Building Early Links for Learning:
Year One Report

June, 2017
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Contact Information and Inquiries:

- By Email: policy@pec-cares.org
About the project

Building Early Links for Learning (BELL) is a collaboration between the Philadelphia Office of Supportive Housing, People’s Emergency Center, Public Health Management Organization, researchers from Villanova University, Rutgers University-Camden, University of Delaware, and the Cloudburst Group, and the Children’s Workgroup-Early Childhood Committee.

The BELL project has two primary goals:

1. **Increase the enrollment of children ages birth – 5 years experiencing homelessness in Philadelphia into high quality early childhood education programs** (ECE). These programs include any child care, day care, preschool, Head Start, or ECE program with a Keystone STARS rating of 3-4 (the highest ratings for quality early learning programs in the city).

2. **Increase the developmental friendliness** of Emergency Housing and Transitional Housing (EH/TH) programs in Philadelphia.

To accomplish these goals, the BELL project engaged in several activities over the past year:


2. Environmental survey of all EH/TH programs using the *Early Childhood Self-Assessment Tool for Family Shelters*.

3. Focus groups with parents and providers on barriers/facilitators to ECE enrollment.


This report describes key activities and findings from these four categories in more detail. The BELL project is a two-year initiative. The year-one findings help develop and support our year-two efforts.

Year One Findings

**Activity 1: ECE Survey**

How many children would need to enroll in high quality ECE programs for the project to meet its goal of increasing enrollment of young children experiencing homelessness into high quality ECE programs? To answer that question, we gathered information from three separate sources, (1) Federal
Head Start data, (2) Office of Homeless Services census data, and (3) the BELL ECE Survey. Each source of information has different strengths and limitations. In order to estimate the total number of children enrolled into high quality ECE, we consider all three sources of data.

2015 Federal Head Start Data. These data are collected regularly as part of Head Start’s program service reports and are made publicly available online. These data tell us the number of children in Philadelphia’s Head Start or Early Head Start programs who are experiencing homelessness. In Philadelphia 6.4% (N=61) of the city’s federally funded Early Head Start slots are used by children experiencing homelessness, which is just below the national rate of 7.6% (N=14,596). However, compared to the national average of children experiencing homelessness attending Head Start programs, Philadelphia’s enrollment rates fall short, with only 3.5% (N=298) of children attending a Head Start program, compared to the 4.2% (N=35,285) attending nationally.

Unfortunately one limitation of the Federal Head Start data is that it does not account for the use of alternative high quality programs such as Pre-K Counts, and other star 3 and 4 rated programs. Therefore, we must also explore other data sources to capture this information.

2016 Office of Homeless Services Census Data. The Office of Homeless Services conducted a preschool attendance census specifically to target children ages 3-5 years in EH/TH programs. The census measured early education use more broadly and expanded the scope beyond Head Start alone to include all types of ECE programs. The census data revealed that just about half (50.19%, N = 131) of children were attending some type of preschool program. While this count does include programs outside of Head Start, it still has limitations. First, the census data is specific to preschool-aged children and does not include children under the age of 3. Additionally, this data does not consider the quality of the preschool programs children are attending.

2016 – 2017 BELL ECE Survey. Our final source of information was a survey developed by the BELL team. The survey focused on child care arrangements of all kinds. This survey also asked about children from ages birth – 5 years. Findings from this survey suggest that 25% of children residing in Philadelphia’s family EH/TH programs are not enrolled in any ECE program. Nearly 12% of these children use informal care arrangements such as family relatives or non-relative home care. In sum, almost 40% of the city’s children experiencing homelessness are not enrolled into any formal ECE program, according to emergency housing providers. Findings also indicate that 21% of emergency housing providers do not regularly track ECE enrollment data.

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1 Federal Head Start Enrollment Data Source: [https://eclkc.ohs.acf.hhs.gov/hslc/data/psr](https://eclkc.ohs.acf.hhs.gov/hslc/data/psr)
Activity 2: Self-Assessment

Housing programs throughout the country are tasked with addressing the developmental needs of children, often with very limited resources and guidance. In Philadelphia, housing programs rely on creative problem solving, community partnerships, and the dedication of caring staff members to meet the developmental needs of young children. To capture these efforts and address the goal of increasing the developmental friendliness of EH/TH programs throughout Philadelphia, the BELL team introduced the Early Childhood Self-Assessment Tool for Family Shelters. After completing the self-assessment, each housing provider was able to make specific purchasing requests to address the child-friendliness of their individual programs.

