



MASSACHUSETTS
PARTNERSHIP
FOR Infants & Toddlers

The Massachusetts Partnership for Infants and Toddlers (MPIT) represents a unique collaboration between early childhood professionals inside and outside of government, at the state and local level, spanning early education and health. The Partnership gathers input and perspectives of families, practitioners, and other community stakeholders across Massachusetts, to inform state plans for early childhood. The Partnership engages national partners and other states, to learn policies and practices that can be applied here in Massachusetts.

Strategic guidance is provided by the MPIT steering committee, representing the following partner organizations:

Boston Children's Hospital,
Office of Community Health

Massachusetts Department
of Early Education and Care

Massachusetts Department
of Public Health

Massachusetts Executive Office
of Education

United Way of Massachusetts Bay
and Merrimack Valley

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Strategies
for Children

What do families want?

Findings from a statewide family survey and focus groups

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Forward: MPIT in the context of COVID-19

The first draft of this report was prepared in early March, 2020. Then came COVID-19.

The Massachusetts Partnership for Infants and Toddlers (MPIT) is continuing to plan for phase 2 of its work, an additional year of activity from June 2020–June 2021. MPIT phase 2 will be designed for the ever-changing context of a post-COVID-19 early childhood landscape. Family needs will almost certainly change, and will likely increase overall. New needs will emerge. Some pre-existing needs may stay the same.

For example, daily life for families during a time of quarantine, social distancing, increased unemployment levels, and working from home has brought a new set of challenges to families with very young children. Questions faced by many families include: How to keep children engaged and learning? How to manage stress? Where to find diapers and formula? How to get food? For those lacking transportation or wifi at home, how to access these crucial lifelines? How to make use of relationship-based services like home visiting over online video chats? And how to cope with trauma due to loss of loved ones.

Infants and toddlers have unique needs, and it is important to remember these needs during times of crisis. As one research team stated perfectly, “Babies don’t do social distancing.”¹

We hope the findings in this report remain relevant in a post-COVID-19 world. New surveys will be needed to gain more insight into the new needs and challenges families face. MPIT will be considering these factors as it continues its work. Send us your ideas. We will be looking for new partners to help us serve infants, toddlers, and their families, and help create the statewide systems of support needed to help programs and services be as effective as possible. Join us.

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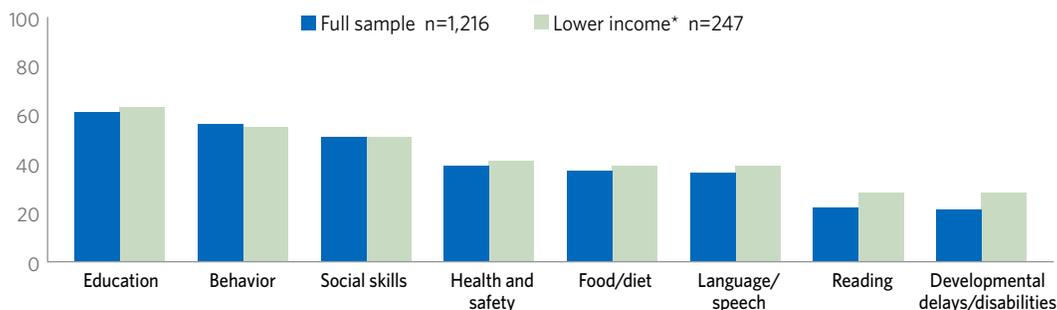
Summary of Findings

During the fall and winter of 2019–2020, The Massachusetts Partnership for Infants and Toddlers (MPIT) surveyed families of young children (birth–age 5) across the state. The goal was to learn about families’ experiences with early childhood programs and services. What works, what doesn’t, what are the barriers to participation, and what would families like to see more of in their communities. These questions were driven primarily by the needs of the state’s inter-agency plan Preschool Development Grant Birth-5 (PDG B-5),² with the hope that findings would be relevant to all MPIT partners and other early childhood stakeholders. A total of 1,260 families were surveyed, including 33 in Spanish. Surveys were complemented by five focus groups held throughout the state, small sessions with 8–12 parents attending each.

What do families with young children want and need? Key themes from both the family survey and focus groups include:

- **Affordability:** existing programs are too expensive, particularly child care. Many families are not eligible or miss income cut-offs for subsidies. Many are on lengthy waiting lists for subsidies.
- **Flexible program schedules:** for activities, workshops, playgroups and other services, families request programming at nights, weekends, holidays, and school vacations. Many families are not free to participate during the standard work week.
- **Information:** many families want more and regular updates on their child’s growth and development, including updates related to behavior and special needs. Families also request more comprehensive information about program offerings, and centralized websites listing all available programs in the community. Coordination and referral need improvement. Many program staff do not know what is available in the community beyond their own program.
- **Communication, tailored to preference:** some parents like email, others prefer fliers, and still others appreciate phone calls. Some express frustration at excessive paperwork, and would prefer electronic updates from programs. Provide translation whenever possible, as families have a diverse range of home languages.
- **Connection to local experts:** families are grateful when they meet local experts such as Family Advocates or Coordinated Family and Community Engagement (CFCE) coordinators. These program specialists are “plugged in” to all programs and services available in the community. But families are concerned that many of their peers do not know these individuals, or even know where to find them.
- **Connection to other parents:** families seek more opportunity for meeting, socializing, peer-support and tips, grouped by child’s specific age or parent type (single parents, Spanish language, etc.).
- **Variety:** yoga, Zumba, exercise, swim, dance, art and music programming are all requested, including two-generation programming (both together with child and separate).

