## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>EXECUTIVE SUMMARY</td>
<td>1</td>
</tr>
<tr>
<td>INTRODUCTION AND PROJECT DESCRIPTION</td>
<td>4</td>
</tr>
<tr>
<td>LESSONS FROM LOCAL EXPERIENCE</td>
<td>9</td>
</tr>
<tr>
<td>IMPLICATIONS AND RECOMMENDATIONS</td>
<td>30</td>
</tr>
<tr>
<td>REFERENCES</td>
<td>34</td>
</tr>
<tr>
<td>ACKNOWLEDGMENTS</td>
<td>37</td>
</tr>
<tr>
<td>ANNEX A</td>
<td>38</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY

The Project

Considerable research indicates that what happens to children before they enter kindergarten is critical to the goal of achieving reading proficiency for all by the third grade. This brief summarizes the content and results of a project undertaken by the National Neighborhood Indicators Partnership (NNIP) in eight cities to explore approaches to strengthening local school readiness systems (Atlanta, Chattanooga, Cleveland, Denver, Memphis, Miami, Milwaukee, and Providence).

The approach taken here defines a school readiness system broadly to include services and supports of many types beyond those only related to early learning, such as services related to physical and mental health, achieving family stability, and improving the neighborhood environment. It also recognizes that, in many communities, these services operate in a highly fragmented manner and that reorienting them to create a coherent and effective “system” is a central challenge in the work.

Coordinated by the Urban Institute, the National Neighborhood Indicators Partnership (NNIP) is a network of local civic groups and university institutes in 34 cities. All of these local “partners” operate neighborhood-level data systems and conduct action-oriented research to inform activities ranging from policymaking to grass-roots community building. The project was funded by the Annie E. Casey Foundation and ran from October 2007 through March 2009. The work for each of the participating sites entailed:

1. Developing a system scan, profiling institutions involved in providing school readiness related services in the area (services in all topic areas identified above)

2. Engaging local organizations and stakeholders in the school readiness system in the project and seeking their advice on improving both the project work and the broader system.
3. Preparing a school readiness brief using available data to compare circumstances of young children in low-income neighborhoods with those in other neighborhoods and drawing implications for programs and policy.

4. Convening a community forum featuring the findings from the brief and laying the foundation for plans to further strengthen the local school readiness system.

Most of the reports and other written products prepared by the eight NNIP partners involved in this project are now available to the public via a component of the NNIP web site: http://www2.urban.org/nnip/schoolreadiness.html.

Main Findings

1. The coherence of existing school readiness systems varied substantially across sites. While performance data are far from complete, it appears that the best results are likely where a local collaboration of stakeholders (in and outside of government) has been formed and adopts coherent strengthening of the school readiness system as its mission over the long term.

2. In all sites, data analysis in the briefs demonstrated that risks to children and their readiness for school were indeed strongly concentrated in a limited number of (generally low-income) neighborhoods. The array of relevant indicators is much beyond what was available even a few years ago. Service providers and other participants in local initiatives were very much interested in this information and felt it would help them do a better job of targeting resources in the future.

3. Given the institutional fragmentation of school readiness activities, measurement to assess system performance has been an enormous challenge. However, work by NNIP partners in this project suggests that it should be possible to make important progress in addressing this challenge in the near term.

4. This work demonstrated that advocacy by local data intermediaries can be influential in strengthening local school readiness system initiatives. In two sites, this project was key to laying the foundation for new comprehensive school readiness initiatives, and in others, it helped build momentum in such initiatives that were already underway. In some cities, it also led to experimentation with methods to better target resources to neighborhoods most in need.
Recommendations

We frame our ideas as recommendations for state action since, in this field, the system is structured such that states must be the key actors. However, the federal government should provide strong incentives and support in all cases:

1. States should catalyze, energize, and support collaborative locally driven initiatives devoted to creating stronger and more coherent school readiness systems in counties that have the potential to sustain them. These initiatives should emphasize strengthening linkages of school readiness services to systems that support school success in early grades.

2. States should also provide incentives for local initiatives to experiment with targeting school readiness resources and service deployment in neighborhoods most in need.

3. States should provide incentives for local school readiness initiatives to prepare annual reports assessing their progress and change in the overall state of school readiness locally. These reports should permit assessment of problems and progress at the neighborhood level.

4. States should significantly expand their efforts to extend the coverage and improve the quality of kindergarten school readiness assessments. They should also plan for their active use to gain better understanding of program performance.
Section 1
INTRODUCTION AND PROJECT DESCRIPTION

This brief summarizes the results of a project undertaken by the National Neighborhood Indicators Partnership (NNIP) to explore approaches to strengthening local school readiness systems.¹ Section 1 provides background information and describes the project. Section 2, “Lessons from Local Experience,” presents the main findings from the work and Section 3 offers a discussion of implications and recommendations.

Background

There is much to support the view that the achievement of children’s reading proficiency by the third grade should receive much higher priority as a goal of U.S. education policy.² However, it is also clear that what happens to children before they enter kindergarten is key to achieving that goal.

The past 15 years have seen an explosion of research on early childhood development and some of the results have been startling.³ That there are sizeable development gaps between groups defined by race and poverty levels has been known for some time. But a finding that caught many in the policy community by surprise was that “up to one-half of the gap in achievement scores in school can be attributed to gaps already evident at the time of school entry.”⁴ Furthermore, such gaps once established prove very difficult to diminish after school begins.⁵

¹ See the acknowledgements section at the end of the brief for a list of the NNIP partners who managed the work at each site.
² See Annie E. Casey Foundation, 2010.
⁴ Rouse, Brooks-Gunn and McLanahan, eds., 2005
⁵ Rothstein, 2004
As might be expected, these findings spurred substantial interest in programs that intervene at early ages to promote “school readiness.” Considerable evidence has been put forward since, showing that there are such programs (e.g., Nurse-Family Partnerships, Early Head Start) that work, that is, that can significantly reduce the gaps for many low-income children before kindergarten and do so in a cost-effective manner.⁶

Together, these findings have prompted some to advocate for substantially expanding investment in school readiness. Economist James J. Heckman, for example, considers such investment to be among the “rare public policy initiatives that promote fairness and social justice and, at the same time, promote productivity in the economy and society at large.”⁷ He suggests, “the best way to improve schools is to improve the students sent to them.”

It is recognized, however, that school readiness remains an enormous challenge at this point. While some individual programs have shown great promise, their implementation has been sporadic to date. Moreover, it is also recognized that full success is likely to require creating a “system” out of what is now often a fragmented collection of independent services. Advocacy organizations Zero to Three and Pre-K Now jointly argue that

Any effective approach to building a cohesive, high-quality system must…invest in the three areas research indicates are critical to later success: early learning, physical and mental health, and family stability. All children and families need access to comprehensive and coordinated services.⁸

In early 2007, seeing the challenge in this way, the Annie E. Casey Foundation and the Urban Institute felt that this was an area where the National Neighborhood Indicators Partnership (NNIP) might be able to make a contribution. Coordinated by the Urban Institute, NNIP is a network of local civic groups and university institutes in 34 cities. All of these local “partners” operate neighborhood-level data systems and conduct action-oriented research to inform activities ranging from policymaking to grass-roots community building.

As they have in other areas, it was felt that NNIP partners might be able to bring information to bear on the school readiness issue in a way that would promote more strategic and coordinated action by the variety of local actors involved. This was considered particularly relevant in this case since it is widely believed that children facing the most severe risks to school readiness are often concentrated in comparatively small number of neighborhoods in each metropolitan

⁷ Heckman, 2006.
⁸ Doctors, Gebhard, Jones and Wat, 2007.
area. Good data on the spatial pattern of both risks and service deployment could be instrumental to sound planning for the system overall.

