

# Needs Assessment: Key Themes Memo

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## Overview

Oklahoma is both a national leader in early childhood care and education (ECCE) and a state seeking to illuminate and address unmet need across the ECCE mixed delivery system—especially for its most marginalized children and families. Oklahoma was awarded a federal Preschool Development Grant Birth to Five (PDG B-5) in December 2018 to achieve these goals. Governor Mary Fallin designated the Oklahoma Partnership for School Readiness (OPSR) to lead this effort. OPSR is a quasi-governmental organization created under the enabling legislation of the Oklahoma Partnership for School Readiness Act of 2003 Title 10 O.S. § 640 to promote school readiness. The OPSR Board serves as the State Early Childhood Advisory Council and is responsible for accomplishing both state and federal legislative duties and responsibilities.

The PDG B-5 needs assessment aims to provide a comprehensive understanding of the mixed delivery system of ECCE, health, and family support programs serving children ages birth to five in Oklahoma, along with the number and characteristics of families who participate in the system. The needs assessment estimates overall system capacity, utilization, and gaps where additional policy development, alignment efforts, and funding can help meet demand and ensure equitable access to high-quality ECCE for the most vulnerable and underserved children and families. Family and workforce perspectives on choice, access, and participation will ultimately supplement analyses of administrative and related data to provide a full understanding of needs across the state.

## Approach

This memo highlights key themes emerging from ongoing assessments of need for ECCE and related services in Oklahoma. Findings reflect data from 33 sources: 28 existing needs assessments and similar documents, demographic data from the American Community Survey (ACS), exports from three administrative databases, and rapid survey responses from key stakeholders. Analysis of existing needs assessment and similar documents centered on a rubric reflecting PDG B-5 Guidance from the Administration for Children and Families. ACS, administrative, and survey data have been tabulated and reported as descriptive statistics. Additional data collection, analysis, and integration across the needs assessment and strategic plan will inform the final report.

PDG B-5 tasks Oklahoma with developing definitions for several key terms. These terms are central to understanding need, and unmet need, for ECCE. Here, we present emerging concepts for each term, along with areas for further exploration.

- *Quality early childhood care and education:* Oklahoma values definitions of quality that can easily be communicated to parents and used to inform professional development among the ECCE workforce. Several existing documents rely on the definition of quality set forth in the state’s quality rating and improvement system (QRIS), Reaching for the Stars, which rewards professional development and family engagement activities, provider qualifications, and national accreditation. Additional concepts of quality cited by key stakeholders include enriching instruction, linguistic and cultural responsiveness, support for transitions from birth through age 5, and underlying systems of integrated data. Stakeholders suggest that quality ECCE should be available across the mixed delivery system.
- *Availability:* Existing documents describe available programs as those with sufficient capacity to meet demand within geographic proximity of children’s homes and/or parents’ employment. References to availability also touch on affordability, taking public subsidies and direct investment through program provision into account.
- *Vulnerable or underserved:* Oklahoma seeks to define vulnerable or underserved populations through the process of needs assessment. Related concepts include low income (less than 200 percent of the federal poverty level), marginalization and structural racism, residence in rural communities, and disadvantage, especially lack of access to affordable early learning opportunities. Eventual definitions of vulnerable or underserved children may also refer to developmental delays, involvement in the child welfare system, trauma exposure, homelessness, and parents who are incarcerated, have mental illness, or have substance abuse disorders.
- *Children in rural areas:* The state’s PDG B-5 application defines children in rural areas as those outside of the Oklahoma City and Tulsa metro areas and their contiguous counties.

Definitions will be refined in light of future data collection and analysis. Additional state and tribal studies, administrative data, and stakeholder perspectives will be incorporated in the coming months. Analyses will probe differences in ECCE supply, potential demand, and unmet need across the state by disaggregating state-level data into key regions. Qualitative data from provider interviews and parent focus groups in select communities will provide direct insights on issues of unmet need for ECCE.

