North Carolina Family Stakeholder Input Results

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Executive Summary

In Fall 2019, a total of 26 community-based organizations representing 16 counties in North Carolina gathered input from 871 families via surveys, interviews, and/or focus groups. Families were asked to share information on their experiences raising young children, parent education resource needs and preferences, family engagement and leadership, and fostering social and emotional health in young children. Highlights from the findings are below:

Experiences raising children:
- Critical influences in raising young children: access to early childhood and family support services, recreational and community activities, and community environment.
- Challenges in raising young children: parenting struggles (single parenthood and child behavior), economic security, and awareness of available resources.

Parent Education Resources:
Access to resources:
- Parents find out about programs or services through social media, word of mouth, friends or family members, and school/child care/other programs.
- The biggest challenges to accessing resources were the timing/schedule of services not meeting their needs, awareness of the resources, transportation, and eligibility.
- Families want to know more about finding affordable quality care, finding activities, parenting programs, school readiness, behavior supports and resources.

Parent education preferences:
- More than half of survey respondents preferred parent education activities to which they can bring their children. Others identified were parenting classes, receiving information on their phone, and parent support groups.
- For those who have received home visiting services, more than 90 percent reported a positive experience.

Family engagement and leadership:
- The preferred family engagement opportunities were: receiving parenting information, involving child in learning activities at home, working with professionals on child's learning and development, and supporting child's transitions.
- The parent leadership opportunity that the most parents (41 percent) were interested in was being part of decision-making process in children's school or programs. One-fifth of parents responded that they were not interested in any of the listed parent leadership opportunities.

Social and emotional health and resilience:
- Parents were asked what helps children learn and talk about their feelings. They identified modeling and coaching about feelings as well as communicating openly about feelings with their children.
- Services to support child social and emotional development were parenting programs and mental health services. Socialization opportunities with other children were also identified.
Introduction

Acknowledging the importance of community voice in guiding and informing state planning for early childhood systems building, the Division of Child Development and Early Education, in partnership with the North Carolina Early Childhood Foundation, identified the need for collecting feedback from families and local early childhood professionals in the development of NC’s B-5 Strategic Plan. The Preschool Development Grant Birth - Five (PDG B-5) provided an opportunity for the development of a strategic plan, which would build upon robust needs assessment and planning efforts already underway. As draft planning documents were being created, the NC Early Childhood Foundation developed a community stakeholder engagement process to gain meaningful input from families and early childhood professionals on the strategies identified in the draft strategic plan, including community needs and barriers as well as action steps. This community stakeholder engagement process was grounded in an intentional focus on equity through seeking diverse representation and inclusive stakeholder strategies.

Background

In December 2018, North Carolina received funding from the federal Administration of Children and Families for a Preschool Development Grant (Birth-Five). The grant was designed to support state early learning system planning efforts. One aspect of the grant’s work is developing a statewide strategic plan for the birth-five system. To this end, North Carolina was able to build upon two significant statewide planning efforts, the Pathways to Grade Level Reading Initiative and the Early Childhood Action Plan.

Pathways to Grade Level Reading

Founded in 2015, Pathways to Grade Level Reading (an initiative of the North Carolina Early Childhood Foundation, in partnership with NC Child, the North Carolina Partnership for Children, and BEST NC) has developed shared measures of success on the pathway to ensuring that every child is reading on grade-level by third grade and prioritized policy action areas to achieve that goal. The Pathways vision is that all North Carolina children, regardless of race, ethnicity or socioeconomic status, are reading on grade-level by the end of third grade, so that they have the greatest opportunity for life success.

Pathways recognizes that literacy is rooted in birth-through-age-eight child development, and includes:

- Health and Development on Track Beginning at Birth
- Supported and Supportive Families and Communities
- High Quality Birth-through-Age-Eight Learning Environments, with Regular Attendance
Pathways brings diverse state and local stakeholders and leaders together, across health, family support, and early learning and education disciplines; across government, policy, private sector and nonprofit actors; across birth-through-age-five and kindergarten-through-third-grade systems; and across political identities. These stakeholders have co-created a common vision, shared measures of success and coordinated strategies that support children’s optimal development beginning at birth.

The NC Pathways to Grade-Level Reading Action Framework lays out a series of expectations for the state’s child and family serving systems and actions to support children’s social-emotional health, ensure high quality birth-through-age-eight early learning environments, and create the conditions for every child to be in school every day. The Framework uses a racial equity lens, is grounded in family, and is informed by community input.

The Pathways process, frameworks and associated metrics have been foundational in setting the strategic direction for a comprehensive early childhood system in North Carolina.

**Early Childhood Action Plan**

In February 2019, the North Carolina Department of Health and Human Services published its Early Childhood Action Plan.1 This plan established NCDHHS’ vision that all North Carolina children will get a healthy start and develop to their full potential in safe and nurturing families, schools, and communities. The Early Childhood Action Plan builds off the foundation laid by the Pathways Initiative. It sets benchmarks for impact by the year 2025 and establishes shared stakeholder accountability to achieve statewide goals for young children from birth through age 8. The plan provides a framework for coordinated action across public and private stakeholders and centers around making measurable changes in early childhood outcomes.

**Preschool Development Grant Birth through Five (PDG)**

The Division of Child Development and Early Education (DCDEE) was awarded funding through the federal Preschool Development Grant Birth-Five (PDG) for activities to strengthen its early childhood system. The PDG requires states to develop a B-5 strategic plan to improve the quality and access of services for children and families across programs through coordination and collaboration among state and local agencies, early childhood partners, and stakeholders. NC’s draft B-5 strategic plan was developed by DCDEE, in partnership with NCECF, and was based on the NC Early Childhood Action Plan. Many local communities and organizations contributed input to the three-year Pathways planning process and/or the subsequent development of DHHS’ Early Childhood Action Plan. That input is reflected in the draft B-5 plan for the PDG.

**North Carolina B-5 Strategic Plan**

The North Carolina B-5 Strategic Plan focuses on strategies led by DCDEE for children ages zero to five and builds upon all previous work to improve the North Carolina early childhood education system with a focus on gaps in access and quality for those facing the most structural barriers to opportunity. While the Early Childhood Action Plan laid out a strong plan for the entire early childhood system, DCDEE and collaborative partner North Carolina Early Childhood Foundation (NCECF) used the strategic planning process from the Preschool Development Grant to drill down into more specific strategies.