The Project

The Annie E. Casey Foundation then provided funding for a project to respond to this opportunity. It was designed by a team with representatives from the Foundation, the Urban Institute and two local NNIP partners. Funds were sufficient to cover the overall management of the initiative and provide a $25,000 grant to eight NNIP partners to carry out the work. The following sites, selected by a competitive procurement, participated:

- Atlanta: Neighborhood Nexus and the Office of University-Community Partnerships, Emory University
- Chattanooga: the Ochs Center for Metropolitan Studies
- Cleveland: Center on Urban Poverty and Community Development, Mandel School for Applied Social Science, Case Western Reserve University
- Denver: The Piton Foundation
- Memphis: Center for Community Building and Neighborhood Action, School of Urban Affairs and Public Policy, University of Memphis
- Miami: The Children’s Trust
- Milwaukee: The Nonprofit Center of Milwaukee
- Providence: The Providence Plan

The project operated in the field over a 1.5 year period, from October 2007 through March 2009. The selected NNIP partners carried out a program with four components:

1. System Scan. The first need was for the partner to gain a comprehensive understanding of all of the organizations involved in providing school readiness services locally. Partners were asked to identify the organizations, briefly describe their scope and responsibilities, and note any relevant data they maintained. They were reminded that in most places, the components of the system function as separate silos and that an important purpose of the scan was to develop information in a way that recognizes them as parts of one system and can be used to help promote that point of view. All had to report on the following components:

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9 The design team included Cynthia Guy from the Annie E. Casey Foundation, G. Thomas Kingsley and Leah Hendey from the Urban Institute, and two NNIP Partners who were the co-chairs of the NNIP early-childhood work group: Charles Bruner from the Child and Family Policy Center in Des Moines and Sandra Ciske from King County Public Health in metropolitan Seattle.
(1) Home Visiting/Family Support/Parent Counseling (e.g., Healthy Start, Nurse Family Partnership)
(2) Foster Care/Child Protective Services
(3) Registered Child Care (center care, home care, family, friend and neighbor care networks)
(4) Head Start
(5) State and Local Pre-Kindergarten
(6) Medicaid, State Children’s Health Insurance Program (SCHIP), Early Periodic Screening Diagnosis and Treatment (EPSDT)
(7) Immunization, Lead Screening
(8) Individuals with Disabilities Education Act (IDEA) services
(9) Kindergarten instrument to assess school readiness (type of instrument and how it is applied)

2. Involve and Obtain Advice from Relevant Local Organizations. Based on the information collected in the scan, the partners were requested to contact key players in the local system, explain the Casey initiative, ask for their ideas about both the project and improving the broader system, and encourage their participation as deemed appropriate given the political/policy environment of the site at hand.

3. School Readiness Brief. Each participating site was then asked to prepare a brief that used available data to compare relevant circumstances of young children in low-income neighborhoods with those in other neighborhoods in the city and drew implications for program and policy. Considering these findings, the results of the system scan, and the issues and ideas identified in conversations with local institutions, the partners were asked to close the brief with an “evidence-based problem statement” that described key barriers to school readiness and early-grade success for low-income children in these communities.

4. Community Forum and Plans for Next Steps. Finally, each partner was expected to convene a community forum that would feature the findings from the brief and engage local funders, advocates, program operators, and officials in discussion about ways to strengthen the overall local school readiness system in the future.

The designers saw that these four activities might yield quite different results in different places. There were no fixed expectations on how the partners should proceed after the convening. The work might or might not lead to a definite follow-on program. It was expected in all sites, however, that the partners would be able to describe the state of the local system, findings from their analysis of neighborhood risk patterns and their views on implications of the work for local systems development.
School Readiness Resource Guide and Toolkit. Before the work began in earnest, one member of the design team made an important contribution to the initiative. Charles Bruner, NNIP’s Des Moines partner and a recognized expert in early childhood policy, prepared a guidebook to assist the sites in assembling and analyzing their data: the School Readiness Resource Guide and Toolkit: Using Neighborhood Data to Spur Action. This document offered an approach for thinking about the application of neighborhood data in school readiness issues, reviewed a host of relevant indicators and data sources, and presented examples of completed analyses in two cities. Its materials were organized around a recognized comprehensive framework, the Ready Child Equation, to address school readiness. The Ready Child Equation addresses not only children’s own acquisition of skills and behaviors needed to be successful in school but also includes the various spheres of influence on children’s development including families, communities, services, and schools.

\[
\text{Ready Families} + \\
\text{Ready Early Childhood Education Services} + \\
\text{Ready Health Services} + \\
\text{Ready Schools} + \\
\text{Ready Communities} = \text{Ready Children}
\]

Products by Local Partners. Most of the reports and other written products prepared by the eight NNIP partners involved in this project are now available to the public via a component of the NNIP web site: [http://www2.urban.org/nnip/schoolreadiness.html](http://www2.urban.org/nnip/schoolreadiness.html). In the remainder of this report, we cut across these products to draw overall observations and conclusions. Readers should find it helpful, however, to visit this site to get a flavor of the range of local work completed.

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Section 2

LESSONS FROM LOCAL EXPERIENCE

This initiative was designed to try to actually influence and strengthen the school readiness system in each of the cities in which it operated—not as a research project. Nonetheless, documentation of the experiences in these sites suggests several findings that should be of broader interest. They are organized in response to four groups of questions adopted in our structuring of the work.

1. How coherent are the school readiness systems in the participating cities at this point in time? What efforts are underway to try to make them more coherent and integrated with each other?

2. What is the current availability and use of relevant data in the management of these systems? What are the prospects for improving data-based accountability?

3. To what extent are school readiness problems and barriers spatially concentrated in these cities? Are participants in the system concerned about spatial concentration and how do they see it affecting their work?

4. Does this experience suggest that data-informed local advocacy can positively influence system organization and momentum?

1. The coherence of existing school readiness systems varied substantially across sites. While performance data are far from complete, it appears that the best results are likely where a local collaboration of stakeholders (in and outside of government) has been formed and adopts coherent strengthening of the school readiness system as its mission over the long term.
The system scans conducted in this initiative identified that all cities had a large number of organizations operating in each of the substantive components in this field (although it was observed that activity in home-visit and family support component was comparatively sparse in most cities). The scans provided an enormous amount of information. Agencies were grouped according to the components listed in Section 1 of this brief and blocks were filled in describing their roles, scope of work and data collected (an example of a scan table, for Cleveland, is presented as Annex A in this brief\(^{12}\)). In fact, participants in several cities suggested that the scan was the first time all of the players in the local system had ever been included together in an understandable framework in one document, and that this in itself was an important building block toward coherence.

More directly relevant, were reports on how efforts to break down silos and achieve system integration were being approached. First, it must be recognized that virtually all state governments are attempting to work toward this goal, although some appear to be more ambitious about it than others.\(^{13}\) In all sites in the NNIP effort, state agencies responsible for the various elements of the school readiness mission made efforts to better coordinate their activities in the cities at hand. Our participants, however, emphasized the comparative benefits of approaches where a local collaboration of stakeholders (in and outside of government) has been formed and adopts strengthening of the school readiness system as its mission over the long term.

At the start of this project, comprehensive local collaborations like this were in various stages of development in five of the eight sites: Atlanta, Cleveland, Denver, Miami, and Providence.\(^{14}\) They did not yet exist in Chattanooga, Memphis, or Milwaukee.