## Young Children in Oklahoma

Oklahoma is home to more than 318,000 young children, birth to five. Table 1 summarizes the characteristics of these children, statewide. The child population is racially and ethnically diverse, with substantially higher shares of children identified as Native American and Other Race or Multiracial than the U.S. as a whole (8 percent versus less than 1 percent Native American, and 12 percent versus 5-6 percent Other Race or Multiracial).<sup>1</sup> Thirteen percent of all children have at least one immigrant parent.

TABLE 1

**Select Characteristics of Children in Oklahoma**

*Young children ages birth to five*

	Estimated number of children	Percent of young children, birth to five
<b>Total population</b>	318,122	100%
<b>Age of child</b>		
Less than 1 year old	50,153	16%
1	53,122	17%
2	53,533	17%
3	52,713	17%
4	54,394	17%
5	54,207	17%
<b>Race or ethnicity of child</b>		
White	168,703	53%
Hispanic	57,483	18%
Black	23,544	7%
Asian	5,663	2%
Native American	25,907	8%
Two or more races or some other race	36,822	12%
<b>Child is an immigrant</b>	1,982	1%
<b>At least one parent is an immigrant</b>	41,968	13%
<b>Recency of parents' immigration to US <sup>1</sup></b>		
Less than 5 years	5,750	2%
At least 5 years but less than 10	11,572	4%
At least 10 years but less than 20	17,599	6%
20 or more years	7,199	2%
<b>Language spoken at home <sup>2</sup></b>		
English only	249,573	78%
Spanish	41,248	13%
Other languages	12,922	4%
Missing	14,309	4%
<b>Parental work status</b>		
One parent household, not working	19,789	6%
One parent household, working part-time	15,801	5%
One parent household, working full-time	48,108	15%
Two parent household, not working	4,570	1%
Two parent household, one working part-time	5,809	2%
Two parent household, one working full-time	85,087	27%
Two parent household, both working part-time	3,451	1%
Two parent household, one working part-time one full-time	44,947	14%
Two parent household, both working full-time	89,219	28%
<b>Poverty, family income below 100% of federal poverty level</b>	70,234	22%
<b>Low-income, family income below 200% of federal poverty level</b>	160,445	50%
<b>Highest educational attainment of parents</b>		
Less than high school	32,288	10%
High school diploma or some college	188,151	59%
Four-year college degree or more	96,342	30%

**Source:** Estimates using 2013-2017 American Community Survey Public Use Microdata Samples downloaded from IPUMS-USA.

**Notes:** <sup>1</sup> If both parents are immigrants, we use the information from the parent who most recently immigrated. <sup>2</sup> We define this variable using the parents' primary language and if one parent speaks a non-English language, we use that language.



About one-quarter of Oklahoma’s young children live in one-parent families, and half are low-income (with family income below 200 percent of the federal poverty level). Nearly one-quarter of children live in poverty. And nearly two-thirds of children are likely to need some form of ECCE, given a single working parent or two working parents where at least one works full-time. These figures suggest substantial need for ECCE – and public investment to support affordable and enriching ECCE options – throughout Oklahoma.

## Early Childhood Care and Education Needs

The ECCE mixed delivery system in Oklahoma involves nine federal, state, and tribal programs and policies. These include: Voluntary Pre-Kindergarten Program (pre-k), Head Start/Early Head Start, Early Head Start/Child Care Partnerships, Oklahoma child care, tribal child care, state-administered home visiting, tribal home visiting, IDEA Parts B and C, and Child Guidance. Additional components of the mixed delivery system include child nutrition programs, libraries, health providers, and faith-based organizations.

Oklahoma has a history of leadership in ECCE. It serves a high share of 4-year-olds in one of the nation’s first universal pre-k programs, launched the nation’s first quality rating and improvement system (QRIS), and receives high marks for its program standards and oversight of child care.<sup>ii</sup> The state also works to leverage available resources for maximum benefit. For example, 152 (or nearly 28 percent) of school districts expand pre-k capacity by supplementing with child care and/or Head Start funds. These historical and ongoing efforts are intended to maximize the availability of high-quality ECCE options for all children and families – and especially for those most vulnerable and underserved.

