



# **Early Care, Early Education, and Home Visiting in American Indian and Alaska Native Communities:**

## **Design Options for Assessing Early Childhood Needs**

OPRE Report 2016-49  
April 2016



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**April 2016**

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## OVERVIEW

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The report documents the process of creating three design topics for an early childhood needs assessment of American Indian and Alaska Native (AI/AN) children and families. The Administration for Children and Families (ACF) developed three broad design topics, and Mathematica Policy Research convened a community of learning (CoL) made up of child care practitioners and researchers, Head Start/Early Head Start practitioners and researchers, tribal home visiting practitioners and researchers, ACF federal staff, including representatives from the Office of Child Care, the Office of Head Start, the Office of Early Childhood Development, and the Office of Planning, Research and Evaluation, and research partners from the Tribal Early Childhood Research Center. The CoL met monthly throughout 2015 and provided a range of perspectives on the key decision points about the designs that came up in those discussions. The three design topics are as follows:

- **Design One** will describe the population of AI/AN children and families and their participation in early childhood services based on existing data sources. To the extent possible, this design will provide a broad picture of the programs and providers serving AI/AN children and families at a national level.
- **Design Two** will study service organization and delivery systems in AI/AN communities, including the current number of children served and not served, workforce capacity, and cultural resources at the community level and will involve new data collection.
- **Design Three** will assess key features needed to support AI/AN communities' capacity for conducting early childhood needs assessments at the community level and will involve new data collection.

The report begins with a description of the framework underlying each design topic: the population of interest and the definition of early childhood needs, services, and indicators, followed by details on each of the three design topics. Each chapter addresses the key research questions for the design topic, the population of interest, measurement topics to consider when addressing the research questions, and data sources, including primary data collection or existing data sources available for secondary analysis. The report concludes with a summary of each design topic and future considerations. The goal of this report is to inform the future design of a needs assessment. However, it does not include the details for specific sample designs, data collection protocols or instruments, or analysis plans.

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## CONTENTS

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I	INTRODUCTION AND BACKGROUND .....	1
	A. The American Indian and Alaska Native population .....	1
	B. Goals of American Indian and Alaska Native Early Childhood Needs Assessment .....	2
	C. ACF-funded early childhood services for tribal communities .....	2
	D. Design topics development process.....	5
	E. Three study design topics.....	7
	F. Report organization .....	7
II	AN AMERICAN INDIAN AND ALASKA NATIVE EARLY CHILDHOOD NEEDS ASSESSMENT DESIGN FRAMEWORK.....	9
	A. American Indian and Alaska Native Early Childhood Needs Assessment design features.....	9
	B. Population of interest.....	9
	C. Defining early childhood needs, services, and indicators .....	11
	D. Summary .....	12
III	AMERICAN INDIAN AND ALASKA NATIVE EARLY CHILDHOOD NEEDS ASSESSMENT DESIGN: DESIGN ONE STUDY PARAMETERS.....	15
	A. Design One research questions .....	15
	B. Design One population of interest .....	16
	C. Design One measure recommendations and data sources .....	17
	D. Design One outcomes .....	18
IV	AMERICAN INDIAN AND ALASKA NATIVE EARLY CHILDHOOD NEEDS ASSESSMENT DESIGN: DESIGN TWO STUDY PARAMETERS .....	21
	A. Design Two research questions .....	21
	B. Design Two population of interest .....	23
	C. Design Two measurement approach: indicators, sources, and data collection methods.....	25
	D. Design Two outcomes .....	26
V	AMERICAN INDIAN AND ALASKA NATIVE EARLY CHILDHOOD NEEDS ASSESSMENT DESIGN: DESIGN THREE STUDY PARAMETERS .....	27
	A. Design Three research questions .....	28
	B. Design Three population of interest .....	31

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C. Design Three measurement approach: associated research questions, informants, and data collection methods.....	32
D. Design Three outcomes .....	34
VI SUMMARY OF KEY FEATURES AND FUTURE CONSIDERATIONS .....	37
A. Summary of key features.....	37
B. Future considerations .....	38
REFERENCES.....	41
APPENDIX A: OHS REGIONS .....	A.1
APPENDIX B: FRAMEWORK.....	B.1
APPENDIX C: DESIGN ONE.....	C.1
APPENDIX D: DESIGN TWO .....	D.1
APPENDIX E: DESIGN THREE.....	E.1



## TABLES

I.1	Number and combination of ACF tribal funding sources .....	3
I.2	Number of AI/AN children and families served, by ACF funding source .....	5
I.3	AI/AN EC Needs Community of Learning participants .....	6
I.4	Overview of design topics .....	7
B.1	AI/AN early childhood needs, services, and potential indicators, by target population .....	B.4
C.1	Design One research questions: key indicators with the potential to answer them .....	C.3
C.2	Design One potential data sources for secondary analysis: overview of data sources .....	C.6
C.3	Potential data sources for secondary analysis: overview of data sources .....	C.7
C.4	Potential data sources for secondary analysis: contents of data sources .....	C.9
C.5	Potential data sources for secondary analysis: level of analysis, sample, and race definitions .....	C.12
C.6	Potential data sources for secondary analysis: accessibility .....	C.14
D.1	Design Two research questions, indicators, and data collection procedures .....	D.4
E.1	Design Three research questions, associated questions, and data collection procedures for tribal communities with experience conducting formal needs assessment .....	E.4
E.2	Design Three research questions, associated questions, and data collection procedures for tribal communities without experience conducting formal needs assessment centered on community readiness .....	E.12

## FIGURES

V.1	Levels of community needs assessments .....	27
V.2	Design Three research questions by community needs assessment experience .....	29
A.1	ACF Regional Offices .....	A.3
B.1	Overview of population of interest, across designs .....	B.3
D.1	Additional population of interest characteristics: Design Two .....	D.3
E.1	Additional population of interest characteristics: Design Three .....	E.3

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## I. INTRODUCTION AND BACKGROUND

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Providing high quality, culturally appropriate early childhood services across the prenatal to age 5 continuum is a critical policy and programmatic issue in the United States, notably among the American Indian and Alaska Native (AI/AN) population. Available data demonstrate the poor health and well-being of the AI/AN population relative to other population groups, highlighting this need for services (Freeman and Fox 2005; U.S. Department of Labor 2014). Although policymakers and practitioners commonly agree that existing services do not meet this need, scant data are available on the scope of the need for early childhood services or to accurately determine and document the unmet need in AI/AN communities. To best support AI/AN children and families, better data will help document their needs for early childhood services, the services currently available to address these needs, and how local communities identify needs for services. These data are prerequisites for conducting an accurate national assessment of the unmet need for early childhood services in tribal communities. This report sets the framework for such a needs assessment and outlines three design options that, if conducted, would support the implementation of an AI/AN early childhood needs assessment.

### A. The American Indian and Alaska Native population

In the 2010 U.S. Census, 5.2 million people identified themselves as American Indian and Alaska Native, either alone or in combination with other races,<sup>1</sup> representing roughly 1.6 percent of the U.S. population (Norris et al. 2012). Approximately 8 percent (422,000) are children under age 5.<sup>2</sup> The AI/AN population has experienced rapid growth in the past decade. Between the 2000 and 2010 Census, this group grew by nearly 27 percent, compared with a 10 percent population growth nationwide (Norris et al. 2012). The median age for the AI/AN population is 29, nearly 10 years younger than the median age (37) for the total U.S. population.

The AI/AN population is widely dispersed across the United States, both on and off tribal lands. A large proportion of the AI/AN population lives in the West (41 percent), with the greatest numbers living in California (14 percent) and Oklahoma (9 percent), followed by Arizona (7 percent) and Texas (6 percent; Norris et al. 2012). The majority of the AI/AN population lives *outside* of American Indian and Alaska Native areas as defined by the Census Bureau (Norris et al. 2012).<sup>3</sup>

There are 566 federally recognized tribes (U.S. Department of the Interior 2015), each with its own distinct history, culture, and language. These sovereign nations make and enforce their own laws, hold elections, and determine citizenship (U.S. Department of the Interior 2015).

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<sup>1</sup> Throughout this report, we use the term AI/AN to refer to persons who self-identify as AI/AN only and those who identify themselves as multi-racial and includes AI/AN and some other racial group or groups.

<sup>2</sup> All population data are derived from the U.S. Census Bureau, including the American Community Survey 2011–2013 Estimates and the 2010 Census except where otherwise noted.

<sup>3</sup> American Indian and Alaska Native areas include American Indian reservations and trust lands, tribal jurisdiction statistical areas (TJSAs), Alaska Native Regional Corporations (ANRCs), Alaska Native village statistical areas (ANVSs), and tribal designated statistical areas (TDSAs). TJSAs and TDSAs serve a similar function: TJSAs are federally-recognized tribes in Oklahoma that no longer have a reservation, and TDSAs are federally and state-recognized tribes also without a land base. Retrieved from <http://www2.census.gov/geo/pdfs/reference/GARM/Ch5GARM.pdf>

Native governance promotes and maintains the tribal nations' economic, judicial, social, political, and cultural lifeways. As a testament to the strength of this group, population growth has all taken place in spite of well-documented historical trauma, including colonization, removal, war, disease, and oppression (Brown-Rice 2013).

Today, the poverty rate for AI/AN families is nearly double that of all families in the United States (21 percent versus 12 percent), a rate that is even more pronounced for AI/AN families with children under age 5. One in three AI/AN families across tribal and nontribal lands with children under age 5 are living in poverty (32 percent), compared with 19 percent of families nationwide. This rate is especially high for AI/AN families living on reservations (Freeman and Fox 2005). Compared with the total U.S. population, AI/AN workers have a lower labor force participation rate (59 percent versus 63 percent nationwide) and a higher unemployment rate (13 percent versus 7 percent nationwide) (Bureau of Labor Statistics 2014). Fewer AI/AN adults earn a bachelor's degree or higher (18 percent versus 30 percent nationwide).

## **B. Goals of American Indian and Alaska Native Early Childhood Needs Assessment**

The American Indian and Alaska Native Early Childhood Needs Assessment (AI/AN EC Needs Assessment) design project, funded by the U.S. Department of Health and Human Services (DHHS), Administration for Children and Families (ACF), Office of Planning, Research and Evaluation (OPRE), seeks to lay a foundation toward understanding the need and, more importantly, unmet need for early childhood services in American Indian and Alaska Native communities. *This report outlines a series of design topics for future studies that can inform a national assessment of the unmet need for early childhood care, education, and home visiting services (prenatal through age 5 not yet in kindergarten) in tribal communities.* The project focuses on the necessary building blocks to understand the need for services supporting child and family well-being in AI/AN communities that are currently receiving federal funds from ACF (described in detail in the next section) and in those that are not currently receiving those funds.

## **C. ACF-funded early childhood services for tribal communities**

ACF supports early childhood care, education, and home visiting services for children and their families in tribal communities through 150 Head Start and/or Early Head Start Region XI grantees, 260 Child Care Development Fund (CCDF) tribal grantees, and 24 Tribal Maternal, Infant, and Early Childhood Home Visiting (Tribal MIECHV) grantees.<sup>4</sup> Of the 450 tribes/organizations listed in ACF sources, 36 percent (161) do not receive any of the three sources of federal funds and 64 percent (289) receive some sort of combination of these. Grantees that receive funds are located in 33 of the 50 states, and over half of the grantees (56 percent) are located within the 10 states with the largest AI/AN populations. AI/AN children that reside outside of tribal communities are also served by these funding streams, but in other programs such as state CCDF grantees and Head Start Regions I–X. In Table I.1, we present the number and percentage of grantees that receive a particular number and type of funding source(s). We then describe each ACF funding stream in terms of program eligibility and AI/AN

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<sup>4</sup> Some grants are to “tribal consortia,” or entities that serve a number of tribes.

enrollment. In Table I.2, we present the number of AI/AN children and families served by each funding source.

**Table I.1. Number and combination of ACF tribal funding sources**

Number and type of funding sources	Number of grantees that receive funding	Percentage of grantees that receive funding
<b>1</b>	154	53%
Head Start/Early Head Start	18	6%
CCDF	127	44%
MIECHV	9	3%
<b>2</b>	125	43%
Head Start/Early Head Start and CCDF	120	42%
Head Start/Early Head Start and MIECHV	2	1%
CCDF and MIECHV	3	1%
<b>3</b> Head Start/Early Head Start, CCDF, and MIECHV	10	3%

Source: ACF-provided resource (ACF Tribal Grantees CCDF-HS-THV – 8-27-2014.Master.xls).

CCDF = Child Care Development Fund; MIECHV = Maternal, Infant, and Early Childhood Home Visiting

The Office of Head Start (OHS) manages grant funding and oversees local agencies providing Head Start and Early Head Start services to support the mental, social, and emotional development of children from birth through age 5 (not yet in kindergarten). There are 12 OHS regions in all, most of which are geographically based. Appendix Figure A.1 maps out the OHS regions. Region XI Head Start programs serve AI/AN children on tribal lands but can get a waiver and serve nonnative children if there is available space (that is, if their funded slots are not all taken). Head Start Regions I–X do not have specific eligibility requirements related to AI/AN children, but many AI/AN children and families are served by programs in these regions.

Head Start and Early Head Start serve more than one million children across Regions I–XI, 43,000 (4 percent) of whom are AI/AN.<sup>5</sup> Fifty-two percent of these children, or about 22,000 AI/AN children, are served in Region XI (tribal Head Start/Early Head Start programs); the other 48 percent of AI/AN children (about 21,000 AI/AN children) are served by Regions I–X. Program enrollments of AI/AN children vary considerably by region. As would be expected, Region XI tribal programs serve a high percentage of AI/AN children—85 percent of children enrolled in these programs are AI/AN—whereas Regions I–X programs overall serve a very low percentage of AI/AN children—2 percent of children in these programs are AI/AN. However, within Regions I–X, there is variability in AI/AN enrollment, with programs in Regions VIII and X serving the highest percentage of AI/AN children, on average (about 8 percent of the children enrolled by these programs are AI/AN).

Through the CCDF, the Office of Child Care (OCC) assists low-income, working families in obtaining high quality child care so the adults can work, attend professional training, or further

<sup>5</sup> These data come from internal calculations of Head Start Program Information Report Data, 2012–2013, on Regions I–XI. There are 49 Region XII (Migrant and Seasonal Head Start) programs. Of these, 14 have one or more AI/AN children, serving a total of 560 children.

their education. Our focus is limited to CCDF funds that support child care for children from birth through age 5 (not yet in kindergarten), even though funds can be used for before and after care for children up to age 13.<sup>6</sup> Tribal children have dual eligibility for programs, meaning they can be served using either state or tribal CCDF funds. Tribal children must meet the state's eligibility requirements in order to access the state CCDF funds. Tribal CCDF funds, on the other hand, can be used only to serve tribal children on or near the reservation.<sup>7</sup>

Slightly more than 9,000 of the 840,000 children ages 0 to 5 served by state CCDF funds are AI/AN.<sup>8</sup> Across 56 states and U.S. territories that receive CCDF funds, an average of 1 percent of enrolled children are AI/AN. However, this percentage varies widely, with about half of states and territories reporting less than 1 percent AI/AN enrollment and 26 states reporting that AI/AN children make up 1 percent or higher of their total enrollment numbers. North and South Dakota serve the highest percentage of AI/AN children in their CCDF-funded programs: between 19 and 21 percent of enrolled children are AI/AN.<sup>9</sup>

ACF's Office of the Deputy Assistant Secretary for Early Childhood Development administers the Tribal MIECHV program. Tribal MIECHV is part of the broader MIECHV (Federal Home Visiting) program, through which the Health Resources and Services Administration (HRSA), in close partnership with ACF, funds states and territories to develop and implement evidence-based home visiting models. Tribal MIECHV supports pregnant women and families and helps parents of children from birth to kindergarten entry in at-risk tribal communities to develop the skills they need to raise healthy children.

To date, 25 tribal MIECHV grants have been awarded to 24 entities. Several state MIECHV grantees also serve tribal communities as part of their awards. AI/AN children not living on tribal lands may be served by programs in other regions or by nontribal grantees. Tribal MIECHV grantees have enrolled a total of 1,523 families since 2012. Eighty-five percent of children and 78 percent of adults served by Tribal MIECHV grants are AI/AN.

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<sup>6</sup> Children can be served up to age 19 if they are "physically or mentally incapable of care for himself or herself or under court supervision."

<sup>7</sup> CCDF service areas must be "on or near the reservation." That is, they must be within a reasonably close geographic proximity to the delineated borders of a Tribe's reservation (with the exception of Tribes in Alaska, California and Oklahoma). Tribes that do not have reservations must establish service areas within reasonably close geographic proximity to the area where the Tribe's population resides.

<sup>8</sup> Information retrieved from FY 2012 ACF-801 Child Care Monthly Data.

<sup>9</sup> Information retrieved from FY 2012 ACF-801 Child Care Monthly Data. Information retrieved from FY 2012 CCDF data tables available at <http://www.acf.hhs.gov/programs/occ/resource/fy-2012-ccdf-data-tables-final>. Data on tribal grantees are not readily available. Therefore, these numbers do not include any counts of the number of children served by tribal grantees. These data reflect all children served by CCDF funds in states and territories. Mentioned previously, CCDF funds serve children up to age 13 and at the lead agency's option, children up to age 19 who are "physically or mentally incapable of care for himself or herself or under court supervision."

**Table I.2. Number of AI/AN children and families served, by ACF funding source**

ACF funding source	Number of AI/AN children served
Head Start/Early Head Start	<ul style="list-style-type: none"> <li>Serve more than one million children across Regions I–XI, 43,000 (4 percent) of whom are AI/AN</li> <li>Fifty-two percent of AI/AN children in Head Start or Early Head Start, or about 22,000, are served in Region XI (tribal programs)</li> </ul>
CCDF	<ul style="list-style-type: none"> <li>Slightly more than 9,000 children of the 840,000 children ages 0–5 (1 percent) served by state and territory CCDF are AI/AN</li> </ul>
MIECHV	<ul style="list-style-type: none"> <li>Tribal MIECHV grants have served a total of 1,523 families since 2012</li> <li>Eighty-five percent of children and 78 percent of adults served are AI/AN</li> </ul>

Source: Head Start Program Information Report Data, 2012-2013; CCDF Data Tables Fiscal Year 2012; MIECHV internal estimates through 9/30/14 as of 11/21/15.

