SOUTH CAROLINA

Early Childhood Advisory Council

Meeting of the Early Childhood Advisory Council
August 15, 2019
2 p.m.
1300 Sumter Street, Columbia, SC 29201

If you are unable to attend in person, please join the conversation by webinar. Register at:
*After registering, you will receive a confirmation email containing information about joining the webinar. If you have never participated in a **GoToMeeting event**, please allow ten minutes to download the software. The meeting is also available by phone at **1-631-992-3221, participant code, 224-751-329.***

AGENDA

I. Call to Order and Approve Agenda (Julie Hussey)
    Motion: To adopt the agenda as submitted.

II. Approve June 20, 2019 Minutes (Julie Hussey)
    Attachments: June 20, 2019 Minutes

III. Special Presentation: Christina Davis, 5K and Countdown to Kindergarten Teacher, Red Bank Elementary

IV. Dr. Leigh D'Amico, Research, Evaluation and Measurement, University of South Carolina
    Attachments: Draft South Carolina Early Childhood Needs Assessment

    Motion: The Early Childhood Advisory Council recommends that the Governor's Office designate SC Department of Social Services as the lead applicant for the State of South Carolina for the Preschool Development Grant Birth through Five Renewal Grant, working collaboratively to develop and implement the project with SC First Steps, the SC Department of Education, the Head Start Collaboration Office, and other partners.

V. First Five – Comprehensive Early Childhood Portal
    Attachments: First Five South Carolina One-Pager

    Motion: The Early Childhood Advisory Council commits to providing an organizational home for "First Five South Carolina," including hosting, maintaining, and co-promoting First Five South Carolina, the state's comprehensive early childhood portal, a one-stop shop for families to learn about and access federal, state and local early childhood programs. First Five South Carolina will improve coordination and delivery of early childhood education and development to children in South Carolina and will provide a unified, cross-agency mechanism to increase the overall participation of children in existing federal, state and local child care and early childhood education and development programs, including outreach to underrepresented and special populations.

VI. 2019 Early Childhood Summit
    Attachments: Keynote Speaker Details, Save the Date

VII. Adjourn

1300 Sumter Street • Concord Bldg., Suite 100 • Columbia, South Carolina 29201
Phone 803-734-0479 • Fax 803-734-1431• Web site www.scfirststeps.org

Early Childhood Advisory Council Meeting
June 20, 2019
Immediately following the SC First Steps Board of Trustees Meeting
Conference America – Phone Meeting
1-888-537-7715

DRAFT MINUTES

Members Present (17):
Chip Stanley, Chair
Julie Hussey, Vice Chair
Josh Baker
Shelley Canright
Walter Fleming Jr.
Representative Jerry Govan
Amy Williams
Tim Holt
Mary Lynne Diggs
Angel Johnson-Brebner
Jennifer McConnell
Alexia Newman
Roger Pryor
Mike Leach
Rick Toomey
Sue Williams
Mary Poole

Members Absent (4):
Representative Rita Allison
David Mathis
Senator Greg Hembree
Senator Gerald Malloy

Others Present
Georgia Mjartan	Lavinia Tejada
Samantha Ingram	Sara Eargle
Zack Catoe	Laura Baker
Mark Barnes	Candi Lalonde
Debbie Robertson	Jon Artz
Betty Gardiner	Melanie Barton
Cassie Barber	Bunnie Ward
Porlan Cunningham	

Mr. Chip Stanley called the meeting to order at 3:10 p.m. and stated that a quorum was present. Mr. Stanley called for a motion to approve the agenda as submitted. Mr. Tim Holt made the motion to accept the agenda as submitted and Dr. Amy Williams seconded the motion. The agenda was unanimously approved.

Mr. Roger Pryor made a motion to approve the minutes from the June 20, 2019 meeting. Upon a second by Ms. Julie Hussey, the minutes were unanimously approved.

Ms. Cassie Barber gave the Early Childhood Advisory Council Report. Ms. Barber updated the group on the Preschool Development Grant and stated that all partners were working very hard on the needs assessment portion of the grant.

Ms. Barber noted that the Harwood Model of Community Engagement process was used to conduct a part of the needs assessment and that preliminary results were in with the final report to be presented to the ECAC at the August meeting.

Ms. Barber said the process contained three different methods of gaining stakeholder input on the three domains, Early Learning and Development, Health and Wellbeing, Family and Community. Ms. Barber said there were 15 regional meetings with 440 participants held in April and May, along with an online survey which resulted in 2,680 useable responses (45.4% parents/caregivers, 42.3% organizational representatives, 12.3% community members). The third method used was focus groups conducted in all 46 counties with a total of 1,495 participants: 911 parents/caregivers, 418 organizational representatives and 166 others.

Ms. Barber stated that she was very confident that the statewide strategic plan that will be presented to the feds will include the voices of local stakeholders. Ms. Barber said Research, Evaluation and Measurement at UofSC are collecting data from each state agency including strategic plans and action plans that will be reviewed and used in the writing of the state strategic planning which will begin in July.

Ms. Barber informed the group that Dr. Leigh D'Amico, Research Evaluation and Measurement, with the UofSC, will attend the ECAC meeting in August to give a presentation on the needs assessment report.

Ms. Barber noted that due to PDG funding the Countdown to Kindergarten program was able to add 553 slots which is a 52% increase.

Ms. Georgia Mjartan informed the board that she met with Richard Gonzales, Senior Advisor for Early Childhood Development, Administration for Children and Families, at Health and Human Services in Washington DC. Ms. Mjartan said the meeting was very positive and believed South Carolina will be a strong competitor for the next round of implementation funds for the Preschool Development Grant. Ms. Mjartan said the Notice of Funding will be out Fall 2019, and the ECAC will need to vote at the August 15 meeting whether to apply or not. Ms. Williams asked who the applicant would be, and Ms. Mjartan replied that there seemed to be consensus that DSS would be the lead applicant again with support from SC First Steps, Department of Education, and Head Start Collaboration, among other agencies.

Ms. Barber introduced Ms. Laura Baker on May 17, 2019 as the ECAC Communications Coordinator.

Ms. Barber also invited committee members to participate in the planning of the SC Summit on Early Childhood. Ms. Barber said the event's theme is the "Economics of Early Childhood".

Ms. Barber briefed the group on the happenings of the Palmetto Pre-K Outreach and Enrollment Committee and the successful Palmetto Pre-K jamboree.

With no further business, Mr. Tim Holt made a motion to adjourn the meeting, followed by a second from Dr. Shelley Canright. The motion as approved unanimously, and the meeting was adjourned at 3:26 p.m.

Building relationships for success!

Countdown to Kindergarten is a school transition program to prepare at-risk children for kindergarten.
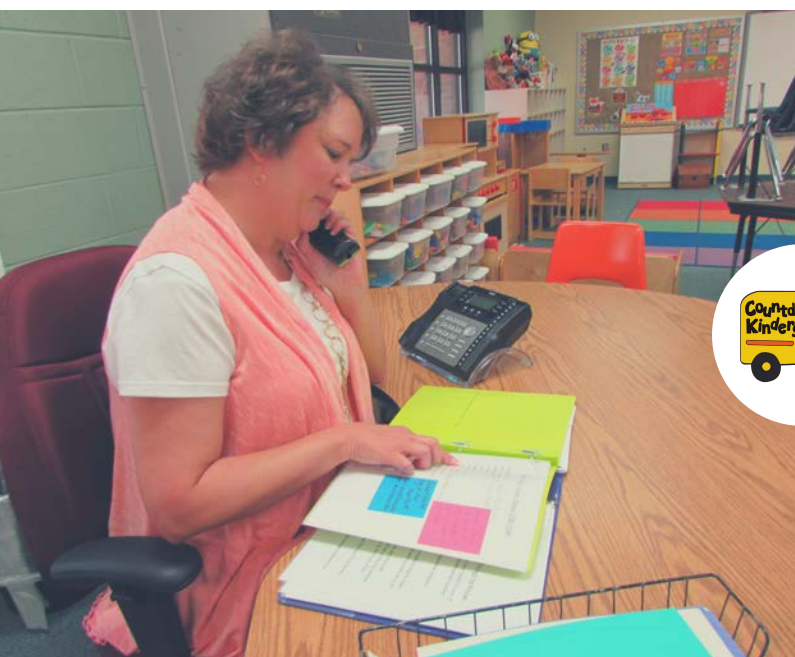
The home visitation, relationship-based program is a nationally recognized model first developed by South Carolina First Steps in 2003 and has served more than 15,000 children statewide.

Each summer, new teachers are recruited, trained, and receive a small stipend for their time and travel.

In 2019, more than 200 teachers participated to serve 1,300 children across South Carolina.

During five one-hour home visits, the teacher demonstrates materials the family gets to keep. The final visit takes place at the child's new school.

Virtually all home visitors meet the program's goals to:
- Increase family awareness of kindergarten expectations
- Ensure a smooth transition to school
- Create a positive relationship with the family

"Parents are saying that the program is putting the teachers and families on the same team."

Dr. Janice Kilburn
Countdown to Kindergarten Director

For more information on Countdown to Kindergarten, please call SC First Steps at (803) 734-0479.

DRAFT

South Carolina
Early Childhood Needs Assessment

August 2019

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Executive Summary

Part 1: Determining Statewide Priorities

The South Carolina Preschool Development Grant (PDG) Needs Assessment was guided by three overarching factors: 1) development and implementation of a research-informed structure and process to gain feedback from large numbers of stakeholders in differing geographic areas of the state; 2) focus on aspirations using elements of the Harwood Framework (Harwood Institute for Public Innovation, 2017) for young children and families to identify common framework for South Carolina that will guide strategic plan to promote opportunities and reduce barriers related to these overarching aspirations; 3) acknowledge and explore sociocultural and econo-political contexts at the state and local level based on Sharon Lynn Kagan's (2019) seminal work related to understanding and synthesizing the highest-quality, most effective systems for young children.

Research-Informed Structure and Process

Four public Institutions of Higher Education (IHE Collaborative) along with thought leaders from other IHEs and state-level organizations developed a process to gain input from stakeholders including parents/caregivers of young children in all 46 South Carolina counties. The IHE Collaborative met twice per month starting in February 2019 to develop a process to gain information about aspirations without unduly influencing or biasing the process. The IHE Collaborative developed a common PowerPoint and data collection templates to be used at 15 feedback meetings held across the state. In March and April 2019, meetings were held in the border areas of each South Carolina Department of Social Services Child Care Licensing region to encourage participation. These meetings sought to gain a better understanding of aspirations for young children and their families by exploring overall and specific goals within three areas of focus: early learning and development, health and wellbeing, and family and community. The May meetings were held in central locations in each of the regions, often the largest city within the region, and these meetings focused on identifying any missing aspirations, prioritizing the aspirations developed in March and April, and exploring current barriers to those aspirations. All goals/aspirations and barriers represent the language used by participants to as great of an extent as possible. IHE Collaborative members made slight edits in the process of combining and synthesizing the information provided.

Focus on Aspirations for Young Children

The Harwood Framework (Harwood Institute for Public Innovation, 2017) for developing shared aspirations and visions was used to encourage a collaborative, inclusive process focused on the goals for all South Carolina children. One of the IHE Collaborative team members has been trained in the Harwood Framework. Aspects of the framework were incorporated in the process for engaging stakeholders and strategies used during the meetings. In particular, emphasis was placed on approaching the conversations through an aspirations focus rather than a deficit focus.

Impact of Sociocultural and Econo-Political Contexts

According to Kagan (2019), the influence of sociocultural contexts and econo-political contexts must be considered in early childhood policy and practice. While South Carolina is

influenced by the larger national contexts, it also functions within its own unique state-based values and beliefs as well as its political context and demographics. South Carolina's process sought to understand sociocultural and econo-political aspects that shape systems implementation at the state level and the local level.

Data Collection Methods

To identify priorities in the three focus areas, multiple methods were used to capture information from parents/caregivers, organizational representatives, community members, and other stakeholders.

Regional Meetings

- Regional meetings/sessions (n=15) were held in 13 different urban, suburban, or town/rural locations based on the four South Carolina Department of Social Services identified regions. Three meetings were held during evening hours.
- Facilitators used a PowerPoint presentation during the first portion of each two-hour meeting to explain the Preschool Development Grant, the needs assessment process, and set the agenda for the meeting. Facilitators then defined and provided examples of overarching goals and specific goals. In the March and April 2019 meetings, participants discussed and identified overarching goals and specific goals in small groups of choice in one of three focus areas. There was also an opportunity for individuals to provide feedback if the group did not agree with or include their overarching goals and specific goals in their small group's report. At the May meeting, participants received the synthesized overarching and specific goals developed in the March and April meetings, indicated priorities among these goals, and discussed current barriers in meeting the goals.

March Meetings

Date	Time	City	Location	Number Registered	Number Attended
March 21	10:00am to 12:00pm	Spartanburg	Spartanburg First Steps	49	43
March 25	10:00am to 12:00pm	Orangeburg	South Carolina State University	43	38
March 27	1:00pm to 3:00pm	Chesterfield	Northeastern Technical College	24	14
March 27	1:00pm to 3:00pm	Rock Hill	York County Public Library	27	21
ALL	ALL	ALL	ALL	143	116

April Meetings

Date	Time	City	Location	Number Registered	Number Attended
April 22	10:00am to 12:00pm	Graniteville	Aiken Technical College	28	23
April 23	6:00pm to 8:00pm	Anderson	Anderson University	29	19
April 23	3:30 to 5:00pm	Horry	SC Community Action/ Head Start Conference	*	24
April 24	9:00 to 11:00am	Conway	Horry Georgetown Technical College	44	22
April 25	10:00am to 12:00pm	Bluffton	Technical College of the Lowcountry	27	16
ALL	ALL	ALL	ALL	128	104

*no registration process, open meeting at conference

May Meetings

Date	Time	City	Location	Number Registered	Number Attended
May 20	1:00pm to 3:00pm	Florence	Pee Dee Education Center	73	30
May 23	1:00pm to 3:00pm	Greenville	Furman University	143	70
May 23	5:00pm to 7:00pm	Greenville	Furman University		
May 29	2:00pm to 4:00pm	Columbia	Richland Library Northeast	136	73
May 29	5:30pm to 7:30pm	Columbia	Richland Library Northeast		
May 29	10:00am to 12:00pm	North Charleston	College of Charleston-North Campus	101	47
ALL	ALL	ALL	ALL	453	220

Online Survey

An online survey was developed to gather feedback from parents/caregivers, representatives of organizations serving young children and parents, and community members. Each First Steps partnership was provided a customized link to the survey to enable tracking of responses by county. In addition, a general link was provided to other organizations and entities to promote completion of the survey. The survey included major factors related to the three overarching areas of focus: early learning and development,

health and wellbeing, and family and community. These factors were determined through the IHE Collaborative, research literature, and other needs assessments that identified common needs in particular areas. The survey was launched on April 1, 2019 and closed on May 10, 2019.