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The Early Childhood Action Plan includes overarching commitments, targets, and progress indicators for North Carolina’s entire early childhood system. For this Strategic Plan, DCDEE included the relevant commitments and targets, along with more specific goals for the Division where applicable.

**Goal 1: High-Quality Early Learning** - Babies, toddlers, and young children will be able to participate in high-quality early learning programs.

**Goal 2: On Track for School Success** - Young children will reach their developmental goals by the time they enter kindergarten.

**Goal 3: Supportive and Supported Families and Communities** - Families with babies and toddlers feel supported, are engaged in early learning, and are connected to the resources they need.

**Goal 4: Social-Emotional Health and Resilience** - Babies, toddlers, and young children will express, recognize, and manage their emotions in a healthy way, especially under stress.

**Study Purpose**

This project serves to ensure community voices are present as North Carolina finalizes its B-5 Strategic Plan and forms implementation plans. The purpose of this project is to collect input from families to inform the development of the final B-5 strategic plan and operationalization of the Pathways Action Framework. In addition, family input collected through this project will inform the ongoing work in developing a statewide family engagement framework and on home visitation planning efforts.

Families were asked to share information on:

- Experiences Raising Young Children
- Parent Education Resources
- Family Engagement
- Social and Emotional Supports

**Methodology**

**Data Collection Methods**

In response to a request for proposal, family support agencies or groups were selected to partner with NCECF on collecting family input and received funding, technical assistance, and/or materials to do so.

To collect input from families directly on the draft B-5 strategic plan, NCECF provided cost reimbursement to community-based family support organizations to collect feedback on the opportunities and challenges that parents face in supporting their children’s development, what information families need about North Carolina’s mixed delivery system, and how they can be supported in their role as their children’s most important teacher.

The project team developed a Family Input Toolkit and hosted a webinar in August 2019 that provided the agencies and groups with standardized data collection tools and procedures. Agencies and groups could gather input from the families they served via focus groups, interviews, and/or surveys. All input was to be gathered and templates submitted to NCECF by October 31.
• **Focus Groups**: The Project Team developed a focus group protocol with questions as well as a note-taking template on which to capture the responses of focus group participants. Note takers were asked to capture the number of participants and briefly describe the observable characteristics of the group (e.g., number of participants, number of females, number of African Americans). The organizations developed a brief report identifying the top themes that emerged from the focus group utilizing a provided report template.

• **Interviews**: The Project Team developed an interview protocol that directly aligned with the focus group protocol. Interviewers recorded participant responses using an interview note-taking template provided by the Project Team.

• **Surveys**: Survey questions were developed by the Project Team in collaboration with representatives from NCECF, NCPC, and DCDEE. Surveys were available in English and Spanish as well as in hard copy or web-based format. Organizations that distributed hard copies were asked to enter those surveys into the web-based version.

**Using a Racial Equity Lens with Family Stakeholder Input Process**

Ensuring that direct input from parents and community providers is not only collected but amplified to influence the North Carolina birth to five strategic plan is in itself an interruption to the status quo to increase racial equity. Too often, data is mined from sources who have direct experience only as an exercise to be inclusive, and not to challenge traditional ways of thinking and being. Bringing a racial equity lens to the creation and holding of both Family and Community Input groups influenced several areas:

• Explicitly inviting the input of a wide variety of communities of color, parents and caregivers of children with different abilities, children and families supported by social services, and children and families who speak multiple languages.

• Working to ensure that the request for proposals was accessible and the grantmaking process was brief and simple, ensuring ease for all organizations, and particularly those who have direct access to the intended audiences.

• Awarding financial resources and support to organizations to provide a stipend for participation, particularly for individual parents being interviewed.

• Inviting childhood caregivers to prioritize strategies most important to them, note their needs and define barriers to effectively implementing prioritized strategies, and suggest particular action items to effectively move forward.

• Using a relational (instead of transactional) approach, particularly with parent/family caregiver groups, to ensure that it is understood that they hold the wisdom that is most valuable to meet the needs of young children.

• Shaping questions to explore not only the barriers faced by children and families but the strengths that marginalized children and families bring to challenge traditional ideas about what is “best” for children and families.
Response and Participation Rates

A total of 26 community-based organizations representing 16 counties gathered input from families via surveys, interviews, and/or focus groups. The map below shows the counties in which data were collected from families.

Table 1 provides a breakdown of the organizations that participated by county as well as information about the numbers of focus groups, interviews, and surveys completed.
Table 1. Summary of participation by methodology

