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Region 4 Executive Summary

In 2021, the Illinois Commission on Equitable Early Childhood Education and Care (ECEC) Funding issued a report with findings that highlighted the inequities in ECEC funding in Illinois and the need to create a better statewide infrastructure to support ECEC professionals, expand services and programs for families and caregivers, and increase enrollment in ECEC programs. The report focused on the importance of addressing racial inequities and the need to include local voices in the conversation funders and decision-makers were having about ECEC.

The experiences and knowledge families, caregivers, and early childhood professionals gain while navigating the complexities of the State's ECEC system is valuable, and understanding their lived experience in the local context is vital for decision-makers to ensure communities have access to the programs, services, and supports they need. To this end, Birth to Five Illinois was created to harness family and caregiver voices in ECEC and serve as a bridge between the communities and policymakers so family, caregiver, and professional



experiences can guide the decisions made to expand or enhance services across the State.

An Early Childhood Regional Needs Assessment was created to present publicly available quantitative data and qualitative data from caregivers, ECEC professionals, and other community stakeholders collected through Action Council and Family Council meetings, focus groups, interviews, community meetings, and surveys. Throughout the process, regional barriers were documented, and recommendations were developed based on identified needs of families. This Executive Summary provides an overview of key findings from the development of the Region 4 Needs Assessment, which includes recommendations developed by our Action and Family Councils. Additional findings, analysis, and recommendations can be found in the full report.

Key Findings

Key findings from the Regional Needs Assessment include the overall lack of child care slots to serve the 24,432 children under the age of 6 in the Region. Outside of the Chicagoland area, Region 4 has the highest population of early childhood-aged children in Illinois and only 10,238 slots to serve those children. This number is further exacerbated when considering infant and toddler care. That is, 12,477 of our children are birth-2 years old and the current capacity is only 1,887 slots for this age group. This leaves many of our parents with limited options, including utilizing friend, family, or neighbor care which offers varying levels of quality or in some cases, a decision to leave the workforce.

Additionally, our community is deemed "high risk", which adds to the overall vulnerabilities our children face. Nearly half of our children are living at 200% or below the poverty level with the highest poverty rates affecting Black, Hispanic, or "Other/two or more race" children. The effects of poverty permeate into other circumstances including, unstable housing, lack of transportation, etc. all of which create additional burdens for our most vulnerable children and families.

These vulnerabilities highlight the urgency to expand access to quality early learning experiences for all families, as favorable early childhood experiences and interventions are linked to positive outcomes later in life. Therefore, accessible ECEC programming is essential for society and one of the necessary components of a healthy community. We must work towards achieving an adequate balance of child care

slots based on need that benefits children and contributes to a functioning economy.

However, the need to provide quality early learning environments is first met with the challenge of maintaining an adequate ECEC workforce. Our community made it clear that to make adjustments in any other facet like program expansion or family support, we must reevaluate our current investment in the ECEC workforce. Strengthening our workforce is fundamental to the success of all children and provides security to the nation's workforce. Workforce investments should include:

Educational Incentives

Necessary educational investments including ECACE scholarships to assure monetary investments in an early education degree pays off, school district "Grow Your Own programs", teacher pathway programs, and new solutions like on-the-job learning time to complete EC coursework or professional development credentials.

Compensation

Crucial compensation adjustments include higher pay for educators with financial incentives to further education, access to benefits for all ECEC providers (medical, dental, time off, etc.).

Recruitment and Retention

Recruit all concentrations of ECEC providers (i.e., Early Intervention, teaching staff, home providers, and ECEC Administration with specific focus on increasing diversity in leadership roles) to grow and sustain adequate staffing levels.

These emphasized ECEC workforce needs are important to consider when examining our current investment structure and what immediate revitalizations are needed. An educated, well-equipped early childhood workforce is essential to the success of all children and the backbone of the nation's workforce. We, the stakeholders (the community at large, businesses, elected officials, etc.) must take ownership in the future of ECEC and advocate for necessary investments today that will help ensure society prospers tomorrow.

Region 1-B-B Needs

- 1. Workforce development (expansion and retention)
- 2. ECEC Program expansion
- 3. Family supports, including transportation assistance
- 4. Integrated referral system

Region 1-B-B Recommendations

- 1. Workforce investments (education, compensation, recruitment, retention)
- 2. Program investments (full-day programs, locations, types of care).
- 3. Targeted supports to families/caregivers who face barriers to access.
- 4. Streamline referral services among ECEC providers (i.e., IRIS)

For more information or to learn how you can become involved with Birth to Five Illinois, please contact:

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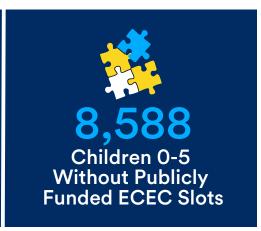


REGION 4 SNAPSHOT INFOGRAPHIC

Using a Collective Impact Model, between September 2022 and June 2023, we led our Action and Family Councils through data discussions to identify gaps and needs for children and families. We coordinated focus groups, interviews, and surveys to gather input from community members across the Region.







90%

Percentage of interviewed Early Childhood service providers that reported their programs are struggling due to workforce issues.

"Lack of staff, more unqualified staff, low wages, no insurance... these all reduce our capacity to serve families."

- Program Director

After identifying the most common and pressing Early Childhood Education & Care (ECEC) needs of their communities, Regional Councils made recommendations for how best to meet them.

REGION 4 NEEDS

- 1. Expansion and retention of Early Childhood workforce
- 2. ECEC program expansion to meet the needs of more families
- 3. Family supports, including transportation assistance, to help more families connect to Early Childhood program and services
- 4. Integrated referral system to more easily connect families to services and supports

REGION 4 RECOMMENDATIONS

- 1. Workforce investments including education, compensation, recruitment, and retention
- 2. Program investments including full-day programs, more locations, and different types of care
- 3. Targeted supports to families/caregivers who face access barriers
- 4. A more streamlined referral services among ECEC providers



"If the ultimate goal is to place more children in programs appropriate for them and their families, we need to understand why there is such a large gap between available services and the children who need them."

- Community Member

Overview & Acknowledgements

Introduction

This Early Childhood Regional Needs Assessment presents data on Early Childhood Education and Care (ECEC) from multiple state and local sources throughout Illinois. It is a collaborative data report that relies on the expertise of entities that collect and analyze ECEC data, Birth to Five Illinois staff, Birth to Five Illinois Action Council and Family Council members, and a variety of cross-sector stakeholders in all 39 Regions across the State.

Through these Early Childhood Regional Needs Assessments, Birth to Five Illinois seeks to amplify the voices of those who have historically been minoritized, marginalized, or not invited to the decision-making table. Each Regional Needs Assessment offers parents, families, caregivers, ECEC providers, and other community stakeholders a platform for sharing valuable insights about their experiences within their local ECEC system. Additionally, it provides local, regional, and state decision-makers with qualitative information about each Region, adding critical context to the quantitative data that is available.

This report will be used in a variety of ways.

First, each Region's Birth to Five Illinois Action and Family Councils will use it to identify gaps in data that is needed to best understand ECEC in their area. Birth to Five Illinois Council members and Regional Staff will also use this report as a basis for making recommendations on how to increase enrollment in, and access to, ECEC programs and services, as well as to determine what additional services/programs and resources may be needed to support families and caregivers throughout the Region.

Second, this report will be made available to parents and caregivers so they can have a fuller picture of what is happening in their community and Region. It is our hope that families will learn more about the available programs and services, share the resources with other caregivers with young children, become advocates for ECEC, and help to drive long-term, sustainable change in their communities.

Third, policy makers, elected officials, and state agencies that administer ECEC programs will receive a copy of the report to give them a local view of the ECEC landscape in the areas they serve. The goal is to provide decision-makers with context from a community perspective so they can better understand data related to ECEC indicators and direct funding to the under-resourced areas across the State based on the feedback received from ECEC system users.

Lastly, the report will be shared with local government bodies, early childhood providers, and organizations so they can use the findings to assess and demonstrate the need for services as funding opportunities become available. Additionally, the data can be used to identify where ECEC services may need to be expanded to support the caregivers and children in the Region.



Letter from State Leadership

In under two years, I have had the privilege of partnering with the State's ECEC community to build Birth to Five Illinois, an extension of decades of foundational efforts that led to the creation of this statewide community system. In true collective impact modeling, we set out to design a system that respects and builds on the work of numerous local organizations that are working hard (often underfunded) to support children, families, and providers' access to our State's confusing and hard-to-navigate ECEC system.

While our work is not perfect, it is genuine and ever-evolving, and I am proud of the effort our Team has made to bring the vision of this equity-focused infrastructure to life. Birth to Five Illinois, while still in the development stage, has made great gains in bringing community members together under one goal, to make Illinois "the



best state in the nation for families raising young children". Our Team has gone above and beyond to make meaningful community partnerships and create space for the prioritization of family voices. My extended gratitude goes to each of the 128 people who shared the vision, brought their passion, and have worked tirelessly every day to improve ECEC experiences for the children and families in their communities.

In collective impact, nothing is done alone. We have many champions to thank, including:

- The Governor, staff in the Governor's Office and the Governor's Office of Early Childhood Development (GOECD), and the dedicated members of the Early Childhood Funding Commission for their early childhood visioning and dedication to racial equity.
- The Illinois Department of Human Services (IDHS) and Illinois State Board of Education (ISBE) for their generous funding and commitment to building this community system with families and caregivers at the center.
- Illinois Network of Child Care Resource & Referral Agencies (INCCRRA) for providing the institutional, technical, and organizational support needed to launch the Birth to Five Illinois department and infrastructure.
- Illinois Action for Children (IAFC) and the Illinois Early Childhood Asset Map (IECAM) for training
 and technical support. Many of the visualizations in this report were developed by staff from both
 organizations based on data they collected and analyzed on our behalf.