First Steps Focus Groups

To gain local-level feedback, First Steps partnerships conducted focus groups based on an implementation guide developed by the Research, Evaluation, and Measurement (REM) Center at the University of South Carolina. The implementation guide included a planning document, focus group protocol (five questions), and a reporting template. Focus groups were conducted between late March and early May 2019. Focus group facilitators summarized the information received from each question and input the information in an on-line reporting template. REM Center evaluators analyzed the focus group data using qualitative coding software.

Regional Meeting Findings

Results from regional meetings were qualitatively analyzed for commonalities across regions. As shown in the table below, the analysis revealed a total of 12 overarching goals (four in each area) for young children and families across the state.

Early Learning and Development	Health and Well-Being	Family and Community
Overarching Goals: 1. Children are ready for kindergarten/Demonstrate kindergarten readiness in multiple domains 2. Promote high quality early care and education/ Promote professional culture and empowerment of child care and early education providers 3. Increase general awareness of opportunities, programs, and services for young children and their families/Empower families to actively participate in development of their children 4. Address needs of families, early care and education providers, and others in supporting children with special needs and behavior challenges (with more children having mental health and behavior challenges)	Overarching Goals: 1. Increase access to early intervention for children ages birth to age 5/ Children with identified delays are referred early to Early Intervention and receive timely services and provide options for families who have needs but don't meet criteria for state services 2. All children are healthy both physically and mentally/ Ensure all children have medical home/Promote a system of care among existing services 3. Provide access to mental health services for children (and family members); Reduce societal belief that children don't have legitimate stress (trauma informed practice)/Child safety to prevent Adverse Childhood Experiences (ACES) 4. Modify our systems to support and promote self-sufficiency	Overarching Goals: 1. Communities are family friendly 2. Families are supported 3. Address/meet the needs of diverse families/Develop cultural sensitivity 4. Ensure legislators understand their impact and ability to influence families and prepare children for productive lives through policy

Once overarching goals were identified, the IHE team examined specific goals (or what was described to participants as the pathways to reach the overarching goals) recorded at each of the March and April meetings. These specific goals were clustered under the overarching goals and used to drive discussions in the May meetings. Participants in May meetings evaluated and prioritized specific goals. Once participants in the May meetings prioritized specific goals, they worked to identify barriers that currently exist across all specific goals. Following the May meetings, the IHE team analyzed the prioritizing process to identify primary, secondary, and tertiary goals under each overarching goal. The results of this final analysis are displayed in the tables below. The language for each goal has not been substantively edited by the IHE collaborative. It is directly representative of the participant voices in the regional meeting process.

<h1 style="text-align:center">Early Learning and Development Goals</h1>

Overarching Goal: Children are ready for kindergarten/Demonstrate kindergarten readiness in multiple domains

Primary Specific Goals
1. Encourage early development in multiple domains
    a. Promote the power of play (inquiry-based learning) in kindergarten, PreK, child care with a focus on the early learning standards. Develop children's language and literacy skills; thinking creatively; problem solving skills; fine and gross motor skills; and social/emotional wellbeing
    b. Focus specifically on social emotional development
        ▪ Parent education on structure, routine, self-regulation
        ▪ Social emotional information provided through media
        ▪ Outreach beginning prenatally or at birth on social emotional development (free-of-charge)
        ▪ More quality child care for social emotional development
    c. Ensure children have a strong understanding of phonemic awareness and other early literacy skills/language and literacy rich environments
        ▪ Develop communication skills of young children
        ▪ Provide effective resources/more resources for ELL students
        ▪ Duplicate awareness campaigns and activities in counties and organizations (hospitals, OBGYNs, dental services, etc.) throughout SC using social media, networking, and modeling.
        ▪ Encourage legislature to make policies to implement the awareness of improving young children's language environments beginning with high school aged parents
    d. Promote parent understanding of these domains
    e. Examine community design-parks, public spaces, outdoor learning spaces
2. Improve collaboration and coordination between early childhood organizations
    a. Address barriers related to children who do not qualify or fit into a program to connect them with other resources or options
    b. Facilitate strong relationships between child care facilities, First Steps, Head Start, and school districts for shared understandings of best practices and best care and education for young children.
    c. Standard messaging from the state
3. Increase recruitment/enrollment in high-quality early care and education including 4K
    a. Increase affordability and access of high-quality child care/early education through vouchers and other supplements to child care facilitates
    b. Provide universal 4K
    c. Funding of 4K slots for all 4K children in SC (public/private partnerships)

Secondary Specific Goals 1. Increase parent/guardian understanding of developmental milestones   a. Increase strategies to improve parental/guardian awareness and understanding of developmental milestones and methods to ensure that they are ready to put strategies into practice effectively 2. Enhance professional knowledge and professional development targeted at school readiness

| | a. | Improve awareness and implementation of early learning standards for all preschool programs |
| | b. | Ensure early education programs and centers know what is expected of children entering 5K |

Tertiary Specific Goals

1. Understand and address access issues related to home, food, family, transportation, ability when putting rules/regulations/requirements in place
2. Develop and promote community-based services for young children
    a. Ensure parents and caregivers have access physically and financially to information and activities on emotional and developmental needs of infants and toddlers, particularly
    b. Engage community in providing educational and social opportunities for infants and toddlers and their caregiver
3. Ensure smooth transitions between early childhood care and education settings including 4K and 5K
    a. Provide better collaboration between providers and schools to ensure smooth transitions for children
    b. Promote collaborative training opportunities for all child care providers and schools to effectively put into practice the early learning standards
    c. Develop standard practice between child care and 4K/5K
4. Refine assessments such as Kindergarten Readiness Assessment (used in South Carolina public schools at kindergarten entry) to gain useful informational

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Overarching Goal: Promote high quality early care and education/Promote professional culture and empowerment of child care and early education providers

Primary Specific Goals

1. Recruit, support, and retain high quality teachers
    a. Provide coaching and mentoring
    b. Provide demonstration modules related to high quality early childhood education in classrooms/early education settings
        ▪ Ensure directors/administrators understand what high quality education looks like in early education settings
    c. Include behavior management and technology training
    d. Provide child care providers opportunities to grow professionally by giving them quality, well trained technical assistance on a regular basis (e.g., monthly/every 6 weeks)
    e. Train providers to recognize the emotional and behavioral needs of children and have accurate information and direction for meeting those needs
    f. Promote livable wages for the workforce providing care for children birth to five (without raising the price for families)
    g. Provide professional benefits (quality health insurance/paid time off)
    h. Professionalize the role of early childhood educators (support membership in ECE state organizations, public recognition for child care providers' achievement, community business support--special discounts/sales/etc.)
    i. Develop a system to provide additional benefits to child care workforce
    j. Include retention grants for staff longevity

k. Determine methods to raise education level of teachers without losing older or experienced teachers
l. Provide/allow state funds for training resources for ECE teachers
m. Expand quality improvement initiatives or support services to improve quality
n. Increase the number of males in the field of early childhood
   - Start recruiting males in high schools
   - Provide high school males some experience working in early childhood in high school to identify who might be good at this work
   - Change the perspective and make sure the larger public understands this work is not just for middle aged women

Secondary Specific Goals

1. Engage, educate, and assist parents in promoting/accessing high-quality early care and education and importance of family engagement in early care and education
   a. Ensure families and providers recognize the educational responsibility for providing more than 'babysitting' and educating children in ways that meet emotional needs
   b. Provide transportation to high quality centers to increase access
   c. Expand voucher program
   d. More available childcare 0-4
      - Tax breaks to child care businesses (city, county, gov't)
      - Provide more funding
      - More support for early childcare providers (benefits)
      - Provide more professional learning opportunities for caregivers
      - Pay childcare providers a living wage so more caregivers will be qualified to provide high quality care
2. Engage the business community and the legislature on the importance of early childhood
   a. Help businesses find ways to support their employees who may need help paying for child care

Tertiary Specific Goals

1. Address early care and education facility issues and curriculum support issues
   a. Focus on facility itself, supplies, maintenance, technology, making the facility accessible and inclusive
   b. Increase grant opportunities to improve facilities and buy materials to support curriculum
   c. Provide tax credits or bonuses to the childcare providers (centers/businesses), the teachers/staff, and directors that participate in quality improvement initiatives and increase education levels of staff
   d. Universal 4K/Broaden the requirements for 4K students to be accepted into the CERDEP program
      - Change regulationss to also include academic need and social emotional factors
      - Identify and address disparities among districts with instructional supply funds for early education including 4K
2. Ensure best practice and latest research are used to inform practices and policies

Overarching Goal: Increase general awareness of opportunities, programs, and services for young children and their families/Empower families to actively participate in development of their children
Primary Specific Goals
1. Empower parents as child's first teacher
a. Develop parenting curriculum to reinforce learning and awareness
b. Provide ongoing funding for training for child care facilities and schools (public, private, and homeschool) for parenting education/engagement
c. Explore expansion needs of programs for parents
d. Provide awareness, access, and resources (including use of social media) for families, child care facilities, and churches (newborn hearing test, early intervention)
e. Provide a safe space for parents if they struggle with areas of development
f. Focus on support and strategies to increase literacy skills in the home
g. Engage funding sources for services (Medicaid Part C)
h. Partner with faith-based community to increase opportunities for parent education/training
Secondary Specific Goals
1. Promote collaboration/collaborative efforts between community resources, medical facilities, child care facilities, churches, families
a. Engage informal learning environments related to promoting early childhood education including public libraries, community centers, etc.
b. Expand transitions support and programming and develop relationships with families served
c. Hold parent night and include incentives for attendance, such as children performing, meal, parent training and tips

Overarching Goal: Address needs of families, early care and education providers, and others in supporting children with special needs and behavior challenges (with more children having mental health and behavior challenges)
Primary Specific Goals
1. Support families, child care facilities/early education providers, and children in understanding of special needs and behaviors
a. Train staff/teachers in child care/early education settings on effectively supporting children with disabilities (in collaboration with state supports)
b. Examine programs' policies on admitting children with disabilities
c. Provide appropriate environments and supports for families of children with disabilities
d. Promote services that help support children in classrooms, like one on one support for children
e. Provide and promote mentor programs for families of children with disabilities
Secondary Specific Goals
1. Develop effective methods to communicate with families about children with behavioral and special needs

2. Provide more support/engage more agencies to access children to help them get the service they need/Collaborate with therapy providers, family, child-specific organizations, and public schools for early mental health services
Tertiary Specific Goals
1. Explore financing options that provide support for health, mental health, and behavioral services beyond Medicaid

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Current Barriers Across all Early Learning and Development Goals

Perceptions of ECE
- Perception/definition of readiness- schools should be ready for children (not the other way around); lack of agreement on definition, no unified voice for early childhood
- Legislators who do not recognize early childhood education or the "return on investment"
- Lack of interest in ECE as a profession
- Accessibility to politicians
- Consistency from business collaborators
- Governmental issues/bureaucracy
- Not all county support is the same
- Lack of clarity from state leaders

Financial Concerns
- Lack of funding (for increasing compensation, retaining high quality teachers, smaller class sizes, compensation for professional development, expanding transition programs)—explore distribution issues
- Lack of time for teachers to engage in professional development, to coordinate programs
- Turnover among staff in early education settings
- Not all districts qualify for CERDEPP (even though parts of the district are clearly in need)
- Need for training directed to the type of provider (family, child care facility), lack of knowledge on Early Learning Standards
- Disconnect between private, public, and Head Start, especially in areas of professional development

Logistical Concerns
- Lack of data and research from state DOE on children (who are we serving/where are they coming from?)
- Duplication/lack of coordination of services/programs targeted at school readiness, competition between agencies/lack of collaboration
- Need to expedite process for background checks; return time is interfering with ability to hire
- Transportation—access to child care, health/mental health services, information

Teacher Related Concerns
- Education levels of providers

- Well-being and health concerns for teachers/caregivers (some have their own trauma to be worked through before they are able to appropriately care for children)
- Lack of qualified candidates (those that are qualified go to K-12)
- Limited early childhood education classroom space/infrastructure and high-quality curriculum materials
- Lack of knowledge and professional development opportunities related to developmental milestones
- Lack of professional courses in ECE (0-3)
- Assessments need to give useful information to teachers, schools, and community
- No standard timeline for assessments or release of data- districts sometimes don't get it until nine months later
- Caregiver understanding of importance of ECE/school readiness
- Lack of Incentives for teachers (i.e. student loan forgiveness)
- Minimum wage for early educators working in some settings
- Lack of early childhood education training options in some areas of state; need a pipeline from child care provider to certified provider without incredible student loan debt
- Lack of buy-in from directors that trickles to teachers
- Lack of funding to employ better trained teachers and offer specialized services

Communication Concerns
- Lack of collaboration/gaps in communication between various community resources—medical, child care, churches, and families
- Lack of understanding of services provided by different agencies
- Lack of a centralized information center
- Social workers not involved as needed

Parent Related Concerns
- School-parent relationships
- Ensure mental health support for children and families—lack of understanding of complexity of what this takes
- Knowledge of resources is limited
- Knowledge of developmental milestones is limited by parents
- Lack of transportation
- Parents/caregivers afraid to ask for assistance (deportation)
- Parent/caregiver schedules, interests, pride often preclude participation in parenting skills development
- Lack of parenting education
- Lack of parent involvement, understanding of child development needs/developmental milestones, knowledge of resources and/or services
- Parent denial/defensiveness about child development, fear of being labeled
- Lack of information in places where families naturally gather
- No family medical home
- Language/cultural differences that impede parent engagement and understandings

Perceptions of Children

• Increase circle of influence so ALL staff are trained to deal with challenging behavior and ACES, versus specialists • Expectations of providers and educators often characterized by limited empathy • Lens of judgment versus support/strengths

