ALASKA EARLY CHILDHOOD COORDINATING COUNCIL

STATEWIDE STRATEGIC REPORT

November 2012
AECCC Statewide Strategic Report

Executive Summary

The quality of life for Alaska’s young children impacts the health, economic, and social outcomes for all citizens of our state. Investments in quality early childhood programs have demonstrated a positive rate of return by increasing school success and graduation rates, workforce productivity, and responsible citizenship, while decreasing the later need for special education, incarceration, and dependency on social institutions.

As part of the Head Start Reauthorization Act of 2007, states were required to establish State Advisory Councils on Early Childhood Education and Care, which have also come to be known as Early Childhood Advisory Councils. The Alaska Early Childhood Coordinating Council (AECCC) promotes positive development, improved health and mental health outcomes and school readiness for Alaska’s children prenatal through 8 by creating a culturally responsive, comprehensive and accessible service delivery system that links service providers, empowers families, and engages communities. Under a Memorandum of Agreement signed by all the Council members, the AECCC facilitates the integration and alignment of services, planning efforts, resources, policy development, and funding as well as strengthens connections between health, mental health, education and family support systems and public and private partners.

A significant task of the AECCC during its first year of operation has been the development of a strategic report for the Governor. The report outlines eight recommendations in the following areas:

- increasing the overall participation of children in early childhood programs for those seeking access;
- supporting planning and coordination of local, regional and state partnerships;
- improving professional development for early childhood professionals;
- improving State early learning standards;
- establishing a unified data collection and monitoring system; and
- facilitating the integration and alignment of services, planning efforts, resources, policy development and funding.

In order to increase the overall participation of children in early childhood programs for those seeking access, the Council’s first recommendation is to expand early childhood services to 5000 new children and families through in home and out of home services. Support for this priority allows more parents and families to have choices regarding the types of programs and supports in which they and their young children engage. More community entities will coordinate services in family and child centered approaches that provide children with an individualized and intentional set of interactions that change over time based on the needs and decisions of that family. Finally, more families will be strong advocates for their children, ready to engage in a partnership with their child’s school, and more children will be ready for success in that school setting.
The Council’s second recommendation is to identify methods to increase the pay in early childhood settings, particularly for those with higher degrees. The AECCC believes when links are developed between professional development and staff compensation, early childhood workers would be encouraged to remain in the workforce and advance up the career ladder, providing consistent and stable services for young children.

In order to establish a unified data collection, monitoring and reporting system and improve the state’s early learning standards, the Council’s third recommendation is to implement a Quality Rating and Improvement System (QRIS). When this recommendation is supported, there will be a sustainable system to recognize, reward and improve the quality of early care and education programs. A QRIS will provide a reliable method for parents and the public to evaluate early care and education programs, ensuring children have access to programs that offer strong foundations for learning and life-long positive outcomes. Ultimately, more parents and families will have access to information to make better informed decisions about the types of early care and learning programs best for their children while early care and learning programs will be supported and incentivized for increased quality.

In order to improve the state’s early learning standards, the Council’s fourth recommendation is to increase awareness of the Alaska Early Learning Guidelines (ELGs) by coordinating efforts (public and private) to include the “universal” early care and learning workforce (parents; extended family, community). In supporting this recommendation Alaska gains the connective outreach that builds a standards-based support system for parents, families, programs, and communities working with young children and supports alignment of educational services through grade 12.

The Council’s fifth recommendation is to embed “Strengthening Families” protective factors through systems across the board to include grant proposals, policies, materials development, and long-term funding efforts. This recommendation will support families in their roles as primary caregivers through programs that are responsive to emerging family and community issues and models for the principles of family support. Families will have access to a user-friendly, culturally competent, integrated service delivery system. A clearinghouse will serve as a repository of information regarding best practices in family services; support interdisciplinary training; provide technical assistance; and distribute information to programs, stakeholders and policy makers.

In order to further assist early childhood efforts within local communities, the Council’s sixth recommendation is to support and promote a local partnerships grant process to invest in early childhood and family support. The Council believes that communities will have a better chance at truly meeting the needs of young children and families, and the network of partnerships will be able to grow, when this recommendation is supported. This will move Alaska toward a culturally responsive, comprehensive, and accessible service delivery system for young children that links service providers, empowers families, and engages communities.

The Council’s final two recommendations concern the health and safety of Alaska’s youngest citizens. Recommendation seven is to seek to ensure every child will have full access to well-child exams that follow the Alaska Periodicity Schedule, and recommendation eight is to seek to ensure every child and their family has full access to age appropriate services that promote physical, emotional,
and behavioral health and safety. Physical and mental health are key components in cognitive development and learning. Supporting these recommendations will promote positive development, improved health and school readiness outcomes for young children.

In conclusion, research across a broad spectrum of disciplines indicates that providing resources for young children and their families increases their potential for social and economic success. Early childhood education improves outcomes across multiple dimensions: education, crime, child welfare, and health care. Investments in Alaska’s youngest citizens and their families will have far-reaching implications in regard to Alaska’s future development as a state.

**Introduction**

The quality of life for Alaska’s young children impacts the health, economic, and social outcomes for all citizens of our state. Early childhood is a critical time for the development of foundational skills and competencies that a child will need for success in school and life. Research on early brain development makes a powerful case for investing in strategies to promote healthy early development. Investments in quality early childhood programs have demonstrated a positive rate of return by increasing school success and graduation rates, workforce productivity, and responsible citizenship, while decreasing the later need for special education, incarceration, and dependency on social institutions. Attention to Alaska’s youngest citizens is critical for building the human capital necessary for maintaining a viable state economy.

As part of the Head Start Reauthorization Act of 2007, states were required to establish State Advisory Councils on Early Childhood Education and Care, which have also come to be known as Early Childhood Advisory Councils. Within the Act are the following requirements for these Advisory Councils:

- Conduct a periodic needs assessment.
- Identify opportunities for, and barriers to, collaboration and coordination of early childhood programs and services.
- Develop recommendations for increasing the overall participation of children in early childhood programs.
- Develop recommendations for a unified, statewide early childhood data collection system.
- Develop recommendations for a statewide professional development system.
- Assess the capacity and effectiveness of 2- and 4- year public and private institutions of higher education.
- Make recommendations for improvements to early learning standards and develop high-quality comprehensive early learning standards.