Most importantly, I would like to thank the hundreds of community members who signed up to serve on their Region's Action and Family Councils. It is their perspective and passion that have inspired us and made this report possible. Thank you to the countless parents who trusted their Council peers with vulnerable stories; providers who emanate passion for the children in their care; business owners offering creative solutions for the identified needs; elected officials who are fierce advocates; faith leaders who opened their doors for care and are now encouraging others to do the same; and various ECEC systems partners who offer families step-by-step support through the enrollments process, blending together the supports families need.

These Early Childhood Regional Needs Assessments are a compilation of community members' experiences; not ours. We thank them for sharing and hope we have represented them well.

Cicely L. Fleming (she/her)
Director, Birth to Five Illinois

Letter from Regional Leadership

First and foremost, I want to thank the community. It is your voice that was called to the table, and it is your dedication to children and families that helped build this narrative. This is your story and thank you for sharing it. Only together can we be powerful agents of change.

I want to acknowledge both the Action Council and Family Council members who stepped in to share their experiences and expertise. Thank you, Action Council members, for volunteering your time to advocate for changes you believe are crucial for Early Childhood Education and Care (ECEC). To the Family Council, family experiences are the heart of Birth to Five Illinois, and we thank you for sharing your stories with us. Both Councils' commitment to the mission, connections to the community, and analyses of available data kept our discussions robust and have indeed provided valuable guidance for this Early Childhood Regional Needs Assessment.

I would also like to recognize the ECEC advocates who agreed to provide their insight through interviews and focus groups. These discussions were full of passion and hope for the future. Thank you to Region 4 Staff for working so diligently to assist in collecting and recording these community voices. If only we had more time to document more community ECEC experiences!

To the business community, the ECEC workforce is your workforce and today's children are your future employees. Children deserve a safe, accessible, quality ECEC experience to reach their highest potential. I invite you to use this information to implement changes big and small, to alter the direction of this child care crisis to a child care solution. Together we can do great things.

Finally, I would like to thank the Birth to Five Illinois State Team for driving this essential and vital work across 39 Regions. Our work can be described best through the words of Booker T. Washington, "If you want to lift yourself up, lift up someone else".

Thank you,

Livia Bane (she/her)
Regional Council Manager: Region 4
Birth to Five Illinois

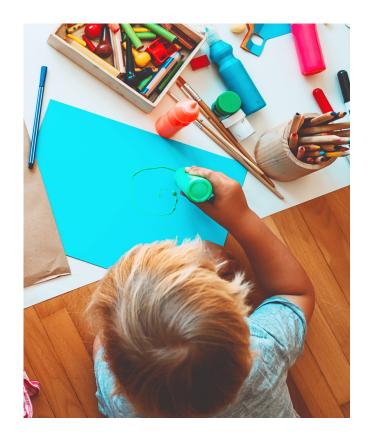


Early Childhood Education & Care (ECEC) in Illinois

ECEC in Illinois is made up of several programs, including publicly funded programs such as Head Start/ Early Head Start, Early Intervention, Early Childhood Special Education, home visiting, preschool, and center- and home-based child care. ECEC also exists within a larger system of services and supports for families, including pediatric health care, mental and behavioral health care, child welfare, and family-focused economic supports. When available, these services and supports can be confusing and difficult to navigate.

While programs and services for families and children exist across the state of Illinois, they are not accessed equitably. For example, families in rural areas oftentimes live in child care deserts and are forced to travel long distances to place their child in any program, regardless of its quality. Another example is families who speak a language other than English who may live in an area without programming in their home language, making it difficult to find educational options. A family that has little to no access to economic or material resources may live in a city with many programs but be unable to enroll their children due to the excessive cost of tuition and long waitlists for access to publicly funded slots.

Additionally, funding for ECEC has been siloed across multiple state agencies and has lacked a cohesive process for distributing funds to providers. Decentralized funding has led to unintended equity issues, leaving some areas of the State with nominal public funding for ECEC programming and others without enough funding to meet the demands of communities.



In 2019, Governor JB Pritzker declared, "Illinois will become the best state in the nation for families raising young children, with the nation's best early childhood education and child care. My promise is this: our work won't be complete until every child in this state enters kindergarten with the cognitive skills to think, learn, read, remember, pay attention, and solve problems, but also the social-emotional skills to communicate, connect with others, resolve conflict, self-regulate, display kindness and cope with challenges."

To honor this commitment, the Governor's Office formed the Illinois Commission on Equitable Early Childhood Education and Care Funding to study and make recommendations on funding that would provide more equitable access to high-quality ECEC services for all children ages birth to five. Work groups met throughout 2020 and published a report of findings and recommendations in March 2021.

The Commission made the following recommendations to address the racial, geographic, and economic inequities found in Illinois' ECEC system:

- 1. Increase public investment to help better subsidize the cost families pay out of pocket.
- 2. Create a coordinated funding approach by centralizing state and federal funding and distribute funding in new, more targeted ways.
- 3. Provide a single source for information and funding for ECEC with designated regional structures to make the system easier for families and providers.

Following these recommendations, the Illinois Department of Human Services (IDHS) established the Division of Early Childhood (DEC) to help centralize and streamline the State's existing child care, home visiting, and Early Intervention programs.

Additionally, after the Commission report recognized, "community input and data can fuel distribution of funds more effectively and equitably" and urged for the creation of a community and regional infrastructure to ensure input from families and providers is included in the state level decision-making process, the State partnered with the Illinois Network of Child Care Resource and Referral Agencies (INCCRRA) to launch our equity-focused regional system. Named Birth to Five Illinois, the goal of this new infrastructure is to create a network of community Councils across the State tasked with identifying the service needs in each region.

The mission of Birth to Five Illinois is to create a statewide regional infrastructure that will amplify input from communities in the development



of policies and funding priorities. We support the mobilization of communities to build and sustain equitable access to inclusive, high-quality early childhood services for all children and families in the state of Illinois.

Our vision is reimagining a more equitable ECEC system that respects family and community voice and works to ensure it is centered and prioritized at every level of decision-making in Illinois.

Our values and goals are:

- Family Voice: Through this transformation centered on authentic family and community engagement, we will address the inequitable distribution of resources and services and rebuild our State's ECEC system.
- Racial Equity: In an effort to move our ECEC system to one where racism no longer impacts
 a child's success, we will work to dismantle barriers that have limited access to high-quality
 services for minoritized children in every corner of our State.
- Collective Impact: Birth to Five Illinois will build a system that harnesses knowledge directly from families and providers and encourages decision-makers to ensure new and/or expanded services are created to meet community needs. This community-driven framework will directly influence policy/funding at the local, regional, and state level.

Staying true to our mission and vision, Birth to Five Illinois has standardized the use of pronouns to affirm all genders and has included a land acknowledgement in each Early Childhood Regional Needs Assessments to honor the Indigenous Peoples who were forcibly removed from their land.

Timeline

March 2021

Early Childhood Commission Report Published

- September 2021

Birth to Five Illinois Director, Cicely Fleming, Hired

February 2022

Official Public Launch of Birth to Five Illinois

March 2022

Held Regional Community Engagement Live Webinars

April 2022

Established Partnerships with Existing Regional Early Childhood Collaborations

- May - July 2022

Hired 39 Regional Council Managers across the State

August - November 2022

Hired Additional 78 Regional Support Staff

September 2022

Awarded \$2.6 Million to 24 Implementation Grantees

October - November 2022

Established 39 Birth to Five Illinois Action Councils

December 2022

Established 39 Birth to Five Illinois Family Councils

January 2023

Awarded \$575,000 to 9 Planning Grantees

January - April 2023

Council Meetings & Ongoing Community Engagement (Focus Groups & Interviews)

June 2023

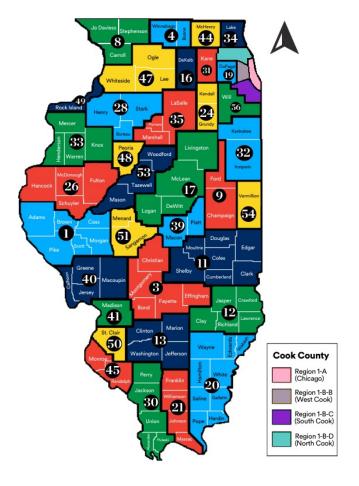
39 Early Childhood Regional Needs Assessments Released

July - August 2023

Report Dissemination & Public Input



Birth to Five Illinois Regions



To provide a structure for communities, families, and caregivers to engage with the data and share their experiences, our new statewide infrastructure was created across 39 Regions. The Regions align with existing Illinois State Board of Education (ISBE) Regional Offices of Education (ROE) boundaries. To better match demographic data to the needs for ECEC programs, Illinois Action for Children (IAFC), along with the Illinois Early Childhood Asset Map (IECAM), provided maps that reflect the true boundaries of the Birth to Five Illinois Regions. Birth to Five Illinois regional boundaries align with school districts instead of strictly following county lines, which can be a challenge for gathering and interpreting data because many early childhood services are provided by, or tied to, school districts.

After the Regions were established and staffed, Birth to Five Illinois Action and Family Councils were created by Regional Selection Committees. To ensure diverse perspectives, outreach efforts focused on community members who might be new to this type of work. Action Councils are comprised of ECEC professionals, healthcare providers, faith leaders, elected officials, and other community members. Each Action Council reserved two seats for parents/caregivers to ensure

family voices were included in every discussion. Family Councils are comprised of parents/caregivers from a wide variety of family types: single parents, adoptive and foster parents, caregivers of relatives, underage parents, two parent families, multi-generational families, and more. Each Regional Selection Committee reviewed Interest Forms, and recommendations were made based on a full consideration of a submitter's role/sector, location within the Region, race/ethnicity, gender, and answers to open-ended questions.