**Cleveland.** The collaboration in Cuyahoga County, Ohio (Cleveland) has perhaps the most impressive record—the Invest in Children Initiative (IIC).\(^{15}\) In 1999, the County Board of Commissioners announced that it would enter into public-private partnership with more than 50 community service agencies, hospitals, private funders and departments of County, State and Federal governments to create the initiative, with an initially projected $40 million investment and three year time span.

IIC has received considerable additional funding over the years and, after more than 10 years, remains active in pursuit of its three central objectives: (1) to promote effective parenting; (2) to

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\(^{12}\) Coulton and Fischer, 2008

\(^{13}\) Doctors, Gebhard, Jones and Wat, 2007.

\(^{14}\) The names of these groups are: Atlanta: Bright from the Start and United Way’s Early Learning Commission; Cleveland: Invest in Children; Denver: Denver Early Childhood Council; Memphis: Early Success Coalition; Miami: the Children’s Trust in partnership with The Early Learning Coalition of Miami-Dade/Monroe and the Early Childhood Initiative Foundation/Ready Schools/Miami; and Providence: Successful Start.

\(^{15}\) Initially called the Cuyahoga County Early Childhood Initiative.
ensure children’s access to a medical home; and (3) to guarantee the availability of quality early childhood education and care. It has been unusual in that, up until recently, it offered a one-time home visit by a nurse to all first-time and teen mothers and their newborns; and then, intensive home visits with families whose children up to the age of three were been identified as facing greater challenges. An evaluation just after IIC’s first two years concluded that:

. . . the programs have been woven into the fabric of local services and have met their target goals of numbers of clients served—early indications are the programs are producing the kinds of positive measurable changes in the community sought by the planners and funders.  

_Providence._ Another noteworthy effort has been the Successful Start initiative in Rhode Island; noted in part because of its particularly thorough and priority focused plan of action. This initiative was driven more by state government but, since metropolitan Providence is so dominant in this small state, it resembled some of the other county-centered efforts. State agencies collaborated with local nonprofits as well as governmental agencies in Providence and developed synergies similar to those where local civic leaders had taken the lead initially. One local collaborator, the Providence Plan (NNIP’s Providence partner) has also played a leading role in pressing toward coherence through its _Ready to Learn Providence (R2LP)_ initiative that grew out of the Mayor’s Early Childhood Task Force, and prepared one of the first thorough data-based analyses of school readiness in any city.

_Miami._ A third participant that stands out is NNIP’s partner in Miami—The Children’s Trust—which was created in 2002 when Miami-Dade County voters established a special taxing district dedicated exclusively to funding early intervention and prevention programs for all children. The Trust allocates significant funds to children from birth to age five and since its inception has been developing a local school readiness system together with other like-minded organizations. Primary collaborators are the Early Learning Coalition of Miami-Dade/Monroe, one of 31 nonprofits in the State tasked by the Florida Legislature to administer state and federal early education programs locally, and the Early Childhood Initiative Foundation, which is overseeing the Ready Schools grant from the W.K. Kellogg Foundation—a project whose aim is to “create partnerships and seamless transitions between early childhood programs and the public schools.” Additional partners work on many different aspects of the school readiness issue rather than any one trying to take on the dominant share of the work directly.

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16 Center for Urban Poverty and Community Development, 2001
17 Rhode Island Kids Count and Rhode Island Department of Health, 2005.
19 See Segal and Bruner, 2003.
Local collaborations working to improve school readiness systems existed beforehand in two other sites—Denver and Atlanta. In both cases, state governments had played a larger role in setting up the framework and local NNIP partners have been less central. Momentum for coordination is now strong, although both recognize that more work remains to be done.

**Denver.** The state of Colorado developed an interdepartmental Early Childhood State Systems Team a number of years ago. The Team launched an initiative called Smart Start Colorado which has established 31 local Early Childhood Councils operating in 56 of the state’s 64 counties (four of these councils operate in the Denver area). These councils emphasize collaboration and coordination across all system domains. The Denver Council has grown considerably stronger of late and Mayor Hickenlooper is now giving substantial priority to school readiness issues in this framework.

**Atlanta.** In 2000, the state of Georgia took a major step toward coordination by creating the Department of Early Care and Learning (DECAL), putting a variety of previously separate school readiness programs all in one place within state government. The state had earlier established a system of 159 county collaboratives, two of which still operate in Fulton and DeKalb counties—the central counties of metropolitan Atlanta. The situation is complicated, however, because the scale of the challenge reaches beyond these two. The United Way, which has a 13-county service area in the metropolis, has been an important client for this project. It established an Early Learning Commission, which attempts to involve a variety of stakeholders in planning and coordination in this service area as a whole. It also operates the Smart Start initiative which funds a number of early childhood programs directly.

In the three remaining sites, local initiatives for school readiness were more fragmented when this project began. In **Memphis**, there was one nonprofit advocating for school readiness programs with a comprehensive point of view (the Urban Child Institute) and a number of groups working on relevant individual issues (e.g., the Early Home Visitation Collaborative) but there was no one collaborative effort attempting to bring all of the relevant players together to strengthen school readiness as a system. In **Milwaukee**, while state agencies were promoting a coherent view of school readiness, there was no strong local group doing so. There had been an effort to coordinate and strengthen early childhood programs a number of years ago—the Early Childhood Council—but with changes in local leadership and other factors, its strength as a rallying point had diminished. In **Chattanooga**, a forceful local effort to bring coherence to school readiness programs had never emerged.

Regardless of their own progress to date, NNIP participants in all sites have concluded that having a *locally driven* initiative to strengthen and coordinate school readiness services makes a critical difference. Why? They suggest that local leadership creates a sense of ownership that binds people to longer and stronger commitments. A local initiative around the school readiness
issue can create greater momentum by prominently engaging a range of civic leaders in addition to the nonprofits and agencies directly responsible for services. United Ways, for example, were actively involved, in all of these local school readiness efforts we have said were noteworthy.

It is recognized that state agencies will often be the instigators and should stay on as facilitators. However, if they continue as the managers day-to-day the same kind of momentum and long-term commitment are considerably harder to achieve. The more successful strategy is to assemble and give a sense of ownership to local people who share common concern for the same community, can meet with each other fairly frequently to build and reinforce a sense of shared responsibility and trust over the long term. A shared sense of responsibility is not as likely to emerge effectively among professionals and practitioners who live in different metropolitan areas.

2. In all sites, data analysis in the briefs demonstrated that risks to children and their readiness for school were still strongly concentrated in a limited number of (generally low-income) neighborhoods. The array of relevant indicators is much richer than what was available even a few years ago. Service providers and other participants in local initiatives were much interested in this information and felt it would help them do a better job of targeting resources in the future.

All eight of the NNIP partners produced briefs with a substantial amount of neighborhood-level data relevant to school readiness. The basic data fall into two categories: (1) indicators related to risks to being ready for school; and (2) indicators related to services that support school readiness.

Two types of risk indicators were presented in the school readiness briefs. The first included those available from the U.S. census (reviewed in the “NNIP School Readiness Resource Guide and Toolkit—for example, percent of families below poverty, percent of adults without high school degree, percent of households on public assistance, percent single-parent families). Since the latest census data is from 2000, these indicators were substantially out of date at the time of this project, but most sites felt they offered useful background information—nuances not captured by data available at the neighborhood-level for more recent years.