The purpose of the Alaska Early Childhood Coordinating Council (AECCC) is to promote positive development, improved health and mental health outcomes and school readiness for
Alaska’s children prenatal through 8 by creating a culturally responsive, comprehensive and accessible service delivery system that links service providers, empowers families, and engages communities. Under a Memorandum of Agreement signed by all the Council members, the AECCC facilitates the integration and alignment of services, planning efforts, resources, policy development, and funding as well as strengthens connections between health, mental health, education and family support systems and public and private partners.

Families play a central role in the healthy development and school readiness of young children. Early childhood programs must support this important role and address the challenges impeding the ability of families to nurture and support the healthy development of their children. Parents and family members should be provided with opportunities to exercise leadership within the state early childhood system.

Early childhood programs for young children and their families are found in a variety of state departments, Alaska Native organizations, and private service organizations. The funding for young children’s services is generally categorical and targets specific populations and issues. To build a comprehensive early childhood system, a governance structure with the legitimacy to endure is needed to ensure the overarching oversight of a comprehensive system for young children.

During its first year the Council met face-to-face four times. At its first meeting the Council established the following committees to carry out Council work between meetings: Workforce Development, Family Support, Early Care and Learning, Health and Mental Health, and Program/Policy. It was determined that committees would meet via audio conference in order to move their work forward. The Program/Policy committee became a committee of the whole and as such met whenever there was a need to make a decision that would impact the Council’s work as a whole. As the year progressed the Council also learned about the Inventory Project undertaken by the Department of Education & Early Development (EED) to identify existing early care and learning services. Information from the Inventory Project was used to create an online Early Childhood Resources Directory. The Council also established a webpage, which is housed on the Department of Health and Social Services website. During the Legislative Session, the Council presented an update on its activities during a joint Senate and House Education Committee hearing.

A significant task of the AECCC during its first year of operation has been the development of a strategic report for the Governor. The report outlines the AECCC’s recommendations in the following areas:

- increasing the overall participation of children in early childhood programs for those seeking access;
- supporting planning and coordination of local, regional and state partnerships;
- improving professional development for early childhood professionals;
- improving State early learning standards;
- establishing a unified data collection and monitoring system; and
facilitating the integration and alignment of services, planning efforts, resources, policy development and funding.

As the Council’s priorities were identified individual committees began to work on the identified priorities in order to make recommendations. The priorities and corresponding committees are listed below:

1. Expand early childhood services to 5,000 new children and families through in home and out of home services. (Early Care and Learning)

2. Identify methods to increase the pay in early childhood settings, particularly for those with higher degrees. (Workforce Development)

3. Implement the QRIS (Quality Rating and Improvement System) plan including an implementation time-line of activities and funding. (Early Care and Learning)

4. Increase awareness of the Alaska Early Learning Guidelines (ELGs) by coordinating efforts (public and private) to include the “universal” early care and learning workforce (parents; extended family, community). (Early Care and Learning)

5. Embed “Strengthening Families” protective factors through systems across the board to include grant proposals, policies, materials development, and sustainability of long-term funding efforts. (Family Support)

6. Support and promote a local partnerships grant process to invest in early childhood and family support. (Early Care and Learning)

7. Seek to ensure every child will have full access to well-child exams that follow the Alaska Periodicity Schedule which is based on the recommendations of the American Academy of Pediatrics. (Health and Mental Health)

8. Seek to ensure every child and their family has full access to age appropriate services that promote physical, emotional, and behavioral health and safety. (Health and Mental Health)

Recommendations and Rationale

This section of the Strategic Report outlines the recommendations of the AECCC for FY 2014 along with background information and the rationale for the recommendation. Each of the recommendations is based upon the priorities of the AECCC as well as research and work conducted by the committees. Resources and links to articles used by the committees in preparing the rationale for their recommendations are found in Appendix A.
Increased Participation

In order to increase the overall participation of children in early childhood programs for those seeking access, the Council recommends the following:

**Recommendation 1:** Expand early childhood services to 5000 new children and families through in home and out of home services.

This AECC recommendation calls for providing access to an array of services for new families with young children across the spectrum of in home and out of home service providers. At the heart of the Council’s efforts, this recommendation directly meets the requirements of Section 642B part D (i)(III) in the Head Start Act:

“develop recommendations for increasing the overall participation of children in existing Federal, State, and local child care and early childhood education programs, including outreach to underrepresented and special populations;”

Based on the Alaska Early Care and Learning Program Inventory (a point in time survey of programs across Alaska) 14,473 of the July 2009 Alaska Department of Labor census estimated 69,032 children, zero through age five, participate in early care and learning services. The introduction of 5,000 new children served across program types is a significant opportunity not only for expanding access and services, but also for the development of collaboration and coordination across programs and communities. It also provides us with the challenges of overcoming barriers that may exist in some of these programs and communities. Implementation of this priority will also help the Council address the federal requirement found in 642B section D (i)(II):

“identify opportunities for, and barriers to, collaboration and coordination among federally-funded and State-funded child development, child care, and early childhood education programs and services, including collaboration and coordination among State agencies responsible for administering such programs;”

Based on the data and information from the Alaska Early Care and Learning Program Inventory mentioned above, and the regional and community analysis of that data, we know more about the availability of a variety of existing program types as well as where they serve and in some cases, their capacity to serve additional children and families. This data was gathered to meet the requirement in 642B part D (i)(I):

“conduct a periodic statewide needs assessment concerning the quality and availability of early childhood education and development programs and services for children from birth to school entry, including an assessment of the availability of high-quality pre-kindergarten services for low-income children in the State;”

Along with additional information around Head Start and Parents as Teachers program waitlists, and Child Care capacity, we can see the numbers already seeking services through these providers. As of January 2012 Head Start has 1218 children on wait lists. The current PAT waitlist shows 65 families through 5 providers. An additional 350 children are in families who have expressed an interest in PAT services if they were available. Both lists
reflect children and families in communities where those programs are currently providing services. There are additional communities, not currently receiving services, who have requested consideration in future expansion projects, and there are additional un-served and underserved communities around the state. The National Association of Child Care Resource and Referral Agencies (NACCRRA) 2012 Childcare in the State of Alaska Report has shown that Alaska has 35,341 children under six years of age with all of their parents in the work force, but only 16,947 licensed childcare slots are available (capacity). While the number of childcare centers and their capacity have remained the same over the last 5 years there has been a 25% decrease in licensed family childcare. To meet these needs for more access to quality care and education an increase in capacity is needed.