<table>
<thead>
<tr>
<th>County</th>
<th>Organization</th>
<th>Methodology</th>
<th>Focus Groups # groups (# participants)</th>
<th>Interviews # interviews (% response rate)</th>
<th>Surveys # surveys (% response rate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beaufort-Hyde</td>
<td>Partnership for Children</td>
<td></td>
<td>1 (n=8)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Burke</td>
<td>The Enola Group</td>
<td></td>
<td>3 (n=15)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Catawba</td>
<td>Parents as Teachers</td>
<td></td>
<td>1 (n=24)</td>
<td>NA</td>
<td>8 (100%)</td>
</tr>
<tr>
<td>Cumberland</td>
<td>Partnership for Children</td>
<td></td>
<td>1 (n=25)</td>
<td>35 (70%)</td>
<td>8 (13%)</td>
</tr>
<tr>
<td>Dare</td>
<td>Children and Youth Partnership</td>
<td></td>
<td>NA</td>
<td>13 (65%)</td>
<td>59 (22%)</td>
</tr>
<tr>
<td>Durham</td>
<td>Durham Volunteer Doulas</td>
<td></td>
<td>1 (n=8)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Families Moving Forward</td>
<td></td>
<td>4 (n=21)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Forsyth</td>
<td>Imprints Cares</td>
<td></td>
<td>2 (n=21)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Smart Start</td>
<td></td>
<td>NA</td>
<td>33 (97%)</td>
<td>10 (5%)</td>
</tr>
<tr>
<td>Guilford</td>
<td>Partnership for Children</td>
<td></td>
<td>NA</td>
<td>NA</td>
<td>14 (DK)</td>
</tr>
<tr>
<td>Johnston</td>
<td>Partnership for Children</td>
<td></td>
<td>1 (n=10)</td>
<td>7 (DK)</td>
<td>39 (10%)</td>
</tr>
<tr>
<td>Mecklenburg</td>
<td>Charlotte Bilingual Preschool</td>
<td></td>
<td>1 (n=8)</td>
<td>NA</td>
<td>18 (75%)</td>
</tr>
<tr>
<td></td>
<td>Partnership for Children</td>
<td></td>
<td>1 (n=11)</td>
<td>6 (DK)</td>
<td>NA</td>
</tr>
<tr>
<td>Moore</td>
<td>Southern Pines Public Library</td>
<td></td>
<td>3 (n=20)</td>
<td>4 (80%)</td>
<td>31 (48%)</td>
</tr>
<tr>
<td>New Hanover</td>
<td>Smart Start</td>
<td></td>
<td>1 (n=7)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Orange</td>
<td>Partnership for Young Children</td>
<td></td>
<td>NA</td>
<td>NA</td>
<td>10 (67%)</td>
</tr>
<tr>
<td>Pamlico</td>
<td>Pamlico Partnership for Children</td>
<td></td>
<td>NA</td>
<td>NA</td>
<td>12 (86%)</td>
</tr>
<tr>
<td>Pasquotank</td>
<td>Albemarle Alliance for Children &amp; Families</td>
<td></td>
<td>NA</td>
<td>NA</td>
<td>96 (DK)</td>
</tr>
<tr>
<td>Randolph</td>
<td>Partnership for Children</td>
<td></td>
<td>1 (n=5)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Robeson</td>
<td>Partnership for Children</td>
<td></td>
<td>1 (n=9)</td>
<td>NA</td>
<td>152 (45%)</td>
</tr>
<tr>
<td>Rockingham</td>
<td>Partnership for Children</td>
<td></td>
<td>2 (n=10)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Transylvania</td>
<td>Smart Start</td>
<td></td>
<td>NA</td>
<td>NA</td>
<td>26 (13%)</td>
</tr>
<tr>
<td>Union</td>
<td>The Alliance for Children</td>
<td></td>
<td>NA</td>
<td>9 (82%)</td>
<td></td>
</tr>
<tr>
<td>Wake</td>
<td>Smart Start</td>
<td></td>
<td>1 (n=22)</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Wayne</td>
<td>Partnership for Children</td>
<td></td>
<td>1 (n=17)</td>
<td>NA</td>
<td>26 (DK)</td>
</tr>
<tr>
<td>Yadkin</td>
<td>Smart Start</td>
<td></td>
<td>NA</td>
<td>NA</td>
<td>14 (88%)</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td></td>
<td><strong>26 (n=241)</strong></td>
<td><strong>98 (78%)</strong></td>
<td><strong>532 (24%)</strong></td>
</tr>
</tbody>
</table>

Data Analysis

Interview and focus group note-taking templates were imported into Dedoose, a qualitative data analyses online software program, in order to code responses into themes. For three items that were common across the focus group protocol, survey, and interview protocol, the survey response options were employed to code the focus group and interview responses for those items. New themes were added when responses did not fit into one of the survey response options.

Because most focus group participants were not identified on the note-taking templates (e.g., using a number or initials), it was not clear when responses represented the same or a different participant. Therefore, the unit of analyses for focus groups is at the focus group level (n=26) as opposed to at the participant level (n=241). The unit of analyses for both the surveys (n=532) and interviews (n=98) is at the participant level.

Once focus group and interview data were coded, frequencies for each code or theme were tabulated by item. Similarly, frequencies for survey response options were calculated by item. To help identify the results for each data collection method (i.e., focus group, interviews, or surveys), all graphs have been color coded such that green=focus group data, blue=interview data, and grey=survey data.
Limitations

The primary limitations of the data are (1) their representativeness, and (2) the unit of analyses for the focus groups. With regard to representativeness, no sampling methodology was employed to select family support organizations to collect data. Family support agencies applied to participate and gathered data from the families they served. This means findings are not generalizable to the county or state level.

As mentioned above, focus group data were not analyzed at the participant level because it was not clear on the note-taking forms whether responses were for the same or different participants. Therefore, findings are presented at the focus group level, which can be misleading. A response from one person in a focus group was all that was needed for a focus group to be counted toward a theme. For example, if one out of eight people in a focus group indicated that what they liked about raising children in their community was the parks, then that focus group counted toward the theme “Community recreational resources and activities.”

Findings

Experiences Raising Young Children

Focus group and interview participants were asked what they liked about living and raising young children in their communities. Figure 2 shows the six major themes that emerged from the analysis of their responses. Although it appears the frequency of responses differed greatly between the two groups, it is more likely that focus groups are overrepresented, since only one person in the group needed to express liking something for the focus group to be counted toward a theme. As evident, respondents most often liked the recreational resources and activities, the community size and environment, as well as the early childhood services and resources available in their communities. Each of the themes are briefly summarized below.

- **Community recreational resources and activities**: Respondents liked the recreational opportunities available in their communities including parks, sports, libraries, etc. and the generally feeling that there was “a lot of stuff for kids or families to do.”

- **Community size and environment**: Respondents liked “the small town” and “family-oriented” characteristics of their communities. They described their communities as diverse, friendly, and/or safe.

- **Early childhood and family support services and resources**: Pertains to the early childhood and family services and resources available in the community such as Smart Start Partnerships and programs such as WIC.

- **Family and friends**: Respondents liked having their family and friends close by.

- **Schools**: The general sense that the community had “good schools,” safe schools, or conveniently located schools.
Focus group and interview participants also talked about the things that have been difficult in raising their children or what they wish would change. As shown in Figure 3, limited or unaffordable services tended to top the list.

- **Limited or unaffordable support services**: This often related specifically to child care being too expensive, not available, waitlists for child care, or wanting child care with flexible hours.

- **Parenting struggles or issues**: Comments about parenting issues ranged from being a single parent to potty training to dealing with their children’s behavioral issues.

- **Economy security**: Responses generally related to poverty, low wages, and high cost of living or housing. “The stress caused by unstable employment, low wages, cost of living, and child care costs all make it difficult to pay bills. This stress impacts how we interact with our children and family.”

- **Need for more activities**: The need for more affordable recreational activities both outdoors (parks and playgrounds) and indoors.
• **Unsafe or negative environments:** Most often this related to crime, violence, or drug use in the community. “It is a great place to live but right outside someone could be getting beat up and killed.” Respondents also talked about racism and bullying, both in the community and in schools.

• **Need more support:** Some families reported wanting help with their children, “Doing it all alone. Need assistance,” or more opportunities to meet other families.