Health and Wellbeing Goals

Overarching Goal: Increase access to early intervention for children from birth to age 5/ Children with identified delays are referred early to Early Intervention and receive timely services and provide options for families who have needs but don't meet criteria for state services
Primary Specific Goals 1. Universal developmental screening/monitoring by parents with support from knowledgeable professionals 2. Wellness and mental health support for teachers who work with challenging populations 3. Health care professionals need greater awareness of developmental milestones that are not related to health and need to better support families in understanding these at well baby visits 4. Increase awareness of what services are available to families. Teach families how to find these services.
Secondary Specific Goals 1. Part C to improve process around receiving referrals and serving children; education and awareness to the public (anyone serving families/children); increased workforce (pediatric specialists, early intervention providers); having early intervention providers travel to all parts of the county/state 2. Ages & Stages Questionnaire (ASQ) 3 and ASQ 2 in all settings (child care, MD, HV, community access) 3. Examine programs' policies on admitting children with disabilities 4. Provide greater mental health support for children, families, and teachers 5. Improve summer opportunities for social engagement for all children
Tertiary Specific Goals 1. Increase awareness and use of foreign language vouchers 2. Improve information dissemination when baby is born—given to parents before leaving any/all hospitals. 3. Alternatives to traditional well-visits- examine models where well visits are conducted at home (or in other settings/venues) for the first year 4. Centralized technical assistance, then fund and train case managers in each building

Overarching Goal: All children are healthy both physically and mentally; Ensure all children have medical home/Promote a system of care among existing services
Primary Specific Goals 1. Create and/or improve supports for parents and awareness on the part of practitioners about supports for parent and child mental health services 2. Improving healthy food access in preschool age children/families

a. Increase healthy food education classes for families and providers
b. Providing healthier options in facilities
c. Policy updates/changes within facility
d. Incentives- partnerships with community groups
e. Parent education nights at schools- bingo nights to raise money
f. Access to healthy foods- cost, location, transportation to community gardens, mobile truck with food
g. Parent engagement, ensure that home cultures are incorporated in healthy foods
h. Ensuring parents are educated and supported on breastfeeding practices
3. Connections to medical office early (prenatal)

Secondary Specific Goals

1. Increase the number of families who know about nutrition and the important role it plays in long- and short-term health and well-being
2. Early referral to early intervention
3. Make more community health care workers available
4. Improve the number of children receiving well-child checkups, vision care/diagnosis, access to care
5. Educate families on the importance of the medical home and components of well visits
6. Educate providers on AAP recommendations (Dental Home by 1, etc.)
7. Host community conversations -- What matters to patients? How do we connect them?
8. Create parent support groups and market them with positive messages
9. Improve funding, training, access to research-based social-emotional milestones and resources from age 3 through 4 year olds.
10. Promote system of care among existing services among professionals and families
    a. Single point of access for families to access services statewide
    b. Cabinet level position for early childhood
11. Ensure consistent practices (research-based) for supporting social emotional/mental health from birth to 5 years, starting with health care-birth/hospital to childcare to 4K to 5K
    a. Improve information dissemination when baby is born—given to parents before leaving any/all hospitals.
    b. Improve funding, training, and access to research-based social-emotional milestones and resources from birth to age 2 and ages 3-4
    c. Provide consistent state-led training and funding (all materials) for ALL state approved curriculum –curriculum must include social-emotional components
    d. Improve summer opportunities for social engagement for all children
    e. Provide monitoring/mentoring systems designed to improve use of evidence for continued support and needs for support.
    f. Improve the awareness of Early Learning Standards (socio-emotional milestones and links to practice)

Tertiary Specific Goals

1. Conduct "speed dating" clinics where people can meet providers and receive free screenings
2. Conduct regular social and emotional, health, and vision screenings for all. Make these available in multiple locations where low income families may go for support

3. Develop positive messages about social and emotional development that are culturally sensitive and targeted to low-income families
4. Involve preschools and other early intervention programs in community awareness campaigns
5. Improve mental health in communities
6. Support from employers -- paid time for basic doctor's care
7. Provide professional development to teachers on SEL

Overarching Goal: Provide access to mental health services for children (and family members); Reduce societal belief that children don't have legitimate stress (trauma informed practice/Child safety to prevent Adverse Childhood Experiences (ACES)

Primary Specific Goal
1. Promote social/emotional screening at all well-child checkups
2. Educate on Adverse Childhood Experiences (ACEs) and protective factors/provide training in ECE PD/preservice teacher preparation program
3. Support ECE staff members' mental health
   a. Provide teachers/ECE staff with access to mental health providers (low/no cost)
   b. Provide PD for teachers about their own mental health and the social emotional development/health of young children
   c. Increase ECE teacher and staff pay in order to reduce worry/stress in personal lives
   d. Reduce teacher turnover
   e. Increase teacher morale
   f. Afford high quality food in schools

Secondary Specific Goals
1. Provide greater mental health support for children and teachers
2. Avoid Adverse Childhood Experiences- reduce the amount of children across the state who are experiencing ACEs
   a. Building resilience
   b. Connecting parents to resources
   c. Improving public transportation (access to jobs)
   d. Access to treatments/training for parents
   e. Support groups for parents taking care of aging family members and their kids
   f. Encouraging parent responsibility/prioritizing kids
3. Improve the physical wellbeing of all children (specifically re: their likelihood of being victimized by child sexual abuse
   a. Using/teaching correct anatomical terminology
   b. Training preservice/in-service teachers to effectively detect and report suspicions of child sexual abuse
   c. Helping children grow the confidence they need to self-report sexually abusive experiences
   d. Provide training regarding child sexual abuse statistics, signs, etc. and to families and mandated reporters
   e. Developing prevention factors

4. Focus on social emotional development as much as cognitive development

Tertiary Specific Goals
1. Help educate parents to identify their own stressors/stress
2. Promote wellness and mental health support for teachers who work with challenging populations
3. Focus on "why" for behavior instead of the behavior
4. Increase awareness for need of therapeutic childcare (TCC)
     a. Medicaid and private insurance pay for TCC
     b. Increased funding for TCC
     c. More TCC programs
     d. Educate more on the importance of social/emotional development

Overarching Goal: Modify our systems to support and promote self-sufficiency
Primary Specific Goals 1. Provide incentives for steps toward success, instead of a cut back or penalty. For example, often when a family member gets a job then they no longer qualify for services yet they aren't making enough money to feed their family so it ends up being the case that being employed (or married for that matter) actually hurts them instead of helps them 2. Form relationships with decision-makers to modify system requirements and regulations 3. Introduce life skills/home economics back into middle/high schools and include financial literacy in middle/high school
Secondary Specific Goals 1. Provide tax incentives to employers who support families and provide parent awareness/education
Tertiary Specific Goals 1. Provide greater access to job coaches through vocational rehab/unemployment office to promote continuing success

Current Barriers Across all Health and Wellbeing Goals
Logistical Concerns • Timeliness of early intervention • Continuity and appropriateness of early intervention services • Referral and evaluation process too lengthy • Redundancy in screenings • Over use of Response to Intervention • Fragmentation of services—no seamless process • Lack of collaboration among statewide systems • No clear definition for mental health problems to get medical access codes for children to permit treatment **Accessibility Concerns** • Lack of awareness of how to access services • Lack of bilingual materials and staff • Organizationally it is hard to reach all of these groups

- Lack of service availability (capacity) in rural areas/transient populations
- Lack of information given to families at hospital about child development
- Lack of access to multiple therapies—mental, physical, occupational, speech
- Lack of transportation
- Parents unable to take off work to access services

Financial Concerns and Perceptions of Need
- No dedicated funding for this
- Need to form relationships with lawmakers
- Lack of buy in from state and local leadership
- Lack of paid parental/maternity leave
- Availability of paid-time off for mental health support
- Values and perceptions of leaders (decision making authority)
- Lack of incentives to promote attendance at parental support groups

Perceptions of Health and Wellbeing
- Stigma of early intervention, abuse, and mental health services
- Parent dismiss issues/normalize issues
- Lack of broader view of whole child
- Lack of shared decision making among early educators and parents
- Adverse effects of technology on physical and mental development
- Lack of understanding that all behavior has meaning
- Cultural barriers- no community focus- we have lost "the village"
- Systems ignore the caregivers- no livable wages, no access to benefits
- Lack of collaboration with social service sector
- Biases of those in charge of programming

Retention and Quality Concerns
- Health care providers are already overworked
- Length of hiring process
- Lack of resources and work load of early childhood educators
- High turnover among teachers/caregivers of young children
- Lack of qualified staff to handle issues

Food Related Concerns
- Food is cost prohibitive, fresh food not available, people do not know how to cook
- Lack of knowledge about what is healthy
- SNAP and WIC recruitment and retention, SNAP is often the sole provider of food for households

Family and Community Goals

Overarching Goal: Communities are family friendly
Primary Specific Goals

1. Help families overcome transportation barriers in order to provide enriching experiences outside of the home
    a. Expand public transportation
    b. Provide transportation to trainings/community gatherings
    c. Partner with churches/organizations to utilize their buses during the week
    d. Carpool network
    e. Expand programs that go into communities (i.e. library book mobiles)

f. Provide transportation to medical facilities for free to increase well visits and access to health care for all family members
g. Expand options for public meeting spaces (i.e. public parks)
h. Wrap around services
2. Connect families to resources and events in all areas (everything from homework to housing)
a. Develop a resource guide for parents that is widely accessible and available in many languages
b. Develop a resource guide for providers (separate from the parent guide)
c. Provide easy access to information, better marketing of services available (social media, print advertising, public relations, radio/TV)
d. Individuals are trained/employed to support families to connect to services they need
3. Provide parent awareness/training on available community resources and activities to help with child development. Ensure work is culturally sensitive and current. Vary the format, use technology when appropriate, and assess needs to drive content.
a. Create interagency council to meet quarterly; provide better coordination of resources
b. Provide a variety of home visitation program options
c. Create family training sites where parents can learn parenting skills
d. Provide food and childcare at community gatherings
e. Possible training topics include:
   ▪ Disabilities and services available
   ▪ How to handle difficult behaviors
   ▪ How to help child develop by doing activities that promote learning
   ▪ How to communicate with teachers about concerns (know the right questions to ask, what information to share)

Secondary Specific Goals
1. Meet basic needs of families-address barriers that prevent families from participation such as good transportation, wifi for online learning, access to technology and child care

Tertiary Specific Goals
1. Increase programs for birth to three (so many are available for four and up)
2. Need for equitable play spaces
3. Provide greater opportunities for adult education for parents
4. Promote respect for all community members; Organize kindness projects and/or service projects/volunteer work
5. Make sure all children have access to Wi-Fi for online learning
6. Partner with libraries to support children and families who do not have access to technology in the home
7. Implement family friendly workforce strategies

Overarching Goal: Families are supported

Primary Specific Goals
1. Encourage collaboration between all community organizations to provide resources and goals

a. Organize planning meetings with leaders from each organization b. Better connect higher ed and communities. If higher ed faculty need research ideas they should partner with local community members in need to provide services and then study their impact c. Don't leave private, for-profit child care out of the conversation. Often these places also serve some children/families in need yet they get overlooked by most agencies and don't receive the same information/resources 2. Build relationships with families served 　　a. Improve community, school, and program understanding of the struggles and circumstances of many families that they serve 　　b. Educate providers about potential bias 3. Provide home visiting programs that connect families to resources in all areas 　　a. Create a resource guide to combine information
Secondary Specific Goals
1. Improve community, school, and program understanding of the struggles and circumstances of many families that can impact how they provide and relate to families 2. Educate stakeholders about potential bias (i.e. assumption that parents are uneducated or "do not care" should be replaced by taking the time to find out what barriers the families may face) 3. Increase availability of programs that provide food, clothing, shelter
Tertiary Specific Goals
1. Survey the needs and barriers of community members through a variety of mechanisms 2. Action oriented collaborations- informing is not enough 3. Use social media to communicate with, support, and train families

Overarching Goal: Address/meet the needs of diverse families/Develop cultural sensitivity/ Overcome multicultural barriers
Primary Specific Goals
1. Support the development of dual language learners/Dedicate ESOL support for birth to four year olds in schools and childcare programs to serve children during critical language development periods 2. Provide greater outreach so resources are appropriate for and accessible to a variety of cultural groups (go to them) 3. Provide cultural diversity and non-biased sensitivity training to parents and teachers with an emphasis on family engagement 4. Partner with organizations that provide coordinated services
Secondary Specific Goals
1. Host "If my community only knew" parent panels (parents' perspective informs how services should be conducted- should be representative of the community they are addressing) 2. Provide support based on family needs to include individual culture and language development and learning style
Tertiary Specific Goals
1. Create localized resource book (printed and/or digital) to support multiculturalism

2. Provide more funding for high quality parenting support programs

Overarching Goal: Ensure legislators understand their impact and ability to influence families and prepare children for productive lives through policy.

Primary Specific Goals
 1. Be intentional in building relationships with legislators so they see us as a trusted resource and expert
     a. Educate legislators on appropriate assessment tools and use of data
     b. Make sure legislators understand what measures are appropriate when compiling data pertaining to the outcomes of data
 2. Host town hall meetings to let legislators hear from parents about their struggles
 3. Increase legislator understanding of ECE
     a. Take legislators on tours of what is and isn't working in each district
     b. Ask legislators to participate in poverty simulations
     c. Conduct data sessions for legislators on kindergarten readiness in their districts

Secondary Specific Goals   1. Develop one-pager/video of "talking points" to ensure one voice when advocating for young children and families including testimonials (needs to represent all voices)
Tertiary Specific Goals   1. Utilize professional early childhood organizations in the state to help create materials and data- use members in these organizations as the voices to the legislation (e.g. SCAEYC, SCECA, etc.)