All of these family needs and community desires when viewed with the fiscal realities and program capacities of today can be blended to determine the breakdowns of program types – in home and out of home – selected to serve a particular number of children and families through any new funding provided to meet this priority.

If this priority is not supported Alaska will continue to see high percentages of its children arrive at pre-school, pre-k, and kindergarten below their typically developing peers. The level, intensity, and duration of the interventions, interactions, and supports needed to close the achievement gap prior to third grade will place significant burdens on families and children, local schools, and communities. According to the Alaska Pre-Kindergarten Year Two Report, the Alaska Pilot Pre-Kindergarten program, 89% (FY 10) and 73% (FY11) of children entering the program below expectations for typical development of the Peabody Picture Vocabulary Test. 73% (FY10) and 71% (FY11) of children started the program below expectations on the DIAL-3 (Developmental Indicators for the Assessment of Learning).

When this priority is supported, more parents and families have choices for the types of programs and supports in which they and their young children engage. More community entities will coordinate services in family and child centered approaches that provide children with an individualized and intentional set of interactions that change over time based on the needs and decisions of that family. Finally, more families will be strong advocates for their children, ready to engage in a partnership with their child’s school, and more children will be ready for success in that school setting.

Professional Development and Career Advancement

In order to improve professional development and career advancement for early childhood professionals the Council recommends the following:

**Recommendation 2:** Identify methods to increase the pay in early childhood settings, particularly for those with higher degrees.

This AECCC recommendation calls for the identification of a variety of ways to develop links between successful staff professional development, especially degree-related, and staff compensation. It relates to the requirements of section 642B part D (i)(V) in the Head Start Act:

“develop recommendations regarding statewide professional development and career advancement plans for early childhood educators in the State;”
Approximately 7,300 early childhood educators are the backbone of the early care and education workforce according to the Economic Impact of Early Care & Learning Services in Alaska, 2011 Update. These individuals work in licensed child care centers, licensed family care homes and group homes, Head Start, private and public preschools, pre-kindergarten, infant learning programs and other early childhood settings.

The services provided by the early care and learning workforce makes it possible for 32,300 additional Alaskans to participate in the labor force. This accounts for 10% of the Alaska resident workforce and equates to annual wages of just over $1.1 billion, an average of $35,300 per family in additional Alaska annual income.

According to a 2009 Alaska Department of Labor and Economic Development Performance Report, early educators’ wages are among the lowest in Alaska’s workforce, with an average monthly wage of an individual in this field being $1,494 compared to $3,886, the overall average monthly wage in Alaska.

Teacher retention promotes attachment and quality relationships between young children and caregivers, which is crucial to optimal brain development and learning. The level of training and education of an early care and learning provider is one of the strongest indicators of quality care and positive child outcomes.

The Alaska System for Early Education Development (SEED) is Alaska's early childhood professional development system. It is overseen by a collaborative group made up of members representing Head Start, the Tribal Childcare Association, State of Alaska Departments of Education & Early Development, Health and Social Services, Labor and Workforce Development, thread, (Alaska’s Child Care Resource and Referral agency), and other nonprofit agencies in Alaska. SEED’s main components are the SEED Registry, Career Ladder, and Individual Reimbursement Fund, which provides reimbursement for qualifying educational expenses to individuals enrolled on the SEED Registry. Participation on the SEED system is voluntary. Approximately 1,800 early childhood professionals are registered. The SEED Registry is a database tracking educational and professional development milestones of early educators on an individual basis. In order to be successful in tracking professional growth of early childhood professionals as well as capture current trends in Alaska, Alaska's SEED must continue to grow. Early childhood educators, teachers, administrators and others working in the field of early childhood should be encouraged to join the Alaska SEED Registry. The Registry can be used to:

- Provide an efficient system to keep track of ongoing education and training.
- Issue a SEED certificate verifying placement on the SEED Career Ladder. Appendix B)
- Provide information about early childhood credentials to employers and parents.
- Increase access to training and educational opportunities.
- Increase eligibility for scholarship and funding opportunities, including thread's Individual Reimbursement Fund (IRF).

If the recommendation is not supported, recruitment and retention of the early childhood workforce will continue to be a problem in Alaska. Low wages in the early care and learning workforce contribute to teacher turnover. According to a 2003 Market Survey the turnover in this
field in our state was approximately 46%. Early educators who want to advance in their field are typically not compensated for their additional education.

When the professional development recommendation is supported, early childhood workers will be encouraged to remain in the workforce and advance up the career ladder, providing consistent and stable services for young children.