• **Lack of transportation:** Some families indicated that not having a car or access to public transportation made it difficult to raise their children.

• **Lack of awareness:** Families participating in focus groups felt better communication and outreach was needed to ensure parents are aware of available resources. “Sometimes only one area of the county knows about what is going on...knowing what resources are out there and knowing where to look.”

**Parent Education Resources**

Interviews, focus groups, and surveys all included questions about parent education resources such as how families find out about programs and services. As shown in Table 2, the internet, word of mouth, and social media (usually Facebook) were some of the main sources of this information.

**Table 2. How families find out about programs or services**

<table>
<thead>
<tr>
<th>Information</th>
<th>Interviews (n=98)</th>
<th>Focus Groups (n=26)</th>
<th>Surveys (n=532)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internet</td>
<td>32.7%</td>
<td>34.6%</td>
<td>21.4%</td>
</tr>
<tr>
<td>Word of mouth*</td>
<td>27.6%</td>
<td>53.8%</td>
<td>NA</td>
</tr>
<tr>
<td>Social media</td>
<td>26.5%</td>
<td>57.7%</td>
<td>34.4%</td>
</tr>
<tr>
<td>Smart Start agency</td>
<td>20.4%</td>
<td>19.2%</td>
<td>18.0%</td>
</tr>
<tr>
<td>Programs or services (e.g., Parents as Teachers)*</td>
<td>19.4%</td>
<td>53.8%</td>
<td>NA</td>
</tr>
<tr>
<td>Friends or family members</td>
<td>19.4%</td>
<td>23.1%</td>
<td>50.4%</td>
</tr>
</tbody>
</table>
Table 2. How families find out about programs or services continued...

<table>
<thead>
<tr>
<th></th>
<th>Interviews (n=98)</th>
<th>Focus Groups (n=26)</th>
<th>Surveys (n=532)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dept of Social Services or Health Dept</td>
<td>16.3%</td>
<td>23.1%</td>
<td>18.2%</td>
</tr>
<tr>
<td>School or child care</td>
<td>15.3%</td>
<td>53.8%</td>
<td>30.3%</td>
</tr>
<tr>
<td>Advertisements (e.g., flyers, bulletin boards, email)*</td>
<td>12.2%</td>
<td>38.5%</td>
<td>NA</td>
</tr>
<tr>
<td>Community events or places (e.g., library)*</td>
<td>9.2%</td>
<td>42.3%</td>
<td>NA</td>
</tr>
<tr>
<td>Doctor or clinic</td>
<td>8.2%</td>
<td>30.8%</td>
<td>26.7%</td>
</tr>
<tr>
<td>Other</td>
<td>4.1%</td>
<td>15.4%</td>
<td>1.3%</td>
</tr>
<tr>
<td>Church or faith community</td>
<td>4.1%</td>
<td>23.1%</td>
<td>7.5%</td>
</tr>
<tr>
<td>NCCARE360</td>
<td>0.0%</td>
<td>0.0%</td>
<td>1.1%</td>
</tr>
</tbody>
</table>

* New theme not included as a survey option

Table 3 shows what has made it difficult for some families to access programs or services. Respondents reported that not having transportation, offering programs and services at times that worked for the family, being able to afford programs and services, and/or knowing what program and services were available were some of the key barriers to accessing resources.

Table 3. What families report makes it difficult to access programs or services

<table>
<thead>
<tr>
<th></th>
<th>Interviews (n=98)</th>
<th>Focus Groups (n=26)</th>
<th>Surveys (n=532)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transportation: No reliable transportation (e.g., no car, no access to public transportation)</td>
<td>22.4%</td>
<td>65.4%</td>
<td>9.0%</td>
</tr>
<tr>
<td>Nothing: No issues with accessing programs or services</td>
<td>20.4%</td>
<td>0.0%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Timing/Schedule: Not offered at times that work for the family (e.g., not offered after 5 or on weekends)</td>
<td>17.3%</td>
<td>46.2%</td>
<td>36.8%</td>
</tr>
<tr>
<td>Time: No time to access services*</td>
<td>16.3%</td>
<td>19.2%</td>
<td>NA</td>
</tr>
<tr>
<td>Affordability: Do not have the money to afford the cost of programs or services</td>
<td>12.2%</td>
<td>38.5%</td>
<td>22.2%</td>
</tr>
<tr>
<td>Knowledge: Do not know what is available</td>
<td>12.2%</td>
<td>38.5%</td>
<td>53.0%</td>
</tr>
<tr>
<td>Child care: No one to care for children in order to access programs or services*</td>
<td>6.1%</td>
<td>23.1%</td>
<td>NA</td>
</tr>
<tr>
<td>Availability: Services or programs are limited in the area (e.g., no services, long waitlists)*</td>
<td>4.1%</td>
<td>19.2%</td>
<td>NA</td>
</tr>
<tr>
<td>Location: Not in a good location (e.g., too far away)</td>
<td>4.1%</td>
<td>11.5%</td>
<td>14.5%</td>
</tr>
<tr>
<td>Other</td>
<td>4.1%</td>
<td>26.9%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Comfort: Do not feel welcome or safe participating</td>
<td>3.1%</td>
<td>15.4%</td>
<td>3.6%</td>
</tr>
<tr>
<td>Eligibility: Do not meet programmatic or financial requirements for participation</td>
<td>3.1%</td>
<td>15.4%</td>
<td>22.6%</td>
</tr>
<tr>
<td>Technology: No access to computer or internet*</td>
<td>3.1%</td>
<td>11.5%</td>
<td>NA</td>
</tr>
<tr>
<td>Language: Not offered in primary language</td>
<td>0.0%</td>
<td>23.1%</td>
<td>3.6%</td>
</tr>
<tr>
<td>Enrollment: Do not know how to sign up</td>
<td>0.0%</td>
<td>0.0%</td>
<td>16.4%</td>
</tr>
<tr>
<td>Satisfaction: Not satisfied with what is offered</td>
<td>0.0%</td>
<td>0.0%</td>
<td>2.8%</td>
</tr>
<tr>
<td>Trust: Do not believe programs or services will help family</td>
<td>0.0%</td>
<td>0.0%</td>
<td>1.9%</td>
</tr>
</tbody>
</table>

* New theme not included as a survey option
As shown in Table 4, the programs, services, or supports related to raising young children that respondents were most interested in knowing more about included finding activities for their children or the family, parenting programs or resources, and affordable or high quality child care.