Early Childhood Self-Assessment Tool for Family Shelters (The Self-Assessment)

The Self-Assessment consists of recommendations developed by the Administration for Children and Families that address the early developmental needs of children. These recommendations were designed specifically for housing programs with the goal of increasing the capacity and awareness of shelter facilities to provide appropriate care to children under the age of five. The Self-Assessment tool asks about both the physical space and resources of the housing program, as well as the policies and programming in place to support young children.

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How does it work?

Staff from each housing program worked side by side with an early education provider (such as someone from Head Start, Pre-K Counts, or another high quality early learning program) to complete the Self-Assessment tool. Together as a team, they determined whether each recommendation on the Self-Assessment was (1) accomplished, (2) improving, or (3) needing action. At the end of each Self-Assessment, the team developed an action plan consisting of next steps to address recommendations that were improving or needing action. From this action plan, each housing provider submitted a purchase list requesting funding for improvements.

How did Philadelphia do on the Self-Assessment?

Where is Philadelphia doing well? EH/TH programs work with children on their own accord as there are very few regulations about child development mandated by the local Continuum of Care (CoC), which provide oversight to promote a community-wide commitment to ending homelessness. Additionally, programs vary in access to resources. Despite this fact, there were several recommendations that all 19 participating EH/TH programs indicated as accomplished. These items fell into three categories: (1) physical space for dining, (2) supporting family connections to public benefits, and (3) safety (including food safety, CPR training, immunizations, and rules about guest visitation). These items reflect areas in which the city of Philadelphia is doing well. (Please see Figure 1. for additional details).

Figure 1. Items indicated as “accomplished” for all 19 EH/TH programs.

<table>
<thead>
<tr>
<th>Space for Families</th>
<th>Supporting Family Connections</th>
<th>Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Dining</td>
<td>• Public benefits</td>
<td>• Immunizations</td>
</tr>
<tr>
<td></td>
<td>• Accomodate ECE schedules</td>
<td>• Rules about visitation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• CPR training</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Food safety</td>
</tr>
</tbody>
</table>

Where does Philadelphia need support? Figure 2 below displays the items with the lowest averages across the city. These items had the most housing programs indicating a need for action. Areas
that need more attention include supports for infants and toddlers, as well as communication with families around policies and practices.

*Figure 2. Where does Philadelphia need support?*

![Bar chart showing the variation in self-assessment questions across programs](chart)

<table>
<thead>
<tr>
<th>Self-Assessment Question</th>
<th>Percent of Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bottle warming practices</td>
<td>40</td>
</tr>
<tr>
<td>Training: drug/allergic reactions</td>
<td>50</td>
</tr>
<tr>
<td>Emergency disaster plans</td>
<td>30</td>
</tr>
<tr>
<td>Posting policies</td>
<td>20</td>
</tr>
<tr>
<td>Sanitary diaper stations</td>
<td>10</td>
</tr>
</tbody>
</table>

**Greatest variability across programs.** Finally, we highlight the items for which Philadelphia housing providers had the greatest variability. The recommendations depicted in Figure 3 below showed the greatest differences in responses across housing programs.
What types of improvements were requested?

After completing the Self-Assessment process, staff from each EH/TH provider created and submitted a funding request for relevant improvements. Figure 4 below summarizes the types of improvements requested.
Figure 4. Percent of total items requested by developmental level or type requested as a part of the Self-Assessment process.

Examples of items requested from these four categories are listed in Figure 5. Please note that this is not an exhaustive list, but rather a list of the most frequently requested items.

Figure 5. Examples of requested items.

- **Infants/Toddler**
  - Tummy time mats
  - Private breast feeding space

- **Preschool**
  - Child friendly furniture
  - Toys/learning materials

- **Safety**
  - Outlet covers
  - Cabinet locks
  - Toilet locks
  - Building maintenance

- **Administrative**
  - Bulletin board
  - Lamination
Trainings requested

In addition to physical spaces, the Self-Assessment also asked about programming and staff training. Several categories of training were commonly requested by EH/TH staff:

1. Child development and the effects of homelessness on developmental outcomes.
2. How to identify and respond to adverse medication and allergic reactions.
3. Ongoing training needs due to staff turnover:
   a. CPR/First aid
   b. Trauma informed care

Before and after photos

The following pictures show an example of transformation of an unused room at Red Shield Family Residence into a private breast feeding space for families.

