	0	
Doctor	0	
Physician's Assistant	0	
Other	3	(Certified Medical Assistant, Nurse Practitioner, Office Coord)

---

Table 7

Responses to Question Two: Age range of patients that visit this office

---

Birth - 6 years	1
Birth - 18 years	6
Birth - adults	3

---

Table 8

Responses to Question Three: Estimate the average amount of time spent by a patient in the waiting room

---

0 - 5 minutes	1	30 - 45 minutes	0
5 - 10 minutes	1	45 - 60 minutes	0
10 - 15 minutes	3	over 1 hour	0
15 - 30 minutes	5		

---

Table 9

Responses to Question Four: Are these materials used  
by your patients?

---

	<u>Yes</u>	<u>No</u>	<u>Sometimes</u>
Children's books	10	0	0
Children's magazines	9	1	0
Children's pamphlets	9	1	0
Newspapers	2	8	0
Toys	7	3	0
Coloring books	2	7	0
Writing paper	1	8	0
Writing instruments	1	8	0
Television	5	5	0

\*discrepancy\* For coloring books, writing paper, and writing instruments the total is not ten due to one office that answered that these materials were located in an inner waiting room.

Table 10

Responses to Question Five: Who is responsible for selecting these materials?

---

Receptionist	5
Nurse	3
Doctor	7
Other	1 (Office Manager)

---

Note: The total is greater than ten due to the fact that in several offices more than one person is responsible for materials selection.

Table 11

Responses to Question Six: Where do these materials come from?

---

Consultant	1
Ordered from catalogs	9
Employees homes	4
Discards	0
Donations	5

---

Note: Several responses were checked by one office.

Table 12

Responses to Question Seven: Do you feel this office could use some help in determining what materials should be made available to promote literacy?

---

<u>yes</u>	3	<u>No</u>	7
------------	---	-----------	---

---

Table 13

Responses to Question Eight: Do I have permission to observe children's behavior while they wait in your waiting room?

---

<u>yes</u>	8	<u>No</u>	2
------------	---	-----------	---

---

In summary, it was found by the researcher that 90% of the pediatric offices contained children's books and magazines. Highlights was available in all offices that had magazines. Ranger Rick was available in 33% of waiting rooms with magazines. The offices that had Ranger Rick also had Highlights. Regarding the books within the offices, they basically were for toddlers and primary aged children. Some of the common books found were: various Golden Books, Bernstein Bears, Disney books, Sesame Street books, Dr. Seuss, and a

doctor's copy of a book entitled Bedtime Stories. There were also picture books; the topics ranged from the aforementioned titles to ABC's numbers, colors, and shapes.

Eighty percent of the observed offices had toys. There was a quantity range from only one educational toy to several offices having toy chests that were filled with toys, but not necessarily educational ones.

The two offices that had newspapers had the same publications, the Democrat and Chronicle and USA Today.

Only one office had coloring books. The researcher was told that they were at the receptionist's desk and were given out upon request. Another office reported that coloring books were sometimes available, but there was no further explanation given. Two other offices disclosed that writing paper and writing instruments were available to patients once they were in an inner waiting room. One of these two offices also stated that coloring books could be found within that situation.

Half of the offices had televisions. These were all preset utilizing a health channel system or educational health cassettes.

The various literacy materials appeared to be well



handled by the patients. Evidence of this could be found through observation of patients utilizing the materials. Some expected wear and tear was noticeable; the researcher saw ripped pages, torn edges, magazines written in with pencil, pen, and crayon. The toys were showing signs of usage.

There was a wide variety of adult magazines available. It appeared that women's magazines were dominant. All offices contained adult magazines. The most popular from the research found Child in 70% of the offices, People in 50% of offices, followed by Newsweek, Parents, and Special Report (40%). The Special Report publication is in conjunction with the preset television programming. There were many solo magazine titles found.

In reviewing the Part B survey completed by the office employee, several discrepancies were noted. They were highlighted in the tables.

Receptionists filled out 70% of the surveys. The common age range of patients was 0 to 18 years for 50% of the offices. When observations were made by the researcher the age range observed was not over elementary aged children. Waiting times varied but the main concentration was 50% for 15-30 minutes while 30%

for 10-15 minutes.

The pediatrician was the person most often responsible for selecting the literacy materials for the office. The receptionist also gave input into this decision making. Ninety percent of the materials were ordered from catalogs and a strong percentage of materials were donated. It was explained to the researcher that many companies give these materials as part of promotions.