Table 4. What families are interested in knowing more about

<table>
<thead>
<tr>
<th></th>
<th>Interviews (n=98)</th>
<th>Focus Groups (n=26)</th>
<th>Surveys (n=532)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Finding activities for children or family (e.g., physical activities, events, weekend or evening activities, playgroups)*</td>
<td>24.5%</td>
<td>34.6%</td>
<td>NA</td>
</tr>
<tr>
<td>Finding parenting programs or resources (e.g., parenting classes, Triple P, child development milestones)*</td>
<td>24.5%</td>
<td>73.1%</td>
<td>NA</td>
</tr>
<tr>
<td>Finding affordable or quality care</td>
<td>13.3%</td>
<td>38.5%</td>
<td>30.8%</td>
</tr>
<tr>
<td>None/Don’t know</td>
<td>12.2%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Helping child(ren) become ready for school</td>
<td>11.2%</td>
<td>30.8%</td>
<td>46.1%</td>
</tr>
<tr>
<td>Finding resources to help with basic needs</td>
<td>10.2%</td>
<td>3.8%</td>
<td>16.7%</td>
</tr>
<tr>
<td>Receiving resources or services to help with child's behavior</td>
<td>7.1%</td>
<td>23.1%</td>
<td>29.1%</td>
</tr>
<tr>
<td>Finding health related information or services (e.g., medical care, nutrition)*</td>
<td>6.1%</td>
<td>19.2%</td>
<td>NA</td>
</tr>
<tr>
<td>Other</td>
<td>6.1%</td>
<td>34.6%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Any information or services</td>
<td>5.1%</td>
<td>15.4%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Finding information or services to support children with special needs*</td>
<td>4.1%</td>
<td>19.2%</td>
<td>NA</td>
</tr>
<tr>
<td>Helping my child transition to Kindergarten</td>
<td>4.1%</td>
<td>7.7%</td>
<td>27.8%</td>
</tr>
<tr>
<td>Reading with my child(ren)</td>
<td>3.1%</td>
<td>7.7%</td>
<td>24.4%</td>
</tr>
<tr>
<td>Finding resources or services for myself or partner</td>
<td>2.0%</td>
<td>3.8%</td>
<td>16.9%</td>
</tr>
<tr>
<td>Talking to teacher</td>
<td>0.0%</td>
<td>0.0%</td>
<td>13.9%</td>
</tr>
<tr>
<td>Connecting with other parents</td>
<td>0.0%</td>
<td>0.0%</td>
<td>27.6%</td>
</tr>
</tbody>
</table>

*New theme not included as a survey option

Families across all three methodological groups also were asked about whether or not they had received home visiting. Results for the interviews and surveys are reported in Table 5. Focus group results were not meaningful given the unit of analyses had to be at the focus group level and not the participant level. As shown in Table 5, about half of the families interviewed and a quarter of the families surveyed indicated they had received home visiting. Of those families, more than 90 percent reported they liked their home visiting experience. Respondents indicated that home visiting was convenient, helpful, and/or informative.

Table 5. Home visiting

<table>
<thead>
<tr>
<th>Received home visiting</th>
<th>Interview (n=98)</th>
<th>Survey (n=532)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>54% (n=53)</td>
<td>23% (n=121)</td>
</tr>
<tr>
<td>Liked home visiting</td>
<td>96%</td>
<td>95%*</td>
</tr>
<tr>
<td>Disliked home visiting</td>
<td>4%</td>
<td>3%*</td>
</tr>
<tr>
<td>NO</td>
<td>46% (n=45)</td>
<td>69% (n=365)</td>
</tr>
<tr>
<td>Interested in receiving</td>
<td>51%</td>
<td>NA</td>
</tr>
<tr>
<td>Not interested in receiving</td>
<td>49%</td>
<td>NA</td>
</tr>
</tbody>
</table>

*Liked corresponds to ratings on the survey of average, good, and excellent and Disliked corresponds to very poor or poor.
Examples of comments include:

- “It is convenient way to learn new things, in our natural environment. For example, Parents as Teachers helped me understand why and how to child proof my home. Things I had not thought about.”
- “Do not know what I would have done without them, for my son, my wife, and me. Supports and teaches us about parenting and child development. Can show us what to do with our child in our house.”
- “I do like it because my parent educator helps me with information regarding the baby as well as keeping myself on track with school. She helps me know about milestones and what I can expect with baby’s development.”

About half of the families (51 percent) interviewed who had not received home visiting services expressed an interest in learning more about those services.

Families who completed the survey responded to an item about the types of parenting support they would prefer. As shown in Figure 4, more than 50 percent of survey respondents reported they preferred activities to which they could bring their child(ren). Over a third of survey respondents also indicated interest in parenting classes and information received via their smart phone.

**Figure 3. Types of parenting support families want**

<table>
<thead>
<tr>
<th>Type of Parenting Support</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activities where I can bring my children with me</td>
<td>59%</td>
</tr>
<tr>
<td>Parenting classes to learn strategies for supporting my child's growth</td>
<td>39%</td>
</tr>
<tr>
<td>Receiving information, tips, and ideas for activities on my phone</td>
<td>37%</td>
</tr>
<tr>
<td>Parent support groups so that I can connect to other parents</td>
<td>30%</td>
</tr>
<tr>
<td>Reading information online or on paper</td>
<td>25%</td>
</tr>
<tr>
<td>Having someone come to my house to provide services</td>
<td>10%</td>
</tr>
<tr>
<td>Parenting supports offered in my primary language</td>
<td>7%</td>
</tr>
<tr>
<td>Other</td>
<td>2%</td>
</tr>
</tbody>
</table>

Survey (n=532)
Family Engagement

Family engagement is an empowering partnership among families, early childhood providers, and community partners with shared responsibility for the success of children. Families who completed surveys were asked to identify the types of family engagement opportunities they would most prefer. As shown in Figure 5, about 40 percent of survey respondents preferred (1) receiving parenting information on parenting skills, understanding child development, and setting up their home to support learning at each age, and (2) involving their child(ren) in learning activities at home.