CCDF = Child Care Development Fund; MIECHV = Maternal and Infant Early Childhood Home Visiting

#### **D. Design topics development process**

The AI/AN EC Needs Assessment Community of Learning (CoL) was formed to share input on the AI/AN EC Needs Assessment, especially cultural considerations based on firsthand experiences with AI/AN children, families, and programs, as well as on research conducted in tribal communities. The CoL is composed of tribal practitioners and research partners from each of the three ACF services of interest (Head Start and Early Head Start, child care, and home visiting); researchers from the Tribal Early Childhood Research Center and Mathematica Policy Research; and federal staff from the OPRE, OHS, OCC, and the Office of the Deputy Assistant Secretary for Early Childhood Development. Table I.3 lists CoL participants.

The design project held an in-person kickoff meeting in December 2014 and began monthly webinar meetings in April 2015, where individuals provided input on project goals; frameworks for a needs assessment; and three design topics that, when undertaken, would inform the design of a future national needs assessment. The information in this report reflects insights and suggestions received from the members of this group.

**Table I.3. AI/AN EC Needs Community of Learning participants**

Participant	Affiliation
<b>Child Care practitioners and researchers</b>	
Frances (Pigeon) Big Crow	Oglala Sioux Child Care
Barbara Buckshot-Jock	Saint Regis Mohawk Tribe
Tammy Charles	Wyandotte Nation
Laurie Hand	National Tribal Center
Kim Nall	Colusa Indian Community
Sherry Rackliff	Delaware Child Development
Melody Redbird-Post	Kiowa Tribe Child Care Program
<b>Head Start/Early Head Start practitioners and researchers</b>	
Ann Belleau	Inter-Tribal Council of Michigan
Patty Brown	Karuk Tribe
Hiram Fitzgerald	Michigan State University, Tribal Early Childhood Research Center
Jacki Haight	Port Gamble S'Klallam Tribe
Charmaine Lundy	Kenaitze Indian Tribe
Teresa Smith	Kenaitze Indian Tribe
Nicole L. Thompson	University of Memphis
Lana Toya	Pueblo of Jemez Walatowa Head Start
Monica Tsethlikai	Arizona State University
<b>Maternal, Infant, and Early Childhood Home Visiting practitioners and researchers</b>	
Lisa Abramson	Inter-Tribal Council of Michigan
Cyndi Anderson	White Earth Nation/Mosaic Consulting, Inc.
Catherine Ayoub	Brazelton Center, Boston Children's Hospital
Jennifer Bouley	Red Cliff Band of Lake Superior Ojibwe
Katie Hess	United Indians of All Tribes Foundation
Elizabeth Kushman	Inter-Tribal Council of Michigan
Jon Miles	Eastern Band of Cherokee Indians
Paul Spicer	The University of Oklahoma
<b>Federal partners</b>	
Meryl Barofsky	Office of Planning, Research and Evaluation
Moushumi Beltangady	Office of the Deputy Assistant Secretary for Early Childhood Development
Nina Philipsen Hetzner	Office of Planning, Research and Evaluation
Ivelisse Martinez-Beck	Office of Planning, Research and Evaluation
Aleta Meyer	Office of Planning, Research and Evaluation
Mary Sprague	Office of Child Care
WJ Strickland	AIAN/Office of Head Start
Maria Woolverton	Office of Planning, Research and Evaluation
<b>Design research partners</b>	
Jessica Barnes-Najor	Michigan State University, Tribal Early Childhood Research Center
Mike Cavanaugh	Mathematica Policy Research
Emily Knas	Mathematica Policy Research
Lizabeth Malone	Mathematica Policy Research
Douglas Novins	University of Colorado Anschutz Medical Campus, Centers for American Indian & Alaska Native Health, Tribal Early Childhood Research Center
Erica Roberts	Tribal Evaluation Institute, James Bell Associates Inc.
Michelle Sarche	University of Colorado Anschutz Medical Campus, Centers for American Indian & Alaska Native Health, Tribal Early Childhood Research Center
Jerry West	Mathematica Policy Research
Nancy Rumbaugh Whitesell	University of Colorado Anschutz Medical Campus, Centers for American Indian & Alaska Native Health, Tribal Early Childhood Research Center



## E. Three study design topics

To support a future AI/AN early childhood needs assessment, ACF identified three design topics (Table I.4):

- **Design One** will describe the population of AI/AN children and families and their participation in early childhood services based on existing data sources. To the extent possible, this design will provide a broad picture of the programs and providers serving AI/AN children and families at a national level.
- **Design Two** will study service organization and delivery systems in AI/AN communities, including the current number of children served and not served, workforce capacity, and cultural resources at the community level and will involve new data collection.
- **Design Three** will assess key features needed to support AI/AN communities' capacity for conducting early childhood needs assessments at the community level and will involve new data collection.

**Table I.4. Overview of design topics**

Design	Key focus	Level	Data source
Design One	AI/AN children and families, participation in services, programs serving AI/AN children and families	National	Secondary data sources
Design Two	Service delivery and organization in AI/AN communities	Community	New data collection
Design Three	Capacity for needs assessments in AI/AN communities	Community	New data collection

## F. Report organization

This report begins with a description of the framework underlying each design topic: the population of interest and the definition of early childhood needs, services, and indicators (Chapter II). Chapters III, IV, and V then detail each of the three design topics. Each chapter addresses the key research questions for the design topic, the population of interest, suggested measures for addressing the research questions, and data sources, including primary data collection or existing data sources available for secondary analysis. The report concludes with a summary of each design topic and future considerations (Chapter VI). The goal of this report is to propose designs that, when undertaken, can inform the future design of a needs assessment. However, it does not include the details for specific sample designs, data collection protocols or instruments, or analysis plans.

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## **II. AN AMERICAN INDIAN AND ALASKA NATIVE EARLY CHILDHOOD NEEDS ASSESSMENT DESIGN FRAMEWORK**

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### **A. American Indian and Alaska Native Early Childhood Needs Assessment design features**

This chapter presents a foundation upon which all three design topics build. The answers to several questions provide the “framework” or the definitions underlying each design:

- What is the population of interest for an American Indian and Alaska Native Early Childhood Needs Assessment?
- What are early childhood needs and services?
- What are the key indicators that suggest whether or not a need has been met?

### **B. Population of interest**

As described in Chapter I, ACF is most interested in understanding the services, funding, and needs and unmet needs among communities served by ACF *tribal* grantees. However, to have a broader context, a national picture of services across all AI/AN communities, regardless of ACF funding, is required to understand the full range of early childhood services available. For the AI/AN EC Needs Assessment framework, we have developed definitions of AI/AN individuals, AI/AN communities, and the AI/AN service population to ensure information on the desired groups is captured for each of the design topics. We limit our focus to AI/AN individuals, grantees, and communities in the 50 states and the District of Columbia. Native Hawaiian or Pacific Islanders are not included as American Indians or Alaska Natives.

#### **1. American Indian or Alaska Native individuals**

The AI/AN EC Needs Assessment design will use definitions of race based on tribal affiliation *or* self-report. This broader definition is needed given the variability in requirements for establishing tribal affiliation. It will be inclusive of those who say they are AI/AN only, and those that say they are AI/AN in *combination with* other races/ethnicities. For example, individuals who identify themselves as American Indian and those who identify themselves as American Indian and African American will both be included under our definition. Our primary interest is on AI/AN children ages 0 through 5 who are not yet in kindergarten. These children may reside in households with others who are not American Indian or Alaska Native.

A particular design may further refine or limit this definition based on its goals or data sources. For example, when using secondary data sources such as U.S. Census data, we must rely on the definition used by the source. The Census and large-scale population-based sample surveys such as the American Community Survey or the Early Childhood Longitudinal Study rely on respondent self-reported race/ethnicity, and responses may or may not align with tribal membership.

## 2. American Indian or Alaska Native communities

To understand the needs of AI/AN communities, we want diversity in the AI/AN communities that are studied. For the current framework, we identified two primary characteristics of interest: (1) ACF funding status (ACF grantees and communities not receiving ACF funding) and (2) location (tribal lands and urban tribal communities).<sup>10</sup> The relationships between these characteristics (Appendix Figure B.1) can be used to help guide decisions about the samples that are needed to answer key questions for the three study design topics.

In terms of *ACF funding status*, a community would be defined by its grantee status. Among those receiving ACF funding for early childhood education and care and/or home visiting, the pattern of funding differs (Table I.1). There are 289 grantees across the three funding programs, with communities receiving one, two, or all three funding programs. Among those not receiving ACF funding, some communities may have applied for and not received funding and other communities may not have applied for funding. Understanding the needs of all AI/AN communities, regardless of funding, is of interest.

For *tribal lands*, geographic location/boundaries could be defined in different ways. Some studies, such as the American Indian Services Utilization, Psychiatric Epidemiology, Risk and Protective Factors Projects (AI-SUPERPPF), have focused on reservation boundaries and then extended them a certain mileage (for example, a 50-mile ring). Another definition of tribal lands could be Census-defined AI/AN areas to include American Indian reservations and trust lands, tribal jurisdiction statistical areas, Alaska Native Regional Corporations, Alaska Native village statistical areas, and tribal designated statistical areas. It is also important to consider AI/AN density when defining tribal lands because about 70 percent of the population residing in Census AI/AN areas is not AI/AN (Norris et al. 2012); however, there may be a great deal of variation in this statistic. Given ACF's primary interest in tribal children and families, to capture the majority of AI/AN children and families, the designs could set a criterion by density or number, using Census data to do so. With this approach, we could use Census data to identify tribal lands with the greatest density of AI/AN individuals or tribal lands that surpass a particular count of AI/AN individuals.

For *urban tribal communities*, we could use one of two approaches to identify communities. First, urban tribal community organizations can help us identify potential AI/AN communities in urban areas. For example, the Urban Indian Health Center or Program, members of the National Council of Urban Indian Health, and National Urban Indian Family Coalition member organizations, have access to urban tribal individuals. The presence of such an organization could be used to compile an initial list of urban tribal communities, and the organization's engagement area could be used to define the geographic boundary of a community. Second, we could use Census data to identify the largest AI/AN urban cities. With this approach, two options exist: 1) number of AI/AN individuals and 2) proportion of AI/AN individuals in an urban area. The two options yield different results and different groups of cities (for instance, New York and Los Angeles have the largest number of AI/AN residents, whereas Anchorage and Tulsa have the

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<sup>10</sup> Communities located on nontribal lands in nonurban areas are not included as a population of interest at this time.

highest proportion of AI/AN individuals). A final definition would depend on the study's key questions.

### **3. American Indian or Alaska Native service population**

Based on the definition of community, the concentration of American Indian or Alaska Native children served within a program would vary. The current interest is to include communities with different levels of AI/AN population density (both tribal and nontribal). This interest is based on the assumption that the needs of an AI/AN child in a predominantly AI/AN community might differ from those of an AI/AN child in a predominantly non-AI/AN community, and the programs serving these children might also look quite different. Although our primary focus is on tribal children being served by tribal communities, it is important to understand who exactly is served by the programs. AI/AN children and families served by tribal communities may be included regardless of where those individuals reside in the community (in particular, if outside of the tribal boundary). Additionally, programs in tribal communities may serve non-AI/AN children and families based on the community/program philosophy, tribal eligibility requirements, and enrollment capacity. For example, about 15 percent of the children and families served by Head Start and Early Head Start AI/AN programs (that is, Region XI) are nonnative. Capturing information on the full service target population is key to understanding the need and unmet need for early childhood services in tribal communities.

### **C. Defining early childhood needs, services, and indicators**

The AI/AN EC Needs Assessment project seeks to lay the building blocks necessary to understand the needs of (1) children, (2) families, and (3) providers/programs in AI/AN communities. For this framework, we defined needs and program services relative to three key types of early childhood programs—child care, early education, and home visiting—to align with the focus on those programs supported by ACF.

In pursuit of this goal, Appendix Table B.1 lists the AI/AN early childhood needs, services, and indicators thought to be important for a future needs assessment to address. More specifically,

- Early childhood needs (EC needs) reflect the child, family, or program characteristics that should be supported. Note that the word “need” is not meant to imply a deficit or lack in a particular area but instead highlight an important domain to be supported or strengthened.
- Early childhood services (EC services) are those services that support the parallel need.
- Early childhood key indicators (EC key indicators) are measures that would suggest whether a particular need has or has not been met by available services in the community.

As presented in the table, we begin with needs specific to AI/AN children (and children of all races and ethnicities). School readiness and healthy childhood development are important needs that services such as early care and education and home visiting programs seek to address. One indication of whether or not these services are meeting children's needs is the number of AI/AN children ages 0 through 5 who are not yet in kindergarten in a particular community compared with the number of early care and education program slots for AI/AN children in that community. That is, if there are more children who require services than slots available, there is

an unmet need in the community. Such indicators can provide context on the supply and demand for services. Additionally, indicators of children's development and school readiness skills include kindergarten screening and assessment scores and whether children's scores on social-emotional screenings are within a developmentally appropriate range.

We then highlight needs specific to AI/AN families, because the well-being of children is tied to their parents and families. Prenatal health, for example, is a family need closely tied to child well-being. The number of prenatal care visits completed by a mother is one indication of potential child birth outcomes and healthy development, as well as maternal health and parenting preparation. Families are also in need of cultural connections, and the availability of services that seek to engage with families in culturally appropriate ways is an indicator of support for the cultural identity of the family.

Finally, we present the needs of AI/AN programs or providers. Understanding the needs of AI/AN programs or providers is critical to our understanding of whether the needs of children and their families are being addressed by such programs. For example, AI/AN programs require sufficient staffing to deliver services. Indicators such as turnover rates and workforce caseloads can tell us whether work conditions are supportive of workers, and, by extension, whether there is continuity in care or services for AI/AN children and families.

As these examples illustrate, indicators can range from a number, such as the number of children ages 0 through 5 who are not yet in kindergarten or the size of workforce caseloads, to an assessment of whether cultural context is part of family engagement activities. In addition, important indicators of cultural connections underlie everything in the table: whether parents are comfortable accessing the services that are available, whether families are aware of the services offered to begin with, and whether or not services that are offered are sensitive to the cultural beliefs of the families.

The indicators presented in Appendix Table B.1 vary in their level of specificity, which may be refined within a given design topic. This framework table provides a broad indication, based on feedback and suggestions from the CoL members, of what AI/AN community members want to understand; it is not meant to be an exhaustive list. Additionally, a given design proposed in this report is not intended to address all needs, services, and indicators—nor can all be addressed using all the designs. Rather, this table illustrates which needs, services, or indicators may be important to consider in a design.

## **D. Summary**

The AI/AN EC Needs Assessment framework provides a conceptual map of the population of interest and a crosswalk of the key early childhood needs, services, and indicators thought to be important for a future needs assessment. The population of interest is intentionally broad to include the entire American Indian and Alaska Native population across diverse communities. Given that the primary goal is to understand if ACF-funded early care and education or home visiting programs are meeting the needs of children and families in tribal communities, the population of interest is further defined by funding sources and location. Under this framework, early childhood needs and services are defined within the purview of early care and education and home visiting (as the key missions of the ACF funding programs). An extensive list of

indicators is presented to determine the scope of need and level of unmet need for AI/AN children, families, and programs and providers.

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### III. AMERICAN INDIAN AND ALASKA NATIVE EARLY CHILDHOOD NEEDS ASSESSMENT DESIGN: DESIGN ONE STUDY PARAMETERS

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Design One will use existing data sources to describe the population of AI/AN children and families and their participation in early childhood services, specifically early care and education and home visiting. To the extent that existing data sources allow, this design will also provide a broad picture of the programs and providers serving AI/AN children and families. Design One will also identify gaps that future data collection efforts might fill.

#### A. Design One research questions

Design One focuses broadly on AI/AN children and families—their background characteristics, needs, and participation in early care and education and home visiting. Further, to understand their participation in and need for services, we would also describe the programs and providers that serve AI/AN children and families. Below, we present the research questions in three categories: on (1) children and families, (2) child and family access to and participation in services, and (3) programs and providers serving AI/AN children and families. The extent to which these research questions can be answered by existing data sources will likely vary.

Key research questions related to *children and families* are the following:

1. How large is the population of AI/AN children ages 0–5?
2. What percentage of AI/AN children and families reside on tribal lands, in urban tribal communities, or outside tribal lands?
3. What are key child and family characteristics in the AI/AN population that may indicate need for early childhood services?

Key research questions related to *AI/AN child and family participation in and potential access to early childhood services* include the following:

4. What are some of the characteristics of AI/AN children and families that may promote or limit their access to ACF-funded early childhood services and programs?
5. How many AI/AN children and families receive ACF-funded early childhood services? How many AI/AN children and families do not receive ACF-funded early childhood services?
6. What are the characteristics of AI/AN children and families who receive services? What are the characteristics of AI/AN children and families who do not receive services?

Key research questions on ACF-funded *early childhood programs/providers serving AI/AN children* include the following:

7. Who are these programs serving (native and nonnative)? That is, what are the characteristics of the families in these programs (for example, race/ethnicity, language use)?

8. What is the supply of early childhood services in AI/AN communities? For example, what is the pattern of ACF funding among AI/AN communities? Or how many regulated providers serve AI/AN children?
9. What are the features of programs serving AI/AN children and families (for example, program type/model, operation/resources)?

## **B. Design One population of interest**

Design One seeks to provide a national picture of AI/AN children and families, their strengths and needs, their access to and participation in early childhood services, and the programs that serve them. Illustrated in Appendix Figure B.1, Design One research questions would consider the entire AI/AN population in tribal and nontribal communities across the United States.

### **1. American Indian or Alaska Native individuals**

Design One will use a broad definition of race based on tribal affiliation *or* self-report. It will be inclusive of those who say they are AI/AN only, and those who say they are AI/AN *in combination with* other races/ethnicities. This broad definition is needed because of the varied ways existing data sources define whether an individual is American Indian or Alaska Native, and many sources' reliance on self-reported race. The definition of race will ultimately be decided based on what race information is available in the data. Children ages 5 years and younger who are not yet in kindergarten are the primary interest. These children may live in a household where other members are not American Indian or Alaska Native. For example, a child and his/her mother may be American Indian or Alaska Native, but the child's father is White.

### **2. American Indian or Alaska Native communities**

Design One seeks to understand where AI/AN children and families live and receive early childhood services. Whether an AI/AN child lives in a community on or near a tribal land, in an urban tribal community, in a rural area, or elsewhere could influence that child's and family's access to services and their service experience.

