Populations of Interest: Decisionmaking; Access across Programs and Systems; and Challenges Related to Quality, Research, and Measurement

Description

This session stemmed from the recognition that the factors affecting parent decision-making and access are not uniform, but often vary with regard to the characteristics of particular children (special physical or emotional needs) or families (immigrant status, language and cultural background).

The session therefore explored:

- The state of knowledge, reflecting recent research findings, of how general patterns of parent preferences and constraints are differentiated by these dimensions of special child or family characteristics.
- The particular challenges and need for training and support of provider staff in meeting the needs of children and families in these populations of interest? To what degree are they similar to or different from the general training and support needs of ECE staff?
- Do current quality-of-ECE scales adequately measure the degree to which staff are meeting the needs of children in these populations; what modifications should be made to scales or to their interpretation?
- How can we evaluate the impact of various policies and interventions, such as subsidies or QRIS, on meeting the needs of these populations of interest, given their relatively small share of the overall ECE market?

Moderator

Richard Brandon, University of Washington

Panel Members

Guillermo Montes, Children's Institute, Inc. Deborah Perry, Johns Hopkins University Helen Ward, University of Southern Maine

Scribe

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Documents in Session Folder

Discussion Notes

Session Themes

• Do we need different scales, measures, and supports for children with special needs?

- Basic early care and education policy questions addressed for specific groups: define and measure quality, ways of training and supporting caregivers, and the impact on parent choice and employment.
- Significant prevalence—diversity of populations and needs.
- Challenges to define and measure quality.
- Role of multiple service systems as a central concern.

Panelists discussed their findings on these major themes.

<u>Helen Ward: Challenges in Understanding Child Care Decisionmaking for Populations of Interest</u>

Overview

These findings apply to children across the board, but the experiences of the parents of children with special needs provide an example of the complexity of child care decisionmaking for populations of interest.

The child care and work challenges of parents of children with special needs were included in an analysis of national data from the National Survey of America's Families and a Maine case study of parent focus groups, interviews and survey of providers.

Broad Themes

Cascading issues that we found in our study and that we saw in other studies included the following:

- Challenges to accessing child care.
- Child care instability and concerns about quality.
- Lack of coordination of child care with early intervention and preschool special education, as they relate to aspects of the Individuals with Disabilities Education Act.
- Lack of workplace flexibility.
- Range of work problems, lower rates of labor force participation, more job instability, and more financial insecurity.

There are child care and work challenges for parents of children with special needs who access such services as the Temporary Assistance for Needy Families program and child care, work, and early intervention services. The impact these services have on parents' decisionmaking processes, their satisfaction with the services, and their employment and economic well-being must be assessed.

There are anecdotal stories showing how hard it is for special population families to navigate the care and support systems. One family member who had a child with a disability had to work two jobs to meet her financial responsibilities. She left her child in care during the day and brought

him with her to work as an office cleaner in the evening. In addition, parents of children with behavioral problems are much more likely to report child care problems.

Challenges for researchers and policymakers would include the following:

- The term "decisionmaking" implies that parents have a choice.
- Constraints on choice may be greater for some populations of interest.
- Discomfort, stigma, and cultural and access issues may make parents reluctant to express concerns.
- Cross-system issues can cause significant problems for parents and can create challenges for researchers and policymakers.

Final Thoughts

The importance of a diverse advisory committee to preview the issues, assess credibility and trust, employ mixed methods, and include parents who work and do not work.

Guillermo Montes: Research and Policy Issues for Child Care Populations of Interest

Overview

- Prevalence of child care arrangements and the implications for providers and families.
- Nationally representative prevalence estimates from the Center for Disease Control and Prevention's National Survey of Children's Health 2003, which was a nationally representative sample of 3- to 5-year-olds.
- Where are the children?
 - Children are in preschool programs, Head Start programs, and family child care situations.
 - o Implications for effective prevalence at child care settings: Head Start *rates higher with the prevalence of autism spectrum disorders*.
- Multiple child care arrangements and the impact on employment: Three or more child care arrangements can cause child care problems that affect parental employment.
- Child care problems affecting employment. Developmental problems are one of the main drivers of child care problems; if you have child care problems, the challenge is steeper; and if you are in a low-income bracket, the challenge is steeper still.

What Have We Learned?

- Child care settings will have substantial numbers of children with developmental problems.
 - o Training issues—staff need training to be qualified to work with children with developmental problems and with mainstreaming in child care settings.
 - Measuring the quality of child care for special populations—Overall quality is important.
 Children with developmental problems often behave better in well-structured environments that have high Early Childhood Environmental Rating Scale (ECERS) scores.