Only 30% of the surveyed offices expressed a desire for help in determining and selecting literacy materials for the office.

#### Analysis of Observations in Waiting Rooms

In five offices observed by the researcher, children were engaged with the materials available. The majority of adults spent the wait time reading. Many children had the adult behavior of their own caretaker as well as other adults to serve as a model. It was noted that if an office had a television set and it was turned on, that was the activity in which the children showed interest. Books and magazines varied from office to office but again these materials were utilized by the patients. At times children read the

adult magazines that were around them. Toys were not as available. They were primarily geared for the infants and toddlers.

The noise level within the offices was that of interaction. Adults told children to be quiet, to sit down, to get a book. Positive exchanges also took place when there was interaction between the adult and child specifically related to the reading material. Conversations took place among adults who were acquaintances. Child spoke to child whether it was a sibling or a new face. Children also spoke with the observer.

## Chapter V

### Conclusions and Implications

The purpose of this study was to determine if pediatricians' offices are promoting literacy by offering a literate environment. A secondary goal was observations of patients within selected pediatricians' offices and how the patients interacted with materials available.

### Conclusions

The results of this study substantiate much of the previous research into the important role a literate environment plays in developing literacy in young children. The implications from this study provide some new insights and pose new questions to be answered.

The most important conclusion that can be drawn from this study was that children interact with the materials within a given environment. From the research, the quality and variety of materials in pediatricians' offices vary therefore having an influence upon users. For instance, the majority of offices contained children's books and magazines, thus allowing children a selection. If an office does not

provide these materials at all or offers only a limited choice, then the child is restricted from the start. The books provided are primarily for younger children in offices that service newborns to young adults. The needs of the adolescent must be met with age appropriate books, not just through magazines.

It appears that perceptions of a literate environment are somewhat narrow. Offices basically have books and magazines. Other literacy materials are somewhat neglected, such as writing instruments, writing paper, pamphlets, and top quality literature selections.

The researcher found that the pediatrician was basically responsible for materials selection. It is the opinion of the researcher that more insight into the selection of materials is necessary. Top quality literature, variety, and real focus on the age of patients, need to be taken into account, rather than just choosing a certain series or concept of book titles.

Literacy is being addressed in pediatricians' offices. However, the researcher feels it is done in a matter of a fact manner. The office environment should have reading materials based on a conscious and

informed decision. With more insight into materials selection and environmental set up, the literate environment in a pediatrician's office could become more viable and interactive to children.

#### Implications for Research

The research conducted in this study serves as a baseline for continued research.

A larger testing population of pediatric offices could be examined. In this study a few select offices were chosen from a specific region. If the study were to be expanded more offices could be utilized. Comparisons could be made based on location, such as inner city, suburban, and/or rural practices. Offices could be labeled according to the quality of materials offered, and observations could be made on how patients become involved with the materials. Specific ages might be another avenue for study, examining if materials are available for certain age ranges and how they are utilized by these patients.

Medical training of pediatricians could be examined to see if the topic of literacy is addressed and how. If this topic is covered, what is the point of view, an educational background or logistics of setting up an office practice?

If an ideal environment were to be set up that would incorporate all materials listed from the survey, what would occur? How would the writing aspect of the literate environment be used by patients? Do children in the ideal office environment encounter more literacy experiences than an average office environment?

There is a need to further educate parents on the importance of making the most of waiting time. If the pediatrician made them more aware of how they could do this within the office environment a pre and post study could be conducted to see if change is taking place. The awareness could be made known during the examination or through pamphlets. A key element that would be necessary is that the office promoted literacy in a positive manner.

Observational studies are needed for longer periods of time, tracking individual patients to watch their literacy development within this specific environment.

#### Implications for Application

The results of this study suggest that the environment is a factor in literacy development. Although teachers, students, and the classroom were not addressed in this study, there is a role for them.

Teachers have the power of influence on their side. They can try to instill good habits within their students, for example, taking along some sort of reading or writing material when going anywhere in order to occupy time if waiting occurs. Emphasis could be placed on the waiting room situation in a doctor's office. Real life practice of this could be planned with little effort. When going to special classes or assembly programs, why not take along a book or journal? When finishing classwork early, the students could independently develop their own personal literacy behaviors. These habits need to be positively reinforced. Children should also see their teachers practicing these behaviors.