Figure 4. Types of family engagement opportunities families prefer

Families also were asked to identify the parent leadership opportunities in which they were most interested. Figure 6 shows that survey respondents most often (41 percent) wanted to be a part of the decision-making process at their child’s school or program through school improvement teams, committees, or other organizations. Almost a third of survey respondents also reported being interested in organizing a group of parents and caregivers with similar backgrounds or experiences to learn together, support each other, and advocate for change.
Families meet a lot of different practitioners such as teachers, doctors, speech therapists, and parent educators. Families participating in focus groups and interviews were asked to talk about what they value most in partnerships. As evident in Figure 7, families most often described:

- **Good communication**: Respondents indicated wanting open and ongoing communication with practitioners. They wanted practitioners to listen and be responsive to families. “There would be ongoing communication, not just when something is wrong. Feedback could be in the form of personal emails, text, and phone.” Another respondent stated, “Open lines of communication especially through teacher, administration, and parent… more direct communication like possibly weekly communications to discuss things to try at home, areas where we are seeing improvement.”

- **Caring, respectful, and safe relationship**: Families talked about how a good partnership meant having a strong relationship with a practitioner. The practitioner would be respectful, could be trusted, and would care about the entire family. “The security of knowing we can trust you and they won't judge you. There's a bond that you can be friends, so that it doesn't feel like they are just doing their job and they have to do the job with kindness.” In the words of another respondent, “The partnership should feel comfortable and have good interactions. The practitioner should connect with the whole family and not just the one child they are working with.”

- **Informed and informative practitioner**: Some families identified wanted a practitioner who was knowledgeable about their profession, as well as their child, and shared resources. “They would be knowledgeable. They would also have resources and connect to those resources.”

- **Work as a team**: Respondents noted that a good partnership meant the family and the practitioner worked together toward common goals.

![Figure 6. How families describe what a good partnership with a practitioner looks like](chart)

Families participating in both interviews and focus groups were asked how comfortable they were advocating for their child(ren) to make sure they get what they need. Figure 8 provides interview results. Focus group results have not been shared because they cannot be analyzed at the participant level. As shown, only a few families indicated not feeling comfortable advocating for their children.
How comfortable families are advocating for their child’s needs

Social-Emotional Supports

Young children start developing social and emotional skills early on. Being able to understand their feelings, manage big emotions, and communicate with friends helps children build relationships and do well later in school. Supporting children to develop their social and emotional skills can sometimes be hard. Therefore, family support organizations gathered input from families about what they think helps children learn and talk about their feelings or how to be good friends as well as what would help them support the emotional and social development of their child(ren).

As shown in Figure 9, families most often reported that teaching or modeling the desired behavior helps children talk about their feelings.

- **Teaching or modeling behavior**: Families talked about how providing guidance or a good role model helps children understand how to talk about their feelings. “Modeling and if I can give my daughter the words ahead of time, and give her choices, it helps her zone in. A big one is stopping and asking how are you feeling right now. Use books in the library about feelings.” Another respondent stated, “Parents teach and show children by discussing and modeling correct behavior.” Examples of other responses include, “watching parents,” “by showing them,” “role modeling,” and “good examples.”

- **Communicating openly**: Focus group and interview respondents indicated that listening to their children, talking with children, and allowing children to freely express themselves were important to children being able to talk about their feelings. Examples of comments include, “Communication. Being open and willing to listen to them,” “Asking questions,” and “let them express themselves.”

- **Socializing or interacting with other children**: Respondents reported that providing children with opportunities to interact with other children was important to their social and emotional development. A couple of the family comments that epitomize this theme are “Opportunities for group play dates. Being around other children and parents” and “Children need to play together to learn social cues and work through being a good friend.”

- **Loving or accepting environment**: Some respondents discussed that children needed to “feel safe in their environment” in order to develop socially and emotionally. That their families should be “accepting of them, even in the hard times.” In the words of another respondent, “when children feel heard and that their opinion and feelings matter.”
• **Building relationship:** Lastly, families talked about the importance of family time and spending quality time with children. Examples of comments included, “Spend time with the kids,” “Have a special day for each child – not just for birthday. Can start individually or as a group,” and “Playing with my child on the floor or on the ground outside.”

Almost half of focus groups (n=11) had one or more participant make comments that did not correspond to the themes in Figure 9. These comments related to television programs or books (n=3), strategies for dealing with behavior (n=2), “turning off technology” (n=1), “parents” (n=1), “good childcare teachers” (n=1), “treat them as a full person/equal and they’ll learn to not be babied” (n=1), “get to know how children to know how they act around other children” (n=1), having set routines (n=1), and finding “someone child is comfortable with to stand in if a male or female is not present” (n=1).

**Figure 8. What families report helps children learn and talk about their feelings**

![Figure 8](image)

Figure 10 displays what types of supports respondents indicated would help them support the child’s emotional and social development. Families most often identified that services and resources related to social and emotional development would be helpful.

• **Support services or resources:** The top two types of services and resources identified by families were parenting programs or resources (e.g., Triple P, parent education classes, parent groups) and mental health services (e.g., counseling, therapy). Other types of services or resources mentioned included child care, home visiting, and speech therapy. For example, “Home visits would be great for helping parents teach social and emotional skills and it is convenient for those who can’t travel.” Other respondents commented, “We need more mental health supports for children and adults,” “workshops, trainings. Triple P – that include parents, providers, teachers, partners,” and “Counseling. I feel like having someone else other than what the children know to listen, help them, and give advice.”

• **Opportunities for being with other children:** Families talked about children having opportunities to socialize with other children in both informal (e.g., park, play groups, play dates, family activities) and more formal settings (e.g., child care, Partnership activities).
- **Information**: Respondents identified that information such as books, articles, videos, games, TV programs, etc. related to this topic would be helpful to them in supporting their child’s social and emotional development. Examples of comments include, “Videos that could be pulled up, or shows that help, like Daniel Tiger,” “Library resources such as books and flash cards,” “On-line links and videos on child development topics,” and “Children’s books with pictures would help identify feelings.”

Similar to the previous item, one or more participants from almost half of focus groups (n=11) provided comments that did not fall into one of the themes shown in Figure 10. Examples of these comments include strategies for improving their child’s emotional and social development (n=5), environmental or financial issues (n=3), professional development for educators (n=1), and social-emotional supports that are digitally available (n=1).

**Figure 9. What families report would help them support their child’s emotional and social development**

![Graph showing the distribution of responses in terms of support services or resources, opportunities for being with other children, other, information, and none or don’t know.]

**Discussion**

The purpose of this project is to collect input from families to inform the North Carolina B-5 Strategic Plan goals and strategies and guide implementation plans. The following will provide a discussion of the family input findings in the context of the draft B-5 Strategic Plan.