**Unified Data Collection, Monitoring and Reporting System and Improved Early Learning Standards**

In order to establish a unified data collection, monitoring and reporting system and improve the state’s early learning standards, the Council makes the following recommendation:

**Recommendation 3:** Implement the Quality Rating and Improvement System (QRIS).

AECCC recommends implementing the Quality Rating and Improvement System (QRIS) in order to support a comprehensive system of setting standards defining, supporting and incentivizing quality early care and learning programs in Alaska. Implementing the QRIS relates to the requirements of section 642B part D (i) in the Head Start Act:

“(II) identify opportunities for, and barriers to, collaboration and coordination among Federally-funded and State-funded child development, child care, and early childhood education programs and services, including collaboration and coordination among State agencies responsible for administering such programs;

(IV) develop recommendations regarding the establishment of a unified data collection system for public early childhood education and development programs and services throughout the state;

A QRIS provides a systematic approach to assess, improve and communicate the level of quality in early care and learning programs. A QRIS sets standards of excellence for early care and learning programs and then provides a pathway to help programs continually improve to meet the higher standards. QRIS provide financial, training and technical assistance support for participating programs and serve as a bridge to bring together all early childhood programs in States under one vision of care and education. Program measurement and improvement tools are used to gather and disseminate information on the quality of early care and learning programs to parents, policy makers, and early educators. By providing public ratings of early care and education quality along with feedback, technical assistance, and improvement incentives, QRIS are positioned to both motivate and support quality improvements. Participating providers are assessed on each of the system components and receive a rating that they are encouraged to display and that may be made public in other ways.¹

Five key elements generally comprise a QRIS:

- **Quality Standards** including: Staff qualifications, Environment, Curriculum/learning, Leadership/management and Family engagement
- **Accountability Measures** including: Teacher/child interactions, Environment, On-site visits, Self-assessments and Professional development
- **Provider Support** including: Training, Mentoring and Technical assistance
- **Financial Incentives** including: Increased provider reimbursement rates, Quality grants, Merit award, Wage incentives and Scholarships
- **Parent Support and Consumer Education** including: Star rating system, Website posting, Media and Certificate

Currently, early care and learning in Alaska operates through a set of independent sectors or subsystems. This includes Head Start/Early Head Start, child care centers, family child care, public and private pre-k, as well as a variety of home visiting programs. Each sector has its own standards, procedures, and funding streams. Too often, this fragmented system results in inefficiencies and uneven early learning experiences for children. Quality rating and improvement systems provide a way to unify these systems measuring different aspects of quality, applying a common metric to all early care and education programs, and promotes program improvement.²

Many federal offices and national reports encourage QRIS implementation. The Office of Child Care, Federal Administration for Children and Families recommends that states build QRIS to set standards of excellence for helping working families access high quality early care and learning. Similarly, the National Governor’s Association for Best Practices supports QRIS as a critical component in supporting a comprehensive high quality early childhood state system. The U.S. Department of Health and Human Services along with the U.S. Department of Education support QRIS for systematic quality improvement setting standards, supports and incentive that strengthen professional and provider capacity to promote well-being in early care and education.

Several statewide plans and initiatives in Alaska also have goals and priorities supporting the need for QRIS:
- Alaska Child Care Program Office – Child Care and Development Fund (CCDF) Plan
- The System for Early Education Development (SEED)
- Best Beginnings and the Ready to Read Ready to Learn Recommendations
- Early Childhood Comprehensive Systems (ECCS)
- *thread*, Alaska’s Child Care Resource and Referral Network Business Plan
- Head Start

If the recommendation is not supported, the quality of early care and learning programs will remain undefined leaving both the early care and learning systems and workforce fragmented and difficult for consumers to navigate. Alaska will continue to see parents and families struggle with meeting their needs relative to quality early care and learning programs and the state will continue to see negative trends in children’s school readiness, and intervention needs. While the Alaska Developmental Profile shows some upward movement in specific areas, Alaska’s kindergartners are far from meeting the expectations set in the Early Learning guidelines for entry into Kindergarten.

When the recommendation is supported, there will be a sustainable system to recognize, reward and improve the quality of early care and education programs and provide reliable methods for parents and the public to evaluate early care and education programs, ensuring children have access to programs that offer strong foundations for learning and life-long
positive outcomes. Ultimately, more parents and families will have access to information to make better informed decisions about the types of early care and learning programs best for their children while early care and learning programs will be supported and incentivized for increased quality.

In order to improve the state’s early learning standards, the Council makes the following recommendation:

**Recommendation 4:** Increase awareness of the Alaska Early Learning Guidelines by coordinating efforts (public and private) to include the “universal” early care and learning workforce (parents; extended family, community).

The Council’s duties concerning standards are found in 642B part D (i)(VII) in the Head Start Act:

“make recommendations for improvements in State early learning standards and undertake efforts to develop high-quality comprehensive early learning standards, as appropriate.”

Other uses of the guidelines relate directly to Section 642B part D (i)(II) in the Head Start Act:

“identify opportunities for, and barriers to, collaboration and coordination among Federally-funded and State-funded child development, child care, and early childhood education programs and services, including collaboration and coordination among State agencies responsible for administering such programs;”

Increasingly, early learning guidelines are used by local communities; by states; and internationally by countries in order to strengthen and coordinate early childhood practices, programs, and policies. Because of the importance of the early years, and because it is beneficial for children to experience consistency from the many adults who play a part in their development, the State of Alaska created the Alaska Early Learning Guidelines (ELGs) as a resource to develop a common understanding about what young children should know and be able to do at different stages.

Broadly defined, the ELGs are a set of statements that reflect expectations for children’s knowledge and behavior and provide essential information for those who love, care for, and educate young children and are designed to support the growth and development of young children from birth to kindergarten entry. Regardless of whether the children are in their own homes, others’ homes, in licensed child care, early intervention programs, Home Visiting programs, Head Start, or in private, faith based, or public preschools, Alaska’s Early Learning Guidelines serve as a source document, informing parents, teachers, and caregivers about expectations for children’s development and learning. Specifically, the Alaska Early Learning Guidelines spell out what young children should know and be able to do by the time they reach the end of each of four critical stages of development: 18 months, 36 months, 60 months, and entry to kindergarten. These age ranges are broad and encompass large spans of
time during which children grow and develop dramatically. They are the Council’s guiding tool to promote standards across all early childhood programs in Alaska.

The Alaska State Board of Education & Early Development endorsed the Alaska Early Learning Guidelines in June, 2007. To date over 7,000 copies have been provided for school districts, preschools, child care providers, Head Starts, parents & families, the University of Alaska system, and clinics and health providers. Additionally over 15,000 companion Early Learning Activities booklets for infants, toddlers, and preschoolers, based on the guidelines, have also been distributed in English, Spanish and in Yup’ik languages, as well as the recent Babies on Track Books and DVDs. Beyond the need for additional sets of these existing documents, a new series of materials extending the outreach and content from the guidelines needs to be put in place. Should funding become available, a priority is set on creating parent friendly versions of the guidelines and activities across all areas of development as well as producing quick informational guides, and developing interactive web based tools to be disseminated, and implemented for parents, families, and community and state level entities to utilize in a coordinated state wide effort. This coordination would include activities, training and technical assistance, and other forms of outreach to parents, early childhood educators and local community members on the use of the materials and the standards themselves.