### **3. American Indian or Alaska Native program/provider**

For this design study topic, programs and providers will be defined as early childhood service providers if the key services include one of the following:

- Child care (nonparental) to include home-based and center-based providers who are registered or licensed<sup>11</sup>
- Early education fostering school readiness (to include public or private preschools or school-based prekindergarten)
- Home visiting services to support parents in raising their children

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<sup>11</sup> Child care services have the potential to include "informal care," defined generally as unregistered or unlicensed care (for example, provided by an unlicensed neighbor or babysitter). However, it is likely that existing data sources may focus on formal care arrangements.

This definition aligns with ACF's primary interest, to understand AI/AN children and families who receive services through three of its funding streams: Head Start and Early Head Start, the CCDF, and MIECHV. The types of services these programs provide could include education, physical and mental health, nutrition, and social services, as described in Chapter I. However, a program or provider whose mission does not include one of the three key services listed above would not be considered an early childhood service provider for this design.

Programs or providers would be considered to be serving AI/AN children and families if at least one AI/AN child or family participates.

### **C. Design One measure recommendations and data sources**

Design One will draw on available data to measure a number of indicators in order to address each of the research questions. Appendix Table C.1 aligns Design One research questions with the indicators that will be used to address each question.<sup>12</sup> For example, the first set of research questions focuses on the identification on AI/AN children and families and could be answered by indicators such as the number of AI/AN children ages 0 through 5 who are not yet in kindergarten within a particular geographic location. The second set of research questions on child and family participation in and potential access to services could be answered by indicators of service availability and children's and families' need for early childhood services. The third set of research questions on early childhood programs/providers serving AI/AN children could be answered by demographic indicators on enrolled children and families, as well as indicators of service delivery. As illustrated by these examples, indicators can range from a number, such as the number of children ages 0–5, to a list of services that are delivered.

Design One will rely on existing data sources to answer each research question. To qualify as a potential data source for Design One, the source must meet two main criteria: it has to (1) contain information on children, families, or early childhood services and (2) include American Indian or Alaska Native as a race category. Data sources could be at different levels (for example, individuals or programs) and representation (for example, national versus tribal). However, a national picture of AI/AN children, families, and programs continues to be a Design One priority.

Approximately 21 data sets were identified as having information on AI/AN children and families, early childhood service participation, or information on at least one of the early childhood services of primary interest here. Appendix Table C.2 contains the data sets identified to date that contain information on the key indicators mentioned above, thereby having the potential to answer one or more of the Design One research questions. Note that Appendix Table C.2 contains large national and administrative data sources, since Design One is interested in a national picture. Although local estimates are not a goal of this design, state, local, or tribal data sources have the potential to complement and fill in holes that national and administrative data

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<sup>12</sup> These indicators are based on those developed in Appendix Table B.1.

sets contain.<sup>13</sup> Appendix Tables C.3 through C.6 provide additional information on these data sets.

This chapter does not recommend particular data sets over others; additional review is needed to address how well any existing data can address the research questions.<sup>14</sup> The data sets listed in Appendix Table C.2 were not designed for the purposes of estimating needs of AI/AN children and families; therefore, no one data set will address the full range of Design One research questions. However, some data sets focus specifically on AI/AN communities in general and therefore hold the strongest potential. For example: the American Community Survey (ACS), the 2010 U.S. Census, the Head Start Program Information Report (PIR), CCDF Grantee ACF-801 Form (for nontribal grantees),<sup>15</sup> and MIECHV Home Visiting Grantee Form 1. Tribal epidemiology data, collected by the Indian Health Service, are likely to include detailed information on a number of health indicators of interest, but these data are not publicly available.

#### **D. Design One outcomes**

*The primary product of Design One would be a descriptive report that provides a picture of the AI/AN population, its participation in early childhood services, and information on the programs and services that are available to AI/AN children and families.* Additionally, the product would include an assessment of the value of the different data sources for answering the Design One research questions, including their content coverage, AI/AN sample size, when these data were collected, and how well they represent the current AI/AN population. In making the assessment, gaps, or questions that remain unanswered by the existing data would be identified.

Below, we identify a list of products that might be possible after examining the existing data sets. Further assessment of the existing data is needed to gauge the feasibility of these products.

- **A data dictionary.** A compilation of information on AI/AN data sources with information on AI/AN children, families, and programs/providers. This would build upon Appendix Tables C.2 through C.6, including such additional fields as: the number of AI/AN individuals in the data set, geographic scope, data collection methodology, response rate, whether there is an oversample of AI/AN, how analysis was conducted, strengths and limitations of the data, and points of contact for the data source.
- **An interactive AI/AN provider map.** A map of where the AI/AN child and family population is located, combined with pinpoints for (1) ACF tribal programs and (2) nontribal ACF-funded early care and education or home visiting programs that serve at least one AI/AN child, identified to the extent possible from existing data sources.

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<sup>13</sup> To identify state, local, or tribal data sources of interest, future planning for Design One could consider states with a large AI/AN population and identify local data sets within those states.

<sup>14</sup> Additionally, review of data procedures may be needed to confirm the accuracy of the information derived from these sources, given concerns expressed by CoL members that national survey data sets may undercount the AI/AN population because of the group's mobility.

<sup>15</sup> Comparable data for tribal grantees are not publicly available.

- **Community profiles.** Short profiles, utilizing secondary data sources, that provide information for a specific AI/AN community on indicators of child, family, and provider/program needs.
- **Understanding participation in services.** An analytic report that would explore early childhood service participation and characteristics that are most predictive of need or service participation.

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#### **IV. AMERICAN INDIAN AND ALASKA NATIVE EARLY CHILDHOOD NEEDS ASSESSMENT DESIGN: DESIGN TWO STUDY PARAMETERS**

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Design Two will focus on service organization and the delivery of early childhood services in AI/AN communities. In this design, service organization refers to the entities, management, resources, and other elements that are necessary to operate programs, whereas service delivery refers to what services are delivered, which children and families receive them, and how the services are provided. The goal of Design Two is to provide information on these two domains, focusing on a subset of AI/AN communities and the programs within them. This sample will not be nationally representative of all AI/AN communities. To provide a picture of early childhood services in AI/AN communities, Design Two will require the collection of new data. Similar to Design One, the overarching goal of Design Two is to inform future decisions and study designs for an AI/AN early childhood needs assessment.

This chapter begins with a list of Design Two’s key research questions, followed by a description of the population of interest: tribal communities with and without funding from ACF. The chapter then presents key measurement considerations and identifies indicators that will be used to address each research question. The chapter concludes with a discussion of the outcomes that Design Two could yield.

##### **A. Design Two research questions**

Design Two focuses on early childhood services delivered to children and families within AI/AN communities. As true for Design One (Chapter III), the main services that these programs offer include one of the following:

- Nonparental child care, including home- and center-based care<sup>16</sup>
- Early education that fosters school readiness
- Home visiting services to support parents in raising their children

The services offered by these programs may include education, health, nutrition, physical, emotional, and social services as well. A program may also offer more than one service—for instance, providing center-based child care and also assessing children’s height, weight, and social-emotional skills to determine the need to refer parents to outside providers. However, a program or provider that does not primarily address at least one of the three services listed above would not be included in this study. For example, health care providers who provide primary care to AI/AN children but do not do so under an early care and education or home visiting program would not be considered an early childhood service provider as defined above.

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<sup>16</sup> This includes “informal care,” defined generally as unregistered or unlicensed care (that is, care provided by an unlicensed neighbor or babysitter).

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Design Two focuses on *direct* service providers. This design would gather information on whether these providers attempt to connect families with other service providers (indirect providers) and, if so, the types of services that these indirect providers offer. However, this design does not include studying the indirect providers in detail.

Design Two would be implemented in three stages: (1) identifying programs and sources of information, (2) assessing service organization, and (3) examining the quality and delivery of services. Each stage has its own set of research questions, building upon the information collected from the previous stage. The first stage—identifying programs and potential data sources within communities—is necessary before moving to the next stages, which require contact with the programs. The second stage involves seeking high-level data from the programs on how their services are organized. The programs could be managing entities, like an ACF grantee or tribal leadership. The third stage, focused on service delivery, involves on-the-ground outreach to providers. Each stage relies primarily on new data collection, as the extent to which these questions can be answered by existing data sources will likely vary.

The key research questions related to *identifying programs and data sources* include the following:<sup>17</sup>

1. What is the supply of early childhood services in AI/AN communities? Who provides these services?
2. Whom do programs serve (or not serve)? Are there particular groups that are underserved?
3. Does the demand for services exceed the supply?

The key research questions related to *service organization* include the following:

4. How do programs determine whom to serve?
5. What resources (both funding and in-kind) are used to support programs' early childhood services?
6. How are services organized or coordinated across agencies or service types?

The key research questions related to the *quality and delivery of services* include the following:

7. What services are delivered?
8. How are services delivered?
9. Do programs have the staff they need? What are the qualifications and credentials of the workforce? What structures are in place to support staff (such as professional development)?
10. What is the quality of the services?

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<sup>17</sup> These Design Two research questions overlap with the Design One questions. Design One would involve answering these questions using existing national data sources, whereas Design Two would build upon Design One findings and draw on new data to understand services at the *local* level.



11. What restricts and what promotes the accessibility of these services to AI/AN children and families? Are AI/AN children and families comfortable accessing services? If not, what are the challenges?
12. Are services able to address child and family needs in a culturally and contextually appropriate way? Do the services and their delivery take into account the diverse ethnic, cultural, and linguistic needs of communities? Do the services and their delivery take into account the community context?

## **B. Design Two population of interest**

This design will seek to paint a comprehensive picture of services at the local level, focusing on a subset of tribal communities and the programs within them. Building on the framework outlined in Chapter II, the Design Two research questions will address the early childhood services available to ACF-funded early care and education or home visiting tribal grantees as well as to tribal communities not receiving ACF funding (Appendix Figure B.1). At the highest level, the design would include three different types of communities:

1. Tribal communities with ACF funds
2. Tribal communities that applied for ACF funds but did not receive them
3. Tribal communities that did not apply for ACF funds

Within those communities, Design Two seeks to understand who is served, including AI/AN and non-AI/AN children and families, and how. Therefore, the programs and providers of interest are those that serve at least one AI/AN child or family.

Participating communities would be selected based on certain community characteristics to ensure diversity in the Design Two sample. Appendix Figure D.1 shows the characteristics that might be used for this purpose. Across all three groups of communities, communities from *different geographic regions or states* should be chosen. For tribal grantees with ACF funds, there is particular interest in which ACF early care and education or home visiting *funding streams* their community has (Head Start/Early Head Start, CCDF, and MIECHV). Therefore, communities with one, two, or three funding streams could be chosen. Within each of the three key sampling groups, communities would be chosen from two locations: *tribal lands* and *urban tribal communities*. Additionally, within communities on tribal lands, the sample would include communities that are and are not *geographically isolated*. Among urban tribal communities, variability is desired in *AI/AN concentration* and *the presence of urban tribal organizations* in order to understand the impacts of these factors on service organization and delivery. To ensure diversity in the information collected, the Design Two sample design would ideally include at least two communities that have each combination of characteristics shown in Appendix Figure D.1.

These key characteristics require further definition before they can be used to select communities for the Design Two sample. We offer options for how they might be defined in the sections that follow. Additional prioritization of these characteristics may be required depending on the study design stage and the level of resources available.

## 1. Geographic diversity

Across all three key groups (tribal communities with ACF funds, tribal communities that applied for ACF funds but did not receive them, and tribal communities that did not apply for ACF funds), the Design Two sample should represent the geographic diversity of these communities either across regions or states, including Alaska in particular.

## 2. ACF funding pattern

For tribal grantees with ACF funds, ACF is especially interested in the services found in communities with various sources of ACF funding (Head Start/Early Head Start, CCDF, and MIECHV) and combinations of these funding streams. Design Two would include tribal communities based on the number and type of ACF funds received by that community.

## 3. Tribal lands

A subset of communities in each sampling group should be from tribal lands, which could be defined in different ways based on geographic location or boundaries. In some studies, such as the American Indian Services Utilization, Psychiatric Epidemiology, Risk and Protective Factors Projects (AI-SUPERPPF), researchers have used the reservation boundary and then extended it by a certain mileage (for example, a 50-mile ring) to define a tribal land. Another option would be to use Census Bureau AI/AN areas: American Indian reservations and trust lands, tribal jurisdiction statistical areas, Alaska Native regional corporations, Alaska Native village statistical areas, and tribal designated statistical areas.

AI/AN density could be another important feature to consider when defining tribal lands, as about 70 percent of the population within the 2010 Census AI/AN areas is not AI/AN.<sup>18</sup> Given ACF's primary interest in tribal children and families, to capture the majority of AI/AN children and families, the sample design could set a criterion by number or density, using the 2010 Census to do so.

**Geographic isolation.** The sample should include communities on tribal lands that are geographically isolated as well as those that are not. Geographic isolation might be defined using the Census Bureau categorization of "rural areas" or by some other threshold, such as the National Center for Education Statistics' (NCES) urban-centric locale categories (NCES 2015).

## 4. Urban tribal communities

The three key community or sampling groups should include urban tribal communities. There are two options for identifying these communities: by the presence of an urban tribal organization or by AI/AN concentration. For the first option, Design Two could look for urban tribal community organizations such as an Urban Indian Health Center, members on the National Council of Urban Indian Health, or organizations tied to the National Urban Indian Family Coalition. The design could identify urban tribal communities based on whether a community has such an organization, and then delineate the community based on how each organization defines those it serves. For example, if an urban tribal organization in Los Angeles focuses on

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<sup>18</sup> There is likely a great deal of variation behind this statistic; one next step would be to work with 2010 Census data to explore this further.

AI/AN individuals in the Los Angeles and metropolitan area, that would be the definition of the community boundary.

For the second option, the design could use 2010 Census data to identify cities with the largest AI/AN populations and then define communities based on the number or proportion of AI/AN people who live in those cities. Decisions regarding the sampling strategy must take this into account, since focusing on number versus percentage of AI/ANs would yield two different groups of cities.

Some combination of the two options for defining a community would likely be appropriate, given that variability on the two key characteristics—presence of an urban tribal organization and the concentration of AI/ANs—may affect service organization and delivery. Nearly all of the communities with a high concentration of AI/ANs, based on information published from the 2010 Census (Norris et al. 2012), have urban tribal community organizations in their community, based on a list of urban tribal organizations provided by ACF. Some urban communities may have a lower concentration but still have urban tribal community organizations; these communities may be of interest for Design Two as well.

### **C. Design Two measurement approach: indicators, sources, and data collection methods**

Design Two will primarily rely on new data to develop a number of the indicators needed to answer each research question. Appendix Table D.1 matches Design Two research questions with indicators that might be used to answer them.<sup>19</sup> This list is extensive but not exhaustive, reflecting some initial priorities from the planning process. The indicators are intentionally broad and are meant to provide guidance on the types of information to look for when deciding which sources to ask and data collection methods to use. For example, the Stage One research questions (on identifying programs and data sources) could be answered by looking at indicators of the supply of services, such as the number of early childhood providers, and child demographics of enrolled children, such as age and race/ethnicity. The Stage Two questions (on service organization) might be answered by looking at indicators of funding streams, such as the pattern of ACF funding and other resources in the community, and indicators of service organization across agencies, such as partnership agreements and the extent to which children and families are linked and referred to services. The Stage Three questions (on the quality and delivery of services) might be best answered by looking at indicators of service provision, such as the types of services provided; indicators of program mode, such as whether the program is home- or center-based; and indicators measuring staff qualifications, facilities, and the program environment. This design will ultimately need to consider the feasibility of collecting information on such indicators.

Given that Design Two will need new data to answer the research questions, we have listed in Appendix Table D.1 some potential sources for information on the indicators of interest, as well as how this information might be obtained from them. Sources could include parents, community leaders, program administrators, or secondary data sources; information might be obtained from them through focus groups, interviews, surveys, or document reviews. Each of

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<sup>19</sup> These indicators are based on those developed in Appendix Table B.1.

these approaches would have varying levels of cost associated with it. In addition, each may require piloting to confirm the best source for a particular set of research questions, depending on available data collection protocols and tools.

#### **D. Design Two outcomes**

*The primary outcome of exercising Design Two would be a description of the services in AI/AN communities.* Once developed, Design Two would provide information on the available services and the populations served, how services are organized, and how they are delivered. Simultaneously, implementing the design would result in a description of processes necessary to conduct local data collection. A process study report would identify what information is available locally and how to collect it. This would also include which data collection tools to use and the best source of the information.

## V. AMERICAN INDIAN AND ALASKA NATIVE EARLY CHILDHOOD NEEDS ASSESSMENT DESIGN: DESIGN THREE STUDY PARAMETERS

Design Three will focus on assessing key features that are required to support AI/AN community capacity for conducting early childhood needs assessments. More specifically, Design Three aims to better understand the support processes and resources required to build local capacity so that AI/AN communities will be equipped to do their own needs assessment. Similar to the other two designs, the focus of Design Three is on early childhood services delivered by AI/AN programs whose key mission is nonparental child care, early education, and/or home visiting. The services offered by these programs can include education, health, nutrition, physical, emotional, and social services. Design Three focuses on the community level and would require new data collection.

Figure V.1 below is a visual representation of the varying levels at which needs assessments and engagement within communities likely exist. Design Three would focus on assessing the needs of communities as a whole (the outer ring). That is to say, it will zero in on how a community organization collects information to understand its members, their needs, and available services across all early childhood settings. The focus is not on how direct service providers determine and individualize services for those they serve.

**Figure V.1. Levels of community needs assessments**



The data collected in Design Three would inform future efforts for building local-level capacity for conducting needs assessments. To maximize efficiency and validity, the design would use a purposeful sampling strategy to identify a subset of tribal communities to study. Because we expect experience with conducting needs assessments will vary, we want to include communities with differing levels of experience. For the purposes of this design, our definition

of needs assessment includes any efforts undertaken to understand community needs, whether formal or informal. Formal efforts to assess community needs would include systematic data collection (for example, a planned survey of AI/AN early childhood service providers to gather data on education, health, nutrition, and social service needs of Head Start-eligible children and their families) and analysis of information on particular characteristics and needs specific to a community for the purpose of informing program design and service delivery. Formal assessments might include those required by outside funding agencies or those that tribal communities initiate internally. Informal efforts would include information gathered through less structured means, such as administrative meetings, tribal council meetings, anecdotal feedback from community members, or other methods.