**Supported and Supportive Families and Communities**

Goal 3 of the B-5 Strategic Plan is Supported and Supportive Families and Communities with strategies on family engagement and leadership and providing resources to families in need. Family input was gathered related to these strategies specifically on family experiences raising children, parent education access and preferences, and family engagement and leadership opportunities and preferences.

*Experiences raising young children*
Several significant factors were identified related to family experiences raising young children in their communities. Families were likely to identify the following influences as both things they liked or things that were challenging for them:

- Access to early childhood and family support services.
- Recreational and community activities.
- Community environment (safety, inclusion).

In addition, families identified challenges with raising young children, including parenting struggles (single parenthood and child behavior), economic security (low wages, high cost of living and housing), and a lack of awareness of available resources.

These findings indicate the need for both better connections to existing resources for families, including recreational and community activities, while also addressing broader community and systemic challenges such as crime, drug abuse and racism.

**Parent education resources**

Families were asked about how they access parent education resources, challenges, and preferences for parenting supports. Findings indicate that parent education strategies should be structured to meet the scheduling needs of families and provide opportunities for families to receive support with their children.

**Access to resources:**

- Parents reported finding out about programs or services through social media, word of mouth, friends or family members, and school/child care/other programs.
- The biggest challenges to accessing resources were the timing/schedule of services not meeting their needs, not being aware of the resources, transportation, and eligibility.
- Families want to know more about finding affordable quality care, finding activities, parenting programs, school readiness, behavior supports, and resources.

**Parent education preferences:**

- More than half of survey respondents preferred parent support activities to which they can bring their children. Others identified were parenting classes to support child growth, receiving parenting information on their phone, and parent support groups.
- For those that have participated in home visiting services, more than 90 percent reported a positive experience. However, when asked about the type of parenting support families want, only 10 percent of survey respondents indicated ‘having someone come to my house to provide services.’

**Family engagement and leadership**

Families identify what is most important to them in a family-practitioner relationship as well as the types of family engagement and family leadership opportunities they prefer. Families report a preference for caring and responsive communication that is inclusive of the whole family and leadership opportunities for them to be part of the school or program decision-making process.

- Families participating in focus groups and interviews were asked what they value most in partnerships with practitioners such as teachers, doctors, therapist and parent educators. Families most often described open and ongoing communication with practitioners who would
listen and were responsive to families. Also, families described the relationship with the practitioner partner to be caring, respectful and trusting.

• Families prefer the following types of family engagement opportunities: receiving parenting information, involving child in learning activities at home, working with professionals on child's learning and development, and supporting child's transitions

• The parent leadership opportunity that the most parents (41 percent) were interested in was being part of decision making in children’s school or programs. One-fifth of parents responded that they were not interested in any of the listed parent leadership opportunities.

Social-Emotional Health and Resilience

Goal 4 of the B-5 Strategic Plan focuses on social and emotional health and resilience with strategies that would provide a path for the early childhood system to capture, track and improve on children’s social-emotional health from birth to five. Family input was gathered through this project on how to support child social and emotional development.

Social and emotional health and resilience

Findings indicate that families would benefit from resources and tools to support families in modeling and communicating about social-emotional development and opportunities for children to socialize with other young children in formal and informal settings.

• Parents were asked what they think helps children learn and talk about their feelings and how to be a good friend. Families identified modeling and coaching about feelings and communicating openly about feelings with their children.

• When asked what types of information or resources would help support their children’s social-emotional development, parents identified support services. The top two types of services and resources identified by families were parenting programs or resources (e.g., Triple P, parent education classes, parent groups) and mental health services (e.g., counseling, therapy). Other types of services or resources mentioned included child care, home visiting, and speech therapy. Families also identified socialization opportunities with other children.
Appendix A: North Carolina B-5 Strategic Plan – Draft

Overview
August 2019

The North Carolina B-5 Strategic Plan focuses on strategies led by DCDEE for children ages zero to five and builds upon all previous work to improve the North Carolina ECE system with a focus on gaps in access and quality for the most vulnerable.

While the Early Childhood Action Plan (ECAP) laid out a strong plan for the entire early childhood system, DCDEE and collaborative partner North Carolina Early Childhood Foundation (NCECF) utilized the strategic planning process from the Preschool Development Grant to drill down into more specific strategies. They looked at how the division will collaborate and coordinate with partners throughout the mixed delivery system and engage community leaders to accomplish targets for early learning for all children.

The ECAP includes overarching commitments, targets, and progress indicators for North Carolina’s entire early childhood system. For this Strategic Plan, DCDEE included the relevant ECAP commitments and targets along with more specific goals for the Division where applicable.

Goal 1: High-Quality Early Learning
Babies, toddlers, and young children across North Carolina will be able to participate in high-quality early learning programs.
- Increase access to early learning programs
- Improve quality of early learning programs

Goal 2: On Track for School Success
Young children across North Carolina will reach their developmental goals by the time they enter kindergarten.

Goal 3: Supportive and Supported Families and Communities
Families with babies and toddlers across North Carolina feel supported, are engaged in early learning, and are connected to the resources they need.
- Family engagement and leadership
- Providing resources to families in need

Goal 4: Social-Emotional Health and Resilience
Babies, toddlers, and young children across North Carolina will express, recognize, and manage their emotions in a healthy way, especially under stress.

Steps to Finalize Strategic Plan
DCDEE will continue to develop this strategic plan with more information from a statewide needs assessment, family engagement project and stakeholder input. The strategies and associated timelines will be developed. The final strategic plan is scheduled for completion by the end of 2019.

Collaborators
Hundreds of organizations and individuals supported the development of the NC Pathways to Grade Level Reading initiative and the Early Childhood Action Plan – and thereby supported the development of this strategic plan.
Appendix B: Family Focus Group Protocol

Experiences Raising Young Children

1. What things do you like about living and raising young children here?
2. What things are difficult about raising young children in your community or that you wish would change?

Parent Education Resources

3a. How do you typically find out about the programs, services, or supports for your children and family?
3b. What things make it difficult for you to access programs, services, or supports?
3c. What types of programs, services, or supports related to raising young children would you be interested in knowing more about?
4a. One type of parenting support program is one that visits you and your child in your home. Have any of you ever participated in a home visiting program?
4b. For those of you who have participated in a home visiting program, did you like receiving supports in this way? Why or why not?
4c. For those of you who have not participated in a home visiting program, would you be interested in receiving supports in this way? Why or why not?

