RURAL COMMUNITIES – ACCESS TO SERVICES

Stephanie Gehres (ICF) and Sally Shepherd (SRI)
OBJECTIVES FOR RURAL COMMUNITIES--ACCESS TO SERVICES WEBINAR

• Increase state capacity to quantify access to early childhood programs and services in rural communities by using data
• Increase state knowledge of effective strategies for improving access to early childhood programs and services in rural communities
AGENDA

• Overview of Rural Access
• State Solutions
  o Pennsylvania
  o Florida
  o Minnesota
• Questions and Discussion
• Resources
POLL QUESTION

• What percentage of your state is considered rural?
  o >80%
  o 60 to 79.9%
  o 40 to 59.9%
  o 20 to 39.9%
  o Less than 19.9%
  o I don’t know

Rural America (census.gov)
DEFINITION OF ACCESS

- Access to early care and education means that parents, with reasonable effort and affordability, can enroll their child in an arrangement that supports the child’s development and meets the parents’ needs (Friese, S., Lin, V., Forry, N. & Tout, K. 2017)
ACCESS TO HEALTH AND CHILD CARE ARE CRITICAL CONCERNS

• **Health** *(Healthcare Access in Rural Communities Introduction - Rural Health Information Hub)*
  - Long distance travel to access health care services
  - Little anonymity, more social stigma, and privacy concerns
  - Health care workforce shortages

• **Child Care**
  - Insufficient and unreliable demand *(Henly & Adams, 2018)*
  - Cost of providing care *(Henly & Adams, 2018)*
  - Limited number of providers offering nonstandard hours of care *(Paschall, K., Halle, T., & Maxwell, K. 2020)*
  - Rural home-based workforce may benefit from additional professional supports *(Paschall, K., Halle, T., & Maxwell, K. 2020)*
PARTNERSHIPS ARE CRITICAL TO INCREASE ACCESS

• Partnering among programs can make more services available to children and families. Different programs bring different services to the table.
  - Early Head Start – Child Care Partnerships bring comprehensive services of EHS to child care
  - Many programs receiving Head Start and/or public preK funding are typically free and offer access to transportation services
  - School-sponsored programs and private child care are often fee based but will accept CCAP funding to offset costs for families
DATA IS CRITICAL TO INFORM DECISIONS ON ACCESS

• Needs Assessment
• Risk and Reach Studies
  o In specific geographic areas, what are the risk factors that impact child well-being and development?
  o In the same geographic areas, what publicly funded early childhood services are currently provided to address risk and what is the reach of these services?
  o Study results are typically used to:
    • track progress in reaching all children who can benefit most from early childhood services;
    • help communities better understand their early childhood programming needs, particularly in counties where there are high risks; and
    • inform future decisions regarding early childhood policies and practices.
**EXAMPLE: DATA FOR ACCESS**

- Example: Risk and Reach Colorado – Early Childhood Mental Health Investments

### Risk

<table>
<thead>
<tr>
<th>Measure</th>
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<tbody>
<tr>
<td>Maternal age</td>
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<tr>
<td>Maternal education</td>
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<tr>
<td>High ACE score</td>
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<tr>
<td>200% FPL</td>
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<tr>
<td>Maternal depression</td>
</tr>
<tr>
<td>Child mental health</td>
</tr>
<tr>
<td>Disciplinary action</td>
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<tr>
<td>Abuse and neglect</td>
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<tr>
<td>Needed mental health care</td>
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</table>

### Reach

<table>
<thead>
<tr>
<th>Program</th>
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<tbody>
<tr>
<td>Core Services</td>
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<tr>
<td>Early Intervention Colorado Part C (Social-Emotional Services)</td>
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<tr>
<td>ECMH Specialists and Consultants</td>
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<tr>
<td>[EQ/IT] Expanding Quality in Infant Toddler Care Initiative</td>
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<tr>
<td>HealthySteps</td>
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<tr>
<td>Incredible Years</td>
</tr>
<tr>
<td>Nurse Family Partnership</td>
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<td>Parents as Teachers</td>
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<tr>
<td>Project LAUNCH</td>
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<td>LAUNCH Together</td>
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<tr>
<td>Preschool Special Education, Part B, Section 619</td>
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<tr>
<td>SafeCare</td>
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</table>
EXAMPLES: REPORTS ON RISK AND REACH

