



**Key Findings  
from the  
New Hampshire  
Preschool  
Development Grant  
Needs Assessment**

  November 2019

1

**New Hampshire has a growing commitment to early childhood investments**

- Spark NH established in 2011 as the governor-appointed Early Childhood Advisory Council for New Hampshire
- Spark NH published *A Framework for Action for New Hampshire's Young Children* in 2015
- 11 active regional early childhood coalitions established around the state from 2010 onward
- Business and Industry Association added early childhood policies to its list of priority issues in 2018
- State funding for full-day kindergarten expanded as of state fiscal year 2018–19
- New Hampshire awarded a \$3.8 million federal Preschool Development Grant (PDG) Birth through Five (B–5) in 2018

**VISION**

*All families are afforded comprehensive and responsive supports, so they are healthy, learning, and thriving now and in the future.*

Slide 2

2

## PDG required a Needs Assessment

- Needs Assessment has multiple aims outlined in federal guidance
  - Define the **B-5 system** and other key terms
  - Describe population of **vulnerable children** and **underserved areas**
  - Identify the current **quality and availability** of early childhood care and education (ECCE) and other B-5 services
  - Assess **barriers** to funding and provision of high-quality ECCE
  - Address supports and gaps for **transitions** between B-5 services and school entry
  - Assess ECCE **facilities** and facility-related concerns
  - Examine other topics including **governance, financing mechanisms, data linkages**
  - Identify **gaps in data or research** and strategies to fill the gaps
- Provides a foundation for the B-5 system strategic plan

Slide 3

3

## Approach to the Needs Assessment

- Researchers from RAND led the Needs Assessment in collaboration with
  - University of New Hampshire
  - Spark NH
  - New Hampshire Department of Health and Human Services
  - New Hampshire Department of Education
  - Other stakeholders throughout the state
- Team received guidance from a PDG Needs Assessment Subcommittee; oversight from PDG Leadership Advisory Team
- Summary and full report from the Needs Assessment will be published as part of PDG products

Slide 4

4

### Needs Assessment examines an array of topics using multiple sources of information

Topic	Existing data & research	Key informant interviews (N=92)	Family focus groups (N=139)	Parent survey (N=1,278)	Workforce survey (N=323)	K teacher survey (N=209)
Parent knowledge of B-5 system						
Family experience with access & quality						
Transition to kindergarten						
Coordination/continuity B-8 system						
B-5 workforce						
B-5 facilities						
B-5 data systems and data integration						
B-5 system governance						
B-5 system financing						
Priorities for PDG B-5 strategic plan						

5

### Needs Assessment examines an array of topics using multiple sources of information

Topic	Existing data & research	Key informant interviews (N=92)	Family focus groups (N=139)	Parent survey (N=1,278)	Workforce survey (N=323)	K teacher survey (N=209)
Parent knowledge of B-5 system	X	X	X	X		
Family experience with access & quality	X	X	X	X		
Transition to kindergarten	X	X	X	X		X
Coordination/continuity B-8 system	X	X	X	X		
B-5 workforce	X	X			X	
B-5 facilities	X	X				
B-5 data systems and data integration	X	X				
B-5 system governance	X	X				
B-5 system financing	X	X				
Priorities for PDG B-5 strategic plan	X	X		X	X	

6

## Today's presentation

- How we defined the B-5 system and other key terms
- Key findings
  - Family experiences with B-5 system
  - Issues relevant for providers
  - System-level issues
- Implications for B-5 system strategic plan