The other type of risk indicator includes those derived from local administrative records that a sizeable number of NNIP sites collect each year. Examples include (see table 2.1): the teen birth rate, percent low birth-weight births, percent births with adequate prenatal care, percent of

\[\text{Bruner, 2007.}\]
students eligible for free and reduced price lunches, student proficiency scores, and children with incarcerated parents.

Table 2.1
INDICATORS SELECTED FOR USE IN NNIP SCHOOL READINESS BRIEFS

<table>
<thead>
<tr>
<th>Basic Demographics (Census Indicators)</th>
<th>Kindergarten Assessment School Readiness</th>
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<tbody>
<tr>
<td>No. children by age, race, sex</td>
<td>Kindergarten assess. school readiness (literacy)</td>
</tr>
<tr>
<td>Child poverty rate</td>
<td>Mem, Mia</td>
</tr>
<tr>
<td>% children speak english at home</td>
<td></td>
</tr>
<tr>
<td>% of single parent households</td>
<td></td>
</tr>
<tr>
<td>Median household income</td>
<td></td>
</tr>
<tr>
<td>Adult education levels</td>
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| Birth Data (often by race)             |                                          |
| Births: total                         |                                          |
| Births: teen mother                   |                                          |
| Births: mother no high school          |                                          |
| Births: mother single parent           |                                          |
| Births: low birthweight rate           |                                          |
| Births: low birthw't by educ., marital status |                                          |
| Births: adequate prenatal care         |                                          |
| Births: maternal income               |                                          |
| Births: premature                      |                                          |
| Births: non-insured                    |                                          |
| Births: site specific risk rating or index |                                          |
| Infant Mortality                       |                                          |

| Home Visiting Programs                 |                                          |
| % newborns receive visit               |                                          |
| % infants enrolled in ongoing home visit|                                          |
| % enrolled in home visits: total 0-3 yr. olds. |                                          |
| % enrolled in home visits: low-birthweight |                                          |
| % enrolled in home visits: mothers < hi.schl |                                          |
| % enrolled in home visits: maltreat,investig. |                                          |

| Child Maltreatment & Foster Care        |                                          |
| Child maltreatment rate (abuse, neglect) |                                          |
| CHIPS Petitions by Children's Court/1000 fam. |                                          |

| Early Care and Education               |                                          |
| Child care vouchers/100 eligible children 0-6 |                                          |
| Child care slots (#)                    |                                          |
| Child care centers                      |                                          |
| Family/group home care (#)              |                                          |
| Professional development early care providers |                                          |
| Child care providers impacted by subsidy cuts |                                          |
| Child care waiting list                 |                                          |
| Quality rating systems                  |                                          |
| Head Start locations                    |                                          |
| Pre-Kindergarten locations              |                                          |

| Health Indicators                      |                                          |
| % newborns enr. in Medicaid & median spells |                                          |
| % Medicaid kids, lacked coverage min.one mo. |                                          |
| % children positive lead tests          |                                          |
| Children hospitalized, unintentional injuries |                                          |
| % pre-K-2nd grade receive timely vaccinations |                                          |
| % of children identified as having devel.delay |                                          |
| Hospital Discharges for Asthma          |                                          |

| School Characteristics                   |                                          |
| Enrollment by grade                      |                                          |
| Special education                        |                                          |
| Free & reduced price lunch               |                                          |
| Class size/student teacher ratios        |                                          |
| Absenteeism                              |                                          |
| Proficiency scores                       |                                          |
| Limited English Proficiency              |                                          |
| School Mobility                          |                                          |
| HS Dropout/Graduation Rates              |                                          |

| Resources - Parent Support               |                                          |
| Nurse-family partnerships                 | Den                                       |
| Other program and resource locations      | Den                                       |
| Parents Are First Teachers               | Chat                                      |

| Resources - Health Care                  |                                          |
| Clinics/health centers (school and other) | Den                                       |
| Mental health services                    | Den                                       |

| Resources - Other                        |                                          |
| TANF enrollment                          | Chat                                      |
| Food stamps                               | Mil                                       |
| Libraries                                 | Att,Den                                   |
| Parks, rec centers & urban gardens       | Att,Den                                   |
| Boys & Girls Clubs                       | Att,Den                                   |
| Other after school programs               | Att                                       |

| Neighborhood Conditions/Risk Factors     |                                          |
| Juvenile arrest records                   | Mia                                       |
| EITC/IRS data                             | Mem                                       |
| Foreclosures                              | Att,Den,Prov                              |
| Home price appreciation                   | Den                                       |
| Code Violations                           | Mil                                       |
| Employment                                | Att,Mil                                   |
| Residential Mobility                      | Mil                                       |
| Children with incarcerated parents         | Prov                                      |

The second major category of indicators includes those that pertain to services or relate needs to services. A number identified on table 2.1 are actually path-breaking in that they signify linking data sources that have only recently been made available for these purposes at the address or neighborhood level. Examples include
- Percent of newborns receiving welcome home visit
- Percent of newborns enrolled in Medicaid
- Percent of children under age 6 enrolled in Medicaid who lacked coverage for at least one month
- Percent of child care slots in accredited child care centers
- Percent of children from birth to age 5 lacking full health insurance

In addition, the table lists a number of indicators of resource and service availability in neighborhoods that can be related to risk scores.

The briefs displayed indicators individually, but all sites also created an overall index to summarize the seriousness of risk at the neighborhood level (see Maps 2.1, 2.2 and 2.3 taken from various sites’ briefs). Cleveland’s brief related their mapped risk index to an index of service use (Map 2.4) and, thereby, they were able to calculate a “risk/service use ratio” for all census tracts in the County (Map 2.5)—an approximate indicator of how well each neighborhood is being served overall (lower score is better).

While their specific methodologies differed, the analysis in all sites showed two things. First, risks were strongly concentrated in a limited number of neighborhoods. Second,
the pattern of risks to school readiness were highly correlated with the spatial distribution of poverty.

In Chattanooga, for example, the highest poverty census tracts also saw the highest rates of child maltreatment (Map 2.6) and the highest rates of students eligible for special education programs and services. In the four ZIP codes with the most concentrated risks for children, the rate of TANF (Families First) recipiency was more than four times the county-wide average.

The Providence brief generally reconfirmed the concentrated patterns of problems they exposed in their 2004 analysis. Contrasts noted in that report had already heightened public concern. For example,

The education levels of mothers range from 50 percent high school graduates in Olneyville to 99 percent in Blackstone. Median family incomes are as low as $11,000 in

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21 Providence Plan, 2004, p.5
pockets of some neighborhoods and as high as $200,000 in others. Rates of child abuse and neglect range from no reported cases in two neighborhoods to 46 cases per 1,000 children living in Olneyville.

The Cleveland work compared risk scores in tracts with poverty rates of 20 percent or more to those in lower poverty areas. They found that the birth rate to teen mothers was 4.2 times higher in the high poverty tracts; the low birth weight rate was 1.7 times higher; births to women without a high school diploma was 6.0 times higher, the child maltreatment rate was 5.5 times higher, and the share with elevated blood lead levels was 6.6 times higher.
Map 2.4: Risk Index by Census Tract in Cuyahoga County, Ohio

Risk Index by Census Tract
Cuyahoga County, Ohio

Map 2.5: Indicator of Success in Reaching At-Risk Populations in Cuyahoga County, Ohio

Summary Score for Selected Indicators
Cuyahoga County Census Tracts
Map 2.6: Poverty Rates for Children Under 6 Year Old by Census Tract and ZIP code with Highest Rates of Reported Child Maltreatment in Hamilton County, Tennessee

The Denver analysis used several characteristics to define “vulnerable children” (ages zero to 8) and then plotted the densities of such children’s residences across neighborhoods. They found high concentrations in the southwest, northwest and far northeast sectors of the city but except for a few pockets, there were not many vulnerable children in central and southeast Denver. They presented a series of maps showing high correlations between densities of vulnerable children and the patterns of other risk factors for young children.