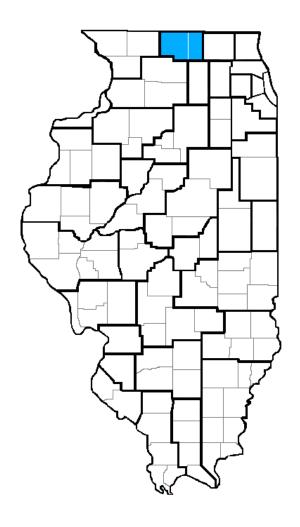
Regional Needs Assessment Methodology

Regionally based demographic, programmatic, and service provider data from IECAM and workforce data from INCCRRA were presented to Action and Family Council members during meetings and is included in the following section. The data comes from both IECAM (2020-2021) and INCCRRA (2021), unless otherwise noted. Some Regions included additional data collected during Community Based Planning or from state and/or local organizations and agencies. Action Council members were invited to bring additional aggregated data on programs and services provided by their agency/organization to complement IECAM data, while Family Council members brought their stories and experiences with the ECEC system to help contextualize quantitative data presented and discussed during meetings.

Additional qualitative data was collected community-wide through focus groups and interviews, and all Council members were invited to provide input on their Region's report. Council members developed the strengths, needs, and recommended next steps that are unique to each Region. Regional Teams, along with the support of their Action and Family Council members, created a dissemination plan and are holding community meetings virtually and in-person to share their report's findings. Throughout the fall of 2023, Regional Teams will lead their Councils through implementation planning based on the recommendations made in their report.

Spotlight on Region 4

Regional Community Landscape





shows, rallies, and special events throughout the year.

Regional Boundaries

Region 4, consisting of Boone and Winnebago Counties, is in the most north central area of Illinois, bordering Wisconsin. According to the 2020 Census, Winnebago and Boone Counties have a combined population of 338,838 community members, with Winnebago County being the seventh most populous county in Illinois and Boone County being the 26th most populous and smallest of the "northern tier" of counties. Both Counties are included in the Rockford Metropolitan Statistical Area, made up of Winnebago, Boone, Ogle, and Stephenson Counties and anchored by Winnebago's most populus city, Rockford.

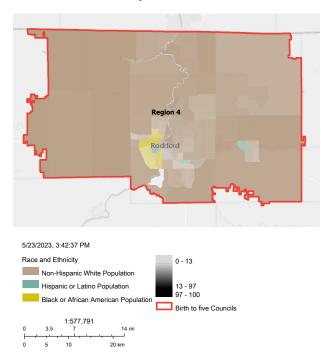
Winnebago County was named after its indigenous inhabitants known as the Winnebago Tribe of American Indians. In 1836 the first non-natives or New Englanders, from upstate New York settled in Winnebago County, named for the local Indigenous people. One year later, in 1837, Boone County was founded out of Winnebago County.

Regionally, manufacturing is the most common employment sector, followed by health care and then retail. The Region's largest secondary education options include Rock Valley College, Rockford University, and Rasmussen Universities. Both counties maintain strong park districts and promote outside exploration, including the use of recreational paths and rivers like the Rock River, Kishwaukee River, Pecatonica River, and Sugar River. Some of the largest annual attractions include the Boone County Fair, which has been in operation since 1855, and the Winnebago County Fair. Winnebago and Boone County are easily accessible to travelers as they are pass-throughs for Interstate 90, the longest interstate highway in the United States.



This larger-than-life size statue is considered chief of the Potawatomi Indian tribe who once inhabited Boone County, is located in a small circular garden near 1635 Big Thunder Blvd. in Belvidere. Illinois

Figure 1: Map of Overall Population by Race and Ethnicity



Source: IECAM Created by: Illinois Action for Children CS3

Esri, HERE, NPS, Esri, HERE, Garmin, USGS, EPA, NPS

Land Acknowledgement¹

As it relates to this history, we acknowledge that colonization harmfully severed Indigenous communities from their relationship with this land. Birth to Five Illinois benefits from the use of these lands and is committed to supporting our Indigenous community members, and resisting the erasure of historical harms that continue to impact them today. According to Mary Lyons, Leech Lake Band of Ojibwe, "When we talk about land, the land is part of who we are. It is a mixture of our blood, our past, our current, and our future. We carry our ancestors in us, and they are around us. As you all do." It is important we understand the longstanding history of those that came before us to seek to understand our place in that history. Those Indigenous to Boone and Winnebago Counties include: Hoocak (Ho-Chunk, also known as Winnebago), Kiikaapoi (Kickapoo), Bodéwadmik (Potawatomi), Odawa (Ottawa), and Ojibwe (Chippewa), Asâkîwaki (Sauk) and Meškwahki·aša·hina (Fox), Kiash Matchitiwuk (Menominee), Meshkwahkîha (Meskwaki), Myaamia (Miami), Peoria, and Očeti Šakówin (Sioux).

Regional Demographics

According to the Illinois Early Childhood Asset Map (IECAM), Region 4 has 24,432 children under the age of five, 3,427 of whom live in Boone County and 21,005 living in Winnebago County. The largest racial/ethnic groups in Boone County, in order of prevalence, are white, Hispanic, or Latine, and Black or African American. In Winnebago County, the largest ethnic groups in order of prevalence, are white, followed by Hispanic or Latine, and Black or African American. Most people who self-identify as Hispanic or Latine and Black or African American live in and around Rockford (Winnebago) and Belvidere (Boone County).

Racial and ethnic identifiers are only one component of the Region's diversity. Residents of Region 4 live in various communities, in varied family structures, and at various income levels, just to name a few. To understand the ECEC landscape and stay true to the mission of advancing equity, it is important to understand these intersections of family lives.

¹Based on information provided at https://native-land.ca

Children and Families in Priority Populations²

The Illinois Early Learning Council (ELC) identified 12 priority populations with the goal of providing services to children and families who may not have access to adequate supports. It is important to note that although some criteria can be referenced, quantitative data on priority populations may be limited or non-existent. However, we gathered qualitative data from community members in priority populations and have included their input throughout this report. The following priority categories have been identified by the community as being the most impacted in Boone and Winnebago Counties.

Children in Families with Limited Access to Financial Resources

The limitations experienced by families with limited access to financial resources can affect children's ability to thrive. The Federal Poverty Level (FPL) can be used to measure a family's access to resources. FPL is the minimum amount of annual income needed for individuals and families to pay for essentials, such as room and board, clothes, and transportation. FPL considers the number of people in a household, their income, and the state in which they live. Someone living on income at or below 50% FPL is considered to be living in deep poverty; 100% FPL is considered to be living at "the poverty line" (Figure 2).

Figure 2: Federal Poverty Levels at 50%, 100%, 185%, 200% for a Family of Four

	50% FPL	100% FPL	185% FPL	200% FPL
Family of 4	\$13,100	\$26,200	\$48,470	\$52,400

Source: U.S. Department of Health and Human Services

Created by: Birth to Five Illinois

Between 2017 and 2021, the number of people living on deep poverty income in both Boone and Winnebago Counties increased, and the number of people living at the federal poverty line across the Region has stayed the same or slightly increased.

Figure 3: Percentage of People in Region Living at 50%, 100%, 200% Federal Poverty Levels³

County	50% FPL (Deep Poverty) 2017-2021	100% FPL (Poverty Line) 2017-2021	200% FPL
Boone	7% (up from 5%)	13% (up from 11%)	50%
Winnebago	13% (up from 12%)	25% (similar to previous years)	35%
Illinois	7% (same previous years)	16% (similar to previous years)	35%

Source: Kids Count Data Center Created by: Birth to Five Illinois

²https://oecd.illinois.gov/content/dam/soi/en/web/oecd/earlylearningcouncil/access/documents/priority-populations-updated-2021.pdf

³ https://datacenter.aecf.org/

Children in Families Experiencing Homelessness and Unstable Housing

Families experiencing unstable or non-existent housing is another priority population, as defined by the ELC. According to the State's definition, families are considered homeless if they lack a fixed, regular, and adequate nighttime residence, including children sharing the housing of others due to loss of housing, economic hardship, or a similar reason. Erikson's Risk and Reach Report⁴ describes how unstable housing in childhood is likely to lead to increased health and anxiety issues and negatively impact children's academic achievement. Families who experience unstable housing/shelter with children not yet in

Kindergarten are often uncounted in public data sources, making it challenging to understand the extent of ECEC needs. However, the Illinois State Board of Education (ISBE) can provide some data in this category. In 2020, there were two identified Kindergarten aged children experiencing homelessness in Boone County and 177 in Winnebago County; Erikson's Risk and Reach Report defines Boone's homelessness risk as low-moderate, and Winnebago as high. An ECEC Director in Winnebago County shared that she has seen an increase in enrolled families experiencing homelessness and unstable housing at her center.

At the end of 2022, the need for housing vouchers skyrocketed, while we saw rental units often doubling in price due to low inventory and high demand.