Slide 7

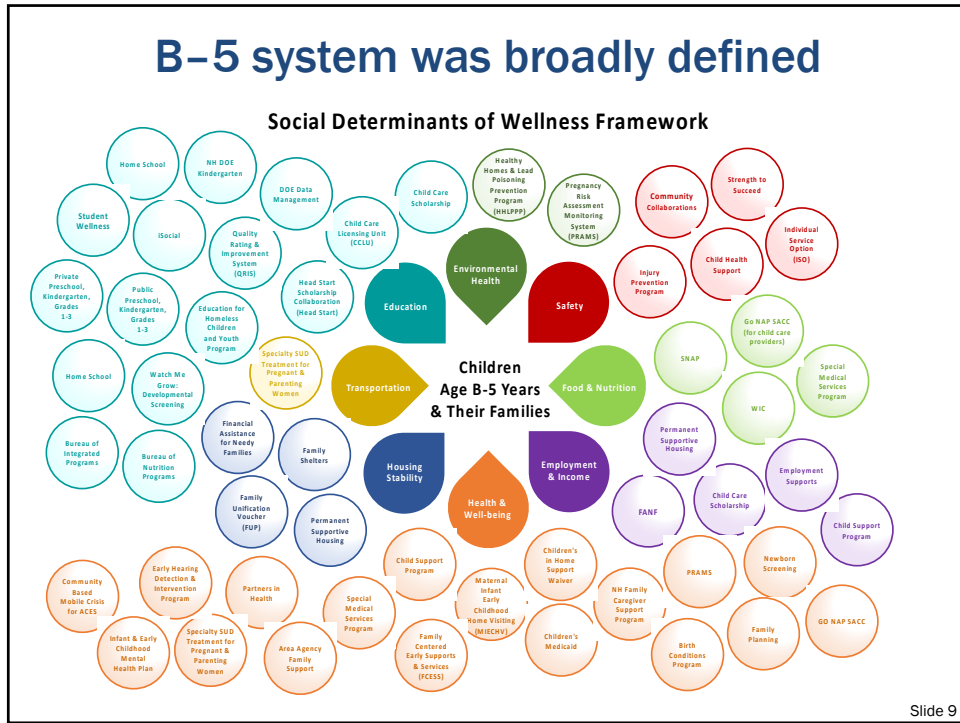
7

## Today's presentation

- **How we defined the B-5 system and other key terms**
- Key findings
  - Family experiences with B-5 system
  - Issues relevant for providers
  - System-level issues
- Implications for B-5 system strategic plan

Slide 8

8



9

## B-5 system was broadly defined

### Social Determinants of Wellness Framework

- Focused on programs in NHDHHS and NHDOE
- Includes programs with funds for direct services to B-5 children and/or families
- Includes programs with funds for services to children and/or families more generally
- Also includes agencies supporting system infrastructure (e.g., licensing)
- Majority of B-5 funding is from federal sources

Slide 10

10

## Needs Assessment considered vulnerable populations

### ***Vulnerable or underserved families and children***

are not connected to, do not have access to, and do not have information on the supports and services they need in their natural environments.

Operationalized through focus on such groups as:

- Children and families with low income
- Children who have or are at risk of disabilities, developmental delays, or complex medical conditions
- Children affected by the opioid epidemic
- Children of incarcerated parents

### ***Children in rural areas***

include those living in a town or city with a population of 10,000 people or fewer and a density of 150 people or fewer per square mile.

Using this definition, the American Community Survey shows:

**27%** of New Hampshire children 0 through 5 are in rural areas

Slide 11

11

## Today's presentation

- How we defined the B-5 system and other key terms
- Key findings
  - **Family experiences with B-5 system**
  - Issues relevant for providers
  - System-level issues
- Implications for B-5 system strategic plan

Slide 12

12

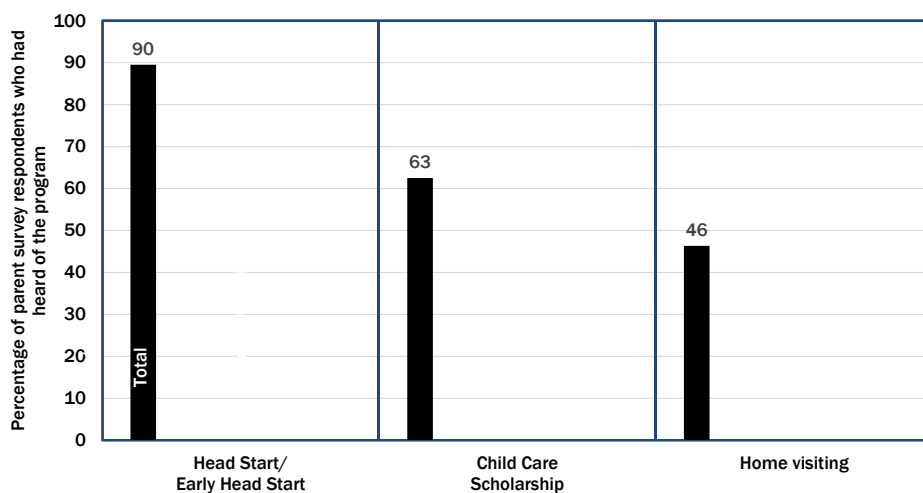
## Findings: Parent knowledge of B-5 system