22 Barry, Montagu and Buckley, 2008
They then incorporated another series of maps showing those densities against overlays with the locations of a number of different support services: early learning centers, health care providers, mental health care providers, parent support programs, and “high-quality” schools, public libraries, parks and recreation centers. Although results differed by service, they generally found serious “spatial mismatches” between where vulnerable children live and where the services they need are located. The map that sparked the greatest interest in their public forum showed the starkest mismatch between the locations of high quality schools and the residences of vulnerable children (Map 2.7). The authors felt the mapping analysis generated more interest than would basic presentations of statistics and, beyond shaping the overall conclusion, the maps offered a more useful base for assessing how to address the problems identified.

Of what value are these analyses of neighborhood patterns in school readiness overall? While this project did not yield definitive answers to this question, it did confirm that neighborhood-level data was of great interest to practitioners involved in school readiness in all cities. In fact, several NNIP partners suggest that the presentations on spatial concentration were the most
important “hook” in securing interest in the project from so many of the key players in the system.

Atlanta’s environment is a good illustration. One service provider at the local Forum there said, “…we would like to have data to access our target populations—for example, how many three year olds are there in a community, how many are being served by particular programs—but that information is not available…the [available] data only let you go to the city- or county-level but that does not help you at all identify where within a county or city one should target programs and services.” The Georgia KIDS COUNT representative at the same meeting commented that they “get lots of requests for neighborhood-level data …but they cannot respond because relevant data is not available below the county-level.”

Probing this issue (in Atlanta and elsewhere), NNIP partners found that few providers were exactly sure how they would use such data once they had it. No one suggested they would target all of their money to kids in the most at risk neighborhoods, but the general sentiment seemed strong that if they had such data they would find ways to use it to get a larger share of their resources to those most in need and enhance programmatic impact.

Providence’s R2LP program offered an example approach. In 2004, it went so far as to designate eight of the city’s 25 neighborhoods as “target” neighborhoods for its programs (based on rankings on a series of indicators). The program did not intend to serve only those neighborhoods, since a sizeable number of children in need lived elsewhere. However they concluded that R2LP, “should devote a sizeable portion of its limited resources to areas in the city where research indicates that investments are most needed and where they will have the greatest impact.”

Another factor that has enhanced interest in neighborhood-level data in the past few years has been the increasing interest in coordinated “place-based” strategies for improving the well-being of children and community conditions generally. This interest has been furthered of late by explicit endorsement from the Obama administration.

3. Given the institutional fragmentation of school readiness activities, measurement to assess system performance is an enormous challenge. However, work by NNIP partners in this project suggests that it should be possible to make important progress in addressing this challenge in the near term.

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23 Providence Plan, 2004, p.3
24 Orszag et al, 2009
It is useful to start this discussion with a reminder of how difficult it is in all communities to track what happens to children between birth and five years of age. From the time they enter kindergarten, schools maintain a complete roster of students and can track their progress from year to year. For the public school system at least, this provides a basis for identifying trends in performance. But for kids under five years old, there is no similar institutional basis for collecting data on their status. In a large city there are hundreds of child care centers, pediatrician’s offices and providers of other services for children and no mechanism that even asks them to report status information to a central place.

Given the dearth of data on what has happened to children before entering school, the potentially most important element in the evaluation of local school readiness today is the application of a sound Kindergarten Assessment tool in all local primary schools; i.e., so that the “readiness” of all children who go to public school is empirically tested at least when they enter kindergarten. A number of such tools have been developed and implemented in many locations around the country, but their quality and topical coverage varies significantly. All of the sites participating in this project except Milwaukee do have some type of Kindergarten Assessment. Denver, Miami and Providence use variations of the nationally developed Dynamic Indicators of Basic Early Literacy Skills (DIBELS) instrument, whereas Atlanta, Chattanooga, Cleveland and Memphis use tools designed locally or at the state level.

Most of these tools, however, focus on the language development/communications skills area and coverage of other topics (e.g., physical and mental health, emotional well-being and social competence) is weak to nonexistent. There are excellent models of more comprehensive assessment tools available (e.g., the Early Development Instrument, EDI) but they are being used Furthermore, community-wide summaries of even these assessments are not regularly published to let the public know whether school readiness is improving overall or not in any of these cities or school systems.

Other types of information are also essential in assessing system performance. Most obvious is: (1) an estimate of the need for each service compared to the available supply; and (2) some assessment of the quality of the service provided. Given the multiplicity of providers in school readiness, this type of information is extremely difficult to assemble. Indeed very little of it was provided in the reports of the eight NNIP partners in this project.

In some cases, however, headway is being made with information of this type. The Providence Plan, for example, collects system-wide information on home-visits. Based on several indicators (mostly about the circumstances of the mother) it is able to classify all births as to whether they

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26 Information about the EDI and its benefits is provided in Janus and Offord, 2007, and Lloyd and Hertzman, 2009.
are or are not "at risk" births. It then is able to calculate the share of families with at risk births that received home visits.\textsuperscript{27}

Another good example is the work of Cleveland’s NNIP partner, which has completed analysis of local child care provision along these lines. First, it has collected data on all of the child care slots available in Cuyahoga County (by type of setting) and compared that with the number of preschoolers needing some type of child care.\textsuperscript{28} It is able to calculate and compare “utilization rates” by type: Head Start vs. private child care, full-day slots vs. morning-only slots, etc. Second, it has used an established rating procedure to perform assessments of the quality of a random sample of local child care centers (and less formal procedures to assess quality in family child care homes).\textsuperscript{29}

These are the two most basic things the public needs to know about any service: Is the supply of the service sufficient to meet the need and is the quality adequate? Overall, the Cleveland child care system performed fairly well on these fronts (although considerably better with respect to supply than quality). The point is that having hard data on these topics enables system managers to identify gaps and problems and then focus resources on addressing them—things that cannot be done in any reasonable way without the data. Furthermore, the data in both Providence and Cleveland have been collected at the neighborhood-level so it is possible to map comparative rates across neighborhoods.

It must be recognized, of course, that service providers are sometimes reluctant to provide data on their performance because its public presentation seems threatening. There is much to suggest, however, that advances along these lines can be made. The NNIP partners in most cities have learned how to handle sensitive information in a way that builds trust over time—not sweeping threatening information under the rug but, rather, emphasizing the positive uses of data to identify and fix problems rather than to point fingers. A recent report by Cleveland’s Center on Urban Poverty and Community Development, which tells the story of its evaluation of the IIC program over a ten year period, offers many cues about collecting and using evaluative information in ways that work to make positive change.\textsuperscript{30}

Rapid advances in information technology imply that much useful data for these purposes can now be provided at low cost. Indeed, location specific data on child care provision is now collected by seven of the eight NNIP partners participating in this project, and six regularly receive data on child abuse and neglect. All eight regularly receive data on births and share of

\textsuperscript{27} The Providence Plan, 2004, p.66.
\textsuperscript{28} Fischer et al, 2007, with updates in the Cleveland Policy Brief for this project.
\textsuperscript{29} Peisner-Feinberg et al, 2009.
\textsuperscript{30} Center on Urban Poverty and Community Development, 2009.
elementary students eligible for free and reduced price lunches—see table 2.1 and further discussion above.