This chapter begins with a list of key research questions for Design Three, followed by a description of the population of interest: tribal communities with and without funding from ACF. The chapter then presents key measurement considerations for answering the research questions, including potential sources of information for each question; it concludes with a discussion of the outcomes that Design Three could yield.

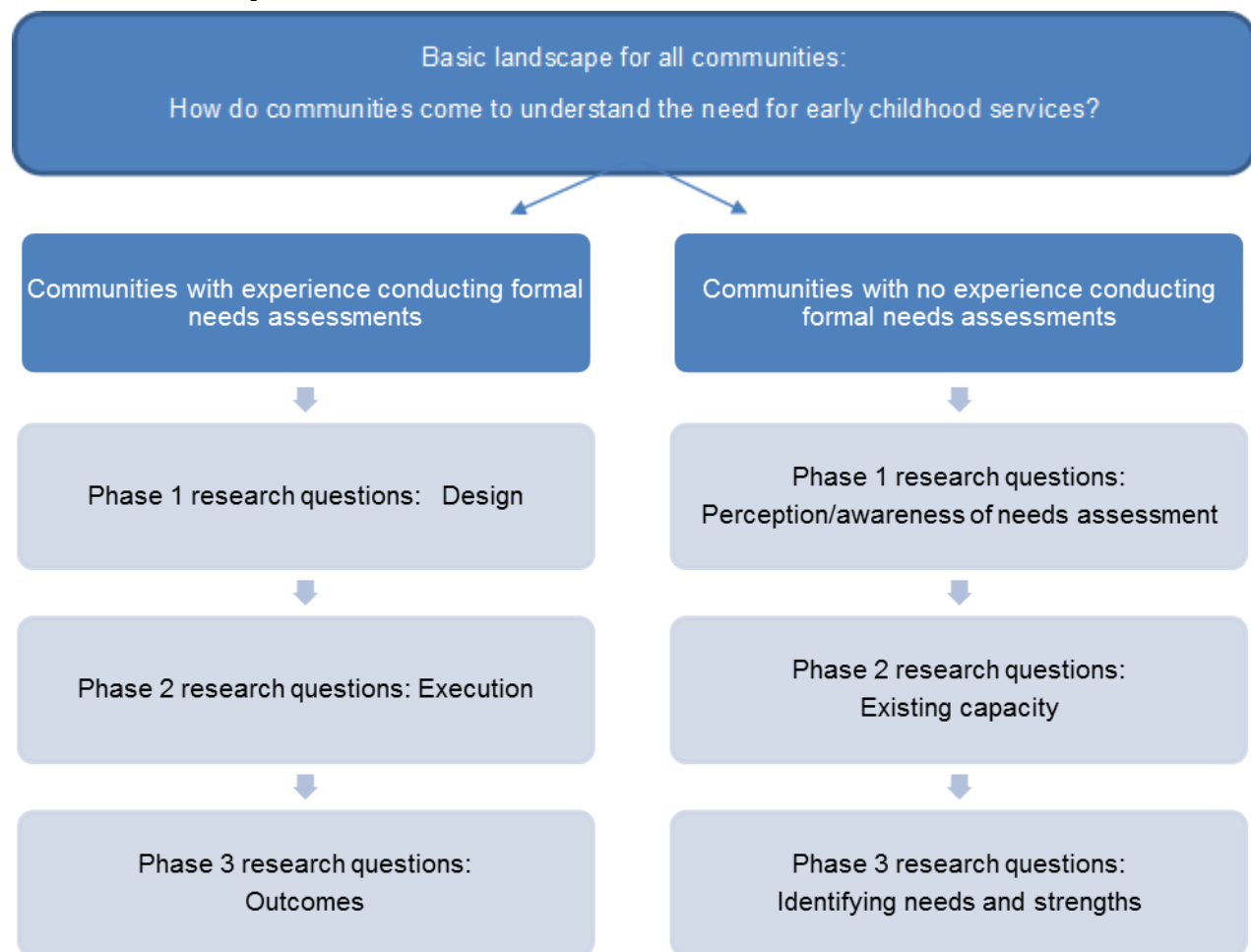
### **A. Design Three research questions**

Communities may or may not have experience conducting needs assessments, so two different blocks of questions are necessary depending on their experience (Figure V.2). Once experience with needs assessments is understood, this will provide a clear indication of the capacity for carrying out needs assessments at the community level, thereby suggesting what support processes and resources would be required to build local capacity in communities without experience conducting a needs assessment.

The level of a community's experience with conducting needs assessments will ultimately determine what concepts we want to understand and questions we want to ask. For communities that have experience conducting formal needs assessments, Design Three research questions are organized according to the three phases of a needs assessment: design (how communities prepare to conduct a needs assessment), execution (how communities conduct needs assessments), and outcomes (how communities analyze and use the information gathered to address needs). For communities that have no experience conducting formal needs assessments, the research questions deal with community readiness, and address perception and awareness of needs assessments, existing capacity, and identifying needs and strengths (Figure V.2).

Both question sets explore similar topics so that we can gain a better understanding of community-level capacity, need, and processes surrounding conducting assessments. For example, both question sets will address tribal communities' barriers to and facilitators of conducting needs assessments, education and TA related to conducting a needs assessment, resources needed to conduct a needs assessment, and existing data within the community that could inform a needs assessment. The research questions that follow provide a conceptual landscape of the key topics of interests. Section C below offers supporting detail on how these research questions will assess information on these concepts and topics and support future development of data collection protocols.

**Figure V.2. Design Three research questions by community needs assessment experience**



### 1. Research questions for communities with experience conducting formal needs assessments

The first set of research questions, Phase 1, focuses on how communities organize and decide what to assess, how they prepare to conduct the assessment, and what information they might collect. The research questions related to the *design* of needs assessments include the following:

1. How do communities prepare and organize their needs assessment?
2. How do communities determine what the needs assessment will include?
3. What current data do communities have (reporting sources, such as IHS, National Indian Child Welfare Association [NICWA], and/or state data systems)? How are data used, specifically as they relate to informing a needs assessment?
4. How do communities know whom to serve?
5. How do communities address service capacity and tracking services?

6. What are the key indicators of existing capacity for conducting needs assessments?
7. How is community/organizational readiness to perform needs assessment defined?

The second set of research questions, Phase 2, centers on how communities actually conduct needs assessments, and it includes a subset of questions related to evaluation and/or TA. The key research questions related to *the execution* of needs assessments include the following:

8. What are the agencies and entities that perform local needs assessments at the community level?
9. How similar or varied are community and evaluation and/or TA approaches in the preparation and training for conducting needs assessments?
10. What training, education, and TA related to performing needs assessments are currently available within communities as well as externally?
11. How do communities get engaged with evaluators and/or TA providers?
12. What type of evaluation and/or TA do communities prefer or perceive they need?
13. What is the level of community and provider collaboration during the evaluation and/or TA process? Do evaluation and/or TA address needs in a culturally appropriate way?

The third set of research questions, Phase 3, focuses on how communities use the information gathered, including how it is processed, analyzed, and reviewed. The key research questions related to the *outcomes* of needs assessments include the following:

14. How do communities define success? What are key variables and indicators of success from the community perspective?
15. What does “met needs” look like in AI/AN communities?
16. How do communities assess for quality and perception of services? Is the information sustainable and does it bolster nation-building efforts?
17. How do communities process, review, analyze, and use the information gathered by a needs assessment?
18. What are the products of the needs assessment?

## **2. Research questions for communities with no experience conducting formal needs assessments**

The first set of research questions, Phase 1, address community perception, awareness, and understanding of needs assessments. The key research questions related to *perception/awareness* of needs assessments include the following:

1. What are the communities’ current goals and how can a needs assessment help them achieve their vision?
2. Why have communities not conducted a needs assessment?



3. What are communities' understanding of the purpose of a needs assessment?
4. Is there organizational or tribal interest in conducting a needs assessment?

The Phase 2 questions address community capacity and potential barriers or supports that might impact ability to conduct a needs assessment. Key research questions related to *existing capacity* include the following:

5. What barriers to conducting a needs assessment are present?
6. Do communities have the infrastructure to execute a needs assessment?

The final set of questions, Phase 3, address the potential identification of community needs and strengths. Key research questions related to *identifying needs and strengths* include the following:

7. What do communities believe they need, in order to do a needs assessment?
8. If education and TA are needed, with whom do tribal communities feel comfortable partnering?
9. What community strengths can be utilized to prepare for a needs assessment?
10. What current data do communities have (such reporting sources as IHS, NICWA, and/or state data systems) and how might they be used to inform a needs assessment?

## **B. Design Three population of interest**

The Design Three population of interest will mirror that of Design Two (Chapter IV): tribal communities. This population includes:

1. Tribal communities with ACF funds
2. Tribal communities that applied for ACF funds but did not receive them
3. Tribal communities that did not apply for ACF funds

Participating communities would be selected from each of the three groups listed above to ensure community-characteristics diversity in the sample. As in Design Two, communities from *different geographic regions or states* should be chosen across all three sample groups (see Appendix Figure E.1). For tribal grantees with early care and education or home visiting ACF funds, there is particular interest in which *ACF funding streams* their community has (Head Start/Early Head Start, CCDF, and MIECHV). Therefore, communities with one, two, or three funding streams could be chosen. Within each of the three key community or sampling groups, communities would be chosen from two locations: *tribal lands* and *urban tribal communities*. Additionally, within communities on tribal lands, the sample would include communities that are

and are not *geographically isolated*.<sup>20</sup> Among urban tribal communities, variability is desired in *AI/AN concentration* and the presence of *urban tribal organizations*.<sup>21</sup>

Because of the likely variation in communities' familiarity with and knowledge of how needs assessments are conducted, *experience level* is an additional characteristic to consider in Design Three. Tribal experience with identifying needs, and their degree of understanding about needs assessments vary; Design Three would capture this spectrum of experience by including communities that have conducted a needs assessment (either formal or informal) and those that have not. Experience level would be an overarching characteristic across all communities.

Communities with no experience conducting needs assessments might be identified in Design Two. However, additional strategies for identifying these communities might include contacting tribes directly, tapping into tribal networks and organizations, and identifying research consortiums and/or institutes that work with tribal communities that could provide insight into a community's experience with conducting needs assessments. Such organizations might include but are not limited to the National Congress of American Indians (NCAI), the National Indian Child Welfare Association (NICWA), the National Indian Education Association (NIEA), and the National Indian Health Board (NIHB).

To ensure diversity in the information collected, the Design Three sample design would ideally include at least two communities with each combination of characteristics shown in Appendix Figure E.1. For example, one such combination is tribal communities that did not apply for ACF funds, are in urban locations, and have a high concentration of AI/AN individuals and an urban tribal organization. Another combination could be tribal communities that applied for ACF funds but did not receive them, are located on tribal lands, and are not geographically isolated. Additional prioritization of these characteristics and combinations may be required, depending on the research questions and the level of resources available.

### **C. Design Three measurement approach: associated research questions, informants, and data collection methods**

Design Three would use a staged data collection process that includes several data sources to collect new information. We recommend a combination of focus groups and interviews alongside surveys. In some instances, document review would be necessary. For example, research questions that seek to better understand existing data that tribal communities have, which might inform a needs assessment, would benefit from such a review. Each data collection approach would have costs associated with it. Moreover, any new questions might require pilot testing to confirm which data collection techniques (focus groups or individual interviews) tribal communities prefer.

Appendix Table E.1 identifies each Design Three research question along with associated questions for communities with experience conducting a formal needs assessment. Associated

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<sup>20</sup> As mentioned in Chapter IV, geographic isolation may be defined using the Census Bureau categorization of "rural areas" or by some other threshold, such as the NCES urban-centric locale categories (NCES 2015).

<sup>21</sup> See Chapter IV for additional details and explanations regarding these characteristics and the population of interest.

questions expand upon the conceptual foundation of the research questions and are related to the individual community. As such, the associated questions are meant to provide additional details or depth on the types of information that will ultimately shed light on key features and processes needed to support AI/AN community capacity for conducting needs assessments. The associated questions are extensive but not exhaustive, reflecting some initial priorities from the planning process that included input from the CoL. If exercised, Design Three future design work would involve creating a protocol to address specific research objectives outlined in this report. The associated questions presented serve as a starting point.

Phase One (design) associated questions reflect the need to further explore how communities prepare, organize, and gather information in preparation for conducting a needs assessment. Phase One-associated questions also allow an examination of current data tribal communities might have that could inform a needs assessment.

Phase Two (execution) associated questions explore how a needs assessment is conducted, along with related evaluation and/or TA processes. Within the context of this design, evaluation would include compiling, processing, and writing up key information, which may be done internally by the tribe or by an outside evaluator. TA processes, on the other hand, focus on support and advice from an individual or an organization on a more topical level rather than actually conducting the needs assessment. Phase Two-associated questions seek to understand existing tribal community processes in executing the needs assessment. The associated questions here also aim to inform and identify future needs for evaluation and TA processes that are culturally relevant and appropriate. This line of questioning addresses community engagement, collaboration, and inclusion of indigenous ways of knowing, before, during, and after the execution of a needs assessment.

Finally, Phase Three (outcome) associated questions target how tribal communities use, process, analyze, and review information once it is collected through a needs assessment. Phase Three-associated questions hone in on community-level indicators of success and needs assessment outcomes that incorporate a need to honor and explore sustainability and nation-building efforts throughout tribal communities.

In Appendix Table E.1, we outline the measurement approach for communities with formal needs assessment experience in terms of the data collection procedures and potential sources for each of the Design Three research questions. High-level program administrative sources are the primary source for all of the research questions. High-level sources could include program management and administrators at the grantee level with access to administrative data and knowledge of program finances. Depending on the question, these sources might include center directors with similar access and knowledge; however, some follow-up questions could be asked of secondary sources, such as AI/AN community leaders and elders, AI/AN families or community members, on-the-ground staff and administrators (for example, a center director or a family child care professional), and evaluators and/or TA providers affiliated with tribes. The same logic applies to Phase Two and Phase Three research questions: the best way to answer the research questions in both phases might again be to conduct interviews and/or surveys with high-level administrators, following up with secondary sources when needed.

In Appendix Table E.2, we present the measurement approach for communities with no experience conducting a formal needs assessment. Similar to Appendix Table E.1, we outline the associated questions to serve as guideposts for the types of information needed to understand key features and processes that may support AI/AN community capacity for conducting needs assessments. Research questions and associated questions for this group of communities are aimed at understanding community readiness, such as the communities' current goals and their perception of whether a needs assessment can help them achieve their vision. Ideally, the primary sources and type of data collection for communities without experience conducting a needs assessment would mirror communities with experience. However, if communities are not conducting formal assessments or receiving ACF funding, identifying the best source could be difficult. As a starting point, data collection staff would reach out to tribal governing bodies, tribal leaders, or local tribal organization administrators who might have knowledge of efforts geared toward understanding the community's needs and of the individuals and organizational components who are involved in these efforts.

#### **D. Design Three outcomes**

The overarching goal of the three design topics is to gather information in order to inform future decisions and study designs toward an AI/AN early childhood needs assessment. However, *the primary outcome of exercising Design Three would be a report describing the processes and resources required to build capacity in AI/AN communities* so that they are equipped to assess the early childhood needs of children and families in their communities, which could then support future evaluation and TA efforts. An intended future by-product of these efforts is bolstering tribal sovereignty through nation building. As processes become better understood and local tribal capacity is built, so too is the community's ability to identify and intervene on issues specific to their tribal nations. In other words, understanding and building capacity in sustainable ways is an exercise of sovereignty and effective governance, that allows tribes to advocate for themselves in Congress or locally. In this manner, communities would be able to identify community needs, strategically plan, and enhance services provided in ways that are culturally specific and sustainable. Additionally, key stakeholders in tribal communities have expressed a need for data and research related to building local capacity. Such interests and trends are highlighted by The Tribal Early Learning Initiative (TELI), launched in 2012 by ACF to support activities aimed at developing coordinated and seamless systems of support for early childhood services in AI/AN communities, and this would include establishing sophisticated and integrated data systems (Tribal Home Visiting 2012). Further, a recent (2015) grant won by the NCAI Policy Research Center and sponsored by the NSF, titled "Using Science to Build Tribal Capacity for Data-Intensive Research," highlights an ongoing movement to improve tribal data quality and capacity for data-intensive research across tribes and federal agencies (NCAI Research Center 2015).

Furthermore, Design Three, if executed, could help inform the structure and content of needs assessments for grantees required to conduct them, thereby giving communities the means to better identify and address specific needs. By targeting a diverse sample, Design Three would identify the processes by which communities identify their needs, allowing for the possibility of tailoring funding, shaping outreach, and providing guidance for communities that have not conducted a needs assessment. Additionally, a process study report will identify the best practices for conducting needs assessments with AI/AN communities, including key information

on design, execution, and the outcomes of preparing for and conducting needs assessments (including important links to TA and training). The report could also inform future federal evaluation and TA strategies. Beyond the report, information on best practices and lessons learned could also be disseminated in accessible ways. One such method could include the creation of topical webinars that focus on the various phases of conducting a needs assessment and how to identify and use data. Briefs could also be created to highlight key findings and convey concise pragmatic ideas surrounding best practices for conducting needs assessment in tribal communities. Graphics and other multimedia tools could underscore the utility of findings in the report. Further, the study report could include the development and refinement of instruments, as well as refined data collection procedures (including how to administer and to whom), with the potential for use in informing similar process studies.

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## VI. SUMMARY OF KEY FEATURES AND FUTURE CONSIDERATIONS

This report outlines a series of design topics for future studies that will inform a national assessment of the unmet need for early childhood care, education, and home visiting services (prenatal through age 5, not yet in kindergarten) in tribal communities. The project focuses on the necessary building blocks to understand the need for services supporting child and family well-being in AI/AN communities that are currently receiving federal funds from ACF and in those that are not currently receiving those funds. We developed an overarching framework (Chapter II) underlying each design topic: the population of interest and the definitions of early childhood needs, services, and indicators. This framework guided the development of three design topics identified by ACF (Chapters III-V). In this chapter, we provide a summary of key features and future considerations for those designs.