- Housing Authority Representative (Boone County)



Children/Families with Child Welfare Involvement

Families involved with the Illinois Department of Children and Family Services (DCFS), including those in substitute care and receiving intact family services, have a parent who is a youth in care, or children in foster care. According to the Kids Count Data Center, the most recent information for Boone County has a total of 59 youth in substitute care and Winnebago has 539. This information is not disaggregated by age. Regarding these arrangements, Erikson explains how mistreatment) during early childhood can create long-term consequences, such as disruptions to cognitive, language, and emotional development, possibly including challenges such as difficulty with self-regulation and depression. Looking at the county-by-county data on risk factors the undermine optimal child development in comparison to the reach of publicly available programs, the Risk and Reach Report indicates Boone County has a "low" maltreatment risk (i.e., child abuse and/or neglect) at 32 indicated victims of maltreatment and Winnebago County has a "high-moderate" risk with 899 indicated victims of maltreatment.

Families that Face Barriers Based on Culture, Language & Religion

Families experiencing language barriers may be unable to access necessary resources due to programs lacking the resources to support their limited English proficiency, linguistic isolation, religious or cultural beliefs, or practices and norms that differ from those of the service providers. IECAM data shows English

Translation is a high-priority issue for families and other fundamental issues, like language that are barring access to equity.

- Mexican American Non-Profit Leader

by Spanish with 416 limited English-speaking households in Boone County, 1,462 limited English-speaking households, and 976 "other languages" spoken in Winnebago County. To assist in remedying the need for translation services, one school district has implemented a "language line" to aid in communication with families.

is the primary language spoke in Region 4, followed

Children with Disabilities

Like other priority populations, it is difficult to have a full understanding of the scope of needs for children with disabilities because not all children have been "screened" and "identified" by a service provider. Children who are evaluated by a provider as having developmental delays or other health impairments and qualify for Early Intervention or special education services fall into this category. Figure 3 represents regional childhood Individualized Education Plan (IEP) numbers for children who qualify for special education services. One ECEC leader described how the school district has seen an overall decrease in children's language development, literacy, and executive functioning and an increase in the need for teacher professional development. One Early Intervention provider explained that "Often doctors do not agree with my assessment of interventions needed." She explained how frustrating it is to hear parents/ caregivers have been told by their pediatricians that their child is "too young to diagnose" when providing support early encourages healthy child development. A Family Council member explained how they found themselves in this situation and by the time the child was three and accepted into school, they were issued an IEP for speech and language services. She felt the system ignored her needs, "I knew my child was delayed and it was like I had to wait until his symptoms got worse for other people to see it".

Figure 4: Number of Preschool and Kindergarten IEPs

	Early Childhood (ages 3-5) IEPs	Kindergarten IEPs
Boone	143	88
Winnebago	1,041	444

Source: Illinois State Board of Education Created by: Birth to Five Illinois

Impact of Caregiver Educational Attainment

According to the Erikson Risk and Reach Report, maternal education is one of the strongest predictors of child health, and cognitive and behavioral outcomes. Mothers with less than a high school degree are more likely to encounter barriers to resources and opportunities and often experience financial strain, which can affect their mental health, level of stress, and the quality of interactions with their children. Figure 4 depicts Regional educational attainment by adults over the age of 25 as compared to the State. Data on mothers ages 20 and older is from the Census Bureau; other data included is from the Erikson Risk and Reach Report.

Figure 5: Percentage of Adults Over Age 25 by Educational Attainment

		High School Graduate or Higher 25 Years & Older, 2017-2021	Bachelor's Degree or Higher 25 Years & Older, 2017-2021
Boone	10% (High-Moderate)	87%	25%
Winnebago	12% (High-Moderate)	88%	23%
Illinois	8%	90%	36%

Sources: Census Bureau, Erikson Risk and Reach Report Created by: Birth to Five Illinois

Children of a Caregiver with a Disability

Additionally important to consider are primary caregivers with medically determinable physical or mental impairments that substantially limit one or more major life activities. One parent described herself as a drug addict in recovery, stating "I wish services were more proactive, not reactive after a crisis." This parent also described how proactive support could help her adjust in her times of need.

Children/Families with Refugee or Asylee Status

A refugee is a person outside his or her country of nationality who is unable to return to his or her country of nationality because of persecution or a well-founded fear of persecution on account of race, religion, nationality, membership in a particular social group, or political opinion. One community member who works with refugees explained the need for more people to work in this realm that understand a refugee's experience, and because there are not enough people to serve in these roles, refugees struggle to receive essential services.

Children in Families Who Face Barriers Due to Immigration Status

The last of the State's priority populations identified within the Region is children in families who face barriers due to their immigration status, which includes children in undocumented families and immigrant families impacted by policies, including public charge which is an estimation made by the U.S. Citizenship and Immigration Services of a noncitizen's likelihood of becoming primarily dependent on the government for subsistence. According to the American Immigration Council,⁵ immigrants make up 14% of the Illinois' population, with immigrants from Mexico being the top country of origin. Furthermore, this source reports 79,856 children in Illinois are immigrants. One Refugee and Immigrant Service Specialist explained how immigrant families wish to be more engaged and included in their community, but systems often prevent them from doing so. This individual described how trust between community representatives and families is key, but that building that relationship takes time. Furthermore, cultural differences in the states can be a shock to immigrants, creating barriers that prevent families from accessing the assistance they require. This cycle becomes counterproductive to serving the needs of children and families.

Income-Eligible Households

Another important demographic when considering the need for ECEC services in the Region is income-eligible households (Figure 6). Subsidies like the Child Care Assistance Program (CCAP) assists income-qualified families in paying for child care. According to current CCAP eligibility requirements, families whose monthly non-exempt income does not exceed 225% of the FPL for their family size are eligible for financial assistance. To put that percentage into perspective, a family size of four at 225% FPL has an income threshold of \$62,436.

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Some families do not qualify for CCAP but are greatly impacted by the high cost of care. These are the stuck in the middle, middle class. They can't afford to stay home but they can hardly afford the child care they pay for.

- Action Council Member



It must be noted that the data collected and presented in this report may not be fully representative because it is based on Census data and not everyone completed a 2020 Census form. At the time of this report the available data was three years old, so some shifts in figures have likely occurred, although probably not significant enough to drastically skew the analysis.

⁵ https://www.americanimmigrationcouncil.org/research/immigrants-in-illinois

Figure 6: Number of Children Ages Five and Under by Working and non-Working Parents

	Two Parent Households		_		One Non-Working Parent
Number of Children Five and Under	11,519	12,174	6,967	10,463	1,711

Source: IECAM

Created by: Birth to Five Illinois

Another factor to consider is referenced informational databases are only updated periodically. This Regional Needs Assessment has attempted to capture the most recent, available, and applicable data and sources when examining ECEC within the Region.

The purpose of the priority populations list is to drive resources and attention toward improving access to high-quality, responsive services for children and families with limited to no access to economic or material resources. While the priority populations list addresses the access issue, Birth to Five Illinois strives to focus the attention of policymakers and early childhood stakeholders on identifying ways to engage these impacted communities to remove the systemic barriers causing the access issue within each Region.

Local Community Collaborations



A group of children sitting on the couch with an adult.

A Local Early Childhood Community Collaboration is a group of organizations, agencies, and/or individuals from across several sectors that come together to address the ECEC needs of families, caregivers, and children, support Kindergarten readiness, and connect families to resources. Between Boone and Winnebago Counties, the Local Community Collaboration landscape varies. Boone County has a newly formed Early Childhood collaboration through the Boone County Maternal and Child Health Advisory Council. Winnebago County has two Collaborations: the Winnebago County Health Department and Alignment Rockford's Ready to Learn Initiative. Though some of these Collaborations are new and not all provide services directly to families, each plays a critical role in coordinating service delivery for families shared outcomes for the Region's children.

Boone County Maternal and Child Health Advisory Council is a newly designated early childhood alliance. This Council consists of interdisciplinary professionals

and stakeholders committed to optimizing the physical, mental, social, and spiritual health of children and families by providing equal access to healthcare, education, and resources. The Council was awarded a \$106,150 Implementation Grant from Birth to Five Illinois in fall 2022. The grants were disbursed to "existing Local Early Childhood Collaborations to provide more equitable access to high-quality ECEC services". The funds went toward strengthening the Collaboration, creating a Maternal and Child Health Data Report, and hiring a Maternal and Child Health Coordinator.

The Winnebago County Health Department's home visiting program serves as the county's ECEC Collaboration. The primary strategy of the system is to work cooperatively with other local entities to increase enrollment of children in early learning programs, serve priority populations, and coordinate intake. The Department institutes quarterly home visitor meetings and training for those local entities to encourage connections, promote knowledge sharing, and encourage professional development.

The other Collaboration serving children and families in Winnebago County is Alignment Rockford's Ready to Learn program, a community-wide early childhood initiative comprised of local organizations, businesses, and individuals. This program was awarded a \$68,300 Implementation Grant from Birth to Five Illinois in FY23, which provided funding for:

- Early Development Instrument (EDI): A measurement of Kindergarten readiness across five critical developmental domains that keep a pulse on the wellbeing of the youngest learners to improve their potential for lifetime success by working to shift conditions in the environment for systemic change. Current EDI composition includes early childhood programs in Rockford Public Schools and the Harlem District.
- Basics Illinois: The Basics are a set of five easy, evidence-based practices to optimize the development of young children, birth to age three (love, talk, count, explore, read).
- Opening Doors: Parenting groups sessions that address parenting topics.

Within recent years, the Winnebago County Home Visiting Collaboration was the sole defined ECEC collaborator for the Region and was localized to the Rockford area. The formation of the Boone County Maternal and Child Health Advisory Council and the Ready to Learn program were necessary to advance and expand ECEC support across the Region; this growth will continue outside of the anchor cities, Belvidere and Rockford, and aid in aligning ECEC networks Region-wide.