This project heightened the awareness of the importance and potential of performance monitoring for early childhood programs in most participating sites. It resulted in one participant (The Children’s Trust in Miami) making the commitment to build “Results- Based Accountability” into its own operations and then to extend it to the broader school readiness system its community. It resulted in another (The Center for Poverty and Community in Cleveland) being granted access to kindergarten assessment data in a form that will make it possible to do diagnostic work, arraying assessment results by neighborhood and relating them to the exposure of children to different types of programs. (See further discussion below.)

4. **This work demonstrated that advocacy by local data intermediaries can be influential in strengthening local school readiness system initiatives. In two sites, this project was key to laying the foundation for new comprehensive school readiness initiatives and in others, it helped build momentum in such initiatives that were already underway. In some cities, it also led to experimentation with methods to better target resources to neighborhoods most in need.**

This project clearly had different effects across the eight cities. It may have had the greatest impact in two sites where systems were weakest initially. In Chattanooga, the local NNIP partner took the leadership in facilitating the establishment of a new local collaboration to further coherent systems development. A new local school readiness system initiative was also established in Memphis. In this case the NNIP played a less “out-in-front” role but its supportive work at every stage was clearly critical to the outcome. A new neighborhood-based approach to service deployment was also an important result.

In Atlanta and Denver, local system efforts were farther along at the outset, but the project also had valuable impacts; i.e., commitment to coherence was strengthened. Milwaukee is yet a different environment. This project made inroads—particularly with its forum, which focused on engaging the business community in the issue—but this had not yet motivated much stronger or coherent local leadership by the time of this writing.

At the other extreme, local school readiness systems in Miami, Cleveland and Providence were already quite advanced in 2007. In these places, it cannot be claimed that this project changed the agenda dramatically, but it did make useful contributions, particularly related to new data and analysis that had the potential for advancing both targeting and accountability. In Miami, the

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31 See, Friedman, 2005.
Using Data to Promote Collaboration in Local School Readiness Systems

project also led to a new commitment to work at the neighborhood level and, in both Miami and Cleveland, to important new opportunities for performance assessment.

**Chattanooga.** The Chattanooga story is a good model for places that have not made significant progress with their school readiness system. Before the project started there, relevant actors had met together in various groupings over the years but no formal association to further school readiness had emerged. NNIP’s local partner, the Ochs Center for Metropolitan Studies, began this project by getting representatives from the relevant groups involved in a project advisory board. The board had 19 members representing health, human services, and education agencies; KIDS COUNT; local service providers; the United Way; Head Start; and the Child Care Resource and Referral agency.

During the Initiative, the Ochs Center convened a number of meetings and focused each on an aspect of the project. Advisory board discussions ranged from potential data sources for school readiness indicators to ways to measure and define school readiness to the review of the drafts and results of the system scan and school readiness brief. The board also played a large role in determining the content for the community forum, presenting on panels, and motivating various groups of people to attend the forum.

The community forum, hosted by the Ochs Center and the advisory board in June 2009, generated widespread interest. More than 150 people attended, including a number of service providers and caregivers, as well as the funding community, school officials, community residents and faith-based providers, and local and state-level elected officials. Several local media outlets covered and reported on the event.

The keynote address was given by journalist Paul Tough who had just finished his book on Geoffrey Canada’s Harlem Children’s Zone (HCZ). Tough explained the holistic “conveyor belt” approach of HCZ, from prenatal care to school readiness and ultimately to high school graduation and college attendance.

The Ochs Center then presented the highlights from their school readiness brief and then held two discussion panels. The first discussed the importance of early education for the community, the consequences of not adequately preparing children for school, and the effects of geographic concentrations of children at risk for not being ready for school. Members of the second panel discussed existing early childhood programs in Hamilton County (greater Chattanooga), ways that system integration could be improved, and how the HCZ strategies could be applied to the County. Tough was later quoted in the press as saying:

> It feels like the research that the Ochs Center has done in the report is really pointing toward a situation that’s very much like what exists in lots of cities . . . where there are
certain neighborhoods in a city where poverty tends to concentrate . . . and poor school performance concentrates there as well.

After the forum, the Ochs Center, confirmed that the advisory board members wanted to continue with the project and develop a consensus work plan with action steps to address the six policy recommendations from the school readiness brief. These included creating a permanent coordinating council on early childhood programs in Hamilton County (Greater Chattanooga).

Since then, the board and the Ochs Center have met each month to develop specific action steps that will need to be taken to implement recommendations. 32 Progress is already underway on implementing a few of them. One was to develop a common assessment tool for school readiness to inform both public schools and early education providers. An offshoot of the advisory board formed a sub-group to develop a new tool that was based on several national models for assessments. Currently it is being piloted and the school district has applied to the Tennessee Department of Education for approval. This group also developed guidelines for pre-kindergarten and pre-school programs as to the skills that children should be developing in these settings to prepare them for kindergarten.

Another recommendation was to develop a county-wide database on early childhood interventions in order to both provide information about the child’s development to kindergarten teachers to insure a smooth transition and also to begin to link early childhood interventions with elementary school outcomes. The school system is revamping their student intake system and has asked the Ochs Center to recommend what data fields to put in to the system. The Ochs Center hopes they will include information about what education and also health interventions the child has received prior to entering school and that the intake system will be linked with data on student achievement and teacher recruitment.

Finally, the Initiative and the work of the Ochs Center has generated interested in the Hamilton County community and the County Mayor’s Office to put together applications for planning grants for the federal Promise Neighborhoods and Choice Neighborhoods programs.

**Memphis.** NNIP’s local partner (the Center for Community Building and Neighborhood Action—CBANA—at the University of Memphis) has been providing analytic and organizing support to various early childhood programs for several years. It undertook the work of this Initiative jointly with The Urban Child Initiative (TUCI) which, as noted earlier, had also been promoting the melding school readiness programs into a coherent system.

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32 When necessary the board convenes smaller working groups to prepare for the meetings or brings in additional stakeholders for knowledge on specific issues.
Presentations and discussions of the system scan with local groups enhanced recognition of the need for a coherent system view of school readiness activity as it did in other cities, but that probably had greater impact in Memphis that in other places where that vision was closer to the reality. Groups particularly interested in movement in this direction included the Shelby County Office of Early Childhood and Youth, the Early Home Visitation Collaborative (coordinated by the Metropolitan Interfaith Alliance), and the Le Bonheur Children’s Hospital.

It was TUCI/CBANA’s convening of the community forum, held in May 2009 with 55 participants from these groups and a much broader array of officials, service providers and advocates, however, that much accelerated the momentum. The most important outcome was the formal establishment of the Shelby County Early Success Coalition in June 2009—an entity that very much fits the institutional model discussed for other cities in this brief. The Coalition has met on a quarterly basis ever since (TUCI and CBANA continue to serve on the executive committee which meets monthly).

A feature of the forum and report that seemed to have more effect in Memphis that in most other cities was the mapping of childhood risk patterns by neighborhood. The analysis showed that while concentrated risks were still prevalent in the city’s central zone, they now also were appearing in a ring of locations outside of that zone, as a result of recent trends toward some deconcentration of poverty. The clear problem was that families in these new locations did not have the access to services that historically had been provided almost solely in the central zone.

The theme of “reaching families where they live,” has motivated subsequent action by partners in the Early Success Coalition and others to target service delivery more effectively to all neighborhoods of need. CBANA has also taken the initiative with the Partners for the Homeless and other groups to form the Site-Based Resident Services Collaborative to strengthen delivery capacity in this approach. With support from the Shelby County Office of Early Childhood and Youth and others, CBANA is also developing an interactive neighborhood-oriented asset mapping system that will overlay assets (addresses of service providers and other resources) on maps of neighborhood-level risk factors for children and families.