- Awareness of many specific B-5 services is low among New Hampshire parents
  - Head Start and Early Head Start are the most recognized
  - Less awareness of home visiting, parent education, and child developmental screening

Slide 13

13

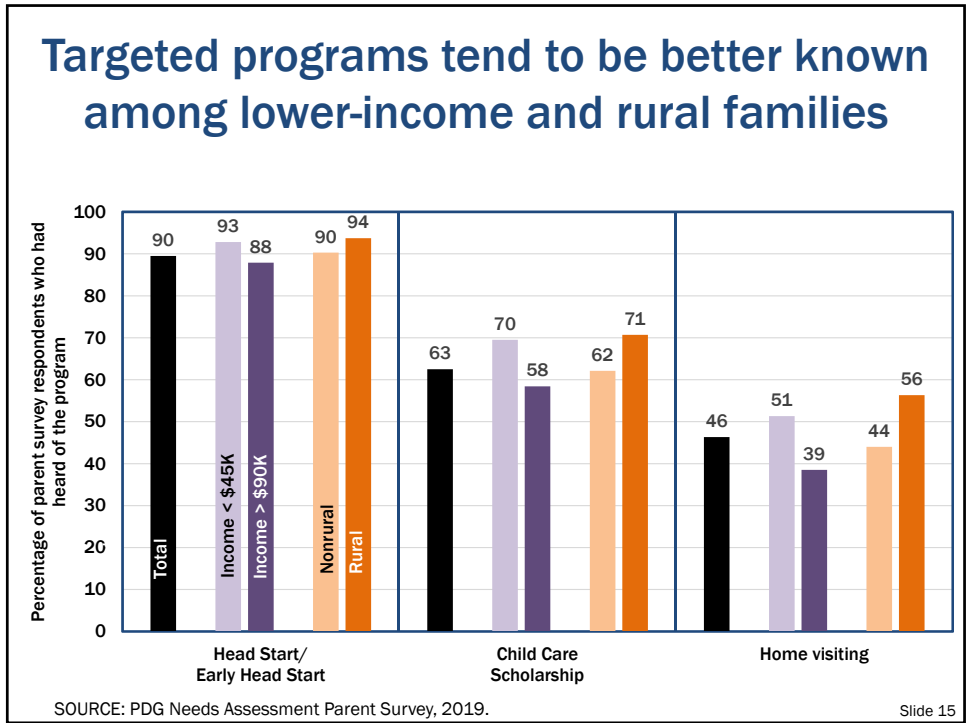
## Among targeted programs, Head Start/Early Head Start are one of best known



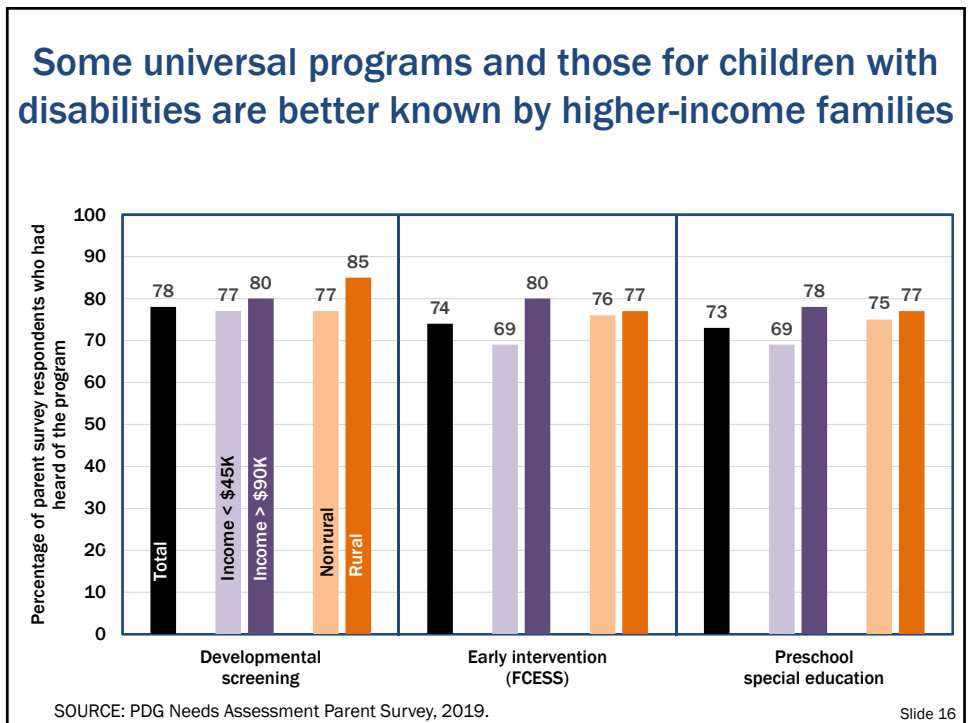
SOURCE: PDG Needs Assessment Parent Survey, 2019.