### A. Summary of key features

To support a future AI/AN early childhood needs assessment, we developed three design topics of greatest interest for potential future study:

- Describing the population of AI/AN children and families and their participation in early childhood services based on existing data sources. (Design One, Chapter III)
- Understanding service organization and delivery systems in AI/AN communities, including the current number of children served and not served, workforce capacity, and cultural resources. (Design Two, Chapter IV)
- Assessing key features needed to support AI/AN communities' capacity for conducting early childhood needs assessments for future training and technical assistance. (Design Three, Chapter V)

The overarching goal of Design One is to understand the need and unmet need for early childhood services. Design One focuses broadly on AI/AN children and families and seeks to provide a national picture of AI/AN children's and families' strengths and needs; their participation in early childhood services (that is, early care, early education, and home visiting); and the early childhood programs that serve them. It seeks to identify and create a number of indicators to answer a set of research question, drawing upon existing data sources to do so. The primary outcome of Design One would be a rich description of the AI/AN population and those who provide early childhood services to this population.

Whereas Design One is considered a "base" or foundation to understand the AI/AN population of children, families, and programs across the United States, Design Two will hone in on the services themselves, filling important gaps about early childhood services that existing data sources are unlikely to capture. The overarching goal of Design Two is to understand how services are organized and delivered in AI/AN communities (both those on tribal lands and urban tribal communities). Design Two focuses at the community level to paint a picture of the programs within AI/AN communities. It seeks to identify and create a number of indicators to answer a set of research questions about early childhood services in AI/AN communities that are and are not currently receiving funds from ACF, drawing upon newly collected data to do so. It would take a staged approach to (1) identify programs and data sources, (2) assess service

organization, and (3) examine the quality and delivery of services. The primary outcome of Design Two would be a description of the services in AI/AN communities, while also compiling a rich description of the processes necessary to conduct local data collection.

Although Design Two hones in on early childhood services themselves, filling important gaps in what we know about these services that existing data sources are unlikely to provide, Design Three focuses on the processes necessary to support communities as they conduct their own local needs assessments. The overarching goal is to provide a comprehensive view of the complexity of community need and the factors that influence capacity and ability to conduct needs assessments in AI/AN communities. Design Three would offer an in-depth description of what communities are doing to assess programs, identify priorities, and organize services, which would include assessing what community members need and want from services. It would consider both informal and formal needs assessments and include AI/AN communities with and without experience conducting formal needs assessment. It seeks to gather information to answer a set of research questions on AI/AN communities' experiences conducting needs assessments, if at all. Design Three would assess each of three phases of needs assessment: (1) design (how communities prepare to conduct a needs assessment), (2) execution (how communities conduct needs assessments), and (3) outcomes (how communities use the information gathered to address needs). The primary outcome of Design Three would be a report describing the processes and resources required to build capacity in AI/AN communities so that they are equipped to assess the early childhood needs of children and families in their communities, which could then support future evaluation and TA efforts.

## **B. Future considerations**

The design options presented here reflect an initial stage of planning, identifying priorities in the research questions, population of interest, and measurement approaches. Future study design work is needed to implement any of these designs. In particular, the following considerations have been identified for future planning and implementation of the three study design topics.

**Identify data sources and their limitations.** The execution of Design One will require additional identification and evaluation of data sources and more specification of study definitions and indicators. The tables presented in this report (for example, Appendix Tables C.2 through C.6) provide an initial assessment of the alignment between existing data sources and the key topics and questions of interest. Therefore, a next step would be to conduct a thorough review of the data sources to determine the extent to which available data are useful for addressing the research questions. One consideration in selecting data sets is determining whether it is possible to identify AI/AN children (in some studies AI/AN individuals are grouped with other racial groups). Another consideration in sample-based studies is to ascertain whether there is a large enough number of AI/AN children and families to support separate reporting with accuracy. In national data sets, the AI/AN sample size is generally too small to report on separately. Other data sets may have large enough samples for separate reporting if AI/AN children and families have been oversampled. An additional consideration in selecting data sets is content coverage. Data sources will vary in how many indicators they can support. There is no one data source that can be used to describe the full AI/AN population; capture its diversity; describe its participation in early care, early education, and home visiting programs; and that includes information on the programs and services that are available to children and families.



Additionally, the same characteristics of AI/AN children and families may be measured in different ways across data sources. Service participation may also be defined differently. Therefore, future design will need to consider advantages and disadvantages of each data source, including the AI/AN sample size, the number of indicators of interest within the data source and how well each indicator is operationalized.

**Further refine the sample design.** While Design One aims to understand the entire AI/AN population across the United States, Designs Two and Three will select as their focus a subset of tribal communities (i.e., those on tribal lands or urban tribal communities). Report Chapters IV and V, which outline Design Two and Three, respectively, discuss characteristics that might be used to ensure the communities selected represent the diversity of the tribal populations. For example, geographic isolation is a characteristic of interest for both Design Two and Design Three and may be defined using the Census Bureau categorization of “rural areas,” or it might be defined by some other threshold, such as the National Center for Education Statistics’ (NCES) urban-centric locale categories (NCES 2015). Of particular importance for Design Three is the inclusion of information about communities’ previous experience conducting needs assessments, and thus operational definitions of previous experience and needs assessments are required. While we have developed initial definitions for sampling characteristics in the design chapters, future work is needed to refine those definitions, identify a sampling frame, and determine a specific sample design (e.g., sample size).

**Outline a plan for working with communities.** Design Two research questions seek to ask community members for their perspectives on the services in their communities. Many Design Three research questions seek to understand processes around conducting needs assessment that bolster nation building, community engagement, and meaningful collaboration with tribal communities whereby attention is paid to both scientific and cultural rigor. Adhering to the tenets of Community Based Participatory Research (CBPR) is of utmost importance when working with and engaging tribal communities on both of these designs. CBPR fosters community engagement with research throughout the study process and facilitates meaningful and equitable relationships (Tribal Evaluation Workgroup 2013). Great attention should be paid to approaching and developing partnerships with tribal communities in culturally sensitive ways that recognize and respect the unique sovereign status of tribal nations. Other key strategies when partnering with tribes include working with them to conduct an initial assessment of available information to minimize burden, providing incentives for their participation, and honoring respective knowledge bases to ensure that researchers and tribal communities are engaged in a process of learning and knowledge exchange.

**Develop data collection protocols.** Because Designs Two and Three rely primarily on new data, additional work is needed to prepare to conduct data collection on programs within tribal communities and their capacity to conduct needs assessments. For example, given Design Two aims to understand services and programs available in tribal communities, more information is needed on whether a reliable list of early childhood providers can be obtained, whether tribal data are available on providers and services, and who is the best source for these data. Future work would also fine tune the Design Three data collection protocol and measurement approach that is outlined in Chapter V, with particular attention to the appropriate overlap in the questions asked in communities with and without experience with formal needs assessment. The Design Three measurement approach offers two sets of research questions and associated questions to

understand these two groups. The questions provide a landscape of key concepts and constructs to measure and are not intended to represent the full scope or potential order of an interview protocol. Although the research questions and associated questions are grouped into specific phases (design, execution, and outcomes), future work would focus on developing specific instruments (focus group or interview protocols, or self-administered questionnaires, for example) with attention to appropriate content, question order, and flow. Those who implement either of these two designs may need to pilot the data collection instruments and techniques and adjust them based on the lessons learned from such work. Piloting the data collection instruments and techniques would provide an opportunity to gain insight into approaches preferable to tribal communities and highlight methods that are efficient and reliable when used with diverse tribal communities.

**Cost and efficiency considerations.** The cost of executing these designs would depend on a number of factors, such as the data sources selected for analysis or the location and number of communities and respondents involved with any new data collection efforts. Because Design One relies exclusively on existing data sources, the cost of executing the design would depend on the number of data sources reviewed and used, the number of indicators that are available within published materials using these data sources, and the number of indicators that have to be developed working with the micro data. Further, the cost of accessing the data and extracting information on the key indicators will vary. Although some data sources already provide publicly available tabulations of the AI/AN population, other data sources group AI/AN individuals into an “Other” category, which would require additional manipulation and analyses to disentangle. In addition, although data on AI/AN children under age 18 may be available through published sources, special tabulations may be required to obtain information on the early childhood population (for example, AI/AN children ages 0–5 on tribal lands). Given that Designs Two and Three propose the same sampling approach, it would be most efficient to coordinate the data collection efforts of the two. Identifying and addressing points of overlap across the two design topics will be vital for ensuring efficient, rigorous, and cost-effective data collection.

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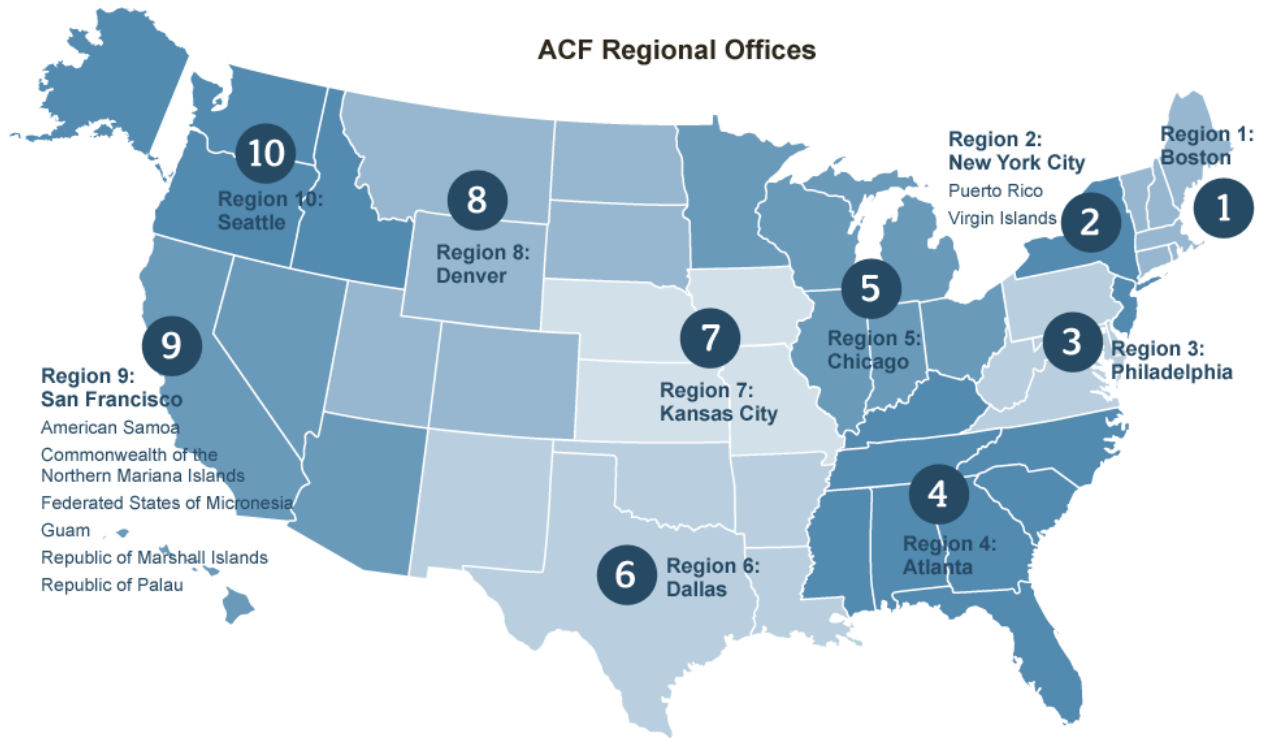
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**APPENDIX A**

**OHS REGIONS**

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**Appendix Figure A.1. ACF regional offices**

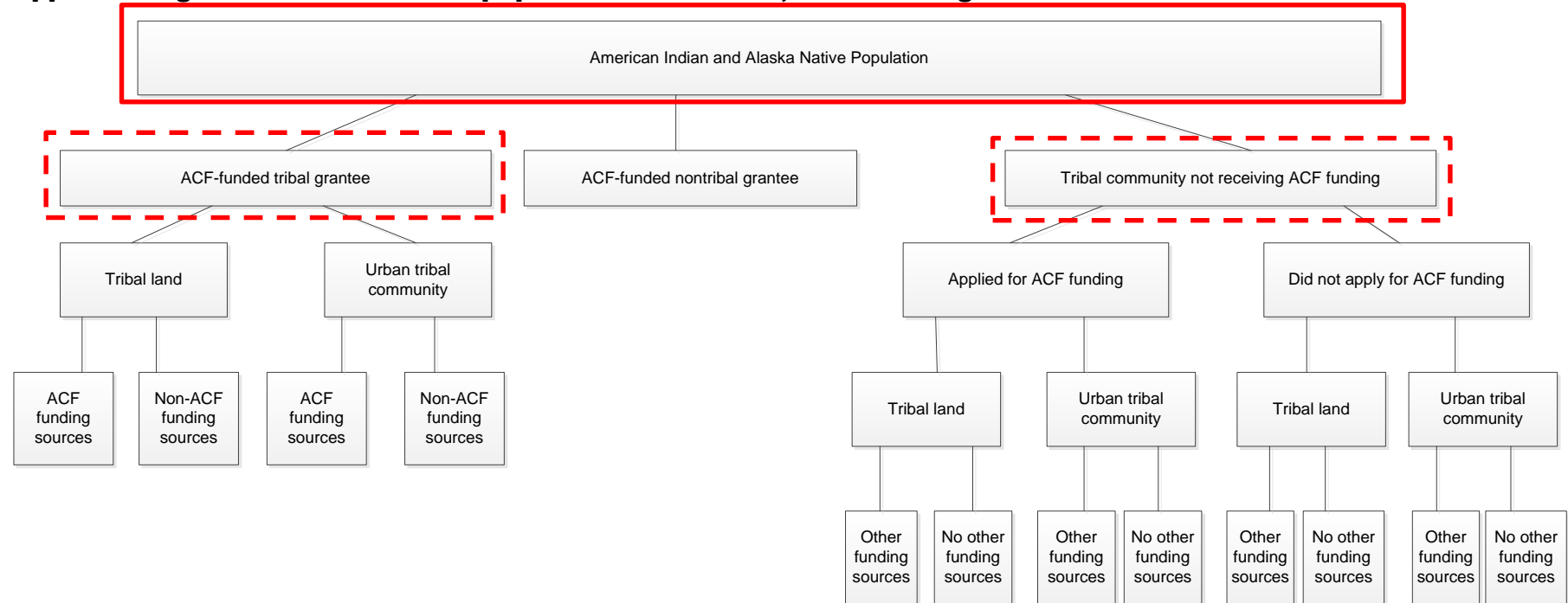
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## **APPENDIX B**

### **FRAMEWORK**

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**Appendix Figure B.1. Overview of population of interest, across designs**

Note: The solid red box denotes the population of interest for Design One.

The dashed red box denotes the population of interest for Designs Two and Three.

We are including AI/AN individuals, grantees, and communities located in the 50 states and the District of Columbia. Native Hawaiian or Pacific Islanders are not included as American Indian or Alaska Native.

Communities located on nontribal lands in nonurban areas have not been mentioned as a key interest to date. American Indian and Alaska Native children and families served by other communities (e.g., tribal land), may be included, regardless of where those individuals reside.

**Appendix Table B.1. AI/AN early childhood needs, services, and potential indicators, by target population**

Target population	EC needs	EC services	EC key indicators
Children (prenatal through age 5)	School readiness	Early care and education	Number of children ages 0–5 as context for demand
	Healthy child development	Home visiting	Number of early childhood program slots/home visit caseload as context for supply
			Number of children ages 0–5 on program's waitlist
			Early childhood program length
			Number of children with special needs
			Kindergarten screening and assessment scores
			Social-emotional screenings
	Healthy child development	Prenatal care	Birth outcomes, including prematurity and birth weight (healthy babies)
		Dental, physical, mental health care	Immunization status
			Child health insurance
			Regular health care provider
			Regular dentist
			Access to mental health services (mental health practitioners and clinics)
			Nutrition
	Culture and language connections	Services to support cultural and linguistic identities of child	Sense of belonging
			Access to native speakers, cultural coordinators, or other adults who can model traditions
			Availability and use of programs with teachers who speak native languages, immersion schools, and traditional medicines
Families (including extended family)	Family health and well-being: prenatal health	Prenatal care	Number of prenatal visits completed
			Number of births
			Adequacy of prenatal care
			Fertility rates as context for demand
			Parent and family health outcomes, including physical health, depression, drug and alcohol use
	Family health and well-being: physical health	Physical and dental care	Health insurance coverage
			Regular health care provider
			Regular dentist
			Parent report on continuity of and frequency of consultation with health professionals

Table B.1. (continued)

Target population	EC needs	EC services	EC key indicators
	Family health and well-being: mental health	Mental health care	Parent depression Access to mental health services (mental health practitioners and clinics) Whether or not alcohol is used in the home Whether or not tobacco is used
	Family health and well-being: spiritual health	Spiritual care	Partnership agreements Number of cultural teachings offered and parent report on connections to tribal community/families
	Access to a high-quality early childhood program	Community transportation services Public- and private-funded early childhood programs and providers	Knowledge about services to support child's development Funding, supply, and quality of transportation services Number of early childhood providers and ages served Proximity of providers to children/families Number of children in quality care
	Family self-sufficiency	Community transportation services	Funding, supply, and quality of transportation services Distance to services
		Employment programs	Parent employment Poverty rate for families with children under age 5 Poverty rate for all families
		Education programs	Parent education level Participation in adult and continuing education and job-training programs
	Parent-child relationship and family strengthening	Early care and education Home visiting Parenting workshops and programs	Formal and informal parent workshops/sessions on parenting available, including talking circles, parent cafes, visitors to an elder center, workshops for mothers and fathers Enrollment in workshops and parenting programs Number of home visits and content covered Levels of child maltreatment Positive parenting practices Domestic violence Out of home care, foster care placement Parent incarceration history Intensity of workshops/programs offered and participation
	Culture and language connections	Services to support cultural and linguistic identities of family	Cultural context included in family engagement activities Funding, supply, and quality of culturally congruent services
	Parent engagement	Supports for family as advocate	Family advisory councils/other leadership opportunities available

Table B.1. (continued)

Target population	EC needs	EC services	EC key indicators
Providers/programs			Sharing of knowledge of child's development with staff Knowledge about services to support child's development Any indication of parent-relationship building conducted by the program
		Family councils	Participation in family councils, communities of learning, parent support groups, father groups, and so on Learning experiences related to parenting and goals
	Early childhood workforce	Work conditions	Caseload Staff turnover
		Early childhood workforce professional development	Staff education, credentials, and experience Staff training opportunities Performance evaluation Staff compensation and benefits
	High-quality early childhood program	Standards and supports for structural and process quality	Quality ratings of early childhood services Staff education, credentials, and experience Program-level leadership and management Attendance level Child outcomes at school entry Program type/model Program operations and center resources Program eligibility requirements Pattern of ACF funding among AI/AN communities Number of regulated providers
	Capacity building to understand community context	TA	Data infrastructure: numbers to understand own target population (such as number of single parent families in community and number of immigrant families) Data infrastructure: numbers to understand program costs
	Parent and community engagement	Program environment	System of regular communication with families Cultural and linguistic responsiveness
		Community partnerships	Linkages and referrals to services Families as partners for identifying and achieving goals