Atlanta. Atlanta’s forum in May 2009 had around 50 attendees, predominantly providers and advocates, as well as state agency officials and local foundation staff. The presentation of the major findings generated considerable interest and was well reported in the press. Neighborhood disparities in childhood risk factors probably received the most attention and have been the feature that has had the most influence since then. Several groups had been working on neighborhood based approaches to early childhood issues locally before this project began (work by the Annie E. Casey Foundation Civic Site, the Mechanicsville Community Learning Collaborative, the Whitefoord Community Program, and the East Lake Community Revitalization). The forum, however, heightened interest in these approaches and interest in
further use of data to guide them. The lead local NNIP partner for this work (Office of University-Community Partnerships at Emory University—OUCP) has since been asked to provide additional analytic support to the Casey, Whitefoord and East Lake projects. It is also providing maps and data to support a new effort by the United Way called “Opportunity Zones” which will be important in realigning its investment strategy. United Way plans to select five to seven such zones (clusters of census tracts where needs are greatest) in its 13-county service area, each zone to be anchored by a “hub” agency. Local data and analytic support provided by the OUCP are also being used in planning for Atlanta’s Promise Neighborhood grant applications and as a basis for a new wave of strategic planning on early childhood issues at the state level.

Denver. The Denver Early Childhood Council was already gaining momentum before this project began, but local participants believe that the project (work done by the local NNIP partner, the Piton Foundation) gave it a notable further boost. Positive feedback about the system scan (first document of its kind, forcing people to see school readiness activities as one system) was probably stronger in Denver than in any other site. The data report was a highly professional document and its presentation and review at a well-attended and well-publicized forum exposed many more people to these ideas than had been before. While the Council had already planned to strengthen linkages to health and mental health services in the system, the project certainly reinforced and supported that idea. The identification of spatial mismatches between low income neighborhoods and quality schools also caught people’s attention—local staff expect this to lead to new thinking about better targeting resources to needy neighborhoods although formal plans to do so have not yet been developed (maps were supplied to city staff at their request). Since the forum, Piton has developed a new web-based tool tracking and presenting new data (e.g., mapping child-care locations by quality ratings). Piton believes these tools will be used more effectively because the work of this project built an audience better prepared to recognize their value and take advantage of them.

Miami. This project had three important effects in Miami-Dade County beyond general reinforcement of the themes related to a stronger and better coordinated school readiness system. First, data and maps on neighborhood disparities has motivated The Children’s Trust and its partners to begin experimenting with selective neighborhood focused planning and service delivery. The Trust expects to approach this work with emphasis on “neighborhood listening and empowering.” Second, the project led to the Trust’s recognition of opportunity to develop a system of “Results-Based Accountability” internally and, then to explore the extension of this approach to the broader school readiness system overall. This latter theme reinforced the priority given to its “Quality Counts” initiative—a quality rating improvement system for child care centers and family day care homes (now with 407 centers/homes/ Head Start locations participating). Third, the project enhanced recognition of the need for data integration at the child-level across components of the school readiness system. Furthering this idea, the Trust

33 The Children’s Trust. 2008b.
and its partners are now working with the public school system and healthcare providers to establish a data information exchange. This dynamic system will integrate children’s education and medical information to form a comprehensive view of a child’s health and well-being as she transitions through early childhood and into school. This secure system will connect families with healthcare providers, teachers and social workers, providing accessible information for identifying individual needs.

**Providence.** The Providence Plan’s presentation of updated neighborhood data (report and forum) offered a number of policy relevant findings. Compared to its earlier report, for example, there was some good news (more timely immunizations, lower exposure to lead toxins, and less use of emergency rooms for unintentional injuries) and some not so good (higher rates of parental incarceration). Probably the most influential aspect of this project, however, was the Providence Plan’s use of some of the funds from this grant to begin to address the most important crisis their school readiness system has faced in many years—a dramatic cut in state funding for child care. The work entailed a survey (95 families and 482 child care providers) with the results vividly showing the effects of the cuts on providers (loss of services, income, etc.) as well as on families. This information was obviously valuable to Providence’s broader coalition on early childhood issues in planning for necessary adjustments. It is too early to tell about its effect on the political environment, although results were well covered in the press. So far, there have no further cuts made after the initial round.

**Cleveland.** Beyond reinforcing of the basics, this project had an important impact in Cleveland that was not anticipated at the outset. While the county’s Invest in Children Initiative (IIC) has always been comprehensive in its outlook, it has given a very high priority to prenatal conditions and problems of infants and toddlers in the past. In this project, the local NNIP partner (Center on Poverty and Community Development at Case Western Reserve University) broadened coverage of both issues and programs related to children in the 4–5 year age group. With this shift came a greater recognition of the importance of learning more about how well programs are performing for kids over the continuum of years from 0 to 5. Perhaps the best hope of doing that is relating the results of kindergarten assessments to earlier program experiences for individual children; i.e., to be able to see what mix of program supports (or the lack of them) were associated with the results found in the kindergarten assessment, to be able to show how kindergarten assessment results differed on average for one group of child care providers versus another, etc. In response to this recognition, the Cleveland city school system has since begun to release kindergarten assessment data (child level records) to the Center on Poverty and Community Development to perform such analysis (the Center has a strong long-term reputation for guarded and responsible use of confidential data).
Section 3

IMPLICATIONS AND RECOMMENDATIONS

The Obama administration has substantially increased funding for early childhood programs. February 2009, saw the passage of the American Recovery and Reinvestment Act (ARRA) which, among other things, included $2 billion in funding for the Child Care Development Block Grant (CCDBG) and $2.1 billion for Head Start ($1.1 billion of which was to be channeled to Early Head Start). In the president’s proposed budget a year later, despite an freeze on total discretionary spending, the share of that total to be spent on children’s programs would go up from 19.4 percent in 2010 to 20.3 percent in 2011.\textsuperscript{34}

The increases underscore the need to find ways to enhance program effectiveness, that is, so that this funding will yield maximum payoff. We believe the project reviewed in this report offers relevant lessons in this regard. We offer four basic recommendations.

Given the way our system of governance is structured, state governments have to be the key actors in each case. Accordingly, we frame our ideas as recommendations for state action. We believe the federal government should provide incentives for states to comply, but a period of discussion is probably appropriate before specific recommendations for modifications to federal laws are formulated.\textsuperscript{35}

1. States should catalyze, energize and support collaborative locally driven initiatives devoted to creating stronger and more coherent school readiness systems in counties that have potential to sustain them. These initiatives should emphasize strengthening

\textsuperscript{34} First Focus, 2010

\textsuperscript{35} In early 2009, we might have recommended that the federal government encourage the states to take these actions by incorporating the ideas into implementing regulations for the “Early Learning Challenge Fund,” which was part of the then proposed Student Aid and Fiscal Responsibility Act. It now appears that approach is not likely to be enacted. Another relevant place for them might be in amendments to the Head Start Act which, by amendment in 2007, requires governors to designate or establish State Advisory Councils on Early Childhood Education and Care for children from birth to school entry.
**linkages of school readiness services to systems that support school success in early grades.**

NNIP partners offer good reasons to expect that initiatives spurred, driven and “owned” by collaborations of local actors are likely to be more successful in achieving school readiness than those directed solely by state agencies. This is not a surprise. Many state governments have long understood this point and already actively support and rely on local initiative to achieve this end. However, the point seldom receives explicit recognition, let alone, sufficient emphasis.