There are many other community programs and groups providing support to young children and families within Region 4. The commonality of these programs is the overarching goal of improving community health. As documented in Erikson Institute's Risk and Reach Report, the overall risk indicator for Boone County is High-Moderate and Winnebago County is marked High. This ranking suggests the need for comprehensive community support within the Region. According to one Family Council member, a lack of awareness regarding available resources is an issue for families. Fluctuating program locations or initiatives is a key issue that Collaborations can help tackle, as some programs have existed for some time, and others have stepped in to fill a need or where a prior service dismantled.

Current organizations that specifically serve as a community network for children and families within the Region are:

- Local Interagency Council (LIC): Serving Boone and Winnebago Counties (and other surrounding counties),
 LIC aims to facilitate a collaborative partnership of families, service providers, and community members who plan, implement, and evaluate a service system for families of children birth to three with special needs within the context of a broader system of services for children birth to five years.
- Youth Services Network: Serving children and families in Boone and Winnebago Counties, the organization develops, provides, and coordinates services to improve the physical, developmental, psychological, and social well-being of children, young adults, and families. All services are trauma-informed, strength-based, and provided in the community. Children, adolescents, and their families are eligible for services.
- Children's Home & Aid Northern Region: Devoted to serving the area's most challenged communities by
 providing programs that focus on child abuse prevention, healthy child development, and strengthening
 families through adoption, prevention, parenting, and family and crisis nursery services.
- Child Care Resource & Referral Agency (CCR&R): Serves as a resource hub for families, child care professionals, and communities, while increasing access to high-quality, affordable child care.
- Integrated Referral and Intake System (IRIS): In development for Boone and Winnebago Counties, the Youth Mental Health System of Care Local IRIS Leadership Team is leading the charge and implementation. IRIS is a web-based community referral system that helps organizations connect the families they serve to the right resources in their community.

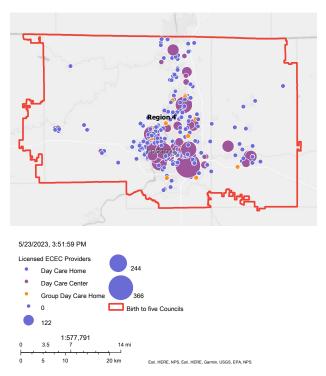
It is important to acknowledge current Community Collaboration information in this report to recognize the strengths and needs within the Region. ECEC Collaborations provide a network of resources and support to families, children, and programs. These supports allow for an alignment of services, can counteract silos or service overlaps, and provide insight into ECEC priorities for the Region.

Early Childhood Education & Care (ECEC) Programs

The Region's ECEC landscape is varied across Boone and Winnebago Counties. This section will examine the types of care available throughout the State and how those services are distributed and utilized in the Region. Options vary by type, location, and service among ECEC providers, but overall consist of license-exempt or licensed care.

License-exempt homes are permitted to serve three or fewer children at a time. License-exempt centers may serve children three years and older and can operate in a variety of settings, including public or private elementary schools, faith-based organizations, or institutions of higher education. Licensed child care options include family child care or center-based care. Family child care arrangements take place in a home-like setting with smaller teacher/student ratios, whereas centers care for more children who are typically grouped by age. Licensed programs are monitored by DCFS to ensure health and safety standards, adequate staff to child ratios, and suitable spacing requirements. Across the Region, there are 29 licensed centers and 190 licensed homes. Most child care options are clustered around or in Rockford and Belvidere (Figure 7).

Figure 7: Location of Licensed Programs and Licensed Capacity



Source: IECAM Created by: Illinois Action for Children CS3

License-exempt homes and centers are not monitored by DCFS, but certain qualifications are required to register as such. According to current data, there are currently 201 license-exempt home providers and 10 license-exempt child care sites in the Region (see the Total Programming Chart in Appendix B). License-exempt child care programs have limitations on the number of children they are allowed to care for and must undergo additional training and monitoring if they choose to accept Child Care Assistance Program (CCAP) payments.

Many license-exempt and licensed providers accept subsidy payments from the CCAP to make child care more affordable for families. According to IECAM, 822 licensed home and child care centers in the Region accept CCAP; a total of 6,351 children receive assistance. Fluctuations in CCAP enrollment have been documented over recent years and may be related to changing eligibility requirements, COVID-19, or a varying economy. One license-exempt program in Winnebago County reported that currently 70% of the families they serve are CCAP qualified. Furthermore, the Illinois Department of Human Services (IDHS) finds most children served by CCAP are three to four-year-olds and six to 12-year-olds. However, the most requested child care (and most difficult to secure) is that for birth to two-year-olds.

While DCFS monitors to ensure minimum standards are met, ECEC programs may choose to pursue additional training or education to improve the quality of the care children receive. License-exempt providers are offered training through the Gateways website to receive a quality add-on tier to their CCAP daily reimbursement rates. At the completion of all three tiers, the Gateways Early Childhood Education Credential Level 1 is achieved. Licensed child care centers, homes, Head Start and Preschool for All programs are recognized with Circles of Quality that rank a program's investment in advancing quality. In

order of achievement, levels of ranking include Licensed, Bronze, Silver, and then Gold. While there are few programs participating in Boone County, there are four centers that have achieved a Gold Circle of Quality rating (Figure 8).

Figure 8: Number of Family and Child Care Centers Participating in ExceleRate⁶

Circle of Quality	Boone	Winnebago
Gold Family Child Care	0	0
Gold Center-based Care	0	4
Silver Family Child Care	0	2
Silver Center-based Care	2	3
Bronze Family Child Care	0	5
Bronze Center-based Care	0	1

Source: IECAM

Created by: Birth to Five Illinois

Across the State there are publicly funded Early Childhood programs available for families that meet enrollment requirements, such as Preschool for All (PFA), Preschool for All Expansion (PFA-E), Head Start, and Early Head Start; however, publicly funded options in Region 4 are limited (Figure 9). There is only one PFA site in Capron (Boone County) with a funded capacity of 40, and there are no PFA-E, Head Start, or Early Head Start programs in Boone County. There are, however, ECEC programs located outside of Boone County (i.e., Winnebago and DeKalb Counties) that serve Boone County families. Although there are more overall ECEC options in Winnebago County, both counties do not have equitable access to programming. Publicly funded programs tend to cluster around city areas, leaving rural families with fewer options for care.

Figure 9: Number of Publicly Funded Programs by Type and County

Program Type, Ages Served	Boone County	Winnebago County
Preschool for All (Ages Three to Four)	1	11
Preschool for All Expansion (Ages Three to Four)	0	4
Head Start (Ages Three to Five)	0	4
Early Head Start (Ages Birth to Three)	0	4

Source: IECAM

Created by: Birth to Five Illinois

Additional ECEC programming available in the Region include home visiting and intervention services for children ages birth to three. Home visiting support includes Prevention Initiative and the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program, which offers family support services and education through planned regular visits with a home visitor to help build a strong foundation for learning. Early Intervention programs provide services to children based on a service provider's evaluation to help children meet developmental milestones. According to the latest available data, there are three Prevention Initiative sites in Winnebago with a proposed capacity of 308 children; the MIECHV home visiting program has a funded capacity of 92 in Winnebago and three in Boone. There are no Prevention Initiative sites in Boone County.

⁶ Does not include number of Head Start or Preschool for All programs that participate in ExceleRate

There are additional services available to families in neighboring Regions. For example, Early Intervention served 78 Boone County children via a service provider based in Rockford, and Early Head Start DeKalb serves a small batch of Boone County children. However, when Boone County children qualify for services, they often must travel to Winnebago County to receive those services. Many families reported that traveling for services was challenging. Caregivers who do not own their own vehicles must rely on school buses, mass-transit systems, family or friends,

Many of our families experiencing risk factors are unable to attend without transportation, disproportionately impacting those of lower socioeconomic status.

- ECEC Leader

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taxi-like services, or walking. Transportation is also a financial burden for many families, bus routes can be inconvenient or not accessible, traveling with multiple children/car seats is nearly impossible, and some public transportation requires prescheduling.

There were additional challenges caregivers, families, and providers identified through Council and community meetings, focus groups, interviews, and surveys. Child care arrangement options do not consistently meet the needs of working families. First, not all caregivers work traditional hours, but most care options are offered during traditional hours, leaving second and third shift working caregivers with limited child care options. Next, part-time slots like PFA generally do not compliment parent work schedules. Additionally, families whose schedules only require part-time care find it difficult to secure a part-time slot with providers. Parents cite that some ECEC providers do not want to accept a part-time student when a full-time slot can be filled instead, which leaves some caregivers forced with a choice to pay for full-time care but only use it part-time.

I don't want to pay for care I don't need.
- Parent

However, one large employer in Region 4 shared that they recognized the challenges employees were having with accessing child care. To better meet employee needs, they offered more flexible scheduling, making all shifts part-time to give parents/caregivers an opportunity to leave work to transport children to preschool or child care. Additionally, they offer and connect employees to additional resources, such as housing, healthcare, and food pantry sources.

Caregivers also expressed concerns about the quality of ECEC programs and the lack of equitable access for all families. One focus group participant explained that her daughter was watched by a home care provider and that, "she is safe, but don't learn anything." This mother explained how the provider uses TV to keep the child busy and how she wants a better learning environment for her child, but that she must work, and this provider is a reliable source of care for her child. Paperwork, cost, available time slots, and changing eligibility

There must be a way to advance the life of the employee and their family. Stable work, benefits, learn and earn, and other supports help do that. We need a community approach.

- HR Professional

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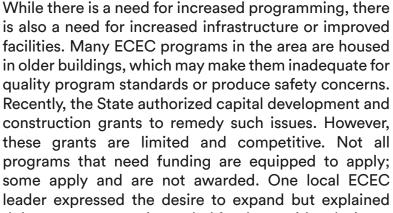
requirements create barriers to access for families of children that need ECEC programs.