Table B.1. (continued)

Target population	EC needs	EC services	EC key indicators
	Culture and language revitalization	Policies and programs (such as language immersion) Resources to assist in development and implementation of cultural/language revitalization programs across all EC education approaches	Program language use Partnership agreements Use of tribal language or cultural curriculum Number of tribal languages used Duration/percentage of program time spent in language or cultural activities (immersion sessions, and so on) Access to native speakers within a community
	Facilities	Construction, maintenance	Building condition (physical place) Space (adequate for target enrollment, limitations to expansion) Outdoor playground equipment

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## **APPENDIX C**

### **DESIGN ONE**

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**Appendix Table C.1. Design One research questions: key indicators with the potential to answer them**

Research question	Key indicators
<b>Research questions related to AI/AN children and families</b>	
1. How large is the population of AI/AN children ages 0–5?	1. Number of children ages 0–5 as context for demand
2. What percentage of AI/AN children reside on tribal lands, in urban tribal communities, or outside tribal lands?	1. Percentage of children ages 0–5 within a particular geographic location
3. What are key child and family characteristics in the AI/AN population that may indicate need for early childhood services?	1. Child and family health indicators <ol style="list-style-type: none"> <li>Number of prenatal visits completed</li> <li>Adequacy of prenatal care</li> <li>Immunization status</li> <li>Child health insurance</li> <li>Regular health care provider</li> <li>Regular dentist</li> <li>Access to mental health services (mental health practitioners and clinics)</li> <li>Parent health outcomes, including physical health, depression, drug and alcohol use</li> <li>Parent report on continuity of and frequency of consultation with health professionals</li> </ol> 2. Socioeconomic indicators <ol style="list-style-type: none"> <li>Parent employment</li> <li>Parent education level</li> <li>Poverty rate for families with children under age 5</li> </ol> 3. Indicators of need for social supports <ol style="list-style-type: none"> <li>Domestic violence</li> <li>Out of home care, foster care placement</li> <li>Parent incarceration history</li> </ol> 4. Child development indicators <ol style="list-style-type: none"> <li>Children with special needs</li> <li>Kindergarten screening and assessment scores</li> <li>Social-emotional screenings</li> </ol> 5. Indicators of culture and language connections <ol style="list-style-type: none"> <li>Sense of belonging</li> <li>Access to native speakers, cultural coordinators, or other adults who can model traditions</li> <li>Availability and use of programs with teachers who speak native languages, immersion schools, and traditional medicines</li> </ol>
<b>Research questions related to AI/AN child and family participation in and potential access to early childhood services</b>	
4. What are some of the characteristics of AI/AN children and families that may promote or limit their access to early childhood services and programs?	1. Indicators of service availability and access <ol style="list-style-type: none"> <li>Knowledge about services to support child's development</li> <li>Number of early childhood providers available to AI/AN children and families</li> <li>Proximity of providers to children/families</li> <li>Funding, supply, and quality of transportation services</li> <li>Funding, supply, and quality of culturally congruent services</li> </ol> 2. Indicators of parent need for early childhood services <ol style="list-style-type: none"> <li>Parent employment</li> <li>Poverty rate for families with children under age 5</li> </ol>

Table C.1. (continued)

Research question	Key indicators
5. How many AI/AN children and families receive early childhood services?	<ol style="list-style-type: none"> <li>Indicators of demand for services               <ol style="list-style-type: none"> <li>Fertility rates</li> <li>Number of births</li> <li>Number of children ages 0–5</li> <li>Number of children ages 0–5 years on program's waitlist</li> </ol> </li> <li>Indicators of service availability and supply               <ol style="list-style-type: none"> <li>Number of early childhood program slots/home visit caseload</li> <li>Early childhood program length</li> <li>Number of home visits and content covered</li> <li>Space (adequate for target enrollment, limitations to expansion)</li> </ol> </li> </ol>
6. What are the characteristics of AI/AN children and families who receive and do not receive services?	<ol style="list-style-type: none"> <li>Demographic indicators               <ol style="list-style-type: none"> <li>Race/ethnicity</li> <li>Primary language and tribal language</li> <li>Household composition</li> <li>Location of household</li> <li>Fertility rates as context for demand</li> </ol> </li> <li>Health indicators               <ol style="list-style-type: none"> <li>Parent health outcomes, including physical health, depression, drug and alcohol use</li> <li>Health insurance coverage</li> <li>Regular health care provider</li> <li>Regular dentist</li> </ol> </li> <li>Socioeconomic indicators               <ol style="list-style-type: none"> <li>Parent employment rate</li> <li>Poverty rate for families with children under 5</li> </ol> </li> </ol>
<b>Research questions on early childhood programs/providers serving AI/AN children</b>	
7. Who are these programs serving (native and nonnative)?	<ol style="list-style-type: none"> <li>Demographic indicators               <ol style="list-style-type: none"> <li>Race/ethnicity</li> <li>Primary language and tribal language</li> <li>Household composition</li> <li>Location of household</li> <li>Fertility rates as context for demand</li> </ol> </li> <li>Health indicators               <ol style="list-style-type: none"> <li>Parent and family health outcomes, including physical health, depression, drug and alcohol use</li> <li>Health insurance coverage</li> <li>Regular health care provider</li> <li>Regular dentist</li> </ol> </li> <li>Socioeconomic indicators               <ol style="list-style-type: none"> <li>Parent employment rate</li> <li>Poverty rate for families with children under 5</li> </ol> </li> </ol>
8. What is the supply of early childhood services in AI/AN communities?	<ol style="list-style-type: none"> <li>Indicators of supply of services               <ol style="list-style-type: none"> <li>Number of early childhood providers and ages served</li> <li>Number of slots/home visit caseload as context for supply</li> <li>Number of children ages 0–5 on program's waitlist</li> <li>Pattern of ACF funding among AI/AN communities</li> <li>Number of regulated providers</li> <li>Space (adequate for target enrollment, limitations to expansion)</li> </ol> </li> <li>Indicators of program functioning               <ol style="list-style-type: none"> <li>Staff turnover</li> <li>Staff training opportunities</li> <li>Staff compensation and benefits</li> <li>Program-level leadership and management</li> <li>Data infrastructure: numbers to understand program costs</li> </ol> </li> </ol>

Table C.1. (continued)

Research question	Key indicators
9. What are the features of programs serving AI/AN children and families?	<ol style="list-style-type: none"> <li>1. Service organization               <ol style="list-style-type: none"> <li>a. Program type/model</li> <li>b. Program operations and center resources</li> <li>c. Program eligibility requirements</li> </ol> </li> <li>2. Service delivery: services and cultural connections               <ol style="list-style-type: none"> <li>a. Services provided</li> <li>b. Program language use</li> <li>c. Use of tribal language or cultural curriculum</li> </ol> </li> <li>3. Service delivery: quality               <ol style="list-style-type: none"> <li>a. Building condition (physical place)</li> <li>b. Space (adequate for target enrollment, limitations to expansion)</li> <li>c. Quality ratings of early childhood services</li> </ol> </li> <li>4. Service delivery: staff               <ol style="list-style-type: none"> <li>a. Staff education, credentials, and experience</li> </ol> </li> <li>5. Indicators of program functioning               <ol style="list-style-type: none"> <li>a. Staff turnover</li> <li>b. Staff training opportunities</li> <li>c. Staff compensation and benefits</li> <li>d. Program-level leadership and management</li> <li>e. Data infrastructure: numbers to understand program costs</li> <li>f. Performance evaluation</li> </ol> </li> </ol>

**Appendix Table C.2. Design One potential data sources for secondary analysis: overview of data sources**

Design One data source	Design One research questions		
	Information on AI/AN population	Information on AI/AN EC participation	Information on EC services
<b>National data sets</b>			
The American Community Survey (ACS)	X	X	
2010 U.S. Census	X	X	
Current Population Survey (CPS)	X	X	
<b>National, early childhood-focused data sets</b>			
Early Childhood Longitudinal Study, Birth Cohort (ECLS-B)	X	X	
Early Childhood Longitudinal Study, Kindergarten Class of 1998–99 and Kindergarten Class of 2010–2011 (ECLS-K)	X	X	
American Indian and Alaska Native Head Start Family and Child Experiences Survey (AI/AN FACES)	X	X	
The National Survey of Early Care and Education (NSECE)	X	X	
NCHS National Survey of Family Growth	X		
NCHS National Survey of Children in Nonparental Care, 2013 (NSCNC)	X		
National Household Education Surveys Program (NHES) 2012	X	X	
<b>National health-focused data sets</b>			
NCHS National Immunization Survey (NIS)	X		X
Special Supplemental Nutrition Program for Women, Infants and Children <sup>a</sup>	X		X
Pregnancy Risk Assessment Monitoring System (PRAMS)	X		X
Behavioral Risk Factor Surveillance System (BRFSS)	X		X
National Violence Against Women Survey	X		X
American Indian Services Utilization, Psychiatric Epidemiology, Risk and Protective Factors Project	X		X
<b>Administrative data sets</b>			
Head Start Program Information Report (PIR)	X	X	X
CCDF Grantee ACF-801 Form	X	X	X
MIECHV Home Visiting Grantee Form 1	X	X	X
National Vital Statistics System <sup>a</sup>	X	X	
Tribal epidemiology data, Indian Health Services <sup>a</sup>	X	X	

AI/AN = American Indian and Alaska Native; EC = early childhood; NCHS = National Center for Health Statistics

<sup>a</sup> These data sources are likely to include state and/or local information if disaggregated.

**Appendix Table C.3. Potential data sources for secondary analysis: overview of data sources**

Data source	Information on AI/AN population	Information on AI/AN EC participation	Information on EC services	Frequency	Accessibility
<b>National data sets</b>					
American Community Survey (ACS)	X	X		Continuous survey; 2011, 5-year estimates are the most recent	Yes, available for download from <a href="#">American FactFinder</a> .
2010 U.S. Census	X	X		Conducted every 10 years	Yes, available for download from <a href="#">American Fact Finder</a> .
Current Population Survey (CPS)	X	X		Monthly	Yes, available for download from <a href="#">NBER</a> .
<b>National early childhood-focused data sets</b>					
Early Childhood Longitudinal Study, Birth Cohort (ECLS-B)	X	X		Cohort followed 2001–2006; collected at 9 months (2001–2002), 24 months (2003–2004), and preschool and kindergarten entry (2005–2006)	Yes, available with a restricted-use license.
Early Childhood Longitudinal Study, Kindergarten Class of 1998–99 and Kindergarten Class of 2010–2011 (ECLS-K)	X	X		Cohort followed 1998–2007; collected in the fall and the spring of kindergarten (1998–1999), the fall and spring of 1st grade (1999–2000), the spring of 3rd grade (2002), the spring of 5th grade (2004), and the spring of 8th grade (2007)	Yes, available for download from <a href="#">NCES</a> .
American Indian and Alaska Native Head Start Family and Child Experiences Survey (AI/AN FACES)	X	X		Fall 2015 and spring 2016 data collection	No, data to be collected in 2015–2016.
The National Survey of Early Care and Education (NSECE)	X	X		2012	Yes, available for download from <a href="#">Research Connections</a> .
NCHS National Survey of Family Growth	X			Continuous, ongoing survey	Yes, some files available for download from the <a href="#">CDC</a> . Other files require additional permissions.

Table C.3. (continued)

Data source	Information on AI/AN population	Information on AI/AN EC participation	Information on EC services	Frequency	Accessibility
NCHS National Survey of Children in Non-Parental Care, 2013 (NSCNC)	X			2013	Yes, available for download from the <a href="#">CDC</a> .
National Household Education Surveys Program (NHES) 2012	X	X		Conducted every other year, 2012 most recently	Yes, available for download from <a href="#">NCES</a> .
<b>National health-focused data sets</b>					
NCHS National Immunization Survey (NIS)	X		X	Annually	Yes, available for download from the <a href="#">CDC</a> .
Special Supplemental Nutrition Program for Women, Infants and Children	X		X	Biannually	Yes
Pregnancy Risk Assessment Monitoring System (PRAMS)	X		X	Yearly through 2011	Yes, but researchers must apply for access from the <a href="#">CDC</a> .
Behavioral Risk Factor Surveillance System (BRFSS)	X		X	Annually	Yes, available for download from the <a href="#">CDC</a> .
National Violence Against Women Survey	X		X	1995–1996	No. Not immediately located.
American Indian Services Utilization, Psychiatric Epidemiology, Risk and Protective Factors Project	X		X	1995–2000	No.
<b>Administrative data sets</b>					
Head Start Program Information Report	X	X	X	Annual	Yes, available for download from the <a href="#">Office of Head Start</a> .
CCDF Grantee ACF-801 Form	X	X	X	Quarterly	Yes, available via <a href="#">Research Connections</a> .
MIECHV Home Visiting Grantee Form 1	X	X	X	Fiscal year	No. Only ACF has access to this resource.
National Vital Statistics System	X	X		Released yearly	Yes, available online via <a href="#">CDC</a> .
Tribal Epidemiology Data, Indian Health Services (IHS)	X	X		Continuous, ongoing survey	<a href="#">Requires permissions</a> .



**Appendix Table C.4. Potential data sources for secondary analysis: contents of data sources**

Data source	Data on children/families	Data on early childhood services
<b>National data sets</b>		
American Community Survey	Family and home life, employment, and income and poverty rates	Preschool enrollment; educational attainment
2010 U.S. Census	Geography data; household type, urbanicity	Preschool enrollment; educational attainment
Current Population Survey (CPS)	Labor force, employment, unemployment, persons not in the labor force, hours of work, earnings, and other demographic and labor force characteristics	Preschool enrollment and educational attainment for elementary, secondary, and postsecondary education; related data are also collected about preschool and the general adult population. Other items on language proficiency, disabilities, computer use and access, student mobility, and private school tuition.
Early Childhood Longitudinal Study, Birth Cohort (ECLS-B)	Birth outcomes; child development; family type; parent demographics (for example, household composition, household income)	Child care arrangements (for example, type of EC education for children and number of hours children spend in care); adequacy of prenatal care; children's health conditions and treatment for those conditions
Early Childhood Longitudinal Study, Kindergarten Class of 1998–99 and Kindergarten Class of 2010–2011 (ECLS-K)	Child age at kindergarten entry; health and development (cognitive, social, emotional, and physical); parent demographics (for example, mother's education, child risk index, household composition, household income)	Child care arrangement and education (for example, type of EC education for children, and number of hours children spend in care); home educational activities; home environment; school environment (school type, part day/full day); classroom environment; classroom curriculum; teacher qualifications
American Indian and Alaska Native Head Start Family and Child Experiences Survey (AI/AN FACES)	Age of children served by Head Start; home language use, household composition, maternal and paternal age, employment status, poverty rates, cultural traditions	Type of public assistance received, family member activities with child, medical and dental care checkups, child care arrangement before/after Head Start, amount of time in child care and Head Start
The National Survey of Early Care and Education (NSECE)	Household composition, household income, and other economic indicators	Child care arrangements (for example, type of EC education for children and number of hours children spend in care)
NCHS National Survey of Family Growth	Demographic characteristics of men and women, including number of children they have had and plan to have; teenage sexual activity and pregnancy; family planning/unintended pregnancy; infertility, adoption; marriage, divorce, and cohabitation; father involvement; HIV risk behavior	Contraception use and sterilization, breast feeding, maternity leave, child care, health insurance coverage

Table C.4. (continued)

Data source	Data on children/families	Data on early childhood services
NCHS National Survey of Children in Non-Parental Care, 2013 (NSCNC)	Demographic characteristics of children living in foster care, grandparent care, or other types of care; information on living situations, child health, and well-being; caregiver health and well-being; family dynamics	Number of children in nonparental care, health care access and use, functioning, health insurance, types of services and supports needed and used
National Household Education Surveys Program (NHES) 2012	Demographic characteristics of children and parents (including education level, poverty status)	Children's participation in formal and informal nonparental care and education programs (relative care, nonrelative care, center-based care, Head Start and Early Head start programs); characteristics of care (hours spent in nonparental care, numbers of children and care providers in arrangement); early experiences (children's home literacy activities with family members, school adjustment, early school experiences)
NCHS National Immunization Survey (NIS)	Demographic characteristics on children, family resources data, health care utilization, barriers to care	Immunization status of preschool children and adolescents, admission and discharge dates, patient data such as location of the service, provider discipline, procedure/diagnosis/injury/dental codes, lab tests, and clinical measurements
Special Supplemental Nutrition Program for Women, Infants and Children	Household size, poverty status, income	Participation in other safety-net programs
Pregnancy Risk Assessment Monitoring System (PRAMS)	Health insurance, health behavior, income, whether infant lives with mother	Contraception use, health service utilization, health insurance coverage
Behavioral Risk Factor Surveillance System (BRFSS)	Marital status, number of children in household, employment status, annual household income	
National Violence Against Women Survey	Gender, marital status, age, employment status, income, health history, victimization experiences, education level, household size	Health insurance provider, childhood abuse history, childhood witness of domestic violence
American Indian Services Utilization, Psychiatric Epidemiology, Risk and Protective Factors Project	Birth date; sex; age; marital status; income; education level; religion; employment status and history; cultural traditions; parental education; health history and behavior (alcohol use, tobacco use, illicit drug use, and so on)	Childhood abuse history; childhood role models and guardians; risky childhood behaviors (skipping school, starting fights, stealing, setting fires); witness of family violence; family health history during childhood; receipt of financial aid (child support, food stamps, disability aid, etc.); receipt of health services; health service provider (Indian Health Service, traditional healer, others)

Table C.4. (continued)

Data source	Data on children/families	Data on early childhood services
Head Start Program Information Report	Age of children served by Head Start and Early Head Start, cumulative enrollment of pregnant women and income of child and family participants, primary language of family at home	Number of children enrolled in Head Start and Early Head Start; program design (whether a given program is a center-based, home-based, family child care, or locally designed option); transportation services; management information systems; total staff by type; total volunteers by type; staff salaries and qualifications; medical and dental services; health insurance; mental health services; disability services
CCDF Grantee ACF-801 Form	Single-parent household, total monthly income, employment, family size	Type of child care, total amount of care provided in month; receipt of public benefits; QRIS rating, accreditation status of program
MIECHV Home Visiting Grantee Form 1	Insurance status, marital status, educational attainment, age (of enrollees and children), income, employment status, primary language of enrollees; number of enrollees that are a "legislatively identified priority population" (for example, pregnant women under 21)	Total number of enrollees, children, and households involved; number of families currently receiving services, completed the program, or stopped services before completion; total number of home visits
National Vital Statistics System	Births, deaths, marriages, divorces, and fetal deaths	Prenatal care
Tribal Epidemiology Data, Indian Health Services (IHS)	Tribal membership and benefit class, insurance eligibility	Location of the service, provider discipline, procedure/diagnosis/injury/dental codes, lab tests and clinical measurements, health factors, patient education, medication, contract health service data such as authorization number, authorizing facility and cost

Note: The level of detail on the various constructs will vary by data source.