Current Barriers Across all Family and Community Goals
Equity Concerns   • Community events should be family friendly for ALL families (i.e. all family members can attend- What parents are being left out? How are we making all of this equitable?)   • Language barriers   • No navigators or communicators to connect families to services or opportunity (who do they listen to, who do they trust- we need more trained staff for this- more diversity more bi-lingual, etc.)   • Gaps in cultural expectations   • Time management of families   • Not enough ESOL services and they need to be broadened beyond Spanish   • No ESOL support for infants/toddlers   • Understanding of other cultures and cultural practices, specifically parents, teachers,   • Lack of livable wages for families   • Lack of parental awareness of resources   • Parents do not know who to connect with for support   **Accessibility Concerns**   • No one-stop shopping for resources or services   • Issues with location of services   • Lack of transportation   • Not all communities are safe

- Affordable and safe housing equipped with a common area
- Lack of identification of people in the community available for support
- Parents need options- not everyone wants a two year program

Financial Concers
- Funding barriers
- Unfunded mandates
- Funding spread too thin- too many priorities

Perceptions of Families
- Lack of understanding of what parents need
- Lack of awareness of family friendly business practices
- Lack of intentional and individualized services- lack of substantive programming (no more one shot workshops)
- Lack of advocates to support families and children
- Commonly understood definition of diverse families
-

Organizational Concerns
- Agencies do not coordinate paperwork and parents must duplicate forms/information
- Need to streamline services
- Competitions and territorialism—internal groups don't want outside groups to participate
- Lack of inclusivity in collaborations
- Home visitation programs need diverse staff
- Current laws and policies regarding family structure and impact on ABC voucher program
- Staff at specific programs may not be representational of diversity
-

Political Concerns
- Politicization of social issues
- Legislators lack of interest in children's issues/disconnection from issues
- Legislators lack of understanding of equity issues
- Turnover/transitions between legislators
- Legislators are not approachable
- Families do not want to be regulated
- Knee-jerk reaction to issues
- Laws/policies that are unfair to children

Survey

Method

An online survey was conducted to understand the perceptions of parents/caregivers, representatives of organizations that work with young children and families, and community members on the issues of preschool development of children who are 5 years of age or younger. The survey questions were aligned with three major domains: Early Learning and Development, Health and Wellbeing, and Family and Community. To understand priorities, respondents were asked to select the most important things (checking the top three among a list of issues or writing in another priority) within each domain. Demographic information was collected from parents/caregivers to better understand associations between demographic information and views on child development.

PDG Survey Priorities by Major Domain

Early Learning and Development

Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)

Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)

Knowing what to do for child/children to be ready for school

Having programs or services that promote learning in the community

Having resources or materials to promote learning at home

Being able to pay for high-quality childcare/early education programs

Knowing the expectations of school(s) related to being ready for school

Having time to play with child/children to promote learning

Knowing how to play with child/children to promote learning

Health and Wellbeing

Understanding child or children's development

Getting services for needs of child or children (early intervention such as speech therapy, physical therapy)

Being able to afford healthcare for child or children

Taking child or children to well-child visits (scheduling, transportation, convenient hours)

Having time to prepare healthy meals for child or children

Being able to get to healthcare as needed for child or children (scheduling, transportation, convenient hours of healthcare)

Finding healthcare providers for child or children

Being able to afford nutritious foods

Being able to find nutritious foods in local grocery stores, farmer's markets/stands, or other places

Having safe food and drinking water

Having mental health services for parents or caregivers

Having mental health services for child or children

Family and Community

Having enough family time to spend with child/children

Having strong relationships with child or children

Having a support system of friends and family members available

Having community resources and activities to support family life

Being in a family-friendly community

Feeling safe in the community

Having amenities in the community (sidewalks, playground area, community center, or a library)

Feeling safe at home

Having a voice/place in the community (fairness in community)

Having a community free of litter, rundown housing, and vandalism

Having role models in the community

The survey was launched on April 1, 2019 and was closed on May 10, 2019. During that period, 3114 responses were received. We excluded the 30 participants who did not identify themselves within one of three categories in our analysis. We also excluded 404 participants who began the survey but did not respond to any of the questions within the three domains. Therefore, we had 2680 valid respondents. Among them, 1216 (45.4%) were parents or caregivers, 1134 (42.3%) were representatives of organizations that work with children and families, and 330 (12.3%) were community members. Some participants had dual roles of being a parent/caregiver and an organizational representative, and we allowed them to complete the survey twice by positioning themselves in these two different roles. In our analysis, we used their first choice to complete the survey as their positions in the analysis.

Parents/Caregivers' Information

Demographic Variable		N	%
Ethnicity/Race	Black or African American	586	49.5
	White or Caucasian	526	44.4
	Other	73	6.2
Academic Degree	High School Diploma or Below	277	23.2
	Associate or Some College	432	36.2
	Bachelor's Degree	223	18.7
	Master's Degree or Ph.D.	262	21.9
Age	Under 18	84	7.0
	18-25	134	11.1
	26-30	225	18.6
	31-40	411	34.1
	41-50	240	19.9
	Above 50	113	9.4
Employment Status	Employed Full Time	749	63.3
	Employed Part Time	262	22.1
	Other	172	14.5
	No Child 5 or Younger	248	20.4

Number of Children Ages 0-5	1 Child 5 or Younger	473	38.9
	2 Children 5 or Younger	300	24.7
	3 or More Children 5 or Younger	194	16.0

We collected demographic information for the 1216 parents/caregivers from 44 counties in South Carolina. The numbers of participants varied based on their counties. Some counties (e.g., Anderson, Lee) had more than 100 participants, while others (e.g., Cherokee, Georgetown, Horry) had fewer than 10 participants. About 49.5% were Black or African American, 44.4% were White or Caucasian, and 6.2% were in the other ethnicity/race group. About 21.9% had a Master's degree or Ph.D., 18.7% had a Bachelor's degree, 36.2% had an Associate's Degree or some college, and 23.2% had High School Diploma or below. About 7% were under 18 years of age, 29.7% were between 18 and 30 years of age, 54% were between 30 and 50, and about 9.4% were older than 50. About 63.3% were employed and worked full time and 22.1% were employed and worked part time. About 20.4% had no children, 38.9% had one child, 24.7% had two children, and 16.0% had three or more children.

Children's Participation in Programs

Participation	N	%
Full-time private childcare/early education program	351	25.83
Four-year-old prekindergarten (4K) program at school district or in childcare/early education setting	217	15.97
Kindergarten (5K)	143	10.52
Head Start	109	8.02
Early Head Start	99	7.28
Part-time private childcare/early education program	86	6.33

In the survey, parents/caregivers were asked to select the programs their children participated in at the time of the survey. About a quarter of the parents/caregivers indicated their children participated in full-time private childcare/early education program. About 16% of the parents/caregivers indicated their children participated in four-year-old prekindergarten (4K) program at school district or in childcare/early education setting. About 10% indicated their children participated in kindergarten, and more than 20% of the parents/caregivers indicated their children participated in other programs including Head Start, Early Head Start, and part-time private childcare/early education program.

Results
Survey results were disaggregated by role including parents/caregivers, representatives of organizations that work with children and families, and community members. Parent/caregiver responses were also analyzed based on demographic factors provided by the survey respondents.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Early Learning and Development</u> of Young Child or Children (N=1216)

Early Learning and Development	N	%
Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)	593	48.77
Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)	479	39.39
Knowing what to do for child/children to be ready for school	461	37.91
Having programs or services that promote learning in the community	446	36.68
Having resources or materials to promote learning at home	427	35.12
Being able to pay for high-quality childcare/early education programs	403	33.14
Knowing the expectations of school(s) related to being ready for school	382	31.41
Having time to play with child/children to promote learning	345	28.37
Knowing how to play with child/children to promote learning	276	22.70
Other (please specify)	20	1.64

Summary:

➢ For parents/caregivers, the most important things (top three) related to the early learning and development of young children include finding high-quality childcare/early education programs, participating in high-quality childcare/early education programs, and knowing what to do in order for their child/children to be ready for school.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Health and Wellbeing </u>of Young Child or Children (N=1216)

Health and Wellbeing	N	%
Understanding child or children's development	593	48.77
Getting services for needs of child or children (early intervention such as speech therapy, physical therapy)	426	35.03
Being able to afford healthcare for child or children	393	32.32
Taking child or children to well-child visits (scheduling, transportation, convenient hours)	371	30.51
Having time to prepare healthy meals for child or children	358	29.44
Being able to get to healthcare as needed for child or children (scheduling, transportation, convenient hours of healthcare)	342	28.13
Finding healthcare providers for child or children	330	27.14
Being able to afford nutritious foods	280	23.03
Being able to find nutritious foods in local grocery stores, farmer's markets/stands, or other places	271	22.29
Having safe food and drinking water	268	22.04
Having mental health services for parents or caregivers	193	15.87
Having mental health services for child or children	179	14.72
Other (please specify)	14	1.15

Summary:

➢ For parents/caregivers, the most important things (top three) related to the health and wellbeing of young children include understanding child or children's development, accessing services that meet the needs of their child(ren), and being able to afford healthcare.

Parents/Caregivers' Perceptions of the Most Important Things Related to the Family and Community of Young Child or Children (N=1216)

Family and Community	N	%
Having enough family time to spend with child/children	657	54.03
Having strong relationships with child or children	611	50.25
Having a support system of friends and family members available	503	41.37
Having community resources and activities to support family life	470	38.65
Being in a family-friendly community	424	34.87
Feeling safe in the community	411	33.80
Having amenities in the community (sidewalks, playground area, community center, or a library)	395	32.48
Feeling safe at home	323	26.56
Having a voice/place in the community (fairness in community)	257	21.13
Having a community free of litter, rundown housing, and vandalism	201	16.53
Having role models in the community	195	16.04
Other (please specify)	14	1.15

Summary:

➢ For parents/caregivers, the most important things (top three) related to the family and community of young children include having enough family time to spend with their child(ren), having strong relationships with their child(ren), and having a support system of friends and family members available.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Early Learning and Development</u> of Young Child or Children Based on Parent/Caregiver Age (%)

Early Learning and Development	Under 18 (N=84)	18-25 (N=134)	26-30 (N=225)	31-40 (N=411)	41-50 (N=240)	Above 50 (N=113)
Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)	60.7	47.8	45.3	49.6	45.0	51.3
Knowing what to do for child/children to be ready for school	47.6	42.5	40.0	33.6	35.4	41.6
Having programs or services that promote learning in the community	38.1	42.5	36.9	35.0	34.2	38.1
Having resources or materials to promote learning at home	35.7	47.8	37.8	30.9	32.1	36.3
Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)	35.7	33.6	40.0	40.9	41.3	38.9
Being able to pay for high-quality childcare/early education programs	33.3	35.1	35.1	34.3	29.2	31.9
Knowing the expectations of school(s) related to being ready for school	33.3	37.3	38.2	29.2	27.9	26.5
Knowing how to play with child/children to promote learning	23.8	24.6	26.7	22.9	19.6	18.6
Having time to play with child/children to promote learning	20.2	29.9	30.2	33.6	22.5	21.2
Other (please specify)	4.8	0.0	0.0	0.7	3.3	4.4

Summary:

- ➢ Regardless of age, parents/caregivers report the most important thing related to the early learning and development of young children is finding high-quality childcare/early education programs.
- ➢ For most parents/caregivers (except for the age group 31-40), the most important things related to the early learning and development of young children also include knowing what to do for child/children to be ready for school.
- ➢ For parents/caregivers who are older than 25, the most important things related to the early learning and development of young children also include participating in high-quality childcare/early education programs.
- ➢ For parents/caregivers who are younger than 25, the most important things related to the early learning and development of children also include having programs or services that promote learning in the community.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Health and Wellbeing</u> of Young Child or Children Based on Parent/Caregiver Age (%)

Health and Wellbeing	Under 18 (N=84)	18-25 (N=134)	26-30 (N=225)	31-40 (N=411)	41-50 (N=240)	Above 50 (N=113)
Understanding child or children's development	46.4	59.7	50.7	44.8	48.3	50.4
Finding healthcare providers for child or children	44.0	28.4	28.0	26.0	23.8	23.0
Taking child or children to well-child visits (scheduling, transportation, convenient hours)	38.1	36.6	35.1	29.2	26.3	24.8
Being able to afford healthcare for child or children	35.7	29.1	35.6	31.9	31.3	30.1
Being able to get to healthcare as needed for child or children (scheduling, transportation, convenient hours of healthcare)	33.3	41.0	30.7	22.9	27.1	25.7
Getting services for needs of child or children (early intervention such as speech therapy, physical therapy)	32.1	37.3	34.7	33.8	36.7	35.4
Having time to prepare healthy meals for child or children	31.0	32.8	28.0	34.1	24.6	21.2
Being able to find nutritious foods in local grocery stores, farmer's markets/stands, or other places	27.4	29.9	28.0	20.0	12.9	25.7
Having safe food and drinking water	21.4	28.4	23.6	20.2	22.1	19.5
Being able to afford nutritious foods	20.2	20.9	31.6	22.9	19.6	19.5
Having mental health services for child or children	16.7	10.4	16.9	16.1	14.2	11.5
Having mental health services for parents or caregivers	13.1	17.2	19.1	16.1	12.9	15.9
Other (please specify)	0.0	0.0	0.9	1.0	1.7	2.7

Summary:

➢ Regardless of age, parents/caregivers reported the most important thing related to the health and wellbeing of young children is understanding child and children's development.

➢ For parents/caregivers who are older than 40, the most important things related to the health and wellbeing of children also include being able to afford healthcare and getting services that meet the needs of their child(ren).

➢ For parents/caregivers who are under 18, the most important things related to the health and wellbeing of children also include finding healthcare providers for child(ren) and taking their child(ren) to well-child visits.

Parents/Caregivers' Perceptions of the Most Important Things Related to the Family and Community of Young Child or Children Based on Parent/Caregiver Age (%)

Family and Community	Under 18 (N=84)	18-25 (N=134)	26-30 (N=225)	31-40 (N=411)	41-50 (N=240)	Above 50 (N=113)
Having enough family time to spend with child/children	73.8	50.0	57.3	58.2	46.7	38.1
Having strong relationships with child or children	50.0	50.7	44.4	54.7	50.0	47.8
Having a support system of friends and family members available	42.9	41.8	40.4	43.3	40.0	38.9
Being in a family-friendly community	41.7	32.1	34.2	35.3	34.2	32.7
Having community resources and activities to support family life	40.5	40.3	39.6	33.6	42.5	46.0
Feeling safe in the community	35.7	35.1	31.6	32.8	38.8	28.3
Feeling safe at home	35.7	29.1	29.3	27.0	23.8	15.9
Having a voice/place in the community (fairness in community)	26.2	29.1	23.6	16.3	18.3	25.7
Having amenities in the community (sidewalks, playground area, community center, or a library)	23.8	40.3	33.8	33.6	30.4	29.2
Having a community free of litter, rundown housing, and vandalism	21.4	14.9	12.9	18.5	16.7	15.0
Having role models in the community	17.9	22.4	18.7	13.9	15.0	13.3
Other (please specify)	1.2	1.5	0.9	0.2	1.3	4.4

Summary:

➢ Regardless of age, parents/caregivers report the most important things related to the family and community include having strong relationships with their child(ren).