Families and caregivers experienced challenges finding child care during the COVID-19 pandemic. While ECEC programs reported enrollment numbers are back to pre-COVID-19 levels, there are concerns that some young children are not or will not be ready for Kindergarten due to low enrollment numbers during the pandemic. School leaders also expressed a concern that ECEC teachers not equipped to support the number of children who are not Kindergarten-ready.



With school and community center closures, we saw vulnerabilities increase. Most of these vulnerabilities were seen in decreased language and literacy, executive function, and fine and gross motor control.

- ECEC Administrator



that "the playing field is not level". She expressed that more support is needed for those with a desire to grow, but that many need "access to resources more easily."

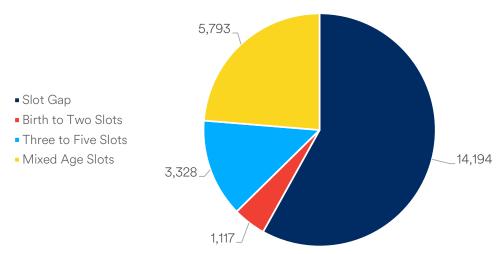
There is a new child care center in development in Machesney Park as a result of an Illinois Capital Development Early Childhood Construction Grant. There is also funding from ISBE to increase the number of PFA-funded slots or establish new PFA sites, and Illinois Facility Funds (IFF) are available to expand, enhance, and stabilize infant and toddler programs in communities that want/need it most across Illinois. However, the need for close, accessible, affordable, high-quality care remains for families, especially in Boone County.

Slot Gap

A slot gap exists when there are more children eligible for an ECEC program than actual available spots into which they can enroll. It is important to note that this summary of available ECEC program options represents a snapshot in time. As a quantitative measure, slot gap helps us understand the need for ECEC expansion in the Region, however, it does not factor a family's choice to not participate in any ECEC programs. Programs, capacity numbers, and actual enrolled children may vary over time as need and funding fluctuate. Another important piece to consider when looking at the Region's slot gap is the difference between children enrolled in care versus the number of children allowed to be in care at any given time, which is known as capacity. For example, a child care center may have 120 children enrolled, but have a licensed capacity of 100, as the 20 additional children may attend only part time, only after school, or when other children are not in attendance so as not to exceed the center's capacity. Additionally, there are unknown numbers, such as informal friend, family, or neighbor care, which cannot be tracked and therefore impacts the ability to accurately calculate the gaps in service. The Total Programming Chart (Appendix B) contains the most recent and available region-wide programming numbers.

There are 24,432 children aged birth to five years old in the Region. If we were to assume that every family in this category desired to place their child in care, then the overall slot gap for child care is 14,194 (see Figure 6). This number does not include children receiving Early Intervention, home visiting, or friend, family, or neighbor care. It must be noted that some children may be double counted in this representation. For example, a fraction of children may attend a half-day PFA program and then be bussed to a licensed family child care home for the remainder of the day. Even when considering some double counting and unknown friend, family, or neighbor care, this slot gap number is daunting and represents the community's need.

Figure 10: Slot Gap Versus Slot by Age Group



Source: IECAM Created by: Birth to Five Illinois

The gap in service delivery is further exacerbated when considering specific groupings like infant and toddler care options. IECAM reports there are 12,477 birth-to-two-year-old children in the Region, and only 1,887 child care slots (i.e., Early Head Start, licensed child care centers, and licensed family child care homes) available for this age group. Therefore, a slot gap of 10,590 exists among the birth to two-year-old age group. Please note, the number of birth-to-two-year-olds enrolled in license-exempt family child care homes is unknown and as a result, it is not included in this age group estimate. These children may be

receiving care elsewhere (i.e., friend, family, neighbor, or parent); however, when care is needed, finding care for this age group is exceptionally difficult for families. According to one licensed family child care provider, a parent revealed she was pregnant to her partner and then immediately contacted the provider to get on her waitlist because the parent understood finding infant care is nearly impossible.

Further adding to the gap are publicly funded slots. Of the 24,432 children aged birth to age five, 12,499 of those children live at 200% FPL or less, making them eligible for enrollment in a publicly funded program. However, regional capacity for publicly funded programs provides only 3,911 slots. Leaving 8,588 eligible children (or 69%) without access to programs (should their families choose). One Head Start representative explained how families are deterred from programs when their children are placed on long waitlists, so many end up waiting until the child enters Kindergarten.

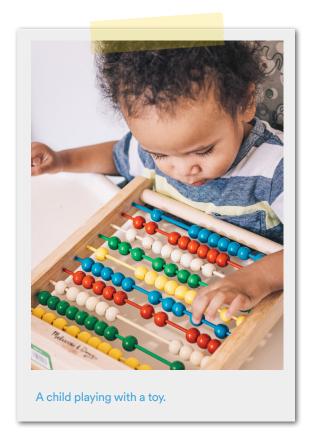
There are also home visiting supports available in the Region, which offer family support and education

I'm only 5 weeks pregnant, but I feel like I need to get on the waitlist now. Otherwise, I might not have a spot when the baby gets here. I love the child care center my kids currently attend. I want all my children to be in the same child care. I trust her and my kids really learn a lot there.

- Parent



through planned regular visits with a home visitor based on a family's needs and schedule. Prevention Initiative, Early Intervention, and MIECHV programming provide 936 slots to qualified children. Many caregivers report obstacles in accessing these services, like inaccessible locations where services are performed, challenges getting to and from services, and prohibitively long waits to be seen/served. One Family Council member reported her child aged out of service while on the waitlist and another drove to Springfield for a special resource because her child was soon to age out of the service.



Accessible ECEC programming is essential to the economy, and quality early learning experiences are one of the necessary components for healthy human development. We must have an adequate balance of child care slots based on the need to maintain a functioning workforce that benefits children and families. As presented in this report and even when considering a family's choice not to participate in ECEC, the number of children eligible for child care far exceeds the available slots. This fact is maintained when considering all specific groupings: three-five aged children, birth to two population, and publicly funded program options. The community currently has the capacity to serve 42% of children aged birth to five, 15% of children ages birth to two, and 31% of children who qualify for publicly funded programs. Families shared that a lack of slots have delayed them entering the workforce, selecting a child care arrangement that lacks quality, or simply being unable to secure intervention services for their children. An expansion of Early Childhood programming is necessary to reduce obstacles for parents seeking care and to ensure all children can learn and receive the supports for which they are qualified.

Early Childhood Education & Care (ECEC) Workforce

It is important to consider the ECEC workforce because of its vital role in the development of young children. Early educators provide children with opportunities to learn and grow outside of their home environment. It is imperative we invest in the ECEC workforce because it is an investment in the future of the Region's children.

The ECEC workforce landscape in the Region is comprised of various elements, including provider education levels, race and ethnicity, and gender and language components. These figures can vary greatly across type and location of care.

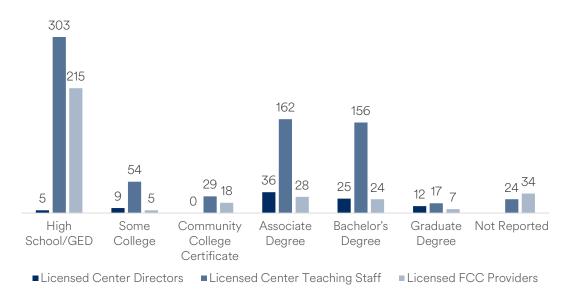


Rock Valley College electronic billboard atop a hill of flowers.

Education

Education levels of the ECEC workforce can range from a high school diploma or early childhood credential to a graduate degree. Moreover, required educational levels vary per ECEC employer. That is, a school district may require a classroom teacher to possess a bachelor's degree, whereas a licensed center may require lead classroom teachers to possess at minimum a high school diploma and an early childhood certification. Overall, education is an important component of providing a developmentally appropriate learning environment and to advance professional growth in the field. However, obtaining the proper degree can be an obstacle for many due to the cost or the challenge of balancing other life commitments and coursework demands. Figure 11 shows the educational levels of the Region's center directors, center teaching staff, and licensed family child care providers (FCC).

Figure 11: Highest Level of Education of Center Directors, Licensed Center Staff, Licensed Family Providers



Source: INCCRRA

Created by: Birth to Five Illinois

Race and Ethnicity

The race and ethnicity of the ECEC workforce also varies throughout the Region based on position and type of care. As shown in Figure 12, the largest racial makeup among all types of providers is Caucasian, with the second largest overall group being African American and then Hispanic. Representation further decreases for those who are Multi-racial, Asian, or another race/ethnicity. When considering the ECEC workforce and the communities they serve, Region 4 is predominantly white, followed by Hispanic, and then Black. Therefore, the workforce is representative of the communities they serve in terms of demographic representation; however, children of all backgrounds benefit from having a diversity of teachers. Despite diversity of staffing, Figure 12 highlights the disparity between race and staffing position, demonstrating how the higher the position, the more likely the individual serving in that role is white.

Figure 12: Number of Early Childhood Professionals by Job Title, Race and Ethnicity⁷

Job Title		Black or African American	Hispanic or Latine	Multi- Racial		Native American, Alaskan Native, Pacific Islander, Other
Licensed Center Directors	*	10	*	*	77	0
Licensed Center Teaching Staff	11	110	84	13	491	13
Licensed FCC Providers	0	103	37	7	176	6

Source: INCCRRA

Created by: Birth to Five Illinois

Gender and Language

Gender data from the Region is representative of historical caretaking roles, as ECEC positions are overwhelmingly filled by women. Moreover, English is the primary language, followed by Spanish, which mimics demographic representation for the Region. Figure 13 outlines these details.