• Risk and Reach Report examples
  o Illinois Risk and Reach Report
  o Pennsylvania Office of Child Development and Early Learning Program Reach and Risk Assessment
  o Louisiana Early Childhood Risk and Reach
  o Minnesota Early Childhood Risk, Reach, and Resilience

• Additional child care access examples
  o Minnesota: ChildCareAccess.org
  o Indiana: Child Care access across Indiana – An ELI Story Map
STATE SOLUTIONS: HOME VISITING IN PENNSYLVANIA

- PolicyLab at the Children’s Hospital of Philadelphia studied rural home visiting programs
  - 150 interviews with 11 program sites serving 14 counties
  - Program staff and clients identified *accessing employment, social and health services*, and *transportation and social interaction* as community-wide barriers to maternal and child health
  - Conclusion: Home visiting programs are a vehicle for larger community development efforts in rural areas
  - Conclusion: The economic and social services provided by rural home visiting programs reach beyond maternal and child health care, building the capacity of individual families and the broader community

Whittaker, J., Kellom, K., Matone, M., & Cronholm, P. (2021)
STATE SOLUTIONS: HOME VISITING IN PENNSYLVANIA

• Solutions beneficial to rural communities:
  o HV programs hosted play dates, enabled parent-organized social events, dinners, and game nights.
  o HV programs funded a mental health consultant who conducts home visits and purchased a van to take families to appointments.
  o Home visitors assisted clients in locating employment, overcoming transportation barriers, and enrolling in educational opportunities.
  o Co-location of two HV models allowed agencies to be more adaptive to the needs of their clients.
Suzan Gage  
Executive Director  
Early Learning Coalition of Northwest Florida, Inc.

Herman T. Knopf  
Research Scientist  
Anita Zucker Center for Excellence in Early Childhood Studies  
University of Florida
LICENSED CAPACITY MAP BEFORE HURRICANE MICHAEL (OCT. 7, 2018)

Licensed Capacity of Northwest Florida
**Hurricane Michael Impact Map**

**Landfall Time**
Oct. 10, 2018 17:30 UTC

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**Legend**
- **Hurricane Track**
- **County**
- **Provider's Licensed Capacity**
  - 10 - 50
  - 50 - 100
  - 100 - 200
  - 200 - 350

**Impact Zone by NFWMD**
- **Catastrophic**
- **Severe**
- **Moderate**

* *NFWMD (Northwest Florida Water Management Department). Data is from NFWMD's Hurricane Michael Damage and Recovery Assessment Map (https://nfwmrd.maps.arcgis.com/apps/webappviewer/index.html?id=7666fbd775264133a16debeeeafab87b)*
IDENTIFYING NEED

- Multi-county rural area
  - Impacted by natural disaster
  - Vulnerability of rural communities
- Maps with data
- Community engagement
- Partner collaboration
RECRUITING FROM FAMILY CHILD CARE (FCC) PROVIDERS

• Hired a Provider Recruitment and Retention Specialist
  o Focusing on already licensed/registered FCC providers who are NOT part of the CCDF-funded School Readiness program (SR)
  o Connecting a specialist with non-regulated FCC providers to help them become regulated and possible SR providers
  o Developing a business practices conference in fall ’21

• Identified Quality Specialist to work exclusively with FCCs as they onboard as a SR provider
• Direct contract with 4+ Licensed Mental Health Technicians to provide a range of mental health services and training to children, families, and teachers based on their needs and at no charge to individuals

• Provided telehealth equipment and virtual access to mental health providers so families can avoid long drives to therapists’ offices (in some cases up to 65 miles away)

• Working with our local Help Me Grow program to provide case management for children not eligible for CCDF funding
Many rural providers are in mental health resource-poor areas
  - Focused on building the internal capacity of center-based and family child care providers

Child care providers needed support with initial observations and classroom level assistance
  - Hired four Mental Health Specialists with varying backgrounds to support them, as appropriate
• Pyramid Model
  o Early Learning Coalition staff are participating in a statewide initiative to learn how to implement and teach others how to implement the Pyramid Model.
  o Staff are working with a rural Head Start program and child care center to train center staff as “specialists” for their locations. This is a multiyear pilot program.