Yet, recent declines in state and federal investment mean that PDG B-5 comes at a critical time for Oklahoma. The state is poised to reassess need, and unmet need, across the mixed delivery system and develop new solutions to perennial problems of availability, affordability, and accessibility. Examining current system capacity is the first step in this process.

### Capacity

Table 2 presents capacity and enrollment information for three main programs operating within the mixed delivery system of ECCE in Oklahoma: licensed child care, Voluntary Pre-Kindergarten, and Head Start/Early Head Start. Child care programs have a current licensed capacity of 120,930, with the majority of available slots (105,773) housed in centers. Public schools serve an additional 39,540 4-year-old students and 2,146 3-year-old students in pre-k. Head Start enrollment funded by the federal Administration for Children and Families numbers 17,350; Oklahoma Head Start programs are licensed (and therefore included within child care capacity) and/or administered within public schools. In addition, nearly 52,000 5- and 6-year-olds attend kindergarten in public schools.

Future refinement and disaggregation of the data in Table 2 will help generate estimates of unduplicated counts of children being served in existing programs and unduplicated counts of children potentially needing ECCE and awaiting services. Additional information on braiding and blending of funds, child care capacity by age, and differences among licensed and desired capacity and current enrollment can help make figures comparable across programs and identify gaps that are most critical to address through future investment.

TABLE 2

**Capacity and Enrollment in Select Early Childhood Care and Education Programs in Oklahoma**

*Licensed child care, Voluntary Pre-Kindergarten, Head Start/Early Head Start, and kindergarten*

	Estimated number of children	Age group served	Percent of age group served
<b>Capacity of licensed child care facilities</b>	<b>120,930</b>	<b>0-5 *</b>	<b>38%</b>
Center-based child care facilities	105,773	0-5 *	33%
Home-based child care facilities	15,157	0-5 *	5%
<b>Enrollment in Voluntary Pre-Kindergarten</b>	<b>41,686</b>	<b>3-4</b>	<b>38%</b>
3-year-olds	2,146	3	4%
4-year-olds	39,540	4	73%
<b>Enrollment in Head Start/Early Head Start</b>	<b>17,350</b>	<b>0-5</b>	<b>5%</b>
<b>Enrollment in kindergarten</b>	<b>51,878</b>	<b>5</b>	<b>96%</b>

**Source:** Total population estimates use 2013-2017 American Community Survey Public Use Microdata Samples downloaded from IPUMS-USA. Capacity of licensed child care facilities (both center-based and home-based) use data from the Oklahoma Department of Human Services for fiscal year 2018. Enrollment in state pre-kindergarten and kindergarten use data from the Oklahoma State Department of Education for the 2017-2018 school year. Enrollment in Head Start uses data from the Office of Head Start Program Information Report to identify ACF-funded enrollment for fiscal year 2018.

**Notes:** \* Licensed child care facilities serve children from birth through school age, but the vast majority of slots are filled by children 0 to 5. Future disaggregation of licensed capacity by age will identify slots for young children and refine estimates of percent of age groups served.

While Oklahoma ranks fourth in the nation in providing access to pre-k, parents and professionals commonly cite long waiting lists for child care as a major issue in the state.<sup>iii</sup> The rapid stakeholder survey bears out this point: six of 10 stakeholders identified ECCE services for specific groups of children (“e.g., infants and toddlers, children from low-income families, children with tribal affiliation”) as one of their top priorities, while services for children overall ranked at the bottom of the list (identified as pressing by a single stakeholder). Unmet need for care is particularly acute for children ages birth to 2 years. Interviews with child care center directors in 2011 revealed the longest waiting lists for infants, followed by 3-year-olds, 2-year-olds, and 1-year-olds; shortages were evident in all regions of Oklahoma and most pressing in rural areas of the state.<sup>iv</sup>

Existing studies have identified funding as a barrier to ECCE expansion across the mixed delivery system. In recent years, reductions in child care spending have led to declines in the number of child care centers, and public pre-k and home visiting programs have experienced cuts.<sup>v</sup> SoonerStart (IDEA Parts B and C) have a low percentage of children receiving services relative to the rest of the country despite substantial need. Budget deficits have presented barriers to the expansion of Child Find.<sup>vi</sup>

Further investigation of the capacity theme will focus on aligning supply and demand for ECCE statewide and by region, as well as for subgroups of children defined by age and demographic background characteristics (to the extent practicable).