The lactation room at Red Shield Family Residence was designed by staff members Danielle Deniro-Grubbs and Keiyana Singleton.
Activity 3: Examples of What Works

To better understand what works to support the enrollment of young children experiencing homelessness into high quality ECE programs, the BELL team engaged in a landscape analysis of promising practices across the country. This analysis included a review of existing reports, and interviews with people engaged in policy and practice around young children experiencing homelessness. The analysis considered two types of recommendations: (1) at the organizational level, and (2) at the systems level. The following describes the findings from this analysis:

<table>
<thead>
<tr>
<th>Organizational</th>
<th>Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Important to have staff responsible for forging connections between housing and ECE providers.</td>
<td>• Prioritizing children experiencing homelessness for enrollment in ECE programs</td>
</tr>
<tr>
<td>• Professional development, and planning meetings may serve as a good venue to establish these relationships.</td>
<td>• Integrated e-referral and tracking systems for outreach and education to increase identification of families experiencing homelessness</td>
</tr>
<tr>
<td>• Formally establishing the importance of collaboration in job descriptions, or other written statements.</td>
<td>• Many states use Child Care Development Funds to better serve young children experiencing homelessness. Others considered expanding eligibility criteria for Individuals with Disabilities Education Act (IDEA) to include children experiencing homelessness.</td>
</tr>
</tbody>
</table>

While Philadelphia and Pennsylvania have made strides recently to focus on the needs of homeless populations, opportunities still exist to better integrate systems and revise policies to ensure that young children experiencing homelessness have the supports and resources they need to succeed side-by-side with their stably-housed peers.

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Activity 4: Parent and Provider Focus Groups

In addition to looking at the environment, policies, and programming in EH/TH programs in the city, the BELL team conducted a series of focus groups with housing providers, ECE providers, and parents experiencing homelessness to capture their perspective on barriers to enrollment in ECE.

Highlights from themes surfaced in focus groups include the following:

<table>
<thead>
<tr>
<th>Providers</th>
<th>Both parents and providers</th>
<th>Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Appreciation for BELL’s efforts to connect ECE and housing systems</td>
<td>• Need for trauma-informed training and care</td>
<td>• Appreciation for importance of quality ECE</td>
</tr>
<tr>
<td>• Parents may lack awareness of available opportunities and policies</td>
<td>• Need for learning environments with consistency, stability, and empathic caring for young children</td>
<td>• A sense of being “on their own” to figure out ECE enrollment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Waitlists and limited slots, esp. for birth-3 year olds</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Scheduling and geographic challenges</td>
</tr>
</tbody>
</table>

Even though many early childhood education programs, particularly Head Start and Early Head Start, have services available that could benefit families experiencing homelessness, connections between housing and ECE systems are lacking. Parents requested more assistance in finding affordable and accessible quality early childhood care, particularly as they are transitioning out of EH/TH programs and into more stable permanent housing.

Constructing more active linkages between the ECE systems and housing service provider system may address barriers not only for enrollment, but for sustaining participation in early childhood education programs. Simply bringing together key partners to share experiences and information may have positive impact on both provider perspectives and practices.

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Year Two of the BELL Project
For the second year of the BELL project the team is hard at work completing activities to reach our two goals. The primary activities to be completed during the second year of the project include:

1. Completion of a second self-assessment at all participating EH/TH programs. We are doing a second round of self-assessments to measure whether or not the improvements funded during the first year of the project had any impact on the child-friendliness of the program.

2. Developing a set of best practices for ECE and housing providers to encourage enrollment of young children experiencing homelessness into high quality ECE programs. The team is working to establish a set of trainings and guidelines aimed at addressing barriers to enrollment and creating a system-wide action plan to increase enrollment into high quality ECE programs.

3. Finally, project partners are currently working to the design a local Head Start model for families experiencing homelessness, taking into account what we have learned about best practices.