Physicians have an opportunity to enhance the development of literacy within their patients. Instead of just selecting materials in order to have something available they could consult a professional to become more aware of top quality literature materials that target age appropriate levels. Specific emphasis should be placed on the importance of including writing materials. In addition to the physical surroundings, doctors could also pass along the word that it is important for patients to become involved with literate



behaviors especially within their offices.

Parents are also part of the equation. They need to be informed about how to interact with materials in a given environment so that they can promote literate behavior. They also need to be role models specifically in this environment.

If pediatricians, teachers, and parents work together the children can only benefit in their quest for lifetime literacy.

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Appendix A

A SURVEY of PEDIATRICIANS' OFFICE ENVIRONMENT

1) Materials available in the office's waiting room.

	<u>YES</u>	<u>NO</u>	<u>NOTES</u>
Children's books	_____	_____	_____
Children's magazines	_____	_____	_____
Children's pamphlets	_____	_____	_____
Newspapers	_____	_____	_____
Toys	_____	_____	_____
Coloring books	_____	_____	_____
Writing paper	_____	_____	_____
Writing instruments	_____	_____	_____
Television	_____	_____	_____
Other	_____	_____	_____

2) Condition of materials.

	<u>NEW</u>	<u>HANDLED</u>	<u>OLD</u>	<u>N/A</u>
Children's books	_____	_____	_____	_____
Children's magazines	_____	_____	_____	_____
Children's pamphlets	_____	_____	_____	_____
Newspapers	_____	_____	_____	_____
Toys	_____	_____	_____	_____
Coloring Books	_____	_____	_____	_____
Writing paper	_____	_____	_____	_____
Writing instruments	_____	_____	_____	_____
Other	_____	_____	_____	_____

(Appendix A con't)

3) Are the magazines current? YES \_\_\_\_\_ NO \_\_\_\_\_

Titles \_\_\_\_\_  
\_\_\_\_\_

4) Are there adult reading materials? YES \_\_\_\_\_ NO \_\_\_\_\_

What? \_\_\_\_\_  
\_\_\_\_\_

5) If there is a television is it preset? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, what channel? \_\_\_\_\_

## Appendix B

A SURVEY of PEDIATRICIANS' OFFICE ENVIRONMENT

Directions: Please check the appropriate response.

1) Who is completing this survey?

\_\_\_\_\_ Receptionist  
 \_\_\_\_\_ Nurse  
 \_\_\_\_\_ Doctor  
 \_\_\_\_\_ Physician's Assistant  
 \_\_\_\_\_ Other

2) What is the age range of patients that visit this office?

\_\_\_\_\_

3) Estimate the average amount of time spent by a patient in the waiting room.

\_\_\_\_\_ 0-5 minutes  
 \_\_\_\_\_ 5-10 minutes  
 \_\_\_\_\_ 10-15 minutes  
 \_\_\_\_\_ 15-30 minutes  
 \_\_\_\_\_ 30-45 minutes  
 \_\_\_\_\_ 45-60 minutes  
 \_\_\_\_\_ Over 1 hour

4) Are these materials used by your patients?

	<u>YES</u>	<u>NO</u>	<u>DON'T KNOW</u>
Children's books	_____	_____	_____
Children's magazines	_____	_____	_____
Children's pamphlets	_____	_____	_____
Newspapers	_____	_____	_____
Toys	_____	_____	_____
Coloring books	_____	_____	_____
Writing paper	_____	_____	_____
Writing instruments	_____	_____	_____
Television	_____	_____	_____
Other _____	_____	_____	_____



## (Appendix B con't)

5) Who is responsible for selecting these materials?

\_\_\_\_\_ Receptionist

\_\_\_\_\_ Nurse

\_\_\_\_\_ Doctor

\_\_\_\_\_ Other

6) Where do these materials come from? (Check as many as apply)

\_\_\_\_\_ Consultant

\_\_\_\_\_ Ordered from catalogs

\_\_\_\_\_ Employees homes

\_\_\_\_\_ Discards

\_\_\_\_\_ Donations

7) Do you feel this office could use some help in determining what materials should be made available to promote literacy?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

8) Do I have permission to observe children's behavior while they wait in your waiting room?

\_\_\_\_\_ Yes

\_\_\_\_\_ No