Periodic review for updates and changes to the ELGs will also need to occur. The guidelines have been aligned with the newly adopted K – 12 Standards in Math and English Language Arts as well as the Alaska Developmental Profile, the Teaching Strategies Gold Assessment tool for Development and Learning Birth through Kindergarten, and the federal Head Start Child Development and Early Learning Framework. Current expectations include all programs receiving state funding be aligned with Alaska’s Early Learning Guidelines and that providers will be competent in using standards to guide their work pre-natal through age 8.

If this recommendation is not supported families with young children who choose either in home or out of home services for their young children will not have the benefits of standards and research-based programs. Alaska will also lose the opportunity for developing ongoing engagement with K – 12 and the community beyond.

When this recommendation is supported Alaska gains the connective outreach that builds a standards-based support system for parents, families, programs, and communities working with young children and supports alignment of educational services through grade 12.

**Integrating and Aligning Services, Planning, Resources, Policy, and Funding**

In order to facilitate the integration and alignment of services, planning efforts, resources, policy development and funding, the Council makes the following recommendation:

**Recommendation 5:** Embed “Strengthening Families” protective factors through systems across the board to include grant proposals, policies, materials development, and sustainability of long-term funding efforts.

The Council’s duties concerning this recommendation are found in 642B Part D(i)(II) of the Head Start Act:
“identify opportunities for, and barriers to, collaboration and coordination among Federally-funded and State-funded child development, child care, and early childhood education programs and services, including collaboration and coordination among State agencies responsible for administering such programs;”

as well as within the AECCC’s Mission Statement:

“…The AECCC shall support the creation of a unified, sustainable system of early care, health, education, and family support for young children and their families.”

Alaska faces acute challenges in providing the support families need to nurture their children. Isolation in remote/rural Alaska and lack of extended family support in urban areas compound these challenges. Alcohol and drug abuse, child abuse and neglect, and unintentional injury are some of the most significant problems for Alaska’s families. Alaska is among five states with the most severe alcohol problems. Healthy Alaskans 2010 (Department of Health and Social Services, 2002) reports that 14 percent of Alaskans have alcohol related problems, over twice the national average.

The rate of substantiated or indicated maltreatment for Alaskan children is more than four times the Healthy People 2010 goal and nearly 3.5 times the national rate. Approximately 50 percent of all reports of harm are for children birth to 5 years of age. The risk of death due to injury for Alaskan children age 1 through 4 is 71 percent higher than the risk of death for other American children. Added to these dramatic challenges is the high cost of housing and other living expenses that add to the problems families face as they attempt to provide a nurturing environment for young children.

In Alaska, children with less-educated parents are more likely to live in low-income families; most low-income children have at least one of their parents in the workforce; and children below the age of 6 are more likely to live in low-income families. Growing up in poverty greatly increases the probability that a child will be exposed to environments and experiences that impose significant burdens on his or her well-being, thereby shifting the odds toward more adverse developmental outcomes. Poverty during the early childhood period may be more damaging than poverty experienced at later ages, particularly with respect to eventual academic attainment. The dual risk of poverty experienced simultaneously in the family and in the surrounding neighborhood, which affects minority children to a much greater extent than other children, increases young children’s vulnerability to adverse consequences.3

The Alaska Department of Health and Social Services funds a variety of programs which provide family support and parenting education through the Office of Children’s Services, the Division of Behavioral Health, the Division of Public Assistance, and the Division of Public Health. The Alaska Children’s Trust (ACT), a significant program with the goal of preventing child abuse and neglect, also provides direct grants to communities for child abuse and neglect prevention programs and parent education efforts. Additionally, a variety of non-profit and faith-based organizations provide services funded through service fees, grants and/or donations. While there are isolated, primarily program-specific family support and parent education efforts in Alaska, no coordinated mechanism to assure that all families have easy access to high quality, community-
based services exists. There is no clear leadership or existing network to develop or support consistent program standards or ensure that a comprehensive system for family support and parent education exists.

If this priority is not supported Alaska will continue to have a fragmented, programmatic approach to supporting young children and their families. Families will continue to have to access services through multiple visits to multiple agencies and programs.

When this priority is supported families will receive support in their roles as primary caregivers through programs that are responsive to emerging community issues and model the principles of family support in all program activities as well as have access to a user-friendly, culturally competent, integrated service delivery system. There will be a clearinghouse serving as a repository of information regarding best practices in family services. The clearinghouse will support interdisciplinary training; provide technical assistance; and distribute information to programs, stakeholders and policy makers.

In order to further assist early childhood efforts within local communities, the Council makes the following recommendation:

**Recommendation 6:** Support and promote a local partnerships grant process to invest in early childhood and family support.

Each Council member signed a Memorandum of Agreement in which the individual agreed to:

“Make funding recommendations to the governor and legislature that will increase efficiency, improve service delivery and effectiveness, and support improved outcomes for young children and their families. Support opportunities for increased resources from public and private sectors;

Support planning and coordination of local and regional partnerships between families; health, mental health, social services, and early care and learning programs; schools; local businesses; and organizations to ensure continuity of quality, comprehensive services for young children and their families;”

In the last 20-30 years, there has been increasing interest in changing how services are provided in communities from a “one-size-fits-all” model to those that reflect local needs and assets. According to a literature review commissioned by the Virginia Early Childhood Foundation in 2010, there are “two major arguments in favor of a community-based approach: first, that only individuals who are part of their community are able to identify intervention strategies that are feasible and most appropriate within the community context; and second, that complex issues, such as early childhood well-being, touch all aspects of the community and thus necessitate a broad-based collection of stakeholders working together to address them.”