**Appendix Table C.5. Potential data sources for secondary analysis: level of analysis, sample, and race definitions**

Data source	Level of analysis	Population	Sample	AI/AN race/ethnicity definition
American Community Survey	Individual	National	3.5 million U.S. households	Self-report
2010 U.S. Census	Individual	National	Representative of all United States	Self-report
Current Population Survey (CPS)	Individual	National	Households in the United States	Self-report
Early Childhood Longitudinal Study, Birth Cohort (ECLS-B)	Individual	National	10,500 children born in 2001, including 750 AI/AN children	Self-report
Early Childhood Longitudinal Study, Kindergarten Class of 1998–1999 and Kindergarten Class of 2010–2011 (ECLS-K)	Individual	National	22,700 children enrolled in kindergarten in fall 1998 (210 AI/AN children) 20,000 kindergarten children in fall 2010	Self-report, school records
American Indian and Alaska Native Head Start Family and Child Experiences Survey (AI/AN FACES)	Individual	National	Approximately 20 programs and 800 children attending tribal Head Start programs	Self-report
The National Survey of Early Care and Education (NSECE)	Individual	National	11,000 households	Parent report of child race
NCHS National Survey of Family Growth	Individual	National	5,000 men and women; approximately 1,000 AI/AN in sample	Self-report
NCHS National Survey of Children in Nonparental Care, 2013 (NSCNC)	Individual	National	1,600 children	Self-report
National Household Education Surveys Program (NHES)	Individual	National	Multiple surveys; varied sample sizes	Self-report
NCHS National Immunization Survey (NIS)	Individual	National	30,000 children ages 19–35 months	Self-report
Special Supplemental Nutrition Program for Women, Infants and Children	Individual	National	WIC users, from state-collected data	Program report of participant race
Pregnancy Risk Assessment Monitoring System (PRAMS)	Individual	State births	1,300–3,400 women per year	Birth certificate
Behavioral Risk Factor Surveillance System (BRFSS)	Individual	National	100,000 people over age 18	Self-report
National Violence Against Women Survey	Individual	National	8,000 women and 8,005 men over age 18	Self-report
American Indian Services Utilization, Psychiatric Epidemiology, Risk and Protective Factors Project	Individual	Regional	3,084 Northern Plains and Southwest tribal members ages 15–54	Tribal membership and blood quantum data collected

Table C.5. (continued)

Data source	Level of analysis	Population	Sample	AI/AN race/ethnicity definition
Head Start Program Information Report	Program	Head Start and Early Head Start	Head Start and Early Head Start Programs	Program report of child race
CCDF Grantee ACF-801 Form	Individual	National	CCDF grantees	Program report of child race
MIECHV Home Visiting Grantee Form 1	Program	National	MIECHV grantees	Program report of child/family race
National Vital Statistics System	Individual	National	State births	Birth records
Tribal Epidemiology Data, Indian Health Services (IHS)	Individual	National	All IHS beneficiaries	Tribal membership

**Appendix Table C.6. Potential data sources for secondary analysis: accessibility**

Data source	Public access	Specific data set and/or report to review
<b>National data sets</b>		
American Community Survey	Yes, available for download from <a href="#">American FactFinder</a> .	Data set to review: 2011–2013 American Community Survey 3-year estimates.
2010 U.S. Census	Yes, available for download from <a href="#">American Fact Finder</a> .	Data set to review: 2010 Census American Indian and Alaska Native Summary File, 2010 SF2 100% Data.
Current Population Survey (CPS)	Yes, available for download from <a href="#">NBER</a> .	Data set to review: October supplement, released yearly.
<b>National early childhood-focused data sets</b>		
Early Childhood Longitudinal Study, Birth Cohort (ECLS-B)	Yes, available with a restricted-use license.	Report to review: <a href="#">Flanagan, K. D., &amp; J. Park. "American Indian and Alaska Native Children: Findings from the Base Year of the Early Childhood Longitudinal Study, Birth Cohort (ECLS-B)," 2005. National Center for Education Statistics, U.S. Department of Education, Institute of Education Sciences.</a>
Early Childhood Longitudinal Study, Kindergarten Class of 1998–1999 and Kindergarten Class of 2010–2011 (ECLS-K)	Yes, available for download from <a href="#">NCES</a> .	Data sets to review: ECLS-K:2011 Kindergarten–First Grade Public Use File, ECLS-K Kindergarten–Eighth Grade Public Use File.  Report to review: <a href="#">"American Indian and Alaska Native Young Children: Findings from the ECLS-K and ECLS-B Baseline Data", Rural Early Childhood Brief, no. 4, July 2005.</a>
American Indian and Alaska Native Head Start Family and Child Experiences Survey (AI/AN FACES)	No, data to be collected in 2015–2016.	NA.
The National Survey of Early Care and Education (NSECE)	Yes, available for download from <a href="#">Research Connections</a> .	Data sets to review: Household files, DS5 and DS6.
NCHS National Survey of Family Growth	Yes, some files available for download from the <a href="#">CDC</a> . Other files require additional permissions.	Data sets to review: Pregnancy file.
NCHS National Survey of Children in Non-Parental Care, 2013 (NSCNC)	Yes, available for download from the <a href="#">CDC</a> .	Data sets to review: NCHS 2013 file.
National Household Education Surveys Program (NHES) 2012	Yes, available for download from <a href="#">NCES</a> .	Data sets to review: Early Childhood Program Participation Files.
<b>National health-focused data sets</b>		
NCHS National Immunization Survey (NIS)	Yes, available for download from the <a href="#">CDC</a> .	TBD.
Special Supplemental Nutrition Program for Women, Infants and Children	Yes	TBD.

Table C.6. (continued)

Data source	Public access	Specific data set and/or report to review
Pregnancy Risk Assessment Monitoring System (PRAMS)	Yes, but researchers must apply for access from the <a href="#">CDC</a> .	TBD.
Behavioral Risk Factor Surveillance System (BRFSS)	Yes, available for download from the <a href="#">CDC</a> .	TBD.
National Violence Against Women Survey	No. Not immediately located.	Report to review: " <a href="#">The Facts on Violence Against American Indian/Alaskan Native Women</a> " (n.d.)
American Indian Services Utilization, Psychiatric Epidemiology, Risk and Protective Factors Project	No.	TBD.
Administrative data sets		
Head Start Program Information Report	Yes, available for download from the <a href="#">Office of Head Start</a> .	TBD.
CCDF Grantee ACF-801 Form	Yes, available via <a href="#">Research Connections</a> .	Data sets to review: CCDF Administrative Data, Fiscal Year 2011, Family File, Child File, Setting File.
MIECHV Home Visiting Grantee Form 1	No. Only ACF has access to this resource.	TBD.
National Vital Statistics System	Yes, available online via <a href="#">CDC</a> .	TBD.
Tribal Epidemiology Data, Indian Health Services (IHS)	<a href="#">Requires permissions</a> .	TBD.

NA = not applicable; TBD = to be determined

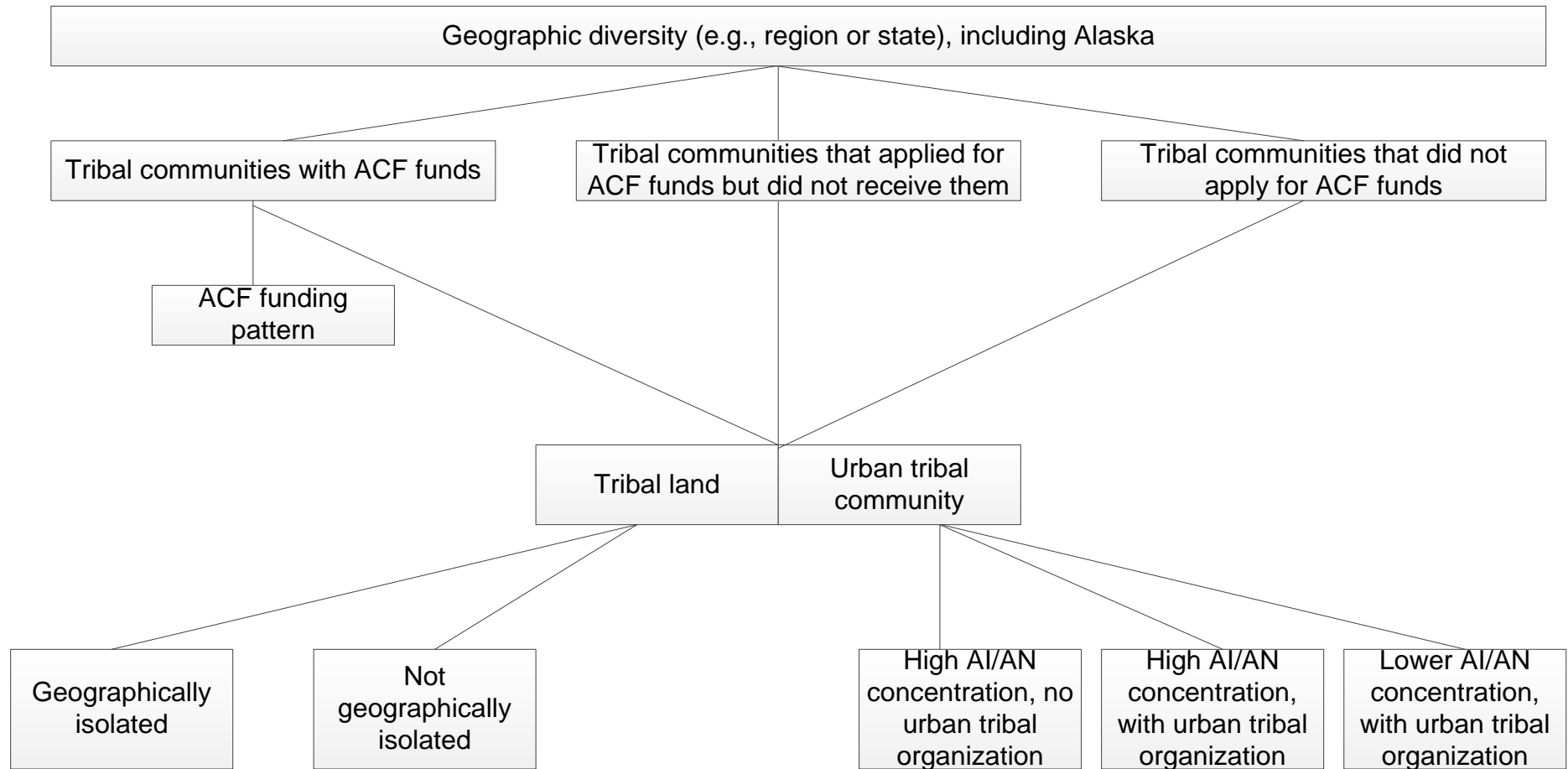
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## **APPENDIX D**

### **DESIGN TWO**

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**Appendix Figure D.1. Additional population of interest characteristics: Design Two**

**Appendix Table D.1. Design Two research questions, indicators, and data collection procedures**

Research question	Indicator	Source	Type of administration
<b>Stage One: research questions on the identification of programs and data sources</b>			
1. What is the supply of early childhood services in AI/AN communities? Who provides these services?	1. Indicators of supply of services <ul style="list-style-type: none"> <li>a. Number of early childhood providers and ages served (infant/toddler/preschool)</li> <li>b. Number of slots/home visit cases as context for supply</li> <li>c. Number of children ages 0–5 years on program's waitlist</li> <li>d. Number of regulated providers</li> </ul>	Secondary data sources Program administrator at the grantee level, with access to administrative data Parents	NA Survey or interview, document review if a list is provided, followed by outreach (telephone, in-person) to build upon or create a list
2. Whom do programs serve (or not serve)?	1. Demographics of children (by enrollment status) <ul style="list-style-type: none"> <li>a. Age</li> <li>b. Race/ethnicity</li> <li>c. Gender</li> <li>d. Household composition</li> <li>e. Primary language and tribal language</li> </ul> 2. Number of children ages 0–5 years on program's waitlist 3. Eligibility requirements 4. Data infrastructure: numbers to understand own target population (e.g., number of single-parent families in community and number of immigrant families)	Program administrator at the administration/grantee level, with access to administrative data Program administrator at the on-the-ground level Community leaders Parents	Survey or interview, document review Survey or interview, document review Interview, focus groups
3. Does the demand for services exceed the supply?	1. Indicators of supply of services <ul style="list-style-type: none"> <li>a. Number of early childhood providers and ages served (infant/toddler/preschool)</li> <li>b. Number of slots/home visit cases as context for supply</li> <li>c. Number of children ages 0–5 years on program's waitlist</li> <li>d. Number of regulated providers</li> </ul>	Secondary data sources Program administrator at the grantee level, with access to administrative data Parents	NA Survey or interview, document review if a list is provided, followed by outreach (telephone, in-person) to build upon or create a list

Table D.1. (continued)

Research question	Indicator	Source	Type of administration
<b>Stage Two: research questions on service organization</b>			
4. How do programs determine whom to serve?	1. Eligibility requirements	Program administrator at the administration/grantee level, with access to administrative data  Program administrator at the on-the-ground level  Community leaders  Parents	Survey or interview, document review  Survey or interview, document review  Interview, focus groups
5. What resources are used to support programs' early childhood services?	1. Indicators of funding streams a. Pattern of ACF funding among AI/AN communities b. Pattern of other funding among AI/AN communities c. Data infrastructure: numbers to understand program costs 2. Other resources a. Grants b. In-kind	Secondary data sources Program administrator at the grantee level, with knowledge of program finances  Accounting and financial professionals at the on-the-ground level	NA Survey or interview
6. How are services organized or coordinated across agencies or service types?	1. Indicators of service organization a. Partnership agreements b. Linkages and referrals to services c. How services are blended/wrapped across the day to meet the needs of children and families d. How services fit within the community context e. Finance/accounting department/group 2. Program auspice a. Tribal versus nontribal b. For-profit versus nonprofit c. Lead agency type (e.g., community-based)	Program administrator at the grantee level, with knowledge of service organization  Program administrator at the on-the-ground level (e.g., a center director or a family child care professional who owns his/her own business)	Survey, followed by interview

Table D.1. (continued)

Research question	Indicator	Source	Type of administration
<b>Stage Three: research questions on the quality and delivery of services</b>			
7. What services are delivered?	1. Indicators of service provision <ol style="list-style-type: none"> <li>Types of services provided (formal, informal)</li> <li>Direct service provision versus indirect service provision</li> </ol>	Program administrator at the on-the-ground level (e.g., a center director or a family child care professional who owns his/her own business)	Survey, followed by interview
8. How are services delivered?	1. Indicators of program mode <ol style="list-style-type: none"> <li>Home-based</li> <li>Center-based</li> <li>Linkages and referrals to services</li> </ol> 2. Types of program models 3. Indicators of caseload <ol style="list-style-type: none"> <li>Early childhood workforce caseload</li> <li>Early childhood workforce turnover</li> <li>Number of slots/home visit cases as context for supply</li> </ol>	Program administrator at the on-the-ground level (e.g., a center director or a family child care professional who owns his/her own business)	Survey, followed by interview
9. Do programs have the staff they need? What are the qualifications and credentials of the workforce?	1. Indicators of staff qualifications and credentials <ol style="list-style-type: none"> <li>Provider education, credentials, and experience</li> <li>Provider leadership and management</li> <li>Staff compensation and benefits</li> </ol> 2. Indicators of professional development <ol style="list-style-type: none"> <li>Training opportunities</li> </ol> 3. Indicators of staff needs <ol style="list-style-type: none"> <li>Performance evaluation</li> <li>Child:teacher ratio</li> <li>Access to native speakers, cultural coordinators, or other adults who can model traditions</li> <li>Availability and use of teachers who speak native languages</li> </ol>	Program administrator at the on-the-ground level (e.g., a center director or a family child care professional who owns his/her own business)	Survey, followed by interview

Table D.1. (continued)

Research question	Indicator	Source	Type of administration
10. What is the quality of the services?	<ol style="list-style-type: none"> <li>Indicators of a high quality early childhood program               <ol style="list-style-type: none"> <li>Provider education, credentials, and experience</li> <li>Child:teacher ratio</li> <li>Quality ratings of early childhood services (e.g., Quality Rating and Improvement Systems)</li> <li>Attendance level</li> </ol> </li> <li>Indicators on facilities               <ol style="list-style-type: none"> <li>Building condition (physical plant)</li> <li>Space (adequate for target enrollment, limitations to expansion)</li> <li>Outdoor playground equipment</li> </ol> </li> </ol>	<p>Program administrator at the on-the-ground level (e.g., a center director or a family child care professional who owns his/her own business)</p> <p>On-the-ground service provider (e.g., teacher, home visitor)</p> <p>Child</p>	<p>Survey, followed by interview</p> <p>Survey, followed by interview; classroom/ home visiting observation; focus groups</p> <p>Child assessment</p>
11. What restricts and what promotes the accessibility of these services to AI/AN children and families?	<ol style="list-style-type: none"> <li>Indicators of program environment               <ol style="list-style-type: none"> <li>System of regular communication with families</li> <li>Cultural and linguistic responsiveness</li> </ol> </li> <li>Indicators of parent engagement               <ol style="list-style-type: none"> <li>Family advisory councils/other leadership opportunities available</li> <li>Sharing of knowledge of child's development with staff</li> <li>Knowledge about services to support child's development</li> <li>Any indication of parent relationship- building conducted by the program</li> </ol> </li> <li>Indicators of access to early childhood programs               <ol style="list-style-type: none"> <li>Community transportation services</li> <li>Transportation services (e.g., buses) available</li> <li>Distance to services</li> </ol> </li> </ol>	<p>Program administrator at the on-the-ground level (e.g., a center director or a family child care professional who owns his/her own business)</p> <p>On-the-ground service provider (e.g., teacher, home visitor)</p> <p>Parents</p> <p>Community leaders</p>	Focus groups
12. Are services able to address child and family needs in a culturally appropriate way?	<ol style="list-style-type: none"> <li>Indicators of culture and linguistic sensitivity               <ol style="list-style-type: none"> <li>Program language use</li> <li>Partnership agreements with other cultural services in the community</li> <li>Use of tribal language/culture curriculum</li> <li>Number of tribal languages used</li> <li>Duration/percentage of program time spent in language/cultural activities (immersion sessions, etc.)</li> <li>Access to native speakers within a community</li> </ol> </li> </ol>	<p>Program administrator at the "on-the-ground" level (e.g., a center director or a family child care professional who owns his/her own business)</p> <p>On-the-ground service provider (e.g., teacher, home visitor)</p> <p>Parents</p> <p>Community leaders</p>	Focus groups