➢ For parents/caregivers who are older than 40, the most important things related to the family and community also include having community resources and activities to support family life.

➢ For parents/caregivers who are 40 or younger, the most important things related to the family and community also include having a support system of friends and family members available.

Parents/Caregivers' Perceptions of the Most Important Things Related to the Early Learning and Development of Young Child or Children Based on Academic Degree (%)

Early Learning and Development	High School Diploma or Below (N=277)	Associate or Some College (N=432)	Bachelor (N=223)	Master or Ph.D. (N=262)
Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)	44.0	43.5	54.7	56.9
Having resources or materials to promote learning at home	41.5	43.3	30.5	17.9
Knowing what to do for child/children to be ready for school	41.2	40.7	31.4	35.1
Having programs or services that promote learning in the community	36.8	40.3	37.2	30.9
Knowing the expectations of school(s) related to being ready for school	30.7	37.5	28.3	24.8
Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)	28.2	43.1	41.3	44.7
Knowing how to play with child/children to promote learning	26.7	21.5	20.6	22.9
Being able to pay for high-quality childcare/early education programs	26.0	31.5	37.2	38.9
Having time to play with child/children to promote learning	24.9	26.6	30.0	32.8
Other (please specify)	1.1	0.7	3.6	2.3

Summary:

➢ Regardless of education level, parents/caregivers report the most important thing related to the early learning and development of children is finding high-quality childcare/early education programs.

➢ For the parents/caregivers who have a Bachelor's, Master's or Ph.D. degree, important things also include participating in high-quality childcare/early education programs and being able to pay for high-quality childcare/early education programs.

➢ For the parents/caregivers who have associate or some college education or have high school diploma or below, important thing also include having resources or materials to promote learning at home.

➢ For the parents/caregivers who have high school diploma or below, important things also includes knowing what to do for their child/children to be ready for school.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Health and Wellbeing </u>of Young Child or Children Based on Academic Degree (%)

Health and Wellbeing	High School Diploma or Below (N=277)	Associate or Some College (N=432)	Bachelor (N=223)	Master or Ph.D. (N=262)
Understanding child or children's development	52.3	51.9	45.7	43.1
Being able to get to healthcare as needed for child or children (scheduling...)	35.4	27.1	22.0	27.1
Taking child or children to well-child visits (scheduling, transportation, ...)	31.8	32.2	23.3	32.4
Getting services for needs of child or children (early intervention)	31.0	36.6	31.8	39.3
Being able to afford healthcare for child or children	27.4	36.8	33.2	28.6
Having safe food and drinking water	27.1	25.5	17.9	13.7
Finding healthcare providers for child or children	26.7	27.3	27.4	26.7
Having time to prepare healthy meals for child or children	25.6	25.2	36.8	33.6
Being able to find nutritious foods in local grocery stores, farmer's markets...	22.7	25.9	26.9	12.2
Being able to afford nutritious foods	22.4	24.3	26.5	18.3
Having mental health services for child or children	13.0	15.3	14.3	16.8
Having mental health services for parents or caregivers	10.1	19.7	16.1	16,0
Other (please specify)	0.7	0.7	1.8	1.9

Summary:

➢ Regardless of education level, parents/caregivers report the most important thing related to the health and wellbeing of children is understanding child or children's development.
➢ For the parents/caregivers who have a Master's or Ph.D. degree, important things also include getting services that meet the needs of their child(ren) and having time to prepare healthy meals.
➢ For the parents/caregivers who have a Bachelor's degree, important things also include having time to prepare healthy meals and being able to afford healthcare.
➢ For the parents/caregivers who have an Associate's degree or some college education, important things also include getting services that meet the needs of their child(ren) and being able to afford healthcare.
➢ For the parents/caregivers who have a high school diploma or below, important things also include being able to get to healthcare as needed and taking their child(ren) to well-child visits.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Family and Community</u> of Young Child or Children Based on Academic Degree (%)

Family and Community	High School Diploma or Below (N=277)	Associate or Some College (N=432)	Bachelor (N=223)	Master or Ph.D. (N=262)
Having enough family time to spend with child/children	49.5	52.3	60.1	55.0
Having strong relationships with child or children	46.2	49.5	52.5	54.2
Having a support system of friends and family members available	37.9	44.4	40.4	41.6
Having community resources and activities to support family life	37.5	39.4	39.0	38.2
Being in a family-friendly community	33.9	32.4	37.7	37.8
Feeling safe in the community	32.9	33.8	34.1	34.0
Feeling safe at home	28.5	29.2	24.2	21.0
Having amenities in the community (sidewalks, playground area, community center, or a library)	25.6	34.0	36.8	34.4
Having a voice/place in the community (fairness in community)	22.4	24.5	22.9	12.6
Having role models in the community	15.2	20.1	17.9	9.2
Having a community free of litter, rundown housing, and vandalism	13.4	17.8	15.7	18.3
Other (please specify)	2.2	0.7	0.9	1.1

Summary:

➢ Regardless of education level, parents/caregivers report the most important things related to family and community include having enough family time to spend with their child/children, having strong relationships with their child or children, and having a support system of friends and family members available.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Early Learning and Development</u> of Young Child or Children Based on Employment Status (%)

Early Learning and Development	Employed Full Time (N=749)	Employed Part Time (N=262)	Other (N=172)
Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)	54.6	32.4	47.7
Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)	39.4	42.4	33.1
Being able to pay for high-quality childcare/early education programs	37.8	22.5	28.5
Having programs or services that promote learning in the community	36.6	36.6	36.6
Knowing what to do for child/children to be ready for school	36.4	37.4	41.9
Having time to play with child/children to promote learning	29.5	25.2	28.5
Knowing the expectations of school(s) related to being ready for school	29.4	37.0	30.2
Having resources or materials to promote learning at home	29.1	50.4	37.8
Knowing how to play with child/children to promote learning	23.0	19.5	23.3
Other (please specify)	1.7	0.0	3.5

Note: Other includes "not employed looking for work," "not employed not looking for work," "retired," "disabled," "self-employed," and "stay at home and care for children"

Summary:

- For the parents/caregivers who are employed and work full time, finding high-quality childcare/early education programs, participating in high-quality childcare/early education programs, and being able to pay for high-quality childcare/early education programs are the top three most important things.
- For the parents/caregivers who are employed and work part time, having resources or materials to promote learning at home, participating in high-quality childcare/early education programs, and knowing what to do for child/children to be ready for school are the top three most important things.
- For others, finding high-quality childcare/early education programs, knowing what to do for child/children to be ready for school, and having resources or materials to promote learning at home are the top three most important things.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Health and Wellbeing</u> of Young Child or Children Based on Employment Status (%)

Health and Wellbeing	Employed Full Time (N=749)	Employed Part Time (N=262)	Other (N=172)
Understanding child or children's development	45.7	59.9	47.1
Getting services for needs of child or children (early intervention such as speech therapy, physical therapy)	35.0	33.2	37.8
Being able to afford healthcare for child or children	34.0	28.6	27.9
Having time to prepare healthy meals for child or children	32.2	22.1	27.3
Taking child or children to well-child visits (scheduling, transportation, convenient hours)	30.2	30.9	32.0
Finding healthcare providers for child or children	29.2	21.8	26.2
Being able to get to healthcare as needed for child or children (scheduling, transportation, convenient hours of healthcare)	28.4	23.7	33.7
Being able to afford nutritious foods	23.2	19.5	23.8
Being able to find nutritious foods in local grocery stores, farmer's markets/stands, or other places	19.9	25.2	26.7
Having safe food and drinking water	19.0	31.7	20.3
Having mental health services for parents or caregivers	14.8	14.9	18.6
Having mental health services for child or children	13.8	13.0	19.2
Other (please specify)	1.3	0.4	1.2

Note: Other includes "not employed looking for work," "not employed not looking for work," "retired," "disabled," "self-employed," and "stay at home and care for children"

Summary:

- ➢ Regardless of employment status, parents/caregivers report understanding child development and getting services that meet their child's needs are very important.
- ➢ For the parents/caregivers who are employed and work full time, being able to afford healthcare is also important.
- ➢ For the parents/caregivers who are employed and work part time, having safe food and drinking water is important.
- ➢ For others, being able to get to healthcare as needed is important.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Family and Community</u> of Young Child or Children Based on Employment Status (%)

Family and Community	Employed Full Time (N=749)	Employed Part Time (N=262)	Other (N=172)
Having enough family time to spend with child/children	60.5	38.2	50.0
Having strong relationships with child or children	53.1	46.6	42.4
Having a support system of friends and family members available	41.3	42.0	41.3
Having community resources and activities to support family life	36.0	45.4	38.4
Being in a family-friendly community	36.0	26.3	41.9
Feeling safe in the community	34.2	35.1	31.4
Having amenities in the community (sidewalks, playground area, community center, or a library)	32.7	32.8	30.2
Feeling safe at home	27.9	25.6	22.7
Having a voice/place in the community (fairness in community)	18.2	24.4	26.2
Having a community free of litter, rundown housing, and vandalism	17.1	13.4	19.2
Having role models in the community	16.8	16.4	11.6
Other (please specify)	1.1	1.1	1.7

Note: Other includes "not employed looking for work," "not employed not looking for work," "retired," "disabled," "self-employed," and "stay at home and care for children"

Summary:

➢ Regardless of employment status, parents/caregivers report having strong relationships with their child(ren) is considered to be very important..

➢ For the parents/caregivers who are employed and work full time, having enough family time to spend with their child(ren) and having a support system of friends and family members available are also considered to be very important.

➢ For the parents/caregivers who are employed and work part time, having a support system of friends and family members available and having community resources and activities to support family life are also considered to be very important.

➢ For others, having enough family time to spend with their child(ren) and being in a family-friendly community are important.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Early Learning and Development</u> of Young Child or Children based on the Number of Children Ages 0-5 They Have (%)

Early Learning and Development	Having no child (N=248)	Having 1 child (N=473)	Having 2 children (N=300)	Having 3 or more children (N=194)
Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)	50.4	51.6	48.0	40.7
Knowing what to do for child/children to be ready for school	41.1	38.1	38.7	32.0
Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)	39.1	40.2	37.0	41.8
Having programs or services that promote learning in the community	33.1	34.5	39.7	42.3
Being able to pay for high-quality childcare/early education programs	32.3	39.5	31.3	21.6
Having time to play with child/children to promote learning	29.8	27.9	31.0	23.7
Knowing the expectations of school(s) related to being ready for school	27.4	29.2	36.0	35.1
Having resources or materials to promote learning at home	25,4	30.2	41.0	50.0
Knowing how to play with child/children to promote learning	21.4	26.2	20.7	19.1
Other (please specify)	3.6	1.3	0.7	1.5

Summary:

➢ For the parents/caregivers who have fewer than 3 children, finding high-quality childcare/early education programs is considered to be very important.

➢ For the parents/caregivers who have 2 or more children, having programs or services that promote learning in the community and having resources or materials to promote learning at home are considered to be very important.

➢ Participating in high-quality childcare/early education programs is also important to parents/caregivers regardless of how many children they have.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Health and Wellbeing</u> of Young Child or Children Based on the Number of Children Ages 0-5 They Have (%)

Health and Wellbeing	Having no child (N=248)	Having 1 child (N=473)	Having 2 children (N=300)	Having 3 or more children (N=194)
Understanding child or children's development	43.1	48.4	49.0	56.7
Getting services for needs of child or children (early intervention such as speech therapy, physical therapy)	35.9	30.2	39.7	38.7
Being able to afford healthcare for child or children	33.1	34.9	31.0	26.8
Having time to prepare healthy meals for child or children	31.0	29.8	31.0	23.7
Finding healthcare providers for child or children	29.8	26.0	27.3	26.3
Being able to get to healthcare as needed for child or children (scheduling, transportation, convenient hours of healthcare)	29.8	27.1	26.3	31.4
Taking child or children to well-child visits (scheduling, transportation, convenient hours)	29.0	31.3	32.0	28.4
Having mental health services for child or children	21.0	12.5	13.7	13.9
Being able to afford nutritious foods	21.0	24.5	25.0	18.6
Being able to find nutritious foods in local grocery stores, farmer's markets/stands, or other places	19.4	23.7	21.0	24.7
Having mental health services for parents or caregivers	19.0	16.1	13.3	15.5
Having safe food and drinking water	15.7	17.8	27.0	33.0
Other (please specify)	3.2	0.8	0.7	0.0

Summary:

➢ Regardless of the number of children they have parents/caregivers report understanding child or children's development is considered to be very important (one of the top three things).

➢ For the parents/caregivers who have 2 or more children, getting services that meet the needs of their child(ren) is also very important. Those without children also reported this as important.

➢ For the parents/caregivers who have 1 or 2 children, taking their child well-child visits is also very important.

➢ For the parents/caregivers who have 3 or more children, having safe food and drinking water is also important.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Family and Community</u> of Young Child or Children Based on the Number of Children Ages 0-5 They Have (%)

Family and Community	Having no child (N=248)	Having 1 child (N=473)	Having 2 children (N=300)	Having 3 or more children (N=194)
Having enough family time to spend with child/children	56.9	60.0	49.7	42.3
Having strong relationships with child or children	52.0	51.2	50.3	45.9
Having a support system of friends and family members available	42.7	41.0	43.0	38.1
Being in a family-friendly community	39.1	37.6	33.7	24.7
Having community resources and activities to support family life	34.7	35.7	40.7	47.9
Feeling safe in the community	32.7	31.7	40.7	29.9
Having amenities in the community (sidewalks, playground area, community center, or a library)	31.0	32.8	35.3	29.4
Feeling safe at home	26.6	26.0	27.0	27.3
Having a voice/place in the community (fairness in community)	17.3	20.7	22.3	25.3
Having a community free of litter, rundown housing, and vandalism	16.1	15.6	21.7	11.3
Having role models in the community	12.9	16.1	17.7	17.0
Other (please specify)	2.8	1.5	0.0	0.0

Summary:

➢ Regardless of the number of children they have, parents/caregivers report having enough family time to spend with their child/children and having strong relationships with them are considered to be very important (two of the top three things).

➢ For the parents/caregivers who have 1 to 2 children, having a support system of friends and family members available is also considered to be very important. Those without children also reported this to be important.