Figure 13: Gender and Language of Licensed Professionals⁸

Position	Total	Male	Female	Bilingual
Licensed Center Director	91	0*	90	9
Licensed Center Staff	745	23	703	94
Licensed FCC	331	14	317	40

Source: INCCRRA

Created by: Birth to Five Illinois

⁷ An asterisk denotes that there were between one and four respondents for a category; the exact number for fewer than five responses was not reported.

⁸ Not all individuals provided a response to each category.

Compensation

It is important to consider compensation in the field of ECEC. According to IDHS's Salary and Staffing Survey⁹, the median wage of a full-time center director was \$19.00 per hour or approximately \$39,520 per year. The median classroom teacher wage was \$14.29 an hour or \$29,960 per year, and an assistant teacher was \$12.00 per hour or \$24,960 per year. Furthermore, according to this Survey most child care centers do not offer insurance to most of their staff. These compensation rates virtually guarantee ECEC employees are also navigating through the challenges of poverty and the added stress these barriers produce.

Pay for Early Childhood staff and teachers is incredibly low. Truly, not a livable wage. We are asking our early childhood providers to live in poverty while taking care of our most valuable assets, our children, our future.

-Community Member

Staff Turnover

Low wages and high expectations in the ECEC field contribute to staff turnover, or as one Director explained, "Teacher pay does not line up with teacher education". According to IDHS's most recent Salary and Staffing information, the turnover rate for early childhood teachers increased from 32% in 2019 to 40% in 2021. The top reason for teachers leaving their jobs were dissatisfaction with

We are stuck between not being able to let go of people who call in a lot because there is no one else to fill the position.

- Center Director

My grandson was on a waitlist for a year. At times his mother made calls daily asking if there were openings.

- Community Member

wages, benefits, and burnout. Regionally, we understand many programs continue to be understaffed. ECEC administrators find themselves balancing between open rooms and quality staff. Programs, staff, and children are suffering from inadequate staffing levels. Another child care center located in an area with unmet resource needs described their status as "barely surviving" and "trying to keep their head above water". This center has reported that the staff they are able to employ are tired and anxious.

These understaffed programs continue to lead to room closures, which lead to forced pick-up from parents; a lack of reliable child care options for caregivers leads to issues at work. These cyclical issues are more likely to disproportionately affect mothers. According to the Office of the Assistant Secretary for Planning and Evaluation (ASPE), maternal labor force participation has declined the most, possibly a driver and consequence of decreased employment in the child care industry¹⁰. These singular issues are all interwoven, and disrupt the cycle of accessing quality, affordable, and reliable child care.

Contrary to high staff turnover rates in the Region, some ECEC providers report their ability to maintain staffing levels due to higher compensation rates and the ability to provide benefits to staff. Most notably are school districts that can provide higher pay rates, benefits, and time off. One

center director in Winnebago County indicated staffing is not an issue at her center. This Director shared that she believes her staffing levels are consistently maintained because she pays staff at a higher rate than other centers and offers incentives like professional development days, which allow staff to attend activities together that focus on relationship building. This center is in a more affluent area of the Region.

A truly effective ECEC workforce in the Region would have access to an equitable disbursement of resources. That is, adequate infrastructure, quality staff, and higher compensation rates for education, professional development advances, and performance. There is a correlation between areas of increased systemic barriers for families and business operation struggles.

⁹ www.dhs.state.il.us/page.aspx?item=143721#a_toc2.

¹⁰ https://aspe.hhs.gov/effects-child-care-subsidies-maternal-labor-force-participation-united-states

Professional Development & Advancement Opportunities

There are several initiatives and advancement opportunities available to the Region to address challenges in the ECEC system.

Early Childhood Access Consortium for Equity (ECACE): ECACE is a collective of higher education institutions working together to increase access and foster persistence toward completion of credentials and degrees for the early childhood workforce in Illinois. Local institutions that participate in this program to reduce barriers to entry include Rock Valley College and Rockford University.

Grow Your Own: Some local school districts are addressing ECEC shortages with Grow Your Own programs; including Rockford Public School District #205 and Harlem District #122. These programs provide educational opportunities to students who are interested in advancing their career readiness skills and then plan to reinvest their talent back into the community.

Gateways to Opportunity: Gateways to Opportunity is a professional development system for Illinois's ECEC providers. Professional development initiatives include:

- Scholarships: Money used to further education in ECEC.
- Credentials: Indicators of professional achievement that show knowledge, skill, and experience in ECEC.
- Great START: Wage Supplement Program that offers extra money for completing college coursework and staying employed with the same employer.
- Training: Online and face-to-face professional development opportunities.

ExceleRate: The ExceleRate program's purpose is to increase ECEC quality, to be used as a business marketing tool, and to encourage license-exempt providers to obtain licensure. One FCC provider illuminated the need for more mentors in the field to assist in navigating programs like ExceleRate for FCC providers entering the field or those trying to advance their business.

Workforce Connection: The Workforce Connection is a business-led board which serves as the regional resource for workforce development. This organization is committed to providing a workforce that meets the needs of the community, which includes an education track.

These highlighted ECEC workforce challenges and supports are important to consider when examining the current investment structure and what immediate revitalizations are needed. The ECEC workforce is essential for the success of all children and the backbone of the nation's workforce. Everyone must invest in this workforce to ensure that all children have access to high-quality early learning experiences. These investments are critical for a child's success in school and later in life.



A child's fist behind a wooden block toy.

When a mentor is able to walk you through process, explain what each program does for your business, and can provide suggestions and advice on building your business, the act of starting a child care program is much more manageable and likely to be more successful for the potential program owner and their future clients.

- Community Member



Parent/Family/Caregiver Voice

Caregiver engagement in ECEC is the process of involving caregivers in their children's learning and development. It can take many forms, such as speaking with a child's teacher, attending ECEC sponsored events, and supporting learning at home. Benefits to family engagement include improved academic achievement, social-emotional development, and self-regulation for children. For caregivers, it can provide opportunities to learn about child development, build relationships with other families, and gain confidence in their parenting skills. For early childhood educators, it can help to create a more supportive and collaborative learning environment.



Family Child Care "Taylor's Tots".

To have productive engagement, caregivers must first have access to ECEC programming. Parent experiences

in accessing ECEC were found to vary based on need and location. There are families who qualify for services, can access those services, and have positive experiences. However, there are other families in which barriers prevent them from accessing ECEC services, which can inhibit crucial relationship development.

During outreach, community members shared over 650 opinions and beliefs on the current ECEC system. Due to the reality of slot gap and elevated risk factors in the Region, common themes emerged, one being access to ECEC services. The following themes synthesized around parent, caregiver, and service provider feedback.

Available Slots and Waitlists

There is a lack of slots in the Region to serve families that need or desire ECEC services. Some caregivers reported experiencing difficulties in accessing ECEC for their children due to a lack of available seats. Others reported being on waitlists for upwards of a year. Service providers confirm an immediate need for services, but also share that there are challenges of providing services due to staffing shortages. These access challenges can leave children without intervention or force parents to rely on family, friend, or neighbor care—which offers varied levels of ECEC quality.

Geographical Equity

Access to child care is not equitable across counties. As presented in previous sections, most child care options and wraparound services are in city centers, or the most populous county, Winnebago. These options leave parents/caregivers pressed to figure out when they can get their children to services and how they will get them to those services.

Preschool for All is not really preschool for all!

-Community Member

Eligibility Requirements

Paperwork, out of pocket expenses, and changing eligibility requirements can create barriers for children who need services. One mother of 10 with five children in her custody explained that she has no personal transportation and depends on others to get her where she needs to be. She "jumps through hoops" to get the assistance and referrals she needs and feels judged while doing so. This next school year, her youngest child will qualify for a full-day ECEC program. She wants to work, but earning more income will decrease her benefits and increase her burden to provide for her family. She does not want to struggle like that, so she chooses not to work. She added "It's a terrible feeling. People think I'm lazy and treat me like it, too".

Even when parents realize their child needs special services, they often can't afford it or are not able to transport them regularly to Rockford or other locations for the services.

- Community Member (Boone County)





Two children and an adult laying down in the grass.

Parent Engagement & Mentorship

One center in Winnebago is licensed for 201 children and is now only serving 50 children; The Director explained that the child turnover rate is high.

Family engagement is an essential part of ECEC. It is imperative to consider the family experience in accessing needed services, as families are the experts on their own experiences. To improve services and engagement one must understand how programs improve family's lives or unintentionally contribute to barriers. By considering family experiences and reducing those barriers, parents/caregivers and early educators can create a positive and engaging environment where all children and families thrive.

Regional Strengths & Needs

It is understood that the most substantial and influential brain development period is during early childhood. These results can be measured against life outcomes for those who had or did not have a quality early learning foundation. As Professor James Heckman's research finds, "There is a 13% return on investment for comprehensive, high-quality, birth-to-five early education. These early experiences influence life outcomes such as health, crime, income, IQ, schooling, and the increase in a mother's income after returning to work due to child care." Therefore, we must identify strengths, needs, and strategies to assure we maintain what is working and improve what is not. The following were identified by the Region as our collective strengths and needs:

Strengths

- The greatest strength of our Region is its people. We have exceptional and dedicated ECEC providers and families in the Region who are ready and willing to secure what is needed for the continued benefit of our children.
- The Region has established quality programs who are doing the work to support children and families. These ECEC stakeholders are collectively brainstorming solutions to ECEC issues and are actively participating to expand and share resources. Moreover, these deep-rooted programs and experienced ECEC leaders are poised to provide mentorships to new programs, as well as programs experiencing challenges.
- The Region's ECEC champions are capitalizing on the public's newly found interest and understanding of the significance of a child's early years. This momentum is significant and must be seized.