NA = not applicable

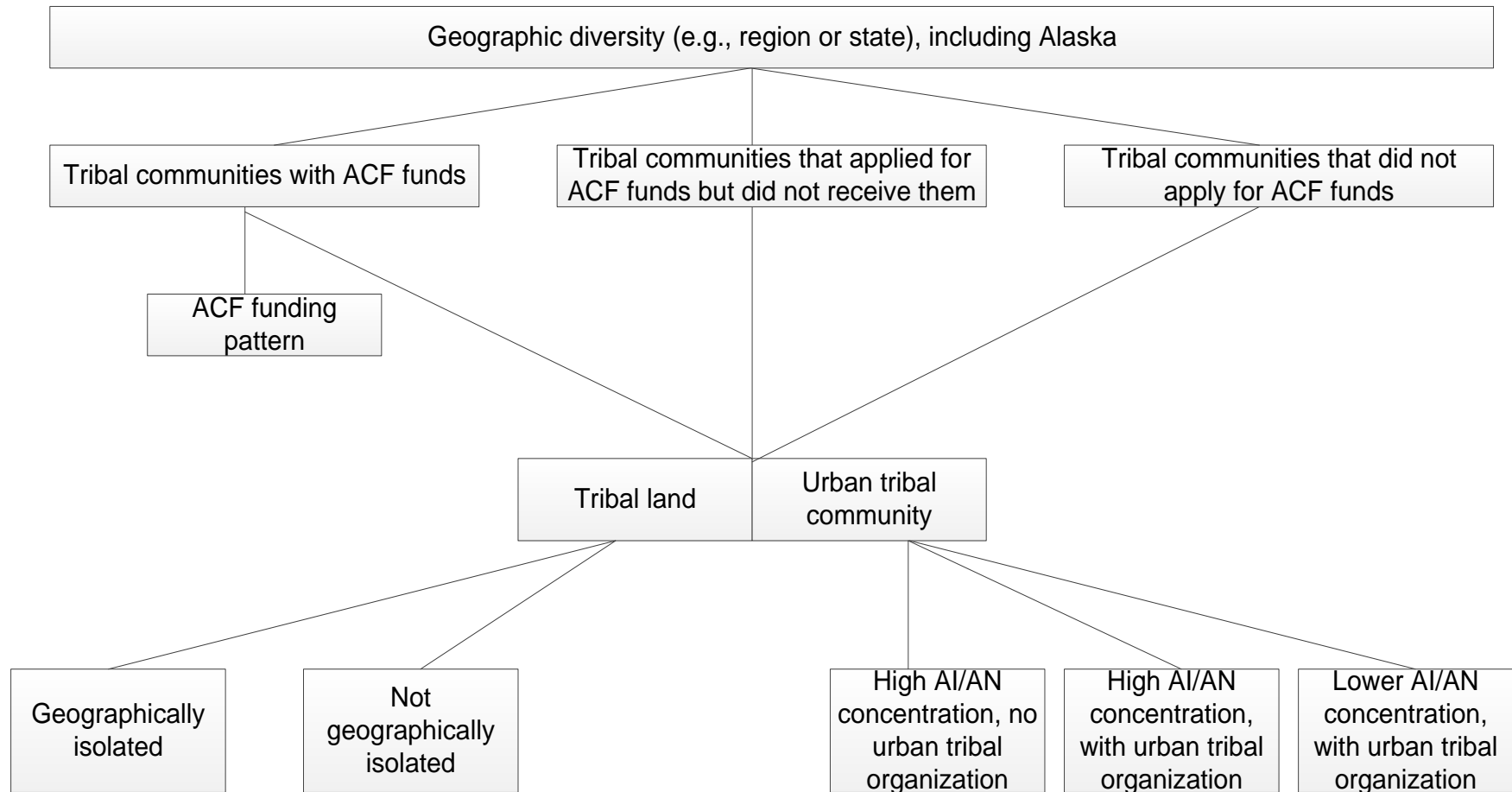
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## **APPENDIX E**

### **DESIGN THREE**

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**Appendix Figure E.1. Additional population of interest characteristics: Design Three**

Note: In addition to these characteristics, Design Three is interested in communities with and without experience conducting needs assessments.

**Appendix Table E.1. Design Three research questions, associated questions, and data collection procedures for tribal communities with experience conducting formal needs assessment**

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
<b>Phase 1: Design</b>				
<b>Research questions on community organization, preparation, and gathering of key information</b>				
1. How do communities prepare and organize to do their needs assessment?	1. When was the last needs assessment conducted in the community? a. Who provided the oversight? b. Who requested it? c. What prompted it? d. What was the product? e. What did the planning process entail? f. Does the community have the data? g. Have the goals been accomplished? 2. Was the assessment completed? If yes or no, what contributed to this? 3. What was the role of the tribal government?	Administrator at management/grantee level	None	Survey or interview
2. How do communities determine what the needs assessment will include?	1. Is the assessment part of funding requirements? 2. Did the community look at other needs assessments? 3. Did the community contact other tribes or communities? 4. Who are the local leaders and sources of knowledge?	Administrator at management/grantee level	Community leaders/elders Administrator at the on-the-ground level	Survey or interview Interview, focus groups

Table E.1. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
3. What current data do communities have (reporting sources, such as, IHS, NICWA, and/or state data systems)? How are data used, specifically as they relate to informing a needs assessment?	1. What data does the community have? <ol style="list-style-type: none"> <li>What is the typical form and content of existing data?</li> <li>How is data used, if at all?</li> </ol> 2. What are reporting sources? <ol style="list-style-type: none"> <li>IHS</li> <li>NICWA</li> <li>State data systems</li> </ol> 3. Do funding requirements match with local ways of knowing? <ol style="list-style-type: none"> <li>Was an indigenous or Native evaluation framework incorporated?</li> <li>Is indigenous or Native knowledge part of the data?</li> </ol>	Administrator at management/grantee level	None	Survey or interview Document review
4. How do communities know whom to serve?	1. What information does the community have on children and families? 2. What is the source of that information?	Administrator at management/grantee level	Community leaders Administrator at the on-the-ground level	Survey or interview
5. How do communities address service capacity and tracking services?	1. What is the current capacity? 2. How was that capacity built?	Administrator at management/grantee level	Frontline service provider employees Administrator at the on-the-ground level	Interview
6. What are the key indicators of existing capacity for conducting needs assessments?	1. Does the community have an existing data system or a connection to other systems? 2. Does the community partner with research centers or institutes? 3. What are the funding/resources to conduct a needs assessment? Was there a set-aside for a grant?	Administrator at management/grantee level	Evaluator/TA provider Administrators at the on-the-ground level	Interview

Table E.1. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
7. How is community/organizational readiness to perform needs assessment defined?	1. Is there an awareness of evaluation or assessment need? 2. Is the community aware but do not have the means to conduct a needs assessment? 3. Does the community want to conduct a needs assessment but lacks support? 4. Is there organizational investment? Who was trained in the needs assessment? How is it sustained?	Administrator at management/grantee level	Community leaders Evaluator/TA provider Administrator at the on-the-ground level	Interview Focus group
<b>Phase 2: Execution</b> <b>Research questions on execution of needs assessment and support (evaluators and TA)</b>				
8. What are the agencies and entities that perform local needs assessments at the community level?	1. With whom does the community partner? a. How does the community build relationships? b. What qualifications and/or experience does the community prefer? c. Does tribal affiliation or experience working with tribal communities impact partnerships and service delivery? 2. Does the community have an evaluator and/or TA provider? 3. How did the community identify the evaluator and/or TA provider? What was the process and contributing factors? 4. How are tribal councils/governments involved in this process?	Administrator at management/grantee level	Evaluator/TA provider Tribal members/community leaders	Survey and interview

Table E.1. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
	5. Does the community have an evaluator and/or TA provider? 6. How did the community identify the evaluator and/or TA provider? What was the process and contributing factors? 7. How are tribal councils/governments involved in this process?			
9. How similar or varied are community and evaluation and/or TA approaches in preparation and training for conducting needs assessments?	1. How available are the evaluators and/or TA providers to plan and collaborate? 2. What is the depth and intensity of this process? a. How often do you meet? b. Are meetings held in person, over the phone, via video? c. What is the structure and form of any provided content? d. Are approaches based on funding? 3. Does evaluation and/or TA honor and include local Indigenous knowledge, world view, and history? a. Is the needs assessment tailored specifically to the local community needs? b. Is the relationship with the evaluator and/or TA provider an exchange of knowledge that is attentive to scientific and cultural rigor?	Administrator at management/grantee level	Evaluator/TA provider  Community leaders/members	Interview

Table E.1. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
10. What training, education, and TA related to performing needs assessments are currently available within communities as well as externally?	<ol style="list-style-type: none"> <li>1. Is TA limited to and related to grant-specific activities, where local evaluations are required?</li> <li>2. What is community-level understanding about the scope of work and qualifications/skill sets needed for individuals conducting a needs assessment?</li> <li>3. Who works on the needs assessment both within and outside of the community? <ol style="list-style-type: none"> <li>a. How did those relationships affect capacity to conduct needs assessment?</li> <li>b. Was it sustainable and reproducible?</li> </ol> </li> </ol>	Administrator at management/grantee level	Evaluators/TA provider Administrator at the on-the-ground level Community leaders	Interviews
11. How do communities get engaged with evaluators and/or TA providers?	<ol style="list-style-type: none"> <li>1. How does the community establish partnerships? What was the process?</li> <li>2. Who are the community partners and organizations?</li> <li>3. What are the methods for establishing relationships?</li> </ol>	Administrator at management/grantee level	Community leaders Administrator at the on-the-ground level	Interview Focus groups
12. What type of evaluation and/or TA do communities prefer or perceive they need?	<ol style="list-style-type: none"> <li>1. What does the community feel they need to do a needs assessments?</li> <li>2. What type of evaluation and TA does the community want?</li> <li>3. How does evaluation and/or TA include/expand on existing resources and capacity?</li> </ol>	Administrator at management/grantee level	Administrator at the on-the-ground level Community leaders Frontline service providers	Interview Focus groups



Table E.1. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
13. What is the level of community and provider collaboration during the evaluation and/or TA process? Do evaluation and/or TA address needs in a culturally appropriate way?	1. What type of collaboration took place? 2. What evaluation and/or TA has been helpful? a. What were strengths? b. What were limitations? 3. In what way was the community involved and engaged in the TA process? 4. In what ways were community input and knowledge factored in (including in the creation of the assessment tool)? 5. How was TA and/or evaluation tailored to meet the culturally specific needs of the tribe? 6. How is culture valued or viewed in this particular community and how does it inform the TA and evaluation process?	Administrator at management/grantee level	Administrator at the on-the-ground level Community leaders/members Evaluator/TA providers	Interview Focus groups
<b>Phase 3: Outcomes</b> <b>Research questions on how communities use, process, analyze, and review information gathered</b>				
14. How do communities define success? What are key variables and indicators of success from the community perspective?	1. How does the community view success? (Measuring effectiveness depends on measuring the outcomes that the community identifies as positive.) 2. Was the tribal community strengthened in a sustainable way (nation building)? 3. What were community expectations? a. Did the community receive what it expected from assessment? b. What was missing? c. What would the community do differently next time?	Administrator at management/grantee level	Administrator at the on-the-ground level Community leaders	Focus group

Table E.1. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
15. What does “met needs” look like in AI/AN communities?	<ol style="list-style-type: none"> <li>What has changed in what is measured?</li> <li>How does this assessment help the community develop or improve children’s and families’ lives (health, development)?</li> <li>What is the community’s vision or goals?</li> </ol>	Administrator at management/grantee level	Administrator at the on-the-ground level Community leaders Frontline service providers	Survey, followed by interview
16. How do communities assess for quality and perception of services? Is the information sustainable and does it bolster nation building efforts?	<ol style="list-style-type: none"> <li>Family level indicators               <ol style="list-style-type: none"> <li>Are services being used?</li> <li>Do families feel welcome/comfortable?</li> <li>Is local knowledge and culture honored and valued?</li> <li>What motivates families to participate in activities and how are they engaged? What do families want/need?</li> <li>What does the community do to engage families? Does the community have a parent advisory board?</li> </ol> </li> <li>Are facilities improved?</li> <li>Are resources improved?</li> <li>Is the program of high quality?</li> </ol>	Administrator at management/grantee level	Administrator at the on-the-ground level Evaluator/TA providers Frontline service providers Community leaders Families/community members	Survey, followed by interview
17. How do communities process, review, analyze, and use information gathered through the needs assessment?	<ol style="list-style-type: none"> <li>Was information used? If so, how?</li> <li>Did the community use information to apply for additional funding?</li> <li>Do they use information to make decisions about tribally funded projects?</li> <li>Did the community receive support from an evaluator or TA provider during this process of reviewing/analyzing and using the information?</li> </ol>	Administrator at the management/grantee level	Administrator at the on-the-ground level  Frontline service providers	Survey, followed by interview

Table E.1. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
18. What are the products of the needs assessment?	<ol style="list-style-type: none"> <li>1. What is the form and content?</li> <li>2. Is it shared with the tribal government or community? How?</li> <li>3. What were community expectations? <ol style="list-style-type: none"> <li>a. Did the community receive what it expected from the assessment?</li> <li>b. What was missing?</li> </ol> </li> <li>4. What would the community do differently next time? What obstacles or challenges did the community face?</li> </ol>	Administrator at the management/grantee level	Community leaders	Survey, followed by interview

<sup>a</sup>Associated questions may be worded for an individual community; however, they are not intended to represent a final protocol.

**Appendix Table E.2. Design Three research questions, associated questions, and data collection procedures for tribal communities without experience conducting formal needs assessment centered on community readiness**

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
<b>Phase 1: Perception/awareness of needs assessment</b> <b>Research questions on community perception, understanding, and awareness of needs assessments</b>				
1. What are the communities' current goals and how can a needs assessment help them achieve their vision?	1. What are the community's current issues or needs? How were they identified? 2. How much does the community know about current programs and activities? 3. How is leadership involved in addressing/identifying needs?	Administrator at the management level	Community leaders	Interview
2. Why have communities not conducted a needs assessment?	1. Does the community have an awareness of its needs? 2. Does leadership believe that needs are being met? 3. What deters communities from conducting a needs assessment? How does the community identify needs?	Administrator at the management level	Community leaders	Survey and/or interview
3. What are communities' understanding of the purpose of a needs assessment?	1. What is the community perception of a needs assessment? a. Does the community know what can be learned from a needs assessment? b. Does the community understand the practical utility of a needs assessment? c. Is there community awareness of the need for an evaluation or assessment? d. Does the community know what a needs assessment is? e. What other forms of assessment does the community use?	Administrator at the management level	Community leaders Administrators on the ground	Survey and/or interview

Table E.2. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
4. Is there organizational or tribal interest in conducting a needs assessment?	1. If yes, how did interest arise? 2. If no, why? What influences interest? 3. What is the current community climate toward addressing/identifying needs? 4. What would compel or motivate the community toward doing a needs assessment?	Administrator at management level	Community leaders	Survey and/or interview
<b>Phase 2: Existing capacity</b> <b>Research questions on community capacity and potential barriers or supports that might impact ability to conduct a needs assessment</b>				
5. What barriers to conducting a needs assessment are present?	1. How does the community identify barriers? 2. What support is needed? 3. Do local leaders or politics play a role?	Administrator at management level	Community leaders Administrators on the ground Service providers	Survey and/or Interview
6. Do communities have the infrastructure to execute a needs assessment?	1. What current facilities or technical resources are available? 2. How was that capacity built?	Administrator at management level	Community leaders	Survey and/or Interview
<b>Phase 3: Identifying needs and strengths</b> <b>Research questions on the potential identification of community needs and strengths</b>				
7. What do communities believe they need, in order to do a needs assessment?	1. What facilities or technical resources are needed for the community to feel prepared? How does the community identify these needs? 2. Does the community have ability to train/educate staff? 3. Does the community have existing partnerships that might enable it to conduct a needs assessment (other tribes, universities, institutes, or TA)? 4. What type of evaluation and TA do communities want? If community has utilized TA, what was helpful? 5. How does evaluation and/or TA include/expand on existing resources and capacity?	Administrator at management level	Community leaders Administrators on the ground Service providers	Survey and/or Interview

Table E.2. (continued)

Research question	Associated questions <sup>a</sup>	Primary source	Potential follow-up source	Type of data collection
8. If education and TA are needed, with whom do tribal communities feel comfortable?	1. Does tribal affiliation or experience working with tribes impact the decision? 2. Is the community aware of potential TA providers or evaluators? 3. Does the community have experience with TA providers? If yes, what TA has been helpful and why?	Administrator at management level	Community leaders Service providers Community members	Survey, followed by interview or focus group
9. What community strengths can be utilized to prepare for a needs assessment?	1. Who are the local leaders and sources of knowledge? 2. What are the potential elements of tribal history, cosmology, and culture that can be implemented and included during the process?	Administrator at management level	Community leaders Elders	Interview or focus group
10. What current data do communities have (such reporting sources as IHS, NICWA, and/or state data systems) and how might they be used to inform a needs assessment?	1. What data does the community have? a. What is the typical form and content? b. How is it used, if at all? 2. What are possible sources? How are local ways of knowing included?	Administrator at the management level	Elders/community leaders Tribal council	Survey, followed by interview or focus group Document review

<sup>a</sup>Associated questions may be worded for an individual community; however, these are not intended to represent a final protocol.

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