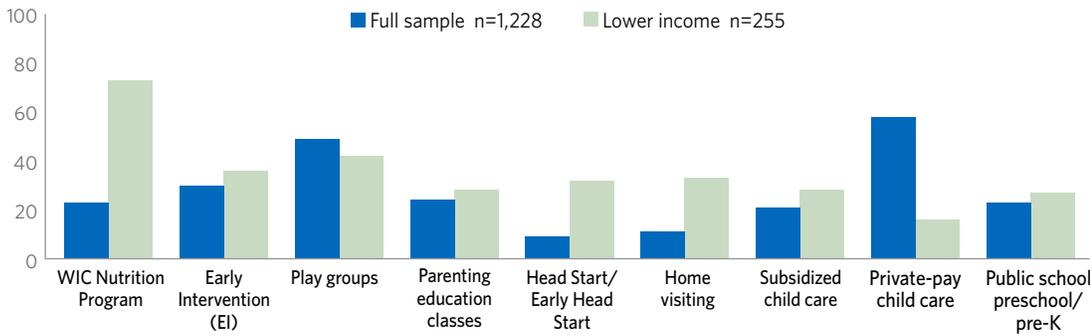
Q1: What topics do you have the most questions about regarding your child’s needs? [check all that apply]



*The lower income sample includes 255 survey respondents with total family income below \$50,000. This amount is approximately 200% of the federal poverty level for a family of four, \$49,200 in 2017. The Massachusetts median household income in 2017 was \$77,385.

Q3: Are you or your children currently enrolled, or have you been enrolled, in any of the following programs?

[check all that apply to you and your children]



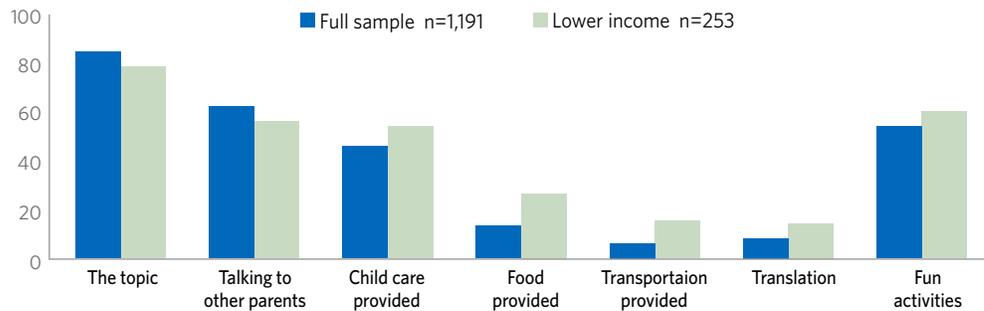
“Our counselor has been amazing. Very responsive and if she doesn’t know the answer to a question she always finds someone who can. She’s a great listener and has had great advice. I feel like I can text her anytime and get a response like a friend.”

Southbridge parent

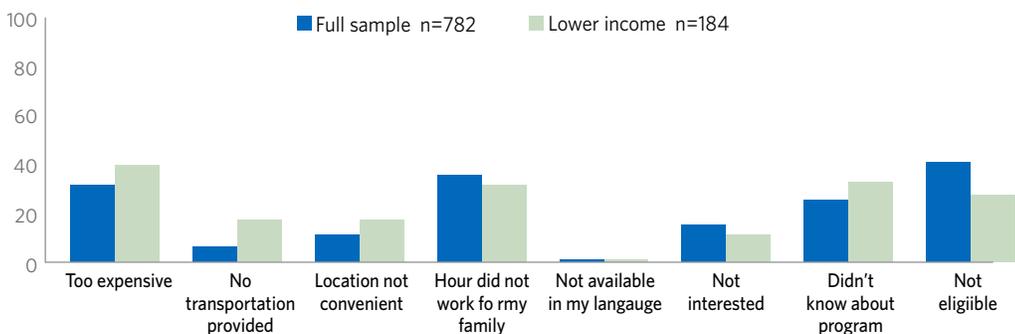
Q9: What is important to you about meetings or events organized by any program?

“Once I started working full time again, the scheduling of all programs (play groups, EI, parent workshops, etc.) was not conducive to working parent hours- most activity takes place during the day during the week.”

Ipswich parent



Q16: If you or your children are not enrolled in any programs or services, why not?



“Sinceramente es la primera vez que conosco estos programas y bueno aun no estoy enterada que mas programs hay aparte de la escuela donde va mi hijo.”

“Honestly this is the first time that I’ve known about these programs, and well I am still not aware what more programs are out there, apart from the school where my son goes.”

Springfield parent

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For a copy of the full report, visit strategiesforchildren.org/MPIT.html.

1 Austin, A., Whitebook, M., Williams, A. (2020, March 20). Babies don’t do social distancing. The Hill. thehill.com/opinion/finance/488690-babies-dont-do-social-distancing

2 The Massachusetts PDG B-5 project is co-led by the Executive Office of Education and Executive Office of Health and Human Services, and includes the Department of Early Education and Care, Department of Public Health, Department of Elementary and Secondary Education, and the Children’s Trust.