The design of all of these initiatives should recognize the critical need to strengthen the linkages of school readiness services to systems that support school success in the early years. There is much to suggest that the emphasis needs to be on development over the period from birth to age 8, avoiding discontinuities within it. This justifies a new priority to expanding and linking data systems as well as linkages in services.

To spread these initiatives, the federal government would certainly have roles to play. These should include identifying and documenting best practices as to the creation of successful local initiatives, as well as providing strong incentives and financial support. However, the states are the entities best positioned to take direction action—to develop aggressive plans to catalyze and support them. Responsible state officials should be trained in best ways to implement this type of agenda and they, in turn, should develop training and support packages to guide local leaders in how best to collaborate and how to create institutional infrastructure with the required dynamism.

We do not expect that these sorts of initiatives could be developed and sustained in all localities. Larger urban counties probably have the strongest resource base (human, institutional, financial) to support them. However, a very large share of all young children in need live in large urban counties.

2. **States should also provide incentives for local initiatives to experiment with targeting school readiness resources and service deployment in neighborhoods most in need.**

It is also not a surprise to many that large numbers of the children that face the greatest risk to school readiness are typically concentrated in a limited number of poor neighborhoods in most U.S. cities. Yet the clear graphic documentation of this circumstance in all cities participating in this project was viewed as noteworthy everywhere. As mentioned earlier, that was often the most important “hook” in securing interest in the project from many of the key players in the system. The interest in doing something special for these places was heightened by the

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36 Annie E. Casey Foundation, 2010
understanding of many participants that effects of concentrated poverty may make it harder to help children living in such neighborhoods achieve school readiness than those living elsewhere.

This does not imply focusing all school readiness resources on the most troubled neighborhoods. Many children in need do live elsewhere. And it must be recognized that it is always politically difficult to allocate resources in a way that is not even on a per capita basis. As noted, the Providence Plan (the NNIP partner with the most experience with this issue) recommended only a partial increase in funding for its target neighborhoods.

At a minimum, the right thing to do at this point may be to encourage local school readiness collaboratives to “experiment with” ways to focus more resources and attention on troubled neighborhoods. This is likely to be the “take-away” from this project in several participant cities (e.g., Memphis, Atlanta and Miami). Much remains to be learned about how best to focus effort in such neighborhoods on the school readiness front. The experience of the Harlem Children’s Zone is being used as the basis for the design of the national Promise Neighborhood program. But the resources needed for that approach suggest that it is not likely that it could be applied fully in many places. There is a need to conceptualize and experiment with alternatives.

The “neighborhood listening and empowering” theme of Miami’s Children’s Trust may well be appropriate for other cities as they begin to work in this way, as will careful documentation and assessment of the experiments.

3. States should provide incentives for local school readiness initiatives to prepare annual reports assessing their progress and change in the overall state of school readiness locally. These reports should permit assessment of problems and progress at the neighborhood level.

This recommendation should be of interest in an era of increased national pressure for accountability and evidence based policy. If annual reports were required on the performance of local school readiness systems as a whole, it would be difficult for the constituent programs (home visiting, day care, mental health, etc.) to avoid recognition of that they are all contributing to the same goal and must collaborate. Their sponsors would also find it harder to avoid actions that recognize and support coherence and reward good performance.

To really be effective, such reports should assess whether the state of school readiness is improving or deteriorating at the neighborhood level. If they do not, it will be impossible to tell whether the overall result in a county is simply an averaging out of improvements in some
neighborhoods and deterioration in others. Yet understanding such differences is key to
developing a fact based approach to deciding what needs to be done.

It is true that very few localities today could assemble the data needed to prepare credible
performance reports like this. However, this project makes it evident that doing so now appears
close to being feasible in several places. If those that have the richest data resources could be
supported to prepare such reports, they might be powerful models that would encourage the
spread of these capacities.

4. States should significantly expand their efforts to extend the coverage and improve
the quality of kindergarten school readiness assessments. They should also plan for
their active use to gain better understanding of program performance.

As noted in Section 3, school readiness assessments have been implemented in all of the sites
in this project. Their coverage and quality, however, leave much to be desired. Most measure
only a few items from the full list that most experts would now say must be measured for a full
understanding of school readiness. None have adopted available tools that the field now
recognizes as the “gold standard” for these assessments, such as the Early Development
Instrument (EDI).³⁷

Even so these sites are above average. A recent review by Child Trends identifies that, among
states and the District of Columbia, 18 have common assessments state-wide, 11 have locally
selected assessments and the remaining 22 have neither.³⁸

Good assessments can be of obvious value in targeting the right remedial support to individual
children. However, they have much broader potential. Without the universal local
implementation of such assessments there is no reliable way to say whether school readiness is
improving community-wide or not. And beyond these basics, work under this project in
Cleveland suggests a new potential: the use of these assessments in comparing the efficacy of
different program treatments (i.e., to help in diagnoses of what works).

³⁸ Daly, Burkhauser and Halle, 2010.
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- Providence: Katie Murray, The Providence Plan and Ready To Learn Providence
**ANNEX A**

Excerpt from Coulton, Claudia and Rob Fisher. 2008. *Systems Scan for Cuyahoga County, Ohio*. Cleveland OH: Case Western Reserve University, February.

### 3. Registered child care

<table>
<thead>
<tr>
<th>Responsible Agency</th>
<th>Role Description</th>
<th>Scope</th>
<th>Data Collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cuyahoga Employment and Family Services (EFS)</td>
<td>County department (a) handles eligibility determination of families receiving subsidized child care, and (b) certification of child care homes (Type B)</td>
<td>Eligibility determination conducted on approximately 20,000 children annually; certification of new homes is quite low (&lt;50/year) but re-certification of existing homes involves approximately 900 homes</td>
<td>Child-level data maintained on approved child care vouchers and the child care programs where they were redeemed; Program-level data are maintained for each child care home in regard to initial certification and re-certification</td>
</tr>
<tr>
<td>Starting Point</td>
<td>Non-profit entity that serves as the County’s child care resource and referral agency; funded by County to provide quality enhancement supports to early care professionals in home-based and center-based programs</td>
<td>Services are available to 400 center-based programs, 200 school-based programs, and 1,300 family child care homes; approximately 200 centers are involved in the voluntary Step Up to Quality program and 600 home-based providers are enrolled in the voluntary Care for Kids program</td>
<td>Data collected at the program level and at the teacher level to show all services received over time; program-level data collected via ongoing program census; data available for external evaluation</td>
</tr>
<tr>
<td>Ohio Department of Job and Family Services</td>
<td>State department that handles licensing of child care centers and larger Type A family child care homes</td>
<td>The number of ODJFS licensed programs in the county is approximately 600</td>
<td>Data only available from ODJFS website and indirectly from Starting Point</td>
</tr>
</tbody>
</table>
Collaboration
Efforts at more concerted collaboration have been underway in this domain since the initiation of Invest in Children in 1999 and were redoubled under the strategic planning work undertaken in 2005–06. The IIC Goal 3 (Children Prepared for School) Strategy Committee is cochaired by the heads of EFS and Starting Point. The group meets quarterly to monitor overall progress and has created strategy subcommittees to guide collaborative efforts in four particular areas of focus. These are: (1) center professional development and accreditation, (2) universal pre-kindergarten, (3) family child care homes, and (4) special needs child care.

Sample Indicators
- Children receiving child care vouchers per 100 children age 0–6 eligible for child care vouchers
- # of child care slots per 1,000 children by age group
- % providers enrolled in voluntary quality enhancement (Care 4 Kids) by type of provider