Needs

- The greatest need in the Region is workforce expansion and retention. ECEC programs and service
 providers are experiencing difficulties in executing their duties due to workforce shortages. As a result,
 many children are placed on waitlists or families are forgoing services altogether.
- The second greatest need is program expansion. There are not enough slots across the Region to absorb qualifying children and not enough program offerings that complement caregiver's schedules.
- The third greatest need is family and community support. That is, an increase in assistance, communication, and collaboration from service providers, organizations, funders, and businesses to provide a safety net of support to families. It is imperative that across all industries, we increase participation and ownership of our regional childhood outcomes.
- Lastly, there is a need to continue to cultivate accurate and available data. Although the information sources used in this report are rich in content, there are gaps in data that need to be addressed or shortcomings that must be acknowledged (e.g., double counted children and missing qualitative data from portions of the community).

Finally, to answer the question, "Do families have access to the ECEC services and programs they need and want in this Region?" The answer is simply some do, and some do not. ECEC access and distribution is inequitable and based on any combination of a family's resources, location, and priority designation. If we understand that Early Childhood experiences have a profound impact on a child's future, we must continue to assess evolving ECEC needs and obstacles. Through a collective impact structure, our networks of stakeholders can advance ECEC equity by learning together, aligning, and integrating actions to achieve systems level change.

Recommendations

When establishing the community's ECEC recommendations, it was imperative to gather various community experiences, knowledge, and facts. The following recommendations are based on feedback from the Birth to Five Illinois Councils and community stakeholders at large. These recommendations are relevant to the current ECEC landscape and are presented in order of the most prevalent recommendation, workforce development, followed by program expansion, and family supports.

Workforce Development

It was determined that all types of ECEC providers (i.e., homes, center staff, Preschool for All, and Early Intervention) require workforce investments. All providers are experiencing some portion of a reduction in staff, turnover, burnout, or staffing issues due to qualification requirements. An overall under-staffed ECEC system leads to ECEC program closures, poorer quality programming, and an influx of children being placed on waitlists. To remedy the ripple effects of staffing issues, we must realign our recruitment and retention efforts with strategies that focus on education and compensation.

Educational Incentives

- Increase use and investments in scholarships like those offered through ECACE and Gateways.
- Develop and promote school district Grow Your Own Programs.
- Streamline university teacher pathway programs with opportunities to train on the job.
- Offer new solutions like built in learning time to complete Early Childhood coursework or professional development credentials during work hours.
- Increase diversity pool in education tracks and then ECEC leadership roles.

Compensation

- Increase pay for educators.
- Offer financial incentives to further education.
- Provide access to benefits (medical, dental, time off).

Program Expansion

It was determined that following workforce development, to better serve each child and family needs, programs must expand. Suggested forms of expansion include more child care options for families and more ECEC locations based on geographic and demographic need. Families report the largest obstacle in balancing life demands with child care choices are the limited options for their children. Additionally, the data shows areas of the Region have limited resources and would benefit from targeted expansion.

More Options

- More full-day programs.
- More infant/toddler care slots.
- More options for non-traditional care hours (i.e., nights and weekends).
- Creative alternatives to traditional centers (i.e., a drop-in model for families with fluctuating needs).

More Locations

- More licensed homes and centers.
- More Preschool for All programming.
- Expand programs in preschool deserts.
- Increase overall ECEC programming in Boone County.
- More infrastructure and Collaborations to support expansion.

Family Supports

Families report a need for increased support from various aspects of their community. Many find navigating the fragmented service delivery system difficult. The current structure is even more challenging for our priority populations. The following community supports would positively impact our families:

- Implement an integrated referral system to streamline services among ECEC providers and connect families with wrap-around services.
- Increase transportation options for all families who need it.
- Expand outreach and parent/caregiver education to hard-to-reach families on the importance of ECEC.
- Seek additional support from the business and economic development community to support families and advocate for ECEC. See the U.S. Chamber Employer Roadmap¹² to learn about options for supporting working parents with their childcare needs.

Although determining an overarching proposal to the child care crisis is arduous, it is important to know that every issue affecting ECEC progress is interwoven with the next. Thus, no recommendation is perfect or free from risks. However, a foundational plan, built by the community, is imperative. This Early Childhood Regional Needs Assessment and recommendations will help guide decisions that best fit family needs. Finally, the foremost important need is funding, as none of the presented objectives are possible without a continued interest in our collective future and financial investment to improve it.

In compiling this report, it is our hope that local and state leaders will use this information to advance ECEC services in the Region. We will continue our community engagement efforts to expand our understanding of the ECEC needs of local families and providers. If you have further questions about these recommendations or would like to get involved with the work of Birth to Five Illinois in Region 4, please find our contact information on the front inside cover of this report.

Appendices

Appendix A: References

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Appendix B: Additional Figures

Figure 1: Total Programming Chart

Programming: Children Ages Birth to Two					
IECAM FY22	Winnebago	Boone	Region 4		
Total Children	21,005	3,427	24,432		
Total Children Ages Birth to Two	10,725	1,752	12,477		
Early Head Start	4 Sites/180 Funded Enrollment	0 Based in Boone	180		
Prevention Initiative	3 Sites/308 Capacity	0 Capacity	308		
Early Intervention	455 Number of Children Served	78 Number of Children Served	533		
MIECHV	92 Number of Total Children Enrolled	3* Number of Total Children Enrolled (More than 0, less than 5)	95		
Parents Too Soon	0	0	0		
Healthy Families Illinois	0	1, No Capacity Listed	1		

Programming: Children Ages Three to Five					
IECAM FY22	Winnebago	Boone	Region 4		
Total Children Three-Five	10,280	1,675	11,955		
Preschool for All	11 Sites/2,474 Capacity	1 Site/40 Capacity (Was 80, then 0, now 40)	2,514		
Preschool for All Expansion	4 Sites/280 Capacity	0	280		
Head Start	4 Sites/534 Funded Enrollment	0 (Was 34, lost in FY2020)	534		
Migrant & Seasonal Head Start	0	0	0		

Programming: Children Ages Birth to Five			
IECAM FY22	Winnebago	Boone	Region 4
Licensed Child Care Centers	25 Sites/2,739 Capacity 6 Weeks-1 Year: 547 Capacity 2 Years: 381 Capacity 3-5 Years: 1,364 Capacity SA: 445 (Before/After @11 Sites)	4 Sites/484 Capacity 6 Weeks-1 Year: 116 Capacity 2 Years: 75 Capacity 3-5 Years: 220 SA: 95 (Before/After @3 Sites)	3,223 6 Weeks-1 Year: 663 2 Years: 456 3-5 Years: 1,584 SA: 540
License-Exempt Child Care Centers	9 Sites/471 Capacity 6 Weeks-1 Year: 0 Reported Capacity 2 Years: 0 Reported Capacity 3-5 Years: 452 Reported Capacity SA: 0	1 Site/30 Capacity 6 Weeks-1 Year: 0 Reported Capacity 2 Years: 0 Reported Capacity 3-5 Years: 30 Reported Capacity SA: 0	501 6 Weeks-1 Year: 0 2 Years: 0 3-5 Years: 482 SA: 0
Licensed Family Child Care Homes	174 Sites/1,708 Capacity 6 Weeks-1 Year: 331 Reported Capacity 2 Years: 213 Reported Capacity 3-5 Years: 553 Reported Capacity SA: 332 (Before/After Capacity)	16 Sites/160 Capacity 6 Weeks-1 Year: 30 Reported Capacity 2 Years: 14 Reported Capacity 3-5 Years: 55 Reported Capacity SA: 36 (Before/After Capacity)	1,868 6 Weeks-1 Year: 361 2 Years: 227 3-5 Years: 608 SA: 368
License-Exempt Family Child Care Homes	Unknown	Unknown	≈201 (Per CCR&R 2023)
Family/Friend/Neighbor Care (Non-CCAP Children)	Unknown	Unknown	Unknown

Appendix C: Focus Group and Interview Questions

Throughout the development of the Regional Needs Assessment, focus groups and interviews were conducted with caregivers, providers, elected officials, and other community stakeholders. Below are questions developed for caregivers and others. In the interest of time and space, only select questions are included.

Caregivers

- 1. There are many Early Childhood services available in our Region. What Early Childhood services does your family use/has your family used?
- 2. How have you found out about Early Childhood programs or services, or found care for your child(ren)?
- 3. Do the child care services you're using now meet your family's needs? If not, please describe what would better fit your family's needs.
- 4. What, if anything, has been particularly helpful in making Early Childhood Education and Care work for your family?
- 5. What barriers or challenges has your family had with using Early Childhood services in your community?
- 6. Have any of the children in your care been referred to services? What was that process like?
- 7. What services don't currently exist in your community that you think would help families, in general? What services would help parent/caregivers, specifically?
- 8. Is there anything else you think I should know about Early Childhood education, care, or services in your community, our Region, or in the state?

Early Childhood Professionals and Others

- 1. What challenges do you think families have in accessing Early Childhood Education and Care programs and services?
- 2. What programs do you know of in the Region that serve children birth through age five and their families?
- 3. What services don't currently exist in your community and/or this Region for young children and/or their families that you would like to see?
- 4. What data do you think would be helpful in better understanding how priority populations access Early Childhood care and services, or the barriers/challenges they have accessing care and services?
- 5. Is child care readily available and close to employers in your community?
- 6. What accommodations has your business or company made for professionals with young children? How have these accommodations impacted your business or company?
- 7. Have you connected with child care providers in the community to build relationships and build relationships with partners to provide the care you need for employees?

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