➢ For the parents/caregivers who have 3 or more children, having community resources and activities to support family life is also considered to be very important.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Early Learning and Development</u> of Young Child or Children Based on Ethnicity/Race (%)

Early Learning and Development	Black or African American (N=586)	White or Caucasian (N=526)	Other (N=73)
Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)	46.6	50.0	52.1
Having resources or materials to promote learning at home	46.2	24.0	27.4
Having programs or services that promote learning in the community	42.3	30.0	37.0
Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)	40.8	38.0	42.5
Knowing what to do for child/children to be ready for school	39.9	35.7	35.6
Knowing the expectations of school(s) related to being ready for school	35.5	26.6	32.9
Being able to pay for high-quality childcare/early education programs	31.2	34.8	39.7
Having time to play with child/children to promote learning	22.4	35.2	27.4
Knowing how to play with child/children to promote learning	20.3	24.5	28.8
Other (please specify)	0.9	2.3	1.4

Note: Other includes "American Indian or Alaska Native," "Asian or Asian American," "Hispanic/Latino," "Native Hawaiian or Other Pacific Islander," and "More than One Race"

Summary:

➢ Regardless of ethnicity/race, parents/caregivers reported finding high-quality childcare/early education programs as very important (one of the top three things).

➢ **For the Black or African American parents/caregivers,** having resources or materials to promote learning at home and having programs or services that promote learning in the community are also very important.

➢ For the White or Caucasian parents/caregivers, participating in high-quality childcare/early education programs and knowing what to do for their child(ren) to be ready for school are considered to be very important.

➢ For the other race or ethnicity parents/caregivers, participating in high-quality childcare/early education programs and being able to pay for high-quality childcare/early education programs are considered to be very important.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Health and Wellbeing</u> of Young Child or Children Based on Ethnicity/Race (%)

Health and Wellbeing	Black or African American (N=586)	White or Caucasian (N=526)	Other (N=73)
Understanding child or children's development	53.1	44.3	47.9
Getting services for needs of child or children (early intervention such as speech…)	35.7	34.4	35.6
Being able to afford healthcare for child or children	34.1	29.5	34.2
Being able to get to healthcare as needed for child or children (scheduling…)	32.3	22.6	34.2
Having safe food and drinking water	31.1	12.9	16.4
Taking child or children to well-child visits (scheduling, transportation…)	30.2	30.2	31.5
Finding healthcare providers for child or children	29.2	24.0	32.9
Having time to prepare healthy meals for child or children	26.1	33.5	31.5
Being able to afford nutritious foods	24.1	22.2	26.0
Being able to find nutritious foods in local grocery stores, farmer's markets/stands…	23.7	20.5	23.3
Having mental health services for parents or caregivers	15.5	17.1	12.3
Having mental health services for child or children	13.3	15.6	23.3
Other (please specify)	0.5	1.7	0.0

Note: Other includes "American Indian or Alaska Native," "Asian or Asian American," "Hispanic/Latino," "Native Hawaiian or Other Pacific Islander," and "More than One Race"

Summary:

➢ Regardless of ethnicity/race, parents/caregivers reported understanding child development and getting services that meet the needs of their child are considered to be very important (two of the top three things).

➢ For the Black or African American parents/caregivers and others, being able to afford healthcare for their child or children is very important.

➢ For the White or Caucasian parent/caregivers, having time to prepare healthy meals is considered to be very important.

➢ For the other race or ethnicity parents/caregivers, being able to get to healthcare as needed is considered to be very important.

Parents/Caregivers' Perceptions of the Most Important Things Related to the <u>Family and Community</u> of Young Child or Children Based on Ethnicity/Race (%)

Family and Community	Black or African American (N=586)	White or Caucasian (N=526)	Other (N=73)
Having community resources and activities to support family life	49.1	27.2	42.5
Having enough family time to spend with child/children	45.6	63.1	53.4
Having strong relationships with child or children	45.6	54.6	60.3
Having a support system of friends and family members available	41.0	42.0	45.2
Feeling safe in the community	36.0	31.6	35.6
Having amenities in the community (sidewalks, playground area, community center, or a library)	33.4	31.4	32.9
Being in a family-friendly community	29.4	39.5	45.2
Having a voice/place in the community (fairness in community)	28.0	12.0	27.4
Feeling safe at home	25.4	27.6	27.4
Having role models in the community	19.5	12.0	19.2
Having a community free of litter, rundown housing, and vandalism	16.2	15.6	21.9
Other (please specify)	1.9	0.4	0.0

Note: Other includes "American Indian or Alaska Native," "Asian or Asian American," "Hispanic/Latino," "Native Hawaiian or Other Pacific Islander," and "More than One Race"

Summary:

➢ Regardless of ethnicity/race, parents/caregivers reported having enough family time to spend with children and having strong relationships with them are considered to be very important (two of the top three things).

➢ **For the Black or African American parents/caregivers,** having community resources and activities to support family life is also very important.

➢ For the White or Caucasian and Other race or ethnicity parents/caregivers, having a support system of friends and family members available is considered to be very important.

➢ For the other race or ethnicity parents/caregivers, being in a family-friendly community is considered to be very important.

Organizational Representatives' Perceptions of the Most Important Things Related to the <u>Early Learning and Development</u> of Young Child or Children (N=1134)

Early Learning and Development	N	%
Knowing what to do for child/children to be ready for school	612	53.97
Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)	527	46.47
Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)	464	40.92
Being able to pay for high-quality childcare/early education programs	435	38.36
Having resources or materials to promote learning at home	368	32.45
Knowing how to play with child/children to promote learning	353	31.13
Knowing the expectations of school(s) related to being ready for school	338	29.81
Having programs or services that promote learning in the community	299	26.37
Having time to play with child/children to promote learning	192	16.93
Other (please specify)	32	2.82

Summary:

➤ For the representatives of organizations that work with children and families, the most important things (top three) for parents or caregivers related to the early learning and development of young children include knowing what to do for child/children to be ready for school, finding high-quality childcare/early education programs, and participating in high-quality childcare/early education programs.

Organizational Representatives' Perceptions of the Most Important Things Related to the <u>Health and Wellbeing</u> of Young Child or Children (N=1134)

Health and Wellbeing	N	%
Getting services for needs of child or children (early intervention such as speech therapy, physical therapy)	623	54.94
Understanding child or children's development	534	47.09
Being able to get to healthcare as needed for child or children (scheduling, transportation, convenient hours of healthcare)	451	39.77
Being able to afford healthcare for child or children	427	37.65
Having mental health services for child or children	323	28.48
Taking child or children to well-child visits (scheduling, transportation, convenient hours)	317	27.95
Having mental health services for parents or caregivers	272	23.99
Being able to afford nutritious foods	225	19.84
Finding healthcare providers for child or children	169	14.90
Having time to prepare healthy meals for child or children	155	13.67
Being able to find nutritious foods in local grocery stores, farmer's markets/stands, or other places	107	9.44
Having safe food and drinking water	100	8.82
Other (please specify)	31	2.73

Summary:

➢ For the representatives of organizations that work with children and families, the most important things (top three) for parents or caregivers related to the health and wellbeing of young children include getting services for needs of child or children, understanding child or children's development, and being able to get to healthcare as needed.

Organizational Representatives' Perceptions of the Most Important Things Related to the <u>Family and Community</u> of Young Child or Children (N=1134)

Family and Community	N	%
Having community resources and activities to support family life	557	49.12
Having a support system of friends and family members available	507	44.71
Having strong relationships with child or children	490	43.21
Having enough family time to spend with child/children	404	35.63
Feeling safe in the community	330	29.10
Feeling safe at home	325	28.66
Having amenities in the community (sidewalks, playground area, community center, or a library)	309	27.25
Being in a family-friendly community	237	20.90
Having role models in the community	209	18.43
Having a voice/place in the community (fairness in community)	193	17.02
Having a community free of litter, rundown housing, and vandalism	142	12.52
Other (please specify)	11	0.97

Summary:

➢ For the representatives of organizations that work with children and families, the most important things (top three) for parents or caregivers related to the family and community include having community resources and activities to support family life, having a support system of friends and family members available, and having strong relationships with their children.

Community Members' Perceptions of the Most Important Things Related to the <u>Early Learning and Development</u> of Young Child or Children (N=330)

Early Learning and Development	N	%
Finding high-quality childcare/early education programs (including childcare, Head Start, 4K)	167	50.61
Knowing what to do for child/children to be ready for school	164	49.70
Being able to pay for high-quality childcare/early education programs	127	38.48
Participating in high-quality childcare/early education programs (including childcare, Head Start, 4K)	121	36.67
Having programs or services that promote learning in the community	120	36.36
Having resources or materials to promote learning at home	105	31.82
Knowing the expectations of school(s) related to being ready for school	97	29.39
Knowing how to play with child/children to promote learning	94	28.48
Having time to play with child/children to promote learning	57	17.27
Other (please specify)	8	2.42

Summary:

➢ For community members, the most important things (top three) for parents or caregivers related to the early learning and development of young children include finding high-quality childcare/early education programs, knowing what to do for their child to be ready for school, and being able to pay for high-quality childcare/early education programs.

Community Members' Perceptions of the Most Important Things Related to the <u>Health and Wellbeing</u> of Young Child or Children (N=330)

Health and Wellbeing	N	%
Being able to afford healthcare for child or children	162	49.09
Getting services for needs of child or children (early intervention such as speech therapy, physical therapy)	156	47.27
Being able to get to healthcare as needed for child or children (scheduling, transportation, convenient hours of healthcare)	130	39.39
Understanding child or children's development	121	36.67
Being able to afford nutritious foods	89	26.97
Taking child or children to well-child visits (scheduling, transportation, convenient hours)	81	24.55
Having mental health services for child or children	76	23.03
Having mental health services for parents or caregivers	69	20.91
Finding healthcare providers for child or children	66	20.00
Being able to find nutritious foods in local grocery stores, farmer's markets/stands, or other places	53	16.06
Having time to prepare healthy meals for child or children	51	15.45
Having safe food and drinking water	40	12.12
Other (please specify)	3	0.91

Summary:

➢ For community members, the most important things (top three) for parents or caregivers related to the health and wellbeing of young children include being able to afford healthcare, getting services for needs of child or children, and being able to get to healthcare as needed for child or children.

Community Members' Perceptions of the Most Important Things Related to the <u>Family and Community</u> of Young Child or Children (N=330)

Family and Community	N	%
Having community resources and activities to support family life	152	46.06
Having a support system of friends and family members available	126	38.18
Feeling safe in the community	124	37.58
Having enough family time to spend with child/children	119	36.06
Having strong relationships with child or children	113	34.24
Being in a family-friendly community	94	28.48
Having amenities in the community (sidewalks, playground area, community center, or a library)	90	27.27
Feeling safe at home	84	25.45
Having a voice/place in the community (fairness in community)	74	22.42
Having a community free of litter, rundown housing, and vandalism	68	20.61
Having role models in the community	60	18.18
Other (please specify)	5	1.52

Summary:

➢ For community members, the most important things (top three) for parents or caregivers related to the family and community include having community resources and activities to support family life, having a support system of friends and family members available, and feeling safe in the community.

Comparing Views of Parents/Caregivers, Organizational Representatives, and Community Members (Top 3 Important Things)

	Parents/Caregivers	Organizational Representatives	Community Members
Early Learning and Development	1) Finding high-quality childcare/early education programs 2) Participating in high-quality childcare/early education programs 3) Knowing what to do for child/children to be ready for school	1) Knowing what to do for child/children to be ready for school 2) Finding high-quality childcare/early education programs 3) Participating in high-quality childcare/early education programs	1) Finding high-quality childcare/early education programs 2) Knowing what to do for child/children to be ready for school 3) Being able to pay for high-quality childcare/early education programs
Health and Wellbeing	1) Understanding child or children's development 2) Getting services for needs of child or children 3) Being able to afford healthcare for child or children	1) Getting services for needs of child or children 2) Understanding child or children's development 3) Being able to get to healthcare as needed for child or children	1) Being able to afford healthcare for child or children 2) Getting services for needs of child or children 3) Being able to get to healthcare as needed for child or children
Family and Community	1) Having enough family time to spend with child/children 2) Having strong relationships with child or children 3) Having a support system of friends and family members available	1) Having community resources and activities to support family life 2) Having a support system of friends and family members available 3) Having strong relationships with child or children	1) Having community resources and activities to support family life 2) Having a support system of friends and family members available 3) Feeling safe in the community

First Steps/Community Organization Focus Groups

Method

The First Steps focus groups data were collected through SurveyMonkey. Focus groups interviews were conducted within 46 counties in South Carolina. Among the 46 counties, 23 (50%) hosted between one and two focus groups, 18 (39%) hosted between three and four focus groups, and five counties (11%) hosted five or more focus groups. The focus groups consisted of 1495 participants, and 911 (61%) were parents and caregivers, 418 (28%) were organizational representatives, and 166 (11%) were others. Counties responded to the SurveyMonkey the summaries of their focus groups interviews. We analyzed counties' summaries based on the five key questions. We used the R for Qualitative Data Analysis (RQDA) to analyze the qualitative data. The following findings were reported based on individual questions.

Results
Question 1

The first question is about the hopes (goals) for the child and young children in the community they live. The following major themes emerged from the coding of the responses: education, living and learning environment, systems/services/activities, and other aspirations.

Education: Many participants indicated that providing quality education to all children in the community is their hope (goal). They shared that education should be the priority and be accessible and affordable to all children. Children should have learning and development opportunities, and schools should be effective to provide programs, resources, and activities to children, especially those with special needs. In addition to intellectual skills, children should also be equipped with physical, social, and emotional skills/development, as well as problem-solving skills. Children should be well-prepared and ready for entering schools socially and intellectually. To facilitate children to learn, schools should provide parents with education/workshop about school readiness. One participant stated, "I believe every child is entitled to a sound basic education in their formative years because it serves as a foundation for kids to build upon as they go to higher learning and enter the workforce."

Living and Learning Environments: The second major goal that participants shared is providing safe living and learning environment for all children. They indicated that children deserve to live/grow up in a safe, nurturing, loving, inclusive, and healthy environment. Children should feel safe and accepted/included at home, at school, and in the community. They should have some positive role models made up of family, community, and school. Schools should provide a positive learning environment.