### Affordability

Because Oklahoma has uneven ECCE capacity and a high share of low-income young families, cost and affordability have been identified by stakeholders as major barriers to parent choice and program

participation. Existing needs assessments find that affordability is a greater challenge for parents of infants and toddlers than families with preschoolers. For example, the Oklahoma Child Care Resource and Referral Association estimates that center-based care for infants costs \$27 more per week, or \$1,400 more per year, than care for preschool-aged children. (This difference is about \$7 per week, or \$370 per year, for home-based care.<sup>vii</sup>) Given these higher costs, public investments in services for birth to 2-year-olds (including Oklahoma Child Care subsidy, Early Head Start and Early Head Start/Child Care Partnerships, and IDEA Part C) are often insufficient. Affordability issues may be most acute for families earning just above the income threshold for child care subsidy, Head Start/Early Head Start, and other income-targeted programs, suggesting the importance of expanded public investment in services for lower-middle and middle-income families in many Oklahoma communities.<sup>viii</sup>

### Quality and Desirability

Quality varies across different aspects of Oklahoma's mixed delivery ECCE system. Oklahoma met 9 of 10 benchmarks on the Quality Standards Checklist in the most recent National Institute for Early Education Research report, and a recent study found that Tulsa's universal pre-k program had lasting, positive effects on math achievement scores, grade retention, and enrollment in honors courses as late as middle school.<sup>x</sup> Community members and professionals have also identified quality early childhood education as one of the easiest services to access in the state.<sup>x</sup>

However, those same stakeholders have identified quality child care as one of the hardest services to access.<sup>xi</sup> As of 2018, just 9 percent of all licensed child care facilities, housing 21 percent of all slots, achieved the highest rating on Reaching for the Stars.<sup>xii</sup> Parents have also noted the low quality of child care centers accepting DHS subsidies.<sup>xiii</sup>

Closely related to quality are considerations of desirability among Oklahoma's diverse young families. Existing studies note mismatch between ECCE programs and the needs of young families along several dimensions. Past needs assessments have identified a shortage of Spanish-speaking caregivers in communities with growing Spanish-speaking communities, particularly in Oklahoma City and Tulsa. Families working non-traditional hours experience similar challenges finding care for their children in the early morning, late evening, overnight, and on the weekend, mirroring national patterns. And several studies noted high levels of mistrust of non-family members caring for children, suggesting the importance of elevating parent voices and working through parent networks to increase the appeal and responsiveness of existing ECCE programs.<sup>xiv</sup> These and other issues related to quality and desirability are critical for maximizing parent choice and filling unmet need for ECCE.

### Interagency Collaboration

ECCE in Oklahoma is administered by the State Department of Education, Department of Commerce, Department of Human Services, Department of Health, and multiple tribal governments. Providers braid and blend funds across agencies, necessitating consideration of multiple program standards, curricular requirements, and accountability systems. Children are served in multiple programs from birth through age 5, and some families participate in multiple programs at the same time. PDG B-5 provides an opportunity to develop an efficient and effective mixed delivery system of ECCE across these diverse programs – and key stakeholders are invested in doing so, rating interagency collaboration among their most pressing priorities.



