WHO SAYS ELEPHANTS CAN'T DANCE?

LINKING THE HUMAN SERVICES AND THIRD-GRADE READING FOR TRANSFORMATIVE CHANGE

BY DR. JANICE M. GRUENDEL

Published in 2002, *Who Says Elephants Can't Dance? Leading a Great Enterprise through Dramatic Change* hit the bookstores as a "must read" for the business sector. Written by former IBM CEO Lou Gerstner, the book traced nearly a decade of leadership that transformed IBM from a massive, hierarchical mainframe company into a nimble information services global business. In Gerstner's view, this transformation was about more than stabilizing and growing its assets. It was all about culture change, "steely-eyed" strategy development, relentless passion, deep integrity, and world-class performance.

Today, 15 years later, our health and human services agencies are engaged in the same journey—from functioning as large, lumbering organizational pachyderms to nimble, light on their feet, much more effective entities for their customers. A recent body of work, compiled by the BEST NC Pathways to Third Grade Reading initiative, provides a new lens on this process through its examination of "what works" to improve children's essential skill development in reading.

So, what do the health and human services have to do with third-grade reading?

It turns out—quite a lot.

And, as in the IBM journey, when our health and human services structures similarly transform themselves, they gain incredible power to more positively affect the learning and life success of America's most important assets—its families and their children.

WHY THIRD-GRADE READING?

This particular skill, at this particular point in time, is an important one because early reading competence correlates with ongoing school success and the capacity of individuals to function as productive adult employees, parents, and citizens. The end of third grade is a key pivot point because that is when instruction shifts from a focus on "learning to read" to one that expects students to be able to "read to learn."

Thus, knowledge and skill gaps at this critical educational juncture can derail students' success throughout their educational careers. Reading performance in the early years also provides a keen lens on troubling educational, health, racial, and economic inequities as well as the essential role of the health and human services to impact child and family outcomes.

THE PATHWAYS JOURNEY

In the fall of 2016, the North Carolina Early Childhood Foundation partnered with the Institute for Child Success to examine the research literature on "what works" to advance the proficiency of third-grade students in the essential skill of reading. The focus was on evidence-informed policy, practice, and programs related to 12 contributors to reading proficiency at the end of the third grade.

Through a collective input process, these indicators were selected from more than 40 data elements with some relationship to early reading, and they were clustered for analysis into three domains—health, family support, and birth-to-eight early care and elementary school education. The chart above provides a useful shorthand version of the domains and the indicators within each.

HEALTH	FAMILY SUPPORT	B-8 EARLY CARE AND ELEMENTARY SCHOOL EDUCATION
HEALTHY BIRTHWEIGHT	SAFE AT HOME	HIGH-QUALITY EARLY CARE & EDUCATION
EARLY INTERVENTION	FAMILY SUPPORTS	GRADE PROMOTION
SOCIAL-EMOTIONAL HEALTH	POSITIVE PARENT-CHILD INTERACTIONS	SUMMER LEARNING LOSS
PHYSICAL HEALTH	READING WITH CHILDREN	CHRONIC ABSENCES

At the beginning of our work, in October 2016, the review process presented itself as a reasonably short-term project of culling the literature on evidence-informed policies, practices, and programs related to each of the 12 indicators.

The research journey actually took about nine months to complete, and at the end we had written (and rewritten) hundreds of pages and employed more than 2,000 citations to fairly represent a complex set of impacts and relationships—all at play in the process of young children's acquisition of grade-level reading skills.

WHAT WE LEARNED

We learned that there is no silver bullet in assuring that America's children become capable readers by the age of eight. The journey to reading proficiency does not begin with the academic process of phonics, vocabulary, or comprehension instruction during elementary school, or kindergarten, or even preschool. It begins with the preconceptual health of mothers to be, with their histories of adversity and present lives of trauma and toxic stress, and with the capacity of our health and human services systems to early on identify challenges, address them, and support vulnerable women and families from the moment of conception and throughout the first eight years of their children's lives.

We learned that while there is evidence of "what works" within each of these indicator areas, the body of research related to each leaves much to be desired. We began thinking we would simply source studies that met the gold standard of research and that had been recognized by evidence-based clearinghouses. We quickly learned that there was less agreement on "the evidence" across rating sources than we expected. We also learned that while some studies did find significant impacts based on a solid research methodology, others studying the same intervention did not.