Systems and Services: The third goal focuses on providing solid supporting system and services for all children. Children should have access to comprehensive and individualized services (e.g., daycare, speech/occupational therapy counselors, after-school programs, summer programs). Services should be provided to children with disabilities and those living in poor areas. These supporting systems and services could be from school, home, and community.

Other Aspirations: Participants shared other goals that include quality childcare (more affordable daycares that are close to home), health care (high-quality and affordable health care), and future successes (independent, positive, and successful life and be good citizens in the future).

Question 2

The second question is about how well the community is currently doing in ensuring the hopes (goals) are achieved. Regarding this question, participants shared mixed views. Some indicated that their communities are providing variety of programs and services to help achieve the goals. Others indicated that their communities are not doing well or enough to help achieve the goals. Even within the same county, some expressed satisfaction with community programs and services, while others showed frustrations. The summaries are the areas that communities are doing well and the areas that communities need to improve.

Successful Areas: Some counties provide variety of programs and services for families and children to participate in. Some programs focus on early literacy/childhood education, and others emphasize parenting skills. Communities build partnership and collaboration with community leaders, agencies, organizations, school districts, libraries, churches, medical professionals, and public officials to promote various opportunities for students and families, and to improve quality childcare and early childhood programs. Some counties mentioned that their libraries are "doing a great job." To engage parents, some communities provide families with professional development/workshops or parenting programs to help with educational needs, and they organize events to assist with these needs. Communities have liaisons between families and schools and make the parents be aware of the school programs, activities, and services. For example, some school districts provide literacy program and summer projects that have no income restrictions. In addition, school districts are working hard to instill soft skills in their students and stress the importance of these skills in the workplace. Some counties emphasized their efforts with collaboration between schools and agencies, and they considered that schools are doing a good job in preparing children. They indicated that the programs have exceeded expectations, and the children are achieving academic successes.

Areas Needing to be Improved: Counties shared the areas that communities should improve. One area that was mentioned by many counties is the lack of parent involvement in programs. Parents are not involved for the following reasons: First, families were not aware of the potential programs and resources. Some parents would like to have more access to resources or be informed more about certain events. Communities need to improve advertising of resources and activities available for families. For example, they could establish partnerships with local school districts, library, and social media to advertise the resources that are available. Second, families are not able to participate in community program due to lack of money or transportation. One county mentioned that many families in rural areas unable to get to service agencies. Third, some families often view agencies as adversarial and aredistrusting or skeptical. Some waiting lists for services/resources for families are so long, and parents don't bother to do so. Therefore, it is important to establish trusting relationships with parents. Other areas that need to be improved include creating

equal opportunities and enough resources for parents and children, creating safe communities, providing opportunities for adult literacy, mentoring program and parenting programs, providing more programs and collaboration in the communities. In addition, communities should provide more affordable pre-school and childcare facilities and activities. Especially, communities should provide programs for children with special needs and/or those from diverse background.

Question 3

The third question is about the supports, programs, or other things within the community that help young children meet the hopes and goals. Based on the coding, supports and programs within the community are mainly in three areas: educational programs, family and children support services, and health care services.

Educational Programs: Participants shared that there are various educational programs that support families and children in achieving their hopes/goals. These programs and services are provided by school districts, libraries, organizations, and churches. Many different organizations/programs establish partnership to make sure children and families are well served. The programs include First Steps, Head Start, Early Head Start, Libraries, BabyNet, ChildFind, childcare centers, Pee Dee CAP, etc. These programs and services focus on early education, literacy, parenting education, etc. They provide after school program, summer reading program, early childhood/family intervention, technology, and literacy. Multiple participants felt that the libraries offer excellent programs that support educational events for parents and children, and they also indicated that church programs are useful. Generally, the organizations and local school districts collaborate to help children for school readiness.

Family and Children Support Services: Participants shared various programs and services that support families and children in achieving the hopes/goals. These programs and services are provided by school districts, libraries, local communities, agencies, churches or faith-based organizations. Parenting programs or trainings focus on teaching parenting skills and family literacy, and professional development are provided to childcare workers and parents. Churches gave funds to support community and provide students with backpacks and other school supplies, and they also offer programs that are beneficial to children's education, life skills, and character. Agencies (e.g., OCAB and CASA) help children by providing financial assistance and shelter to families in need. Different types of home visitation programs offer help to struggling families. Neighborhood/community safety is another important aspect of support. For example, some counties shared that their Law Enforcement and Neighborhood Watch Groups try to provide protect to children/families in the community. Other supports to the families and children include field trips by programs (e.g., First Steps), activities by local county Recreation Department, bilingual information for the families from a diverse background, and emotional support and stress management for families and children.

Health Care Services: Participants shared variety of health care programs and services for the children. These programs and services are provided by local medical communities, hospital and medical clinics, agencies, etc. The medical communities and non-profit agencies offer free programs to children that are income based. Programs (e.g., BabyNet,

First Steps, Child Find, YMCA, Healthy Start) focus on children's physical, mental, behavioral, and social and emotional health support. For example, one county introduced that the service can help with quality of life, health and wellness, and access to healthy foods. The recreation department provides health services to children and families. The programs and services focus on developmental screenings, extracurricular activities (e.g., sports, dance, gymnastics, scouts), and nutrition. Some programs also help shape children's behaviors and positive mind. In addition, transportation services are provided with the healthcare access and receiving services.

Question 4

The fourth question is about the barriers that prevent young children from meeting these hopes (goals). Based on the coding, the barriers include but are not limited to: transportationparents' knowledge and involvement, and availability and affordability of childcare.

Transportation: Many counties indicated that the rural areas do not have public transportation system. It has been a huge challenge and concern for the families to access many resources. Therefore, parents are reluctant to use the resources and services due to lack of transportation.

Parents' Knowledge and Involvement: Parents' knowledge and involvement is another barrier that prevents children from meeting the goals. Many parents are not involved in their children's early learning and development. Parents are unaware of the resources and services available that can benefit their children. They do not use effective parenting strategies/skills due to lack of knowledge about child development. Participants shared that parents with little to no education are most likely to face challenges. Parents' work schedules also keep them from having quality time with their children. In addition, there are other barriers including parents' not providing discipline to their children, negative living environment, families' lack of nutritious food, and having a different culture/language background.

Availability and Affordability of Childcare: According to the participants, there are limited resources and services in the areas. There is lack of affordable quality childcare, health care, and educational programs. Some shared that they don't have any types of youth area for the children to go, the services for children with special needs are limited or nonexistent, and there are low numbers of providers, especially for the infants. They considered that there is not enough funding for resources, programs, or quality childcare. In addition, many families in the areas come from high-poverty and low-income background. Parents do not have well-paid jobs, and it is hard to meet financial obligations. Therefore, families' financial restrictions and the cost of childcare, health care, educational programs, and healthy food prevent young children from meeting these goals.

Other Barriers: Participants also shared other barriers that prevent young children from meeting these hopes (goals). They include children having mental, social, emotional problems, lack of communication between parties, and challenges of identifying the people who are in need.

The fifth question is about the top priorities in promoting positive outcomes for young children in the community. The following major themes emerged from the coding of the responses: education, family and community involvement, safe environment, supporting systems, and other priorities.

Education: Many participants indicated that providing quality education to children is a priority. They shared that children should have equal learning opportunities that are not based on income and community, and education should be accessible and affordable to all children, Schools should hire qualified teachers. They emphasized the importance of early learning and literacy, preschool programs, afterschool programs, summer programs, and various learning activities. They shared that parents should have access to resources to promote learning and school readiness. Participants also indicated the importance of establishing a culture that values education.

Family and Community Involvement: According to participants, family and community involvement is another priority. They indicated the importance of positive parenting and considered parental resources as positive influence for their child's education. Communities should make sure that parents are aware of the resources available in the community and they are supported by the community. They emphasized the impact of strong and positive family relations, and children need to feel loved and to have their parents involved in their lives. To increase parental involvement, parent education should be provided. There should be mentoring and counseling programs for all families, and families should have access to housing and transportation. In addition, communities should provide fun activities for families such as: community events, more outdoor spaces/activities, more playgrounds, and athletic areas.

Safe Environment: Providing safe living and learning environment for children is another priority. They indicated that safety is an important issue, and communities should provide children with safe living and learning environment. They shared that schools and community should be safe, and children should feel safe and loved. One county indicated that "When children have a loving environment, they tend to flourish."

Supporting Systems (Childcare, Health care, Funding): Participants indicated that providing solid supporting system and services for children is a priority. They indicated that funding for services and programs should focus on children and families. Children need supportive households, communities, and organizations. Communities should provide affordable high-quality childcare services, health care services, mental health resources/support, transportation, and recreational and educational activities. Support systems also include parent education, job opportunities for parents, food banks, transportation, and information about childcare. Most importantly, communities should listen to family need, and provide corresponding support.

Other Priorities: Participants shared other priorities. They indicated the importance of communication and collaboration among the schools, families, communities, and

organizations for mutual understanding about positive outcomes. Priorities also include building relationships, understanding cultural and ethnic diversities, identifying needs and resources for children, having good role models in the communities, and attracting businesses to the county. As one county indicated that "The top priorities in the community would be to not only have these conversations, but to create action plans that will bring change in the community."

Considerations and Limitations

During regional meetings across South Carolina, IHE facilitators noted aspects related to working with young children and their families that were not included in the goals/aspiration developed but that may impact the strategic plan and future work. The IHE Collaborative summarized these trends.

- Participants in the regional meetings demonstrated passion and commitment to solve issues and make progress toward goals to improve conditions for young children and families.

- Many participants indicated that they were grateful to be included in the process, and they want to be continually involved in shaping ideas and strategies in South Carolina. Participants highlighted the importance of developing ongoing mechanisms to gain feedback from all stakeholders.

- While participants were passionate and committed to solving issues, there were differing conceptualizations of how to solve programs and a lack of shared understandings for definitions of terms such as school readiness, quality early care and education, and inclusion. In addition, mindsets varied related to "responsibility." For example, some participants focused on the responsibility of parents/caregivers in the role of preparing their children for school; whereas, others noted the responsibility of programs and organizations in their role in preparing children for school.

- In some cases, participants appeared to be posturing and positioning their programs, key services, or organizations. Some participants viewed the process and goal-setting work through their organizational lens only, which may have compromised their ability to set goals for the best interest of young children and families.

- Unfortunately, we had limited participation from people who speak languages other than English. This needs to be a priority moving forward to ensure all people are represented in the progress and plan for South Carolina.

- In some instances, factions stayed together at regional meetings (e.g., public school, child care). This may be related to the posturing and positioning that was noted in some small groups and may contribute to siloed protectionism that emerged as a barrier to meeting goals or this may be based on people's familiarity with people and their desire to work with colleagues in this process.

- Disconnects between research and practice emerged during the meetings with some participants suggesting or using practices that are not aligned with latest research literature. However, it is important to understand participants' logics and perceptions as they are often the leaders in the community who are shaping implementation and services. In addition, some participants have logics and perceptions that may not be swayed by research or policy, and it is important to understand and work from these perceptions as they are shaped by local contexts and experience.

- Moving forward, we noted the importance of listening to and seeking to understand differing perspectives, rather than discounting others' viewpoints and focusing on being right.

Comparing the Findings (Goals) Using Three Methods (Cross Checking)

	Regional Meeting Findings	Survey Findings	Focus Groups Findings
Early Learning and Development	• Children are ready for kindergarten/demonstrate kindergarten readiness in multiple domains • Promote high quality early care and education/Promote professional culture and empowerment of child care and early education • Increase general awareness of opportunities, programs, and services for young children and their families/Empower families to actively participate in development of their children • Address needs of families, early care and education providers, and others in supporting children with special needs and behavior challenges (with more children having mental health and behavior challenges)	• Finding high-quality childcare/early education programs • Knowing what to do for child/children to be ready for school • Participating in high-quality childcare/early education programs • Being able to pay for high-quality childcare/early education programs	• Providing quality education to all children • Helping children be prepared and ready for school • Providing early intervention/learning/literacy • Providing transportation for the learning programs • Establishing a culture that values education
Health and Wellbeing	• Increase access to early intervention for children ages birth to age 5/ Children with identified delays are referred early to Early Intervention and receive timely services and provide options for families who have needs but don't meet criteria for state services • All children are healthy both physically and mentally; Ensure all children have medical home/Promote a system of care among existing services • Provide access to mental health services for children (and family members); Reduce societal belief that children don't have legitimate stress (trauma informed practice/Child safety to prevent Adverse Childhood Experiences (ACES) • Modify our systems to support and promote self-sufficiency	• Getting services for needs of child or children • Understanding child or children's development • Being able to afford healthcare for child or children • Being able to get to healthcare as needed for child or children	• Providing high-quality affordable health care programs and services to all children • Providing services to children with disabilities and those living in poor areas • Providing mental health services • Providing transportation for the services

| Family and Community | • Communities are family friendly
• Families are supported
• Address/meet the needs of diverse families; Overcome multicultural barriers
• Ensure legislators understand their impact and ability to influence families and prepare children for productive lives through policy. | • Having community resources and activities to support family life
• Having enough family time to spend with child/children
• Having a support system of friends and family members available.
• Having strong relationships with child or children
• Feeling safe in the community | • Providing resources/activities for families and children
• Providing children a safe, loving, and inclusive environment
• Children having role models
• Providing parenting programs
• Informing parents of the programs and services available
• Communications and collaborations between all parties |

Part 2: Needs Assessment Requirements-Domains and Key Questions

- What is your definition of **quality early childhood care and education** for this grant?
- What is your definition of **early childhood care and education availability** for this grant?
- What is your definition of **vulnerable or underserved children** for this grant?
- What is your definition of **children in rural areas** for this grant?
- Do you have a definition or description of your early childhood care and education system as a whole? (If yes, what have you used that definition for? What about your broader early childhood system encompassing other services used by families with young children? Do you have a definition for that and, if so, what have you used it for?)
- Do these definitions differ in key ways from how you have defined any of these in the past? If so, what do you think are the advantages of your definitions for this grant?
- Are there any challenges you foresee in using these definitions? (e.g., are they consistent with how key programs that make up the broader early childhood system define these terms?)

Many scholars and national organizations have effectively operationalized terms in the early care and education field. To date, South Carolina has not developed its own unique definitions of terms, other than through undercurrents of its policies and practices that reinforce the definitions developed by experts in the field. South Carolina will use the definitions provided in this section until there is a need to differentiate from definitions developed by experts in the field.

