



# Early Childhood Regional Needs Assessment **ADDENDUM**

**Region 19**  
(DuPage County)



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## Introduction

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 decisionmakers 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 decisionmakers 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.

## Early Childhood Regional Needs Assessments

Between August 2022 and May 2023, Regional Teams throughout the State met with their local Action Council and Family Council to talk about Early Childhood data and hear about their experiences with ECEC programs and services. They also conducted focus groups, interviews, held community listening sessions, and conducted surveys to gather additional feedback from caregivers, ECEC professionals, and priority populations in their Region. A community report, the Early Childhood Regional Needs Assessment, was completed in June 2023. However, recognizing that not all community members had a chance to provide their feedback on data or share their experiences in the original Regional Needs Assessment, additional feedback was collected through community events and meetings, and this Addendum was created to complement the existing report. The new information provided by community members, agencies, organizations, and other community stakeholders is broken into the following categories:

## Local Community Collaborations

Transportation was a barrier to accessing services that many caregivers cited. Often times, those who need to attend school events (such as literacy events) and target populations are unable to attend due to transportation barriers, including a lack of public transportation in areas such as West Chicago. The We Go Together for Children collaboration in West Chicago is currently working to address the lack of transportation for families in the community. They were awarded a grant to facilitate multiple resource events for families, a resource fair, and school events. The collaboration is trying to develop a "ride share" type program that designates pick up and drop off places to provide transportation during school events. This is especially important for those who

have relied on traditional rideshare programs such as Uber or Lyft, because families are forced to carry car seats with them to appointments, which becomes cumbersome to transport along with children and other necessities. Additionally, some families reported that rideshare drivers do not allow car seats or do not have room to accommodate them, leaving some without reasonable options to get to appointments or events.

One Villa Park collaboration member said, “We literally just bought and Instacarted a car seat to a family two weeks ago the night before our outreach event so they could Uber here. In fact that was the family that cried at our event because they hadn't been able to qualify for services before, but in one day, they signed up for SNAP, had a WIC visit and qualified, got their vaccinations up to date, and learned about a variety of services they are eligible for. They cried because they were never able to get to the services in the past and the car seat was the barrier. That should never be a barrier for a family wanting to get to us.”

## Early Childhood Education & Care (ECEC) Workforce

One main concern ECEC professionals discussed was the long wait time for background checks to be processed for new hires. Long wait times to get new staff background checks processed prevents many new staff from starting at a program. In some cases, programs have lost staff since individuals cannot afford to wait for long periods to start employment/go without a paycheck.

Easter Seals, one of very few programs that offers inclusive care and education in the Region, hired a new director and had to wait four months to get her approval back from the Department of Child and Family Services (DCFS). This meant that they had to employ two directors during that time, which caused a financial burden.

Below are two quotes that speak directly to this issue:

- “By the time we actually can get these new employees in the building to start, they have moved on to accept another position and typically not in this field because of the delayed process that is out of our control. We then roll into another 6 weeks before a new employee can start; 1-2 weeks to interview, and then another possible 4 weeks for a background check result.” - Center Director
- “Don't get me wrong, I understand why background checks are necessary, but waiting as long as we are to receive results is just another example of the system being broken.” - Licensed Group Home Provider

Another concern programs face is trying to find part-time assistant. It is difficult to find people who are looking for only part time work, especially when they are being used as a substitute for another full or part time worker. Providers wait for months to fill the open positions, negatively impacting their ability to provide services.

## Additional Community Feedback

Healthcare, including access to vaccinations, was cited as a concern for many community members.

One discussed the Vaccines for Children (VFC) which is a Federal program that provides free vaccines for all children. Administrative policies for VFC are strict; providers cannot take vaccines off-site,

leaving clients with the burden of coming to clinic for care. Another noted that pharmacies are not allowed to vaccinate any children under the age of three, leaving some families to travel further to receive a vaccination from a provider.

One of the largest providers of healthcare in Region 19 stopped accepting new Medicaid clients on July 1, 2023, and is also no longer participating in VFC. Instead, they are referring families to Federally Qualified Health Center (FQHC) clinics or their local health department. Many families outside the county and/or Region are being referred to the same clinics, meaning that appointments fill up quickly. As school started, the clinics were seeing about 100 kids per week. The DuPage Health Department noted that they are happy to fill in the gap, but their services are not comprehensive as they do not do development screenings or wellness checks. They do ask who the child's primary care provider is and provide a referral list when needed.

This is important to note, because children unable to get required physicals or vaccines cannot attend child care facilities or schools. One parent said, "When my child was younger, our doctor stopped accepting the All Kids insurance. I didn't know what to do and had to scramble to find a new doctor as my daughter needed shots for school. She already did not like shots and now had to go to someone she was unfamiliar with. Pharmacies are not allowed to vaccinate children under three, but prior to COVID they couldn't vaccinate anyone under the age of ten. I had to make a doctor's appointment and take off work every time. Without consistency it was hard to build trust. We also had to get a new dentist every year because of the same issues."

The reimbursement rates for Medicaid are also unsustainable for providers like Easter Seals, who offer ECEC services for children with developmental delays and medical complexities. They only receive one third of what it costs to provide services in reimbursement, limiting the number of children they can serve.

## **Next Steps**

As Regional Teams continue their conversations with caregivers, ECEC professionals, and community stakeholders, their stories and experiences with ECEC programs and services will be recorded and shared with state and local agencies, legislators, funders, and decisionmakers. We hope our work will contribute to reimagining an Early Childhood system that is more equitable for all families and support the incredible work ECEC professionals do every day.