- Coordination with the medical system—diagnosed versus needing to be diagnosed (e.g., the coordination of treatments, privacy issues, and the transfer of knowledge from one setting to the other).
- o Informal child care settings—Is public policy creating unwanted effects?
 - Expulsion of children from nonpublic settings is in part caused by public policy that effectively limits the public services needed to mainstream children into private child care settings.
 - Limited scheduling will affect child care options and employment.
- Child care policy matters—Childhood developmental and behavioral problems make it more likely that child care problems will affect parental employment.
- Policy impact on developmental outcomes for children with developmental problems.
 - A partial model suggesting the need to increase resources to the private-sector child care and/or increasing the number of hours within the public sector. Without resources, private child care may not accept or may expel a child with developmental problems. Parents then might be unable to find adequate care and might have to change employers, and the subsequent inadequate care could lead to developmental outcomes for children with developmental problems.

<u>Deborah Perry: Promoting High-Quality Child Care for Young Children With Mental Health Needs</u>

- Review the prevalence estimates, make the case for mental health consultation as a quality improvement strategy, and measure the quality of care.
- Prevalence of problem behaviors—there are no national epidemiological data. An early childhood longitudinal study of 10 percent of all kindergarten children showed problematic behavior.
- Preschool expulsion prevalence.
 - No systematic data collection exists regarding the number of young children expelled from child care settings nationally.
 - o First published report of statewide data occurred in Massachusetts.
- First national estimates.
 - Across the United States, the expulsion rates were *significantly* higher in the prekindergarten (preK) grades.
 - National preK study classroom data from all 52 State-funded preK programs in 40 States—telephone survey for teachers (50 minutes in length), a weighted national average of children enrolled, and a range of 0–24.
- Mental health consultation.
 - o Quality improvement strategies include the following:
 - Support positive interactions among staff, children, and families.
 - Manage job stress (staff and families).
 - Promote strength-based communication.
 - Build relationships among staff and families.
 - Promote culturally sensitive parenting supports.
 - Management of job stress to help reduce turnover, particularly for those teaching children with special needs.

- o It is important to understand how culture affects mental health issues.
- Definition of early childhood mental health consultation.
 - o Culturally sensitive services offered by providers with a formal preparation in children's mental heath.
 - Need to promote social-emotional development and to transform children's challenging behaviors.
 - o Primarily indirect services that build the capacity of staff and family members.
 - o The impact to be measured in the domains of child, parent, staff, and family outcomes.
- Child and family-centered consultation.
 - o Programmatic consultation for staff and programs via a mental health consultant on site at preschool programs for a half-day per week.
- Research review inclusion criteria.
 - o Empirical research—About 30 studies meet the criteria concerning child and family outcomes.
- Overall findings were encouraging.
 - o Competency and self-efficacy.
 - o Job stress improvements.
 - o Gains in teaching skills and family interaction.
 - Staff turnover reductions.
 - o Improvement in the environment and child outcomes.
 - o Decreased problem behaviors.
 - o Decreased rate of expulsions.
- Issues and limitations.
 - o Few peer-reviewed studies.
 - o Lack of rigorous study designs.
 - o Inconsistent measures used.
 - o Limited information about the key components.
- Put together an evaluation toolkit—Early Childhood Mental Health Consultation.
 - Measurement of quality.
 - o Infant/Toddler Environmental Rating Scale and ECERS—mixed findings.
 - o Not sensitive enough to detect differences in patterns of interaction.
 - o Moving more toward the Arnett Caregiver Interaction Scale.
 - Classroom Assessment Scoring System, which assesses emotional support, classroom organization, and instructional support.
 - Preschool Emotional Climate Scale.
 - o Quality of relationships.
- The strongest predictor of positive outcomes was a supportive relationship. *Someone who can come in, model, and coach.*

Key Issues

• A structure is necessary for children in the autism spectrum in high-quality programs. Information must be disseminated to parents to help them choose the best arrangements for their children, especially those from special populations. Qualitative information is needed

on programs. Centers are not necessarily the best quality option for the children; one size does not fit all.

- Is it clear that these children are poorly served? It will be harder to find places for children to go. The public settings may not be serving children to their fullest capacity, and the private settings need funding as well. Legislation must provide more funds to ensure that these children get the necessary services.
- Child care resource and referral agencies are the best source of information on the known challenges. They have lists of providers with the experience to take children with special needs. Communication between the parents and resource and referral agencies should be improved. The most useful source was the multibarrier agencies that work with part of the caseload.

Wrap-Up

- Need staff training and consultation to improve the services for children with special needs.
- Recognize the need for intensive services for children and funds for mainstreaming.
- Use the appropriate measures and scales for evaluating children with special needs.
- Support cross-system collaboration funding.
- Share and cross information among all child care programs.