Alaskans recognize the value of partnerships or coalitions. Grant funders ask for information on an organization’s partners in proposals for support. The Early Childhood Comprehensive
Systems Plan states, “There will be a network of effective community and regional organizations supporting comprehensive early childhood services.” The Alaska Prekindergarten Program required school district applicants to show how they were partnering with other entities in their community. Head Start programs sign formal memoranda of agreement with the local school and other organizations.

An additional example arose when the Ready to Read, Ready to Learn Task Force released its report and recommendations in September 2006. Interest grew in establishing and supporting a statewide network of effective local and regional partnerships to promote early childhood efforts. A leader in this area, Smart Start’s National Technical Assistance Center worked with Best Beginnings and other stakeholders from around Alaska to adapt the Smart Start model for Alaska.

Building off of that work for the past three years, Best Beginnings has supported local early childhood partnerships in 10 communities around the state with funding, training, and technical assistance. Training and technical assistance have been offered in all three areas of effective partnerships: membership and leadership capacity, organizational capacity, and community capacity through an annual conference, on-site visits, telephone and e-mail consultation, and regular conference calls and webinars. Geographic boundaries are generally the same as school districts’ boundaries.

With help from Best Beginnings, partnerships assessed needs of young children in their community, identified priorities, created and began implementing a strategic plan. Plans and budgets are approved annually by a committee according to stated criteria, and partnerships submit an interim and final report. Grants have ranged from less than $2,000 to $50,000, and have been supported by State funds for the past two years.

Partnerships share the vision that all Alaska children will begin school ready to succeed. Their plans include goals and measurable indicators of success, with a particular focus on parent engagement and support.

If this recommendation is not supported, a disjointed system of early childhood services will remain in place, with more top-down efforts than top down/bottom up activities, which have been shown to be more effective and efficient.

Communities have a better chance at truly meeting the needs of young children and families, and the network of partnerships will be able to grow, when this recommendation is supported. This will move Alaska toward a culturally responsive, comprehensive, and accessible service delivery system for young children that links service providers, empowers families, and engages communities.

The Council’s final two recommendations concern the health and safety of Alaska’s youngest citizens:
Health and Safety

**Recommendation 7:** Seek to ensure every child will have full access to well-child exams that follow the Alaska Periodicity Schedule, which is based on the recommendations of the American Academy of Pediatrics.

**Recommendation 8:** Seek to ensure every child and their family has full access to age appropriate services that promote physical, emotional, and behavioral health and safety.

The recommendations have their foundation in the mission of the AECCC:

“The purpose of the AECCC is to promote positive development, improved health outcomes, and school readiness for children prenatal through age eight by creating a culturally responsive, comprehensive, and accessible service delivery system that links service providers, empowers families and engages communities. The AECCC shall support the creation of a unified, sustainable system of early care, health, education, and family support for young children and their families.”

Over the last decade a growing body of research has confirmed what many have believed for generations; **the foundations for lifelong mental and physical health are substantially built from conception through early childhood.** According to the Center on the Developing Child at Harvard University, “Health in the earliest years – actually beginning with the future mother’s health before she becomes pregnant- lays the groundwork for a lifetime of well-being. When developing biological systems are strengthened by positive early experiences, healthy children are more likely to grow into healthy adults.”

Adverse experiences or events that occur in early childhood have been linked to a range of poor health and mental health outcomes in adulthood. They include abuse and neglect, family dysfunction, domestic violence, household substance abuse, household mental illness, parental separation or divorce, and incarcerated household members. These adversities are potent risk factors for involvement in domestic violence, alcohol dependence, illicit drug use and suicide attempts. Early life adversities are also surprisingly strong risk factors for medical conditions that do not manifest until decades later, including heart disease, chronic lung diseases and cancer. Multiple childhood adversities (a combination of neglect and abuse for example) magnify the harm and increase the risk for domestic violence, alcohol abuse, and drug use by as much as 400-500%. In addition, attempted suicide risks increase by as much as 5000% and heart disease risk increases by over 300%.

Many Alaska children face these “adverse” conditions in their daily lives. In June, 2010, 50% of Alaska children with substantiated reports of harm were birth through five years old. 59% of children in out of home placement were birth through eight years old. In 2004, 38% of early childhood programs expelled a child due to behavioral/social emotional concerns. Maternal stress or depression can affect parenting and manifest behaviorally, emotionally, or even physically in the child. In 2009 44% of Alaska postpartum women reported they felt down, depressed or sad at least sometimes. Alaska’s population in general suffers from high rates of
suicide, substance abuse, and other mental health related illnesses. Preventing *childhood adversity* is increasingly understood as a foundation for improving mental and physical health that endures for generations. *The reduction of childhood adversities, the early identification of health, mental health and developmental concerns, and access to quality, age-appropriate services are key ingredients for supporting families and ensuring the development of a healthy child and adult.*

In 1992, the American Academy of Pediatrics (AAP) stated that the best way to promote high quality mental and physical development for children with special healthcare needs was to have access to a patient-centered health home \(^{15}\). This policy statement was updated in 2002, and reaffirmed in 2008 \(^{16}\). During the last 20 years, many studies have shown that the AAP’s policy on health homes is sound, as families that are a part of a health home system have improved health care utilization patterns, better parental assessment of child health, and increased adherence with health-promoting behaviors \(^{16-19}\). More recent studies have looked into whether children without special healthcare needs benefit from being enrolled in a patient centered health home \(^{18,19}\). These studies confirm that all children benefit from this type of medical environment. Thus, in their 2002/2008-policy statement, the AAP plainly stated “over the next decade, with the collaboration of families, insurers, employers, government, medical educators, and other components of the health care system, the quality of life can be improved for all children through the care provided in a health home.”