Slide 14

14



15



16



## Findings: Parent knowledge of B-5 system

- **Awareness of many specific B-5 services is low** among New Hampshire parents
  - Head Start and Early Head Start are the most recognized
  - Less awareness of home visiting, parent education, and child developmental screening
- **Parents report difficulty with accessing information** about B-5 services
  - Those already receiving services often feel most informed
  - Key barriers to accessing information: limited phone service and online access, lack of time
- **Top information sources** for parents are friends/family and Google
- **Providers also report gaps in their knowledge** of other service providers (e.g., who to refer to, what services they offer)

Slide 17

17

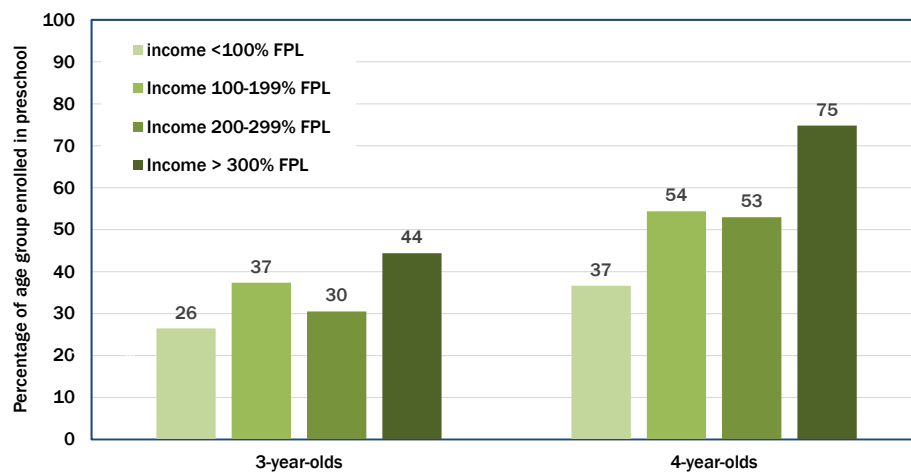
## Findings: Family experience with access to ECCE services

- **Issues with accessing ECCE affect many families** in New Hampshire
  - 50% report having difficulty finding the ECCE program they wanted
  - 25% feel they do not have good ECCE choices
  - 25% need care during nonstandard hours
  - 25% couldn't find the care they wanted for a week or more at least once in the past year
  - 20% report quitting a job, school, or training in the last year because of issues with care
- **Issues with access are greatest for some groups** of families
  - Those with the lowest income
  - Those with children with special needs or complex medical issues

Slide 18

18

## Strong positive relationship between family income and preschool participation



SOURCE: American Community Survey data for New Hampshire, 2013–2017.

Slide 19

19

## Findings: Family experience with access to other B–5 services

- Parents **lack understanding** of the services available, their benefits, and whether they are eligible
- Other common barriers: provider **shortages**, high **cost**, lack of family-friendly **hours**, lack of **transportation**
- **Navigating insurance** options affects health-related services
- Program staff who interface with families are **not always supportive**
- **Unique challenges** are present for
  - Parents of children with special needs or complex medical conditions
  - Guardians, new citizens
- Many parents **do not have employment-related supports** to ease the burden
- Parents stress the **need to advocate** for their family and child

Slide 20

20

## Findings: Family experience with quality of B-5 services

- **Parents often settle** for what is available or affordable, even if lower quality—an “illusion of choice”
- Parents often **define quality differently** than experts
  - Relationships, logistics, and facilities/settings are important
- More **favorable experiences** with WIC, FRCs, home visiting services, and specific health care providers
- Parents have **mixed views** on the value of rating providers
- Parents facing **complex situations** would benefit from advocacy support, mental health services, and respite care