- **Quality Early Childhood Care and Education** is focused on supporting a children's development in multiple domains. It is multifaceted including quality designations, specialized services, appropriateness of curriculum and instruction, and stability of First, an ECE program's designation of quality (e.g., a QRIS rating) is included as a broad indicator to acknowledge the documented association between high-quality ECE and children's development.[19,20,21] Second, coordination of services is included as an indicator to address the importance of practices that involve collaborating within and across ECE settings and other sectors (such as health), to improve children's transitions between ECE settings, connect children with early intervention services at a young age, and facilitate positive physical, cognitive, and socio-emotional outcomes through linkages with resources and family supports. [22,23, 24] Third, practices that support children's stability in ECE arrangements is included as an indicator to acknowledge the importance of continuity of care for children's social-emotional well-being and their ability to form strong relationships with their caregivers.[25] Finally, program practices that meet children's unique needs including provision of supports for children with developmental or physical disabilities, children who are homeless, and children who speak a language other than English were recommended as indicators by the Access Expert Panel to

acknowledge the importance of high quality ECE for children who may be particularly vulnerable.26 In South Carolina, there is a Quality Rating Improvement System, Early Learning Standards, Center for Child ...
https://www.acf.hhs.gov/sites/default/files/opre/cceepra_access_guidebook_final_508_22417_b508.pdf

- **Early Childhood Care and Education Availability** is defined as the interplay between the location and supply of early care and education programs/options based on age range of children; fit based on needs of parents including preferred type of program, availability of transportation, hours of operation, languages spoken; availability of information related to early childhood options; and affordability for parents/caregivers (Child Trends) . Child Trends' recent report on child care access is a tool researchers and policymakers can use to identify and assess the multiple dimensions of access. The report includes a definition of access taking families into account: access to early care and education (ECE) is *"when parents, with reasonable effort and affordability, can enroll their child in an arrangement that supports the child's development and meets the parents' needs."*

- Vulnerable or Underserved Children

- Children in Rural Areas

- Systems-Level Definition (yes/no)

- Challenges based on Definitions

Focal Populations

- Who are the vulnerable or underserved children in your state? What are their characteristics in terms of race/ethnicity, recency of immigration, language spoken at home, poverty and low-income status, concentration in certain cities or town and/or neighborhoods? What are the strengths and the weaknesses of the data you have available on this population? Are there any initiatives under way to improve these data?

- Who are the children who live in rural areas in your state/territory? What are their characteristics in terms of race/ethnicity, recency of immigration, language spoken at home, poverty and low-income status? Are they concentrated in certain regions of the state/territory? Are data available on how far they typically live from an urban area? What are the strengths and the weaknesses of the data you have available on this population? Are there any initiatives under way to improve these data?

- Vulnerable and Underserved Children (who are they)

- Children in Rural Areas

Number of Children Being Served and Awaiting Services

- What data do you have describing the unduplicated number of children being served in existing programs? What are your biggest data gaps or challenges in this area?
- What data do you have describing the unduplicated number of children awaiting service in existing programs? What are your biggest data gaps or challenges in this area?
- What are the strengths and the weaknesses of the data you have available on children being served? Are there any initiatives under way to improve these data?

Quality and Availability

- What would you describe as your ECCE current strengths in terms of quality of care across settings (e.g., accessing accurate data from rural areas, central points of data entry [+ or -], population mobility)?
- What would you describe as key gaps in quality of care across settings?
- What are the strengths and the weaknesses of the data you have available on quality? Are there any initiatives under way to improve these data?
- What would you describe as your current strengths in making care available across populations and settings?
- What would you describe as key gaps in availability?
- What initiatives do you currently have underway to ensure that high-quality care is available to vulnerable or underserved children and children in rural areas in your state/territory? What works well? What could work better? Have you been particularly successful in developing quality environments for any particular populations or in any particular settings? What made these efforts successful and what needs to be done to replicate them?
- What initiatives do you currently have in place to inform parents about what constitutes a high-quality child care center and how different centers match up in terms of quality? Is this information delivered in a in a culturally and linguistically sensitive manner? How effective are the initiatives and information? What could be improved in this area?
- What initiatives do you have in place to promote and increase involvement by and engagement of parents and family members in the development and education of their children? What works well about these initiatives? What could be better? Include information about the degree of availability of these initiatives and the extent they are culturally and linguistically sensitive.
- What specific initiatives are in place to address the needs of parents/families that meet their cultural and/or linguistic needs? Are there specific populations of parents/families with cultural/linguistic differences that do not have easily- accessible services available?
- What do you see as your biggest need and opportunity in improving the quality and availability of care particularly for vulnerable or underserved children and those in rural areas? This should include a discussion of needs and opportunities related to

strengthening the early care and education workforce in terms of training and the retention of high-quality staff and spaces across the early care and education system, including both center-based and family child care providers.

Gaps in Research to Support Collaboration Between Programs/Services and Maximize Parental Choice

- What do you know about the service use of families with children (both children and family members) in the ECCE system?
- What are the most important gaps in data or research about the programs and supports available to families and children? What challenges do these gaps present? What existing initiatives are being undertaken in your state/territory to address these gaps?
- What are the most important gaps in data or research regarding collaboration across programs and services? What initiatives are currently underway in your state/territory to address these gaps?
- What are the most important gaps in data or research related to maximizing parental choice? What initiatives are currently underway in your state/territory to address these gaps

Quality and Availability of Programs and Supports

- What programs or supports do you have available that help connect children to appropriate, high-quality care and education? What works well about these programs or supports? What could work better? What else do you need to know about these programs and the populations they serve? What specific initiatives are in place to address the needs of parents/families that meet their cultural and/or linguistic needs? Are there specific populations of parents/families with cultural/linguistic differences that are not being connected to appropriate high- quality care and education?
- What programs or supports do you have in place to make sure that children of parents who are employed, looking for work, or in training are able to access child care that is compatible with their employment or training situation? What works well about these programs or supports? What could work better? What else do you need to know about these programs and the populations they serve?
- What programs and supports do you have available to identify children who are developmentally delayed and connect them to services? How effective is the connection between these programs and supports and your early care and education system? Are these programs reaching children from vulnerable and underserved populations? Are they reaching rural children? What else do you need to know about these programs and the populations they serve? What specific initiatives are in place to address the needs of parents/families that meet their cultural and/or linguistic needs? Are there specific populations of parents/families with cultural/linguistic differences that are not being connected to these services?
- What programs or supports do you have available that help ensure that early care

and education settings are helping vulnerable or underserved children access needed support services such as health care, food assistance, housing support, and economic assistance? What works well about these programs or supports? What could work better? What else do you need to know about these programs and the populations they serve?

- What programs and supports do you have available to support children who are non-English speaking or reflect different cultures that connect them to services? How effective is the connection between these programs and supports and your early care and education system? Are these programs reaching children from vulnerable and underserved populations? Are they reaching rural children? What else do you need to know about these programs and the populations they serve?
- What programs or supports do you have available that help ensure that early care and education settings are able to connect families in crisis to needed programs or services (e.g., family violence programs, emergency economic assistance, mental health care, substance abuse treatment)? What works well about these programs or supports? What could work better? What else do you need to know about these programs and the populations they serve?

Measurable Indicators of Progress

- What measurable indicators currently exist that can be used to track progress in achieving the goals of this grant and your strategic plan? What are the strengths and the weaknesses of these indicators? Include the extent to which they can be used to describe the current conditions experienced by vulnerable, underserved and rural populations?
- What opportunities are currently under way involving developing additional measurable indicators to track progress in achieving the goals of this grant and your strategic plan?

Program Level
- Quality Rating Improvement System (voluntary)
- Head Start
- First Steps
- 4K Curriculum Requirements and Teacher PD
- Teacher PD Requirements

Child Level
- Enrollment Data (public sector only)
- 4K Assessment
- Kindergarten Readiness Assessment

ECCE Facilities

- What issues have been identified involving ECCE facilities?
- What innovative efforts have taken place to improve ECCE facilities? Have these efforts targeted vulnerable or underserved children and those who live in rural areas?

- What current plans are in place to address ECCE facility issues?
- What opportunities exist for different ECCE and/or other early childhood programs and systems to work together collaboratively on ECCE facility improvement (e.g., through co-location of key early childhood services)
- What are the strengths and the weaknesses of the data you have available on ECCE facilities? Are there any initiatives under way to improve the data?

Barriers to the Funding and Provision of High-Quality Early Childhood Care and Education

- What barriers currently exist to the funding and provision of high-quality early childhood care and education supports? Are there characteristics of the current governance or financing of the system that present barriers to funding and provision of high-quality ECCE services and supports? Are there policies that operate as barriers? Are there regulatory barriers that could be eliminated without compromising quality? For this question, you should be sure to include a discussion of supports in the broader early childhood system not just the ECCE system.

- Are there opportunities for a more efficient allocation of resources across the system? Have there been successful efforts in the state at implementing strategies that have improved the efficient use of resources? Why and how were they successful and what needs to be done to replicate them? Have there been efforts that were undertaken, but did not show positive results? What can be learned from these experiences?
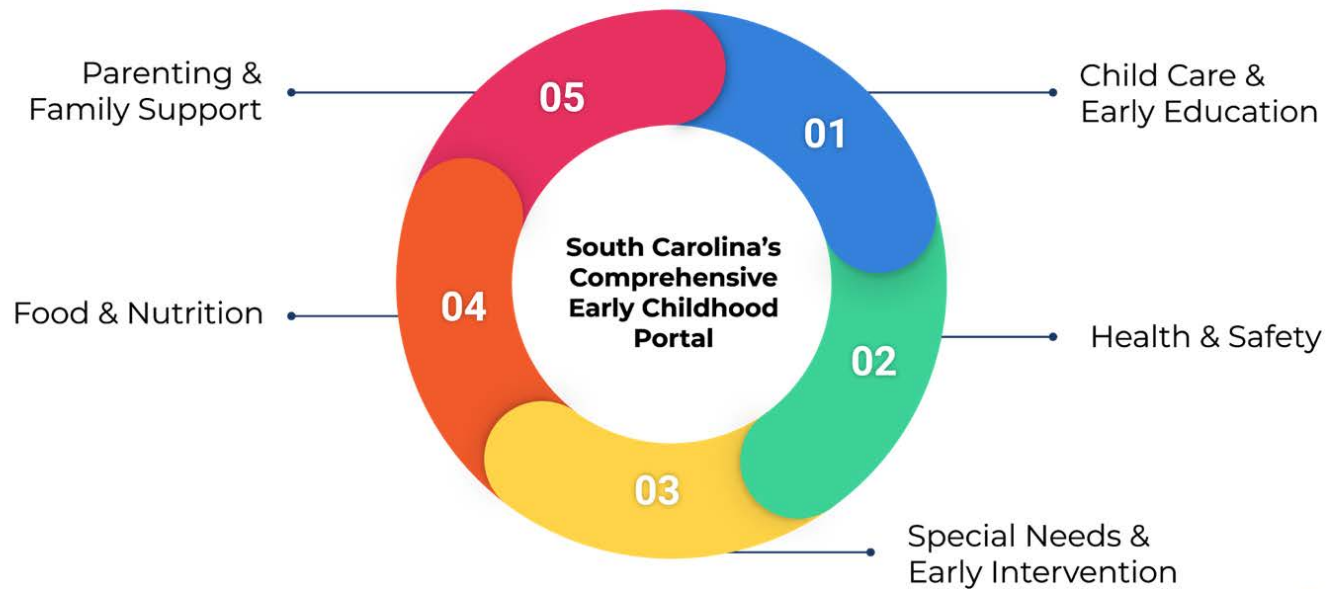
Transition Supports and Gaps

- What are the strengths and weaknesses of the transition supports for children moving from the early care and education system to school entry?
- Are there targeted supports for vulnerable or underserved children and children in rural areas? What is effective about these? What could be better?
- Are there transition supports across the age spans or are they for specific age populations? Are there transition policies/practices that support children in all types of care and education settings?
- What is effective about the supports for children with developmental delays or other special needs? What could be more effective about them? For this question you should look at both transition to kindergarten and transition between early intervention and preschool special education programs.
- How are parents currently provided with information about transitions? Is the information provided in a culturally and linguistically sensitive manner? What is effective about the information provided? What could be improved?
- Have there been any innovative efforts to improve transitions? How effective were they?
- How do the supports differ based on the type of early care and education provider (e.g., Head Start, state/territory Pre-K, home care provider, private or religious-based provider)?
- How effective is the communication between early care and education providers and school systems? What could be done to improve that communication?

Systems Integration and Interagency Collaboration

- What policies and practices are in place that either support or hinder interagency collaboration?
- Are there specific funding policies and practices that support or hinder interagency collaboration?
- What practices are in place that reflect effective and supportive interagency collaboration supporting young children and families? How were they developed? What would need to happen for them to spread to other areas, agencies, or sectors?
  - ECAC
  - First Steps Partnerships
  - DSS Regions
  - SC Department of Education
  - Head Start Collaborative

Early Childhood Services

Increased access = Increased potential for South Carolina's children

Parenting & Family Support

05

Child Care & Early Education

01

South Carolina's Comprehensive Early Childhood Portal

Food & Nutrition

04

Health & Safety

02

03

Special Needs & Early Intervention

First 5

SOUTH CAROLINA

SC SUMMIT ON EARLY CHILDHOOD

Presented by: **BB&T**

KEYNOTE SPEAKER
Rob Grunewald

Rob Grunewald is an economist with the Federal Reserve Bank of Minneapolis. Grunewald conducts research on community development and regional economic issues. He co-authored "Early Childhood Development: Economic Development with a High Public Return" in 2003 and has written several subsequent articles on the economic and social impact of early learning. He frequently speaks to community and business leaders, policymakers, and media throughout the United States. Grunewald has served on boards and advisory committees for organizations involved with early childhood development, including Think Small: Leaders in Early Learning, First Children's Finance, and the Minnesota Visiting Nurse Agency. He is also a past president of the Minnesota Economic Association. He holds a bachelor's degree in economics and religion from St. Olaf College and a master's degree in applied economics from the University of Minnesota.

SAVE THE DATE
12 0 6 19
FRIDAY
8:30 a.m. - 4 p.m.

Columbia Metropolitan Convention Center, 1101 Lincoln Street, Columbia, SC

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SOUTH CAROLINA Early Childhood Advisory Council