Research clearly indicates that effective early intervention for developmental delay as well as social emotional issues is effective in ameliorating levels of delay and the need for more intensive services later on. *From Neurons to Neighborhoods, Institute of Medicine, 2000).* By providing comprehensive physical and mental health care which includes regular comprehensive developmental screening at scheduled health supervision clinics, the pediatric health home model has the best chance to prevent and identify the averse, often lifelong issues that arise when children are exposed to traumatic events early in life \(^{20}\). The Subcommittee recommends basing the health supervision clinics on the AAP’s “Bright Futures” program \(^{21}\), which concentrates health supervision clinics during the first 4 years of life. Additionally, it is recommend that screening for depression, domestic violence and substance abuse be available for pregnant women and new parents.

In order to provide these services effectively, pediatric health homes should have access to appropriately trained personnel, including but not limited to medical providers, behavioral health specialists, nutritionists, and most importantly, nurse case managers to coordinate all aspects of care. This model has been shown to be highly cost-effective, as children and their families avoid costly emergency room visits, hospitalizations, and other expensive medical interventions when they are enrolled in the health home model \(^{17-19}\). Thus, savings realized by the implementation of the health home model should be redirected to reimburse the services supplied by certified health home practitioners providing comprehensive physical and mental health care.
Typical mental health services are often designed for older youth and adults and target serious emotional disturbance. Services for young children should be focused on early intervention, reflect developmentally appropriate practice, and be supportive of stable and responsive relationships with parents and caregivers. Programs and strategies are needed that provide services and supports along a continuum from prevention to intervention. Mental health providers, family support workers, parent educators, early interventionists, early childhood educators and medical providers all have a role to play.

Efforts should be made to ensure that all environments for children, whether in or out of the home, are nurturing and supportive. Training on supporting social and emotional competence should be available to childcare providers, Head Start teachers and others who work with young children. Early childhood mental health consultation should be available to programs and professionals working with children with challenging behaviors. Programs and strategies that focus on family strengths, that are embedded in places that families already go, that support ALL families can help to prevent difficulties from developing. If concerns can be identified early, the costly, long term consequences for learning, social competence, and lifelong health can be avoided. James Heckman, a Nobel Prize winning economist who demonstrated the economic impact of investing in early childhood development, determined that the return on investment diminishes the later the intervention is administered. The later the intervention, the more costly the remediation.  

Mental health services for young children must be empirically-supported, family responsive and culturally and linguistically competent. They should address the specific needs of this age group, which are different from those of older children and youth. Since many mental health concerns are often the result of environmental and relational difficulties, the child’s primary caregiver must be involved. We need a workforce of early interventionists and mental health professionals skilled in assessment, diagnosis and evidence-based interventions for young children and their families.

Practitioners need to be informed about the impacts of trauma and other early childhood adversities. Under provisions of the Child Abuse Protection and Treatment Act (CAPTA) all children under the age of three with a substantiated report of harm must be referred to the Part C Early Intervention System to determine if the child is eligible for services under the Individuals with Disabilities Education Act (IDEA). The Infant learning program (ILP) in Alaska is receiving approximately 1000 referrals a year from Child Protection Services. The Infant Learning Program and mental health programs must have the resources and expertise to support children exposed to traumatic experiences. When services are uniquely tailored to help these children, the savings in terms of cost and suffering are substantial. The cost of one case of abuse or neglect is estimated at more than $200,000 over a lifetime. The Substance Abuse and Mental
Health Services Administration (SAMSHA) has found that when children exposed to traumatic events are connected to supportive adults and provided evidence-based treatment, they demonstrate reduced behavioral and emotional problems, increased behavioral and emotional skills, reduced trauma symptoms, reduced substance abuse problems, improved functioning in school and the community, and improved ability to build relationships. 21

Alaska is starting to make progress in these areas. In recent years small scale projects have been initiated to provide training, consultation and support to the early childhood and behavioral health workforce. The availability of trauma-informed services is starting to grow. We need to bring these efforts to scale, however, so that our current investments in services are maximized and the best possible outcomes for children are realized. Although not set in stone, good parenting predicts a healthy life. By supporting families and caregivers right from the start, a positive trajectory can be established for a child’s future success in school and in life.

Report Conclusion

In conclusion, research across a broad spectrum of disciplines indicates that providing resources for young children and their families increases their potential for social and economic success. Early Childhood education improves outcomes across multiple dimensions: education, crime, child welfare, and health care. 25 The eight recommendations presented in this report provide a wide range of actions designed to improve outcomes for young children and their families.

1. Expand early childhood services to 5,000 new children and families through in home and out of home services.
2. Identify methods to increase the pay in early childhood settings, particularly for those with higher degrees.
3. Implement the QRIS (Quality Rating and Improvement System) plan including an implementation time-line of activities and funding.
4. Increase awareness of the Alaska Early Learning Guidelines (ELGs) by coordinating efforts (public and private) to include the “universal” early care and learning workforce (parents; extended family, community).
5. Embed “Strengthening Families” protective factors through systems across the board to include grant proposals, policies, materials development, and sustainability of long-term funding efforts.
6. Support and promote a local partnerships grant process to invest in early childhood and family support.
7. Seek to ensure every child will have full access to well-child exams that follow the Alaska Periodicity Schedule which is based on the recommendations of the American Academy of Pediatrics.
8. Seek to ensure every child and their family has full access to age appropriate services that promote physical, emotional, and behavioral health and safety.

The council looks forward to continuing its work not only in conjunction with these eight recommendations, but in recommending and refining systematic approaches to enhance state and
local processes utilized by Alaska’s families with young children. Investments in Alaska’s youngest citizens and their families will have far-reaching implications in regard to Alaska’s future development as a state.
Appendix A

Additional Resources Used by the Council Committees


van Ijzendoorn, MH et al. 2010 Biological Psychiatry 68:405-07.