Oklahoma’s strength in universal preschool also presents challenges for interagency coordination and collaboration. One study identified concerns about pre-k and Head Start “taking” children from child care centers and family child care homes, exacerbating issues of resource scarcity.<sup>xv</sup> Head Start experiences unique collaboration challenges given its federal-to-local structure and integration with state and local ECCE programs.<sup>xvi</sup> Similarly, SoonerStart bridges the transition from infant and toddler care through preschool and kindergarten. Future qualitative data collection with providers, parents, and key stakeholders can help illuminate these ongoing challenges and highlight opportunities for coordination across the state.

## Health Needs

ECCE has a long history of supporting the health of children, families, and communities. Programs in Oklahoma continue this tradition by working to address substantial health needs among children and families. Oklahoma ranks 46<sup>th</sup> out of 50 states in overall health and is well below the national average on a variety of indicators, including no or delayed prenatal care, preterm births, and infant mortality, and past needs assessments document substantial challenges with statewide mental health and substance abuse.<sup>xvii</sup> Oklahoma Head Start directors identify health as their number one priority area, citing insufficient opportunity for screenings and services with physicians across the state.<sup>xviii</sup>

Existing studies also document substantial racial and ethnic disparities in child and adult health, as well as child health care coverage. For example, the preterm birth rate among black women in Oklahoma is 39 percent higher than the rate among all other women, and Native American children are insured at a rate that is between 11 and 16 percentage points lower than children from other racial and ethnic groups.<sup>xix</sup> These disparities suggest a greater role for ECCE programs, especially state-administered and tribal home visiting, Child Guidance, IDEA Parts B and C, and Early Head Start, in meeting urgent need.

Health insurance coverage is also a pressing issue. Oklahoma ranks 48<sup>th</sup> in the nation in the rate of uninsured children and 49<sup>th</sup> in the nation in health insurance enrollment for adults ages 18 to 64.<sup>xx</sup> Lack of coverage can create challenges for young families, as well as ECCE providers. Mental health, including maternal depression, is a persistent problem in Oklahoma. Families often experience barriers to access when seeking out general screenings and follow-up services. And the cost of health care for families earning just over the income limit for SoonerCare can be prohibitive.

Ongoing investigations of health needs and the role that ECCE can play in addressing them will continue to focus on young children and families, as well as the ECCE workforce.

## Family Support Services Needs

Family support services supplement child development programs and healthcare to improve family well-being and expand opportunities for children’s school readiness. These services are delivered through state-administered and tribal home visiting programs, parenting programs, Child Welfare Services, Head Start/Early Head Start, community-based organizations, and agencies focused on income and nutritional support, such as SNAP, TANF, and WIC. Family support services also include paid leave policies (covering sick and parental leave) and transportation and other logistical supports for ECCE access.

Key themes emerging from preliminary analyses of family support services needs highlight limited resources and barriers to access. Recent state budget cuts and persistent poverty have increased demands on a limited system of service providers. For both parents and providers, coordination between the mixed delivery systems of ECCE and family support services can prove challenging. Future qualitative data collection will explore the extent to which family support services are met within ECCE programs versus through coordination with other agencies and how Oklahoma can best serve its young children and families.

## Summary and Next Steps

This memo identifies key themes emerging from an ongoing assessment of need for early childhood care and education, health, and family support services in Oklahoma. Across these areas, preliminary findings suggest too few providers, particularly in rural areas; a lack of affordability; uneven quality across programs; opportunities for improved interagency coordination and collaboration, as well as integrated data systems; and disparities in knowledge of, access to, and participation in available services by race, ethnicity, and urbanicity.

This memo also highlights known limitations and gaps in existing data and analysis. Additional insights on differences in the capacity and demand for services for infants and toddlers compared to preschool-aged children will be critical for strategic planning and considerations of future system change. Disaggregating data by children’s race, ethnicity, urbanicity, and tribal affiliation can better inform questions of cultural and linguistic responsiveness, program desirability, and ECCE availability and use. Finally, parent and provider perspectives on transitions and alignment can help foster a developmental approach across the ECCE mixed delivery system.