Family Engagement

5a. What would a good partnership between a parent and a practitioner, such as a teacher, look like and feel like?
5b. Can anyone describe a time when you felt most welcomed, understood, or valued by a teacher, doctor or other practitioner?
6a. How comfortable are you advocating for your child/children to make sure they get what they need?
6b. What types of resources or supports might help you in this role?

Social and Emotional Supports

7. What do you think helps children learn and talk about their feelings and how to be a good friend?
8. What types of information or resources would help support your child’s emotional and social development?
Appendix C: Family Interview Protocol

Experiences Raising Young Children

1. What things do you like about living and raising young children here?
2. What things are difficult about raising young children or that you wish would change?

Parent Education Resources

3a. How do you typically find out about the programs, services, or supports for your children and family?
3b. What things make it difficult for you to access programs, services, or supports?
3c. What types of programs, services, or supports related to raising young children would you be interested in knowing more about?
4a. One type of parenting support program is one that visits you and your child in your home. Have any of you ever participated in a home visiting program?
4b. (If person responds YES to 4a) Did you or do you like receiving supports in this way? Why or why not?
4c. (If person responds NO to 4a) Would you be interested in receiving supports in this way? Why or why not?

Family Engagement

5a. What would a good partnership between a parent and a practitioner, such as a teacher, look like and feel like?
5b. Can you describe a time when you felt most welcomed, understood, or valued by a teacher, doctor or other practitioner?
6a. How comfortable are you advocating for your child/children to make sure they get what they need?
6b. What types of resources or supports might help you in this role?

Social and Emotional Supports

7. What do you think helps children learn and talk about their feelings and how to be a good friend?
8. What types of information or resources would help support your child’s emotional and social development?
Appendix D: Family Input Survey

The North Carolina Early Childhood Foundation is conducting this survey with parents and guardians of young children. The purpose of the survey is to learn more about the needs of young children and their families. Your responses will help guide the direction of North Carolina’s early childhood system over the next few years.

Your participation in completing this survey is voluntary and your responses will be confidential. For a chance to receive a gift card, please provide your name and contact information at the end of the survey. Responses will not be linked to your name when information is shared.

1. How many children do you have that are five years old or younger?
   - 1
   - 2
   - 3
   - 4
   - more than 4

2. What are the ages of your children that are not yet in kindergarten (Select all that apply)?
   - Newborn/infants
   - One year old
   - Two years old
   - Three years old
   - Four years old
   - Five years old

3. How do you find out about services or supports for your children and family (select TOP THREE)?
   - A doctor or clinic in my community
   - My child’s teacher or school/child care
   - Friends and family members
   - Department of Social Services or Health Department
   - Other (please specify): ________________________________
4. **What things make it difficult for you to access programs or services (select TOP THREE)?**
   - **Knowledge** - I do not know what programs or services are available
   - **Enrollment** - I do not know how to sign up for services
   - **Eligibility** - My family is not eligible for the programs or services
   - **Satisfaction** - I’m not satisfied with the programs or services that I’m being offered
   - **Affordability** - My family cannot afford the cost of the programs or services
   - **Comfort** - I do not feel comfortable having my family participate (don’t feel welcome or safe)
   - **Timing** - Programs and services are not offered on days or times that work for my family
   - **Location** - Programs and services are not in a good location for my family
   - **Language** - Programs and services are not offered in my primary language
   - **Transportation** - I do not have reliable transportation
   - **Trust** - I don’t believe the programs or services offered will help my family
   - **Other (please specify):** ________________________________

5. **What types of supports related to raising young children would you be interested in knowing more about (select all that apply)?**
   - Finding quality child care
   - Reading with my child or children
   - Helping my child or children become ready for school
   - Receiving resources or services to help with my child’s behavior
   - Finding resources to help with basic needs for my family like food or housing
   - Helping my child transition into kindergarten
   - Talking with my child’s teachers
   - Connecting with other parents who have similar experiences to me
   - Finding resources or services for myself or my spouse or partner
   - **Other (please specify):** ________________________________

6. **What types of parenting support would you prefer (select TOP THREE)?**
   - Parenting classes to learn strategies for supporting my child’s growth
   - Parent support groups so that I can connect with other parents
   - Activities where I can bring my child(ren) with me (ex. library story time)
   - Having someone come to my house to provide services (home visiting)
   - Reading information online or on paper
   - Text or apps – receiving information, tips and ideas for activities on my phone
   - Parenting supports offered in my primary language
   - **Other (please specify):** ________________________________

7. **One type of parenting support program is one that visits you and your child in your home to share helpful information. Have you ever participated in a home visiting program?**
   - **YES (GO TO ITEM 7a)**
   - **NO (GO TO ITEM 8)**

   **7a. How would you rate your experience participating in the home visiting program?**
   - Very poor
   - Poor
   - Average
7b. Please describe your experience with the home visiting program (optional): 

__________________________________________________________________
__________________________________________________________________

8. Family engagement is an empowering partnership among families, early childhood providers and community partners with shared responsibility for the success of children. What type of family engagement opportunities would you most prefer (select all that apply)?

- Receiving parenting information on parenting skills, understanding child development, and setting up your home to support learning at each age.
- Working with professionals - Talking with teachers and program staff about your child’s learning and development. Being able to ask questions and share information about my child.
- Improving partnerships with my child’s school or program to ensure their needs are being met.
- Volunteering at my child’s school or in my community.
- Involving my children in learning activities at home.
- Supporting my child’s transitions between programs, classrooms or schools.
- None of the above
- Other (please specify): __________________________________________

9. What type of parent leadership opportunities are you most interested in (select all that apply):

- Decision making - Being a part of school or program decisions through school improvement teams, committees, or other organizations.
- Parent advocate - Serving as a parent advocate or ambassador for other parents, helping them access services.
- Community organizing - Organizing a group of parents and caregivers with similar backgrounds or experiences to learn together, support each other and advocate for change.
- State advocacy - Contacting elected officials to support programs and services for young children.
- None of the above
- Other (please specify): __________________________________________

10. Is there anything else you would like to share?

__________________________________________________________________
__________________________________________________________________

Please provide your name and contact information below for a chance to receive a gift card.

Name: __________________________________________________________
Phone or Email address: ___________________________________________