Slide 21

21

## Findings: Transition to kindergarten

- **Most parents receive support** for their child’s transition to K
  - Most common: receiving information from the school and a child visit to the school/classroom
  - Less common: sharing of information between a child’s ECCE program and K teacher
- **Parents are generally satisfied** with the information, timeliness, and activities associated with the K transition
  - Some parents did not feel well informed
  - Some parents of children with special needs report issues with accessing special services in K
- Kindergarten **teachers have some information** about incoming children

Slide 22

22

## Findings: Coordination/continuity of other B-8 services

- **Coordination of services is an issue**, both at a point in time or over time, especially when children have special needs or complex medical conditions
- Examples of **coordination issues**
  - Requiring separate applications, repeating information
  - Not sharing information across providers
  - Not knowing what other providers offer
- Other **complexities**
  - Waiting lists for services
  - Physicians referring to out-of-network providers
  - Provider closings, family moves
  - Insurance gaps, maintaining services through school breaks
- Parents with **advocates or navigators** report better experiences

Slide 23

23

## Today's presentation

- How we defined the B-5 system and other key terms
- Key findings
  - Family experiences with B-5 system
  - **Issues relevant for providers**
  - System-level issues
- Implications for B-5 system strategic plan

Slide 24

24

## Findings: B-5 workforce

- B-5 workforce members have **varied backgrounds and positions**
- **Compensation, professional development (PD), and job satisfaction are closely tied to position and education level**

Slide 25

25

## Low earnings for early learning and care workforce

Occupation (BLS Code)	Mean	10th	50th (Median)	90th
<b>a. Hourly wages (\$)</b>				
Child care workers	11.51	8.32	11.11	15.43
Preschool teachers, except special education	14.84	10.59	14.05	19.97
Kindergarten teachers, except special education	-	-	-	-
<b>b. Annual earnings (\$)</b>				
Child care workers	23,940	17,300	23,100	32,100
Preschool teachers, except special education	30,860	22,030	29,230	41,530
Kindergarten teachers, except special education	56,710	39,140	57,080	76,850

NOTE: 2018 dollars.

SOURCE: BLS occupational wage data for New Hampshire, May 2018.

Slide 26

26

## Findings: B-5 workforce

- B-5 workforce members have **varied backgrounds and positions**
- **Compensation, professional development (PD), and job satisfaction are closely tied to position** and education level
- **Lower-paid staff** are more likely to **receive public benefits**
- **Barriers to PD** include time, distance/difficulty of reaching opportunities, and expense
- **Overall job satisfaction is high**, but about half plan to **make a job change** in 2-4 years, primarily to improve pay and benefits
- **Commitment to the field appears to be high**
- **ECCE providers face staffing shortages** that limit the number of children served

Slide 27

27

## Today's presentation

- How we defined the B-5 system and other key terms
- Key findings
  - Family experiences with B-5 system
  - Issues relevant for providers
  - **System-level issues**
- Implications for B-5 system strategic plan

Slide 28

28

## Findings: System infrastructure and financing

- Near universal concern with the **shortage of quality facilities** for ECCE and other B-5 services
- Near universal recognition that **lack of integrated data** limits care coordination and data-driven decisionmaking
- General agreement that state **governance structures need to be improved**
- Universal understanding that **funding for the B-5 system is inadequate**
  - Limits ability to expand awareness of and access to programs
  - More funding required to address quality, workforce, and facilities issues
  - New Hampshire faces challenges in securing political support to enact new revenue streams

Slide 29

29

## Today's presentation

- How we defined the B-5 system and other key terms
- Key findings
  - Family experiences with B-5 system
  - Issues relevant for providers
  - System-level issues
- **Implications for B-5 system strategic plan**

Slide 30

30

## Implications for PDG B-5 Strategic Plan

- Need to **improve experiences of families** in B-5 system: knowledge, access, and quality
  - Some issues are more prevalent for the most vulnerable children families (e.g., complex systems, transportation, internet/phone)
  - Other issues are common across most families (e.g., knowledge gaps, cost as barrier, service coordination)
- Equally important to **address needs of B-5 workforce** (e.g., compensation, professional learning) **and providers** (e.g., workforce, facilities, funding)
- System improvement also **requires attention to other infrastructure elements**: integrated data systems, well-functioning governance structure

Slide 31

31



Slide 32

32