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<sup>i</sup> Urban Institute. (2018). *10 Characteristics of Infants and Toddlers: A State and Local Data Tool to Inform Policy and Action* and *10 Characteristics of Preschool-Age Children: A State and Local Data Tool to Inform Policy and Action*. Available online at <https://apps.urban.org/features/characteristics-of-infants-toddlers/> and <https://apps.urban.org/features/characteristics-of-preschool-age-children/>.

<sup>ii</sup> NACCRRA. (2012). *Leaving Children to Chance: NACCRRA’s Ranking of State Standards and Oversight for Small Family Child Care Homes*. NACCRRA. (2013). *We Can Do Better Child Care Aware® of America’s Ranking of State Child Care Center Regulations and Oversight*.

<sup>iii</sup> Allison H. Friedman-Krauss, W. Steven Barnett, Karin A. Garver, Katherine S. Hodges, G.G. Weisenfeld, and Nicole DiCrecchio. (2019). *The State of Preschool 2018: State Preschool Yearbook*. New Brunswick, NJ: National Institute for Early Education Research.

<sup>iv</sup> Early Childhood Education Institute, The University of Oklahoma—Tulsa. (2012). *The Oklahoma Early Childhood Education 2011 Needs Assessment, Final Report*.

<sup>v</sup> Community needs assessments prepared for OPSR. (2017).

<sup>vi</sup> Oklahoma Part C FFY 2016 State Performance Plan / Annual Performance Report. (2016).

- <sup>vii</sup> Oklahoma Child Care Resource & Referral Association, Inc. (2017). Oklahoma Child Care & Early Education Data.
- <sup>viii</sup> Community needs assessments prepared for OPSR. (2017).
- <sup>ix</sup> Oklahoma State Department of Education. (2017). Oklahoma ESSA Consolidated State Plan. Gormley, William T., Jr., Deborah Phillips, and Sarah Anderson. (2017). “The Effects of Tulsa’s Pre-K Program on Middle School Student Performance.” *Journal of Policy Analysis and Management* 37 (1).
- <sup>x</sup> McCarty, Alora Korb. (2018). OCAP Community and Stakeholder Survey Analysis.
- <sup>xi</sup> Ibid.
- <sup>xii</sup> Oklahoma Child Care Resource & Referral Association, Inc. (2017). Oklahoma Child Care & Early Education Data.
- <sup>xiii</sup> Oklahoma Child Care Resource & Referral Association, Inc. (2017). Oklahoma Child Care & Early Education Data
- <sup>xiv</sup> Hannah Holloway. (2012). Smart Start Oklahoma State Early Childhood Advisory Council 2012 Community Needs Assessment.
- <sup>xv</sup> Early Childhood Education Institute, The University of Oklahoma—Tulsa. (2012). The Oklahoma Early Childhood Education 2011 Needs Assessment, Final Report.
- <sup>xvi</sup> Head Start State Collaboration Office. (2018). Head Start Program Needs Assessment Update: Seven Target Priorities Identified by Head Start Programs.
- <sup>xvii</sup> CAP Tulsa. (2017). Tulsa County Community Needs Assessment. National Home Visiting Resource Center. (2018). *2018 Home Visiting Yearbook*. Arlington, VA: James Bell Associates and Urban Institute. SFY2012 Child Guidance Annual Report. (2012). Oklahoma City, OK: Oklahoma State Department of Health.
- <sup>xviii</sup> Head Start State Collaboration Office. (2018). Head Start Program Needs Assessment Update: Seven Target Priorities Identified by Head Start Programs.
- <sup>xix</sup> March of Dimes. (2018). 2018 Premature Birth Report Card: Oklahoma. Anderson, Debra, Diane Bell, and Gabrielle Jacobi. (2019). *Project HOPE Data Report*. Oklahoma City, OK: Oklahoma Partnership for School Readiness.
- <sup>xx</sup> Alker, Joan and Olivia Pham. (2018). *Nation’s Progress on Children’s Health Coverage Reverses Course*. Washington, DC: Georgetown University Health Policy Institute Center for Children and Families. U.S. News. (2018). Health Care Access Rankings.