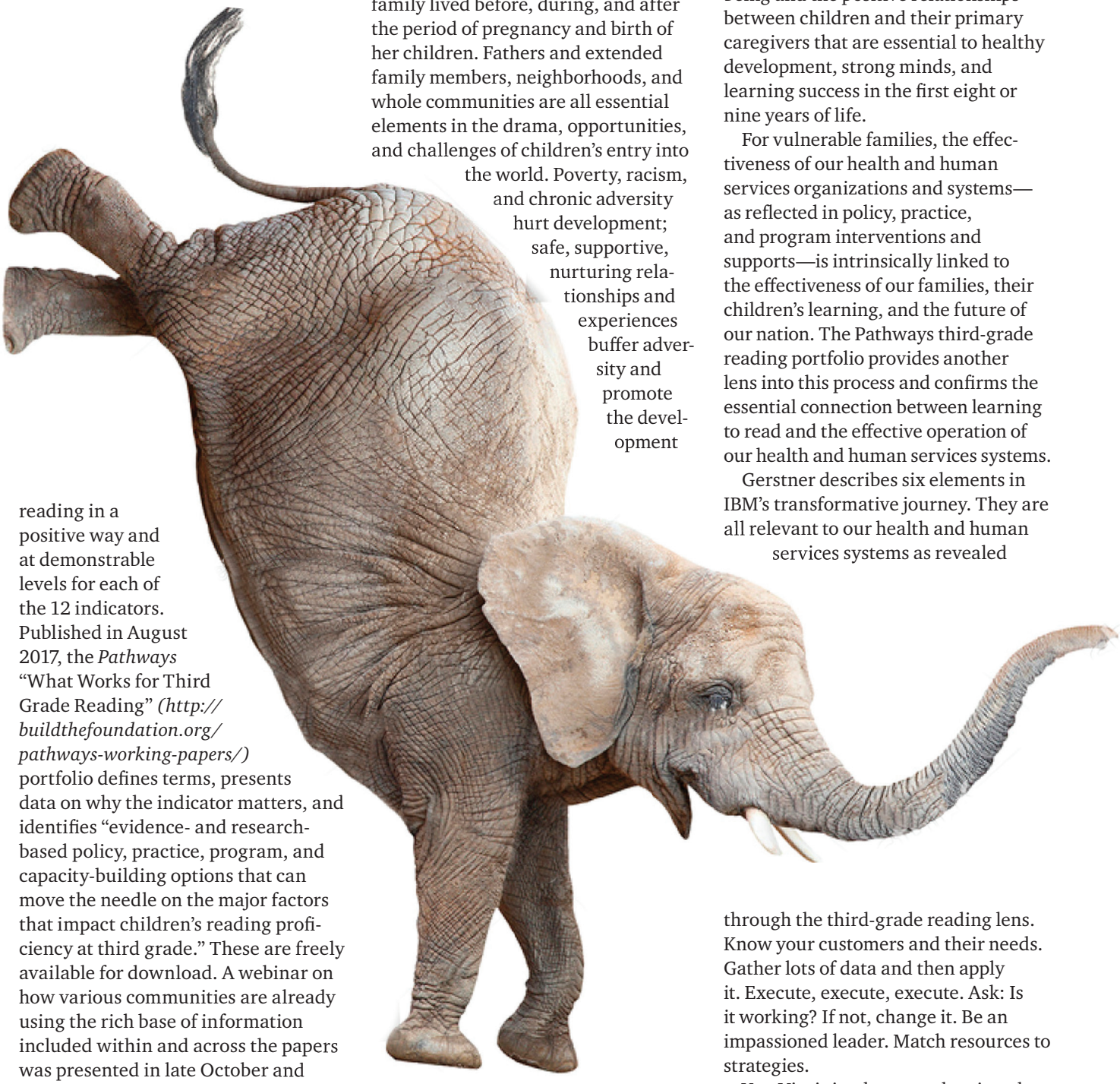
We learned that each of the indicators has a synergistic relationship with several (or many) of the others. Most important, physical health, social-emotional health, family supports (formal and informal) and positive parent-child interactions are linked with each other and are huge drivers of early reading success. These relationships, and the data that reveal them, became an important element in the format for reporting our findings for each indicator.

We learned, not surprisingly, that there are two "mediators" in this vital process early on—the nature of the adult–child relationship, and the nature of the adult–child–family relationship to our health and human services delivery systems (and, of course, to education). While these two mediating relationships are certainly true for all of us, they are especially relevant for children growing up in families with trauma, toxic stress, and multigenerational adversity, including economic challenge and inequity related to race and ethnicity.

Janice M. Gruendel is a Senior Fellow at the Institute for Child Success.

These are, in fact, the families whose children demonstrate the greatest levels of developmental challenges early in life, social and behavioral challenges early in schooling, and reading challenges at the end of the third grade. They are also the families who often populate our human services caseloads.

We did identify a broad group of policies, practices, and interventions shown to impact third-grade reading in a positive way and at demonstrable levels for each of the 12 indicators. Published in August 2017, the *Pathways* "What Works for Third Grade Reading" *(http://buildthefoundation.org/pathways-working-papers/)* portfolio defines terms, presents data on why the indicator matters, and identifies "evidence- and research-based policy, practice, program, and capacity-building options that can move the needle on the major factors that impact children's reading proficiency at third grade." These are freely available for download. A webinar on how various communities are already using the rich base of information included within and across the papers was presented in late October and is available from the North Carolina Early Childhood Foundation.



Implications for the Expansion of Dancing Elephants

It is now clearly understood by virtually everyone that our brains grow most rapidly and dramatically during the early years of life. This growth is influenced by woman's preconceptual, prenatal, and postpartum health, her experiences with present (and prior) adversity, and the economic and social environment in which she and her family lived before, during, and after the period of pregnancy and birth of her children. Fathers and extended family members, neighborhoods, and whole communities are all essential elements in the drama, opportunities, and challenges of children's entry into the world. Poverty, racism, and chronic adversity hurt development; safe, supportive, nurturing relationships and experiences buffer adversity and promote the development of healthy, safe, smart, and strong children.

To better serve their clients, many health and human services are already engaged in transforming themselves from lumbering pachyderms into data-enabled, trauma-informed, resilience-building organizations and systems. As this process of intentional transformative change occurs—and it must—our organizations become better able to support family well-being and the positive relationships between children and their primary caregivers that are essential to healthy development, strong minds, and learning success in the first eight or nine years of life.

For vulnerable families, the effectiveness of our health and human services organizations and systems—as reflected in policy, practice, and program interventions and supports—is intrinsically linked to the effectiveness of our families, their children's learning, and the future of our nation. The Pathways third-grade reading portfolio provides another lens into this process and confirms the essential connection between learning to read and the effective operation of our health and human services systems.

Gerstner describes six elements in IBM's transformative journey. They are all relevant to our health and human services systems as revealed through the third-grade reading lens. Know your customers and their needs. Gather lots of data and then apply it. Execute, execute, execute. Ask: Is it working? If not, change it. Be an impassioned leader. Match resources to strategies.

Yes, Virginia, there are dancing elephants and we must become them.