• Trauma-Informed Care (TIC)
  o Paying the cost of Department of Children and Families TIC training for child care directors and providing a participation stipend
LESSONS LEARNED

• Ask the right questions
  o Don’t ask what you can afford; instead ask what you can’t afford to lose (care and supports for rural families).

• Consider the REAL impact of losing even one provider
  o In some counties, losing one provider means families have lost 50% of their care options.
Heidi Hagel Braid
Chief Program Officer
First Children’s Finance
Rural Child Care
Innovation Program
Creating a Rural Child Care Innovation Program

• A community engagement strategy that increases the sustainability and supply of child care in rural communities
• 31 communities in Minnesota
• 1,001 new child care slots created, plus preservation
• 1,149 participants in town hall events
• Business leadership cohorts for child care businesses; 83% report improved business practices that indicate improved financial sustainability
USING DATA TO DETERMINE NEED

• Importance of identifying precise rural child care data
  o Allows for thorough analysis of community’s current child care gaps and needs
  o Right-sized solutions are critical

• Project Example
  o Kandiyohi County
    • Population: 42,510 Child Care shortage: 776 slots
    • Launched Early Childhood Education course at nearby college, created scholarships, partnered with local child care center for lab courses
    • Resulted in 12 new Family Child Care providers, new child care center (74 slots)
    • Expanded Early Head Start for 24 infants and toddlers
INNOVATIVE STRATEGIES FOR COMMUNITIES

• Position child care as an economic development strategy

• Leverage community expertise and resources
  o Community Core Team
  o Community Solution Action Plan
  o Use existing facilities, especially for family child care

• Use innovative strategies to preserve existing supply and add new slots and child care businesses
QUESTIONS FOR STATE PRESENTERS
RESOURCES

- OPRE/Child Trends Report Early Care and Education in Rural Communities (hhs.gov)
- Urban Institute Report insights_on_access_to_quality_child_care_for_families_living_in_rural_areas_1.pdf (urban.org)
- Risk and Reach Reports and Data Websites
  - Colorado: An Analysis of Colorado’s Early Childhood Mental Health Investments Risk, Reach, and Resources Colorado Health Institute
  - Illinois - https://www.erikson.edu/policyleadership/risk-reach/
  - Pennsylvania - https://www.pakeys.org/program-quality/program-reach-risk-assessment/
  - Indiana Website: Deserts and Hubs: Child Care Access across Indiana: An ELI Story Map (earlylearningin.org) and 2020 Interactive Dashboard - ELAC (elacindiana.org)
RESOURCES

- Home Visiting
  - Home Visiting Programs Address Rural Health Challenges Head On | PolicyLab (chop.edu)
  - Two Models, One Site: The Benefits of Co-locating Home Visiting Services | PolicyLab (chop.edu)
  - Home Visiting Programs – RHIhub Transportation Toolkit (ruralhealthinfo.org)
  - The Rural Home Visiting (RHV) Program – Okanogan County Child Development Association (occda.net)

- Home | Rural Child Care Innovation Program

- Working with Stakeholders to Identify Potential Improvement Strategies: ImprovementStrategiesGuide1-21-15-amlformat (ectacenter.org)

- Landscape Analysis Tools: Landscape.pdf (anlar.com)

- Strategies for Outreach to Families Living in Rural or Remote Areas (hhs.gov)


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This Center is funded by the U.S. Department of Health and Human Services,
Administration for Children and Families, Office of Child Care.
Contract Number HHSP233201500041I