Herr Research Center for Children and Social Policy at Erikson Institute Research Report • 2008, No. 1, Creating a Workforce in Early Childhood Mental Health: Defining the Competent Specialist
State of Alaska, Office of Children’s Services, Statistical Information Monthly Reports for June 2010

PRAMS — Pregnancy Risk Assessment Monitoring System, Center for Disease Control and Prevention. Data collected annually with a two-year delay in reporting (2010 data available in 2012). Questions revised every three years and labeled “Phase,” with the current one being Phase 6 and Phase 7, with revised questions to begin with data collection for 2012

State of Alaska, Child Care Program Office, Market Rate Survey, 2004

AAP website: http://www2.aap.org/commpeds/dochs/mentalhealth

Appendix B
System for Early Education Development (SEED) Career Ladder

<table>
<thead>
<tr>
<th>LEVEL</th>
<th>Requirements</th>
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</table>
| 1     | Working in the early care and education field  
OR High School diploma/GED with motivation to advance in the ECE field |
| 2     | 12 hours of training approved for Child Care licensing  
OR 1 ECE credit |
| 3     | SEED ECE Overview (32 hours)  
OR 2 ECE credits |
| 4     | 45 hours of CDA training  
OR 45 hours of nationally recognized training  
OR 3-credit ECE introductory course, 90 hours of CDA training  
OR 90 hours of nationally recognized training  
OR 6 ECE credits |
| 5     | 90 hours of CDA training  
OR 90 hours of nationally recognized training  
OR 6 ECE credits |
| 6     | 12 ECE credits  
OR ECE Occupational Endorsement  
OR Current CDA  
OR AA in unrelated field with either the SEED ECE Overview or 3-credit ECE introductory course |
| 7     | 24 ECE credits  
OR Current CDA with ECE Occupational Endorsement  
OR AA/AAS in unrelated field with 12 ECE credits  
OR 30-credit ECE certificate  
EI/LP (INFANT LEARNING PROGRAM) DEVELOPMENTAL ASSISTANT  
AA/AAS in unrelated field with 12 ECE credits |
| 8     | AA/AAS in related field with either the SEED ECE Overview or 3-credit ECE introductory course  
OR AA/AAS in unrelated field with 15 ECE credits  
OR BA/BS in unrelated field with either the SEED ECE Overview or 3-credit ECE introductory course  
EI/LP TRACK: DEVELOPMENTAL ASSOCIATE  
BA/BS in unrelated field with 3 EC Development credits  
OR AA/AAS in related field |
| 9     | AA/AAS in ECE  
OR AA/AAS in related field with 12 ECE credits  
OR AA/AAS in unrelated field with 24 ECE credits  
OR BA/BS in related field with either the SEED ECE Overview or 3-credit ECE introductory course  
OR BA/BS in unrelated field with 12 ECE credits  
EI/LP TRACK: DEVELOPMENTAL SPECIALIST I  
BA/BS in related field with 3 EC Development credits  
OR MA/MS in unrelated or related without license or teaching certificate  
OR AAS in SIP with license |
| 10    | BA/BS in ECE  
OR BA/BS in related field with 12 ECE credits  
OR BA/BS in unrelated field with 24 ECE credits  
EI/LP TRACK: DEVELOPMENTAL SPECIALIST II  
BBA/BS in related field with 3 EC Development credits  
AND professional license or teaching certificate |
| 11    | Masters in ECE  
OR Masters in related field with 12 ECE credits  
OR Masters in unrelated field with 24 ECE credits  
EI/LP TRACK: DEVELOPMENTAL SPECIALIST III  
MA/MS in related field with 3 EC Development credits  
OR professional license or teaching certificate |
| 12    | Ph.D., oriented, or with emphasis in ECE  
EI/LP TRACK: DEVELOPMENTAL SPECIALIST IV  
Ph.D./ED in related field with 3 EC Development credits  
OR professional license or teaching certificate |
Appendix C

AECCC Member List

<table>
<thead>
<tr>
<th>Name</th>
<th>Represents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peggy Cowan</td>
<td>Alaska Superintendents Association</td>
</tr>
<tr>
<td>Sue Hull</td>
<td>Association of Alaska School Boards</td>
</tr>
<tr>
<td>Amanda Faulkner</td>
<td>Alaska Infant Learning Program Association</td>
</tr>
<tr>
<td>Debi Baldwin;</td>
<td>Alaska Head Start Association (RurAL CAP)</td>
</tr>
<tr>
<td>Stephanie Berglund</td>
<td>Alaska Child Care Resource &amp; Referral Network (thread)</td>
</tr>
<tr>
<td>Matthew Hirschfeld</td>
<td>Alaska Native Health Entity</td>
</tr>
<tr>
<td>Dee Foster</td>
<td>Mental Health Providers</td>
</tr>
<tr>
<td>Abbe Hensley</td>
<td>Best Beginnings</td>
</tr>
<tr>
<td>Corrine Biederman</td>
<td>Parent Representative</td>
</tr>
<tr>
<td>Brian Holst</td>
<td>Business Community (Chamber of Commerce)</td>
</tr>
<tr>
<td>Michael Burke</td>
<td>Faith Based Community</td>
</tr>
<tr>
<td>Mike Lesmann</td>
<td>Special Staff Assistant, Office of the Governor</td>
</tr>
<tr>
<td>William Streur</td>
<td>Commissioner, Department of Health &amp; Social Services</td>
</tr>
<tr>
<td>Michael Hanley</td>
<td>Commissioner, Department of Education &amp; Early Learning</td>
</tr>
<tr>
<td>Jeff Selvey</td>
<td>Commissioner, Department of Labor</td>
</tr>
<tr>
<td>Joseph Masters</td>
<td>Commissioner, Department of Public Safety</td>
</tr>
<tr>
<td>Meredith Jaecks</td>
<td>Division of Teaching and Learning Support</td>
</tr>
<tr>
<td>Paul Sugar</td>
<td>Head Start Collaboration Director</td>
</tr>
<tr>
<td>Erin Kinavey</td>
<td>State Part C/Early Intervention Program Manager</td>
</tr>
<tr>
<td>Marcey Bish</td>
<td>Child Care Program Manager, Division of Public Assistance</td>
</tr>
<tr>
<td>Shirley Pittz</td>
<td>Early Childhood Comprehensive System Program Officer</td>
</tr>
<tr>
<td>Vacant</td>
<td>Department of Health &amp; Social Services</td>
</tr>
<tr>
<td>Vacant</td>
<td>University of Alaska System</td>
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</table>

Endnotes: