



MASSACHUSETTS
PARTNERSHIP
FOR Infants & Toddlers

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.

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

Executive Summary

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.).

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.

- **Variety:** yoga, Zumba, exercise, swim, dance, art and music programming are all requested, including two-generation programming (both together with child and separate).

About the Massachusetts Partnership for Infants and Toddlers (MPIT)

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. MPIT is facilitated by Strategies for Children (SFC), a nonprofit policy and advocacy organization. SFC's mission is to ensure that Massachusetts invests the resources needed for all children, from birth to age five, to access high-quality early education programs that prepare them for success in school and life. The project manager is Titus DosRemedios, SFC's director of research and policy.

Phase 1 of MPIT covered seven months from September 2019 to March 2020. During this time, the project had three goals:

1. Convene partners interested in infants and toddlers, and working with families in many capacities.
2. Collect input and perspectives of families and family engagement specialists to inform the state PDG B-5 Strategic Plan.
3. Participate in Pritzker Children's Initiative (PCI) prenatal-to-age three learning network, and learn best practices that can be applied in Massachusetts.

This report focuses on goal 2 and the results of the MPIT family survey and focus groups. This work was only possible due to robust network of partners convened [goal 1]. The work was also informed by goal 3. Ronda Alexander of the BUILD initiative and PCI technical assistance hub provided MPIT with advice and support throughout the project.³

MPIT consists of 45 partner organizations and 20 family engagement specialists. Most partners joined prior to the launch of MPIT as a state team applying for a Pritzker Children's Initiative state planning grant in early 2019. Several partner organizations joined MPIT after the launch of phase 1, as did all 20 family engagement specialists. Family engagement specialists representing many program types were contacted by the project manager and MPIT partners. Program types covered statewide networks including Coordinated Family and Community Engagement (CFCE) grantees, ParentChild+ coordinators, Family Resource Centers, YMCAs, and individuals who engage families in other roles and who were recommended by partners. The 20 family engagement specialists who responded to initial outreach (email, webinar invitations) were put on the MPIT contact list, which will grow over time as new relationships are forged.

³ This technical assistance included brokering a conversation with a family engagement systems expert—Holly Wingard of Michigan's Early Childhood Investment Corporation. Holly presented to the Steering Committee on January 13, 2020.

There are six project funders, members of the recently formed Massachusetts Early Childhood Funder Collaborative:

- Boston Opportunity Agenda
- Commonwealth Children's Fund
- Gisela B. Hogan Foundation
- Irene E. & George A. Davis Foundation
- The Boston Foundation
- United Way of Massachusetts Bay and Merrimack Valley

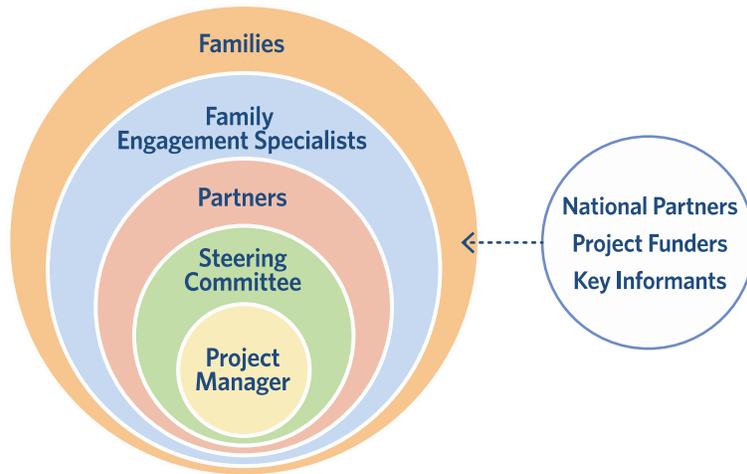
The MPIT steering committee represents six partner organizations:

- 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
- Strategies for Children
- United Way of Massachusetts Bay and Merrimack Valley

The steering committee provided strategic guidance throughout the MPIT project: meeting weekly with the project manager, advising on the design and implementation of the family survey and focus groups, and ensuring alignment with related initiatives including the inter-agency PDG B-5 planning work.

This visual shows the “nested” relationship of MPIT stakeholders, with influence from national partners, project funders, and key informants. The project manager held meetings and phone calls with twelve key informants who provided advice for the project, but did not join as partners. Project funders are all represented in the “Partners” circle, with one serving on the steering committee. In October 2019, initial attempts were made to recruit parents to serve as peer partners on the steering committee, but this recruitment was not completed. Family Engagement Specialists were recruited through the MPIT partner network and engaged at a Zoom meeting in November 2019, then added as a stakeholder group.

Figure 1: MPIT Stakeholders



By the conclusion of MPIT phase 1, partners shared their feedback on the project which was overall very positive. Much progress was made on the initial goals, and partners had good recommendations for evolving and sustaining MPIT over the long term. Strategies for Children will be re-applying for funding to continue MPIT into Phase 2, hoping to sustain the partnership for an additional year.

Review of recent family surveys in Massachusetts

Prior to creating the MPIT family survey, the project manager and steering committee searched for recent family surveys conducted in Massachusetts that would be relevant to MPIT's family engagement questions about experiencing the whole system of programs and services for birth-5. The goal was to see what others had learned, avoid duplication, and generate models for survey format and question design.

Eight surveys were identified that had at least a partial relevance to MPIT. A summary of these family surveys, including key findings from each is presented in Appendix A.

Key findings include:

- Child care cost as a barrier to women entering the workforce
- Parent satisfaction with child care choices, request for more affordability
- High demand for free, high-quality preschool. Both full- and half-day.
- Parents value preschool for school readiness and child development, and indicate a range of priorities: social skills, pre-academic skills, transitions and school behaviors, independence.
- Parent request for more family support resources
- Parents generally treated with respect by services providers.
- High cost of living affects family life.
- Limited free time/flexibility for families to participate in groups and activities.

Due to the scope of the survey questions (too broad, too narrow) and the geographic focus of the surveys (Boston, Pittsfield, program-specific), the project manager determined that the MPIT survey would be original and non-duplicative. MPIT presents a unique opportunity to engage families statewide and learn about how they experience the whole range of programs and services for young children.

Methodology for family survey and focus groups

The goal of MPIT’s family engagement was to be multifaceted. MPIT sought to learn about families with young children, and their experiences with birth-5 programs and services. This includes broad questions (What works? What doesn’t? What would you like to see in your community?) as well as specific program feedback for a range of early childhood programs and services. The survey covered all major categories of programming: Women, Infants, & Children Nutrition Program (WIC), Early Intervention (EI), play groups, parenting education classes or workshops, Head Start and Early Head Start, home visiting programs, child care (both subsidized and private-pay), and public school preschool/pre-K. The scope of questions was to be comprehensive, with all program types included, and a “whole child” view. The findings would be used to inform state plans for early childhood, including PDG B-5 and EEC strategic plan. Data would be shared among all MPIT partners.

The MPIT Steering Committee drafted the survey questions with assistance from MPIT partners, particularly those with research and family engagement experience. Once drafted, the survey was tested by 10 parents and family support staff—volunteers from the MPIT partners. The survey was translated into Spanish.

The survey was administered completely online via Survey Monkey. This allowed for a mobile-friendly format. The survey was anonymous, and the introduction stressed that respondents can skip any question. The survey consisted of 29 questions, mostly multiple choice, and the average completion time was 10 minutes.

The survey was disseminated throughout the MPIT partner networks via email, flyer with link and QR code, social media posts, announcements at various early childhood meetings, and general word of mouth. This method made it more likely that respondents would have already been accessing a program or service—they would have likely only heard about the survey through a prior relationship with these programs, and being on their email lists, following on social media, or being told about the survey in person during programming. To bolster the low response to the Spanish survey, the project manager conducted outreach to Latinx-focused nonprofit organizations, bilingual schools and Spanish-language churches.

The survey was open for two months, from mid-November 2019 to mid-January 2020. In total, the survey had 1,260 responses, including 33 in Spanish.⁴ There was good geographic representation with respondents covering all regions of the state.

Focus groups were designed to be a qualitative complement to survey. They were also designed to reach families who were not being reached by the survey. A review of the demographics of the initial wave of

⁴ Due to the low number of Spanish survey responses, summary charts for that survey are not presented in this report. Highlights from the open responses are included. Spanish survey data is combined with English survey data for region and play groups charts and excluded for all others. This is due to MPIT’s use of two separate Survey Monkey surveys, with survey data and auto-generated charts not easily combined.

survey respondents showed a sample with higher income and education levels, and predominately white. Focus groups were planned to reach racially diverse, multi-lingual, and lower-income populations. MPIT targeted communities with higher need, including Gateway Cities.⁵ Multi-lingual facilitators allowed focus groups in Brockton and New Bedford to be conducted in parents' home language. In total, there were 50 parents attending focus groups, 8-12 parents per session, five sessions completed in Quincy, Brockton, Yarmouth, New Bedford, Springfield.

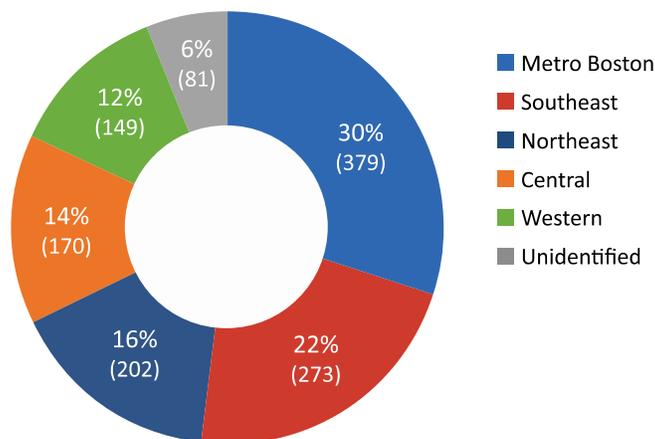
⁵ In Massachusetts, Gateway Cities are mid-sized urban centers that anchor regional economies. As former manufacturing hubs, they often face economic, social, and educational challenges. They are often targeted for support by Massachusetts policymakers, nonprofits, and philanthropic leaders. For more, visit MassINC: massinc.org/our-work/policy-center/gateway-cities/about-the-gateway-cities/

Family survey results

Demographics

The survey asked extensive demographic information about respondents, which are presented here in summary. Respondents listed their town/city of residence, which the authors coded into five major regions of the state using EEC regional boundaries.⁶ Each of the major regions of the state were represented, with 30% of respondents from Metro Boston and 22% from Southeast. The five cities with the most respondents were Boston (140), Haverhill (43), Springfield (37), Plymouth (35), and Somerville (26).

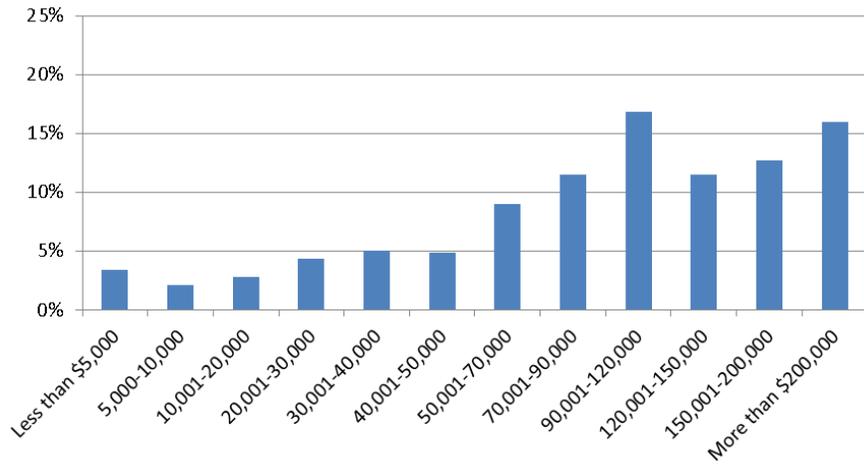
Family Survey Responses by Region (n=1,260)



The survey asked families to indicate their total income from 12 income categories. Responses skewed towards the higher end of the income distribution.

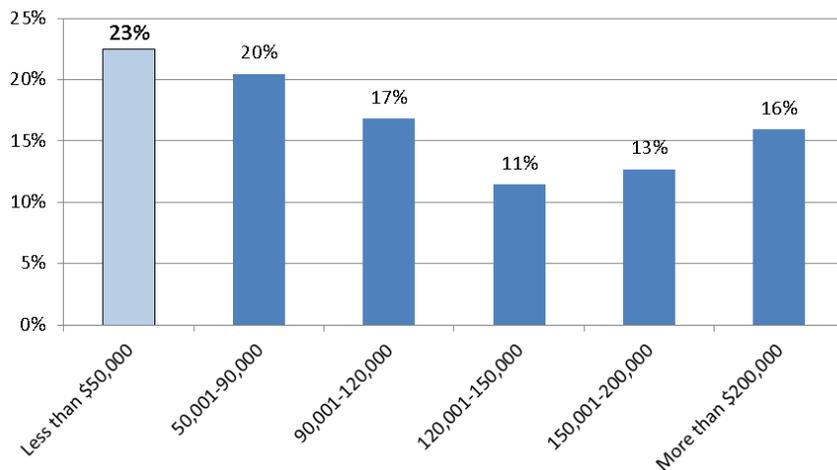
⁶ Boston combined with Metro Boston. EEC—Early Education and Care Regional Map. www.transprollc.com/pdf/regionmap.pdf and EEC—Department of Early Education and Care Locations www.mass.gov/orgs/departments-of-early-education-and-care/locations?_page=1

Q24: From these categories, choose the one that represents your family’s total income range from all sources (n=1,133, skipped=99)



MPIT was particularly interested in the views of lower-income families, as many publicly-funded programs and advocacy initiatives deliberately target lower-income families, or more broadly, under-served families who are furthest from equal opportunity due to various socio-demographic factors (income, education, race, home language, immigrant status, etc.). To generate a lower income group with sufficient sample size to be meaningful, the authors collapsed income into six categories, combining incomes below \$50,000 into one category. There were 255 respondents in this “lower income” group, which made up 23% of the sample. This income cut-point approximates 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.

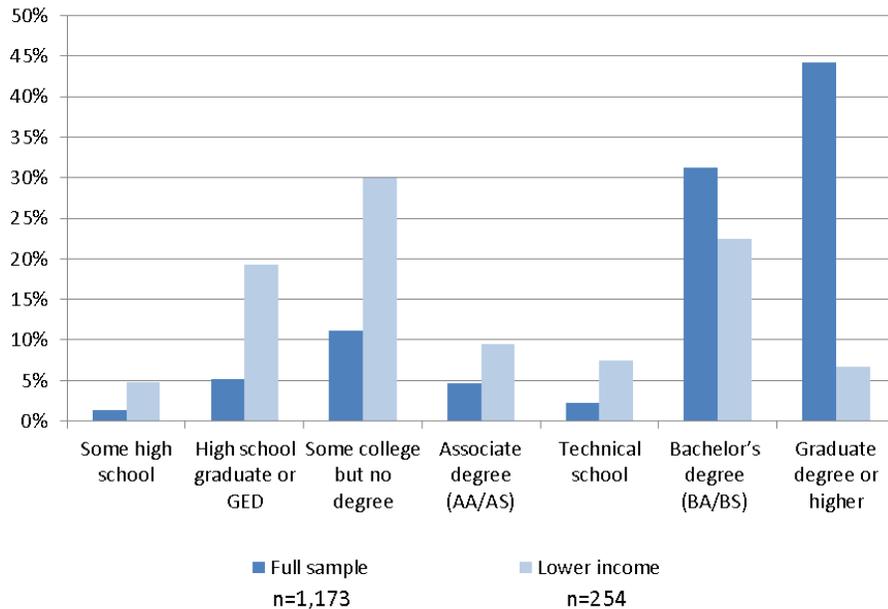
Q24: Family income, collapsed to six categories



Respondents reported higher than average levels of education, with 75% of the full sample having a BA or higher, compared to only 29% of the lower-income group. Recent reports show that 50% of all Massachusetts workers have a BA or higher.⁷

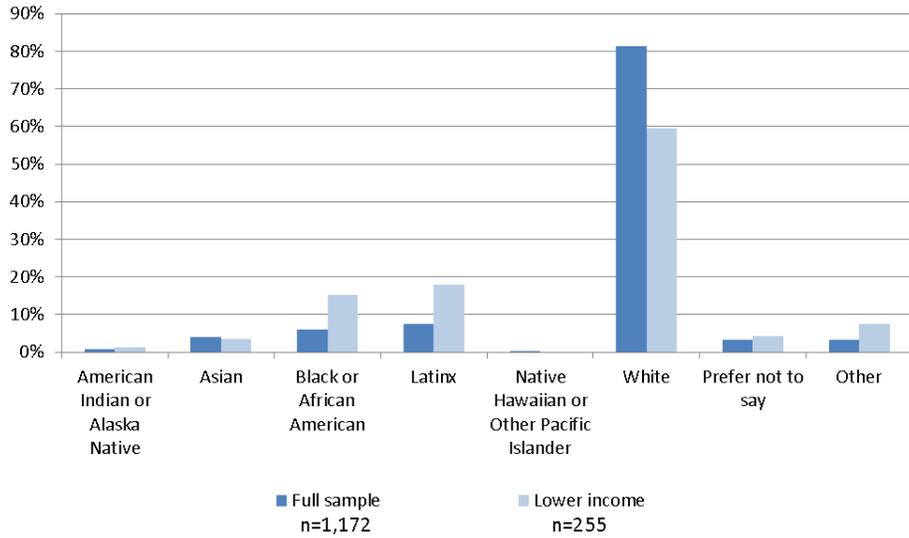
In terms of race and ethnicity, 81% of respondents self-identified as white, including 60% of the lower income group. On the open-response question, “What language is spoken most often in your home?” besides English and Spanish, these languages had more than one response each: Portuguese, German, Russian, Cape Verdean Creole, Chinese/Mandarin, Arabic, Turkish, and Ukranian.

Q23: What is your highest education level?



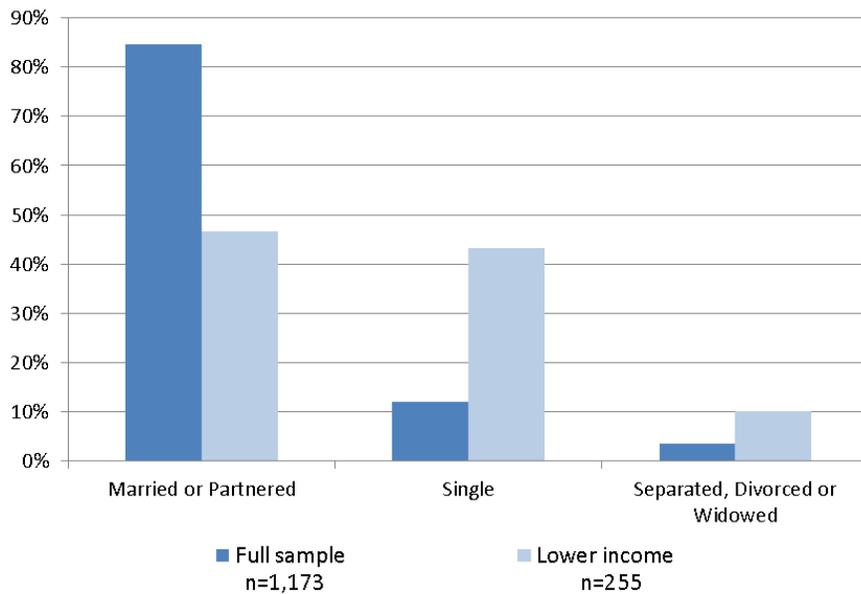
⁷ Massachusetts ranks #1 in the country, the U.S. average is 35.5%. Massachusetts Budget and Policy Center. (2017). 2017 State of Working Massachusetts. www.massbudget.org/reports/swma/

Q20: What is your race and/or ethnicity? You may choose all that apply. (U.S. Census categories)



In our sample, reported marital/partner status varied by income. The higher percentage of lower- income parents who are single parents may have implications for programs and services. Indeed a few survey and focus group respondents noted wanting more programming (i.e. parenting workshops) specifically tailored to the needs of single parents.

Q22: How would you describe your marital/partner status?



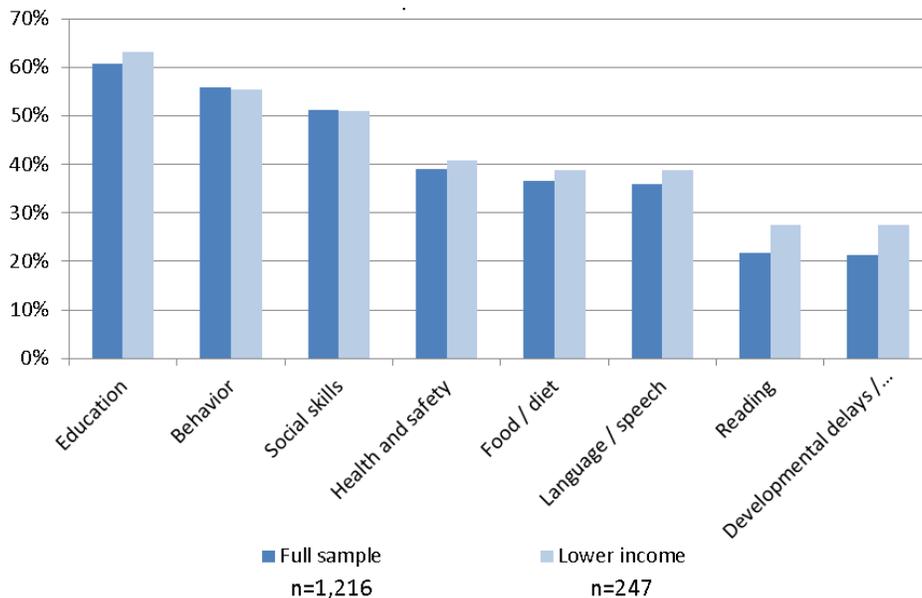
Parent perceptions: early childhood needs, review of programs and services

The survey asked a series of questions about program access and quality, parents' preferences, needs, and barriers to accessing programs and services. For nearly all multiple-choice questions in this section of the survey, respondents were allowed to check all that apply.⁸

When asked about what questions parents have the most questions about regarding their child's needs, education, behavior, and social skills were the top three responses. There was no difference in response sorting between the full sample and the lower-income group.

Who do parents ask if they have questions about their child? Doctor/pediatrician was the clear top choice, followed by family, internet searches, and friends and neighbors. Child care provider had the fewest responses (47%) among the full sample, and second fewest for the lower-income sample.⁹ Response sorting showed similar patterns for the full sample and lower-income group. Early Intervention was the most common open-response given under "Other."

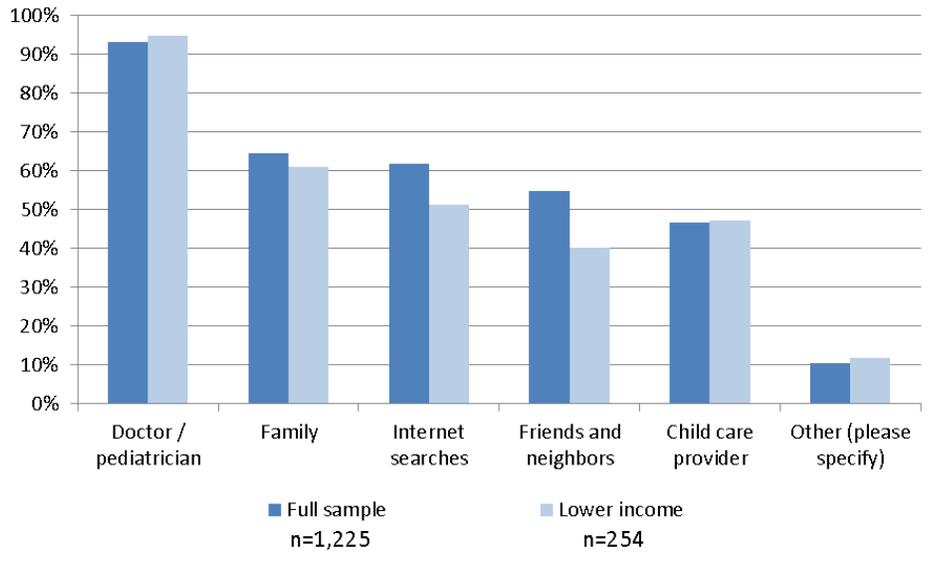
Q1: What topics do you have the most questions about regarding your child's need? (Check all that apply)



⁸ One question towards the end of this section was forced-choice: Of all the programs and services, which was the most helpful? Research indicates that forced-choice answers (choose only one) yield more accurate results. Pew Research Center. (2019, May 9). When Online Survey Respondents Only 'Select Some That Apply'. Retrieved from: <https://www.pewresearch.org/methods/2019/05/09/when-online-survey-respondents-only-select-some-that-apply/>

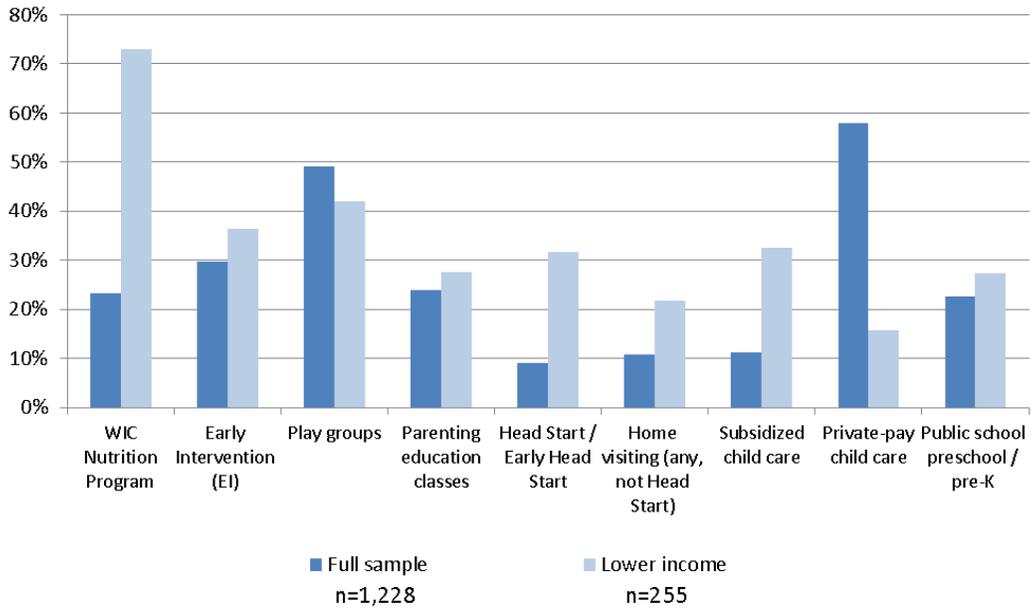
⁹ Only 67% of the full survey sample reported utilizing child care (private-pay, n=685; subsidized, n=134). So it is likely that "child care provider" would score higher in a different sample with higher child care utilization rates.

Q2: If you have questions or concerns about your child, who do you ask? (Check all that apply)



Respondents were asked about their enrollment in various early childhood programs and services. Private-pay child care and play groups were the most common responses. For the lower-income group, WIC was the most common response. Means-tested programs like Head Start and subsidized child care were more common for the lower-income sample.

Q3: Are you or your children currently enrolled, or have been enrolled, in any of the following programs? (Check all that apply to you or your children)



Play groups take place in a variety of settings. To learn who provided the play groups, the survey asked a follow-up open-response question. The top four responses in order were: Library, Coordinated Family and Community Engagement (CFCE)—an EEC-funded statewide network of grantees, parent or family centers, and Early Intervention.¹⁰

Q4: If you answered “Yes” for play groups, parenting education, or home visiting, who provided these services?

Library	113
Coordinated Family and Community Engagement (CFCE)—any (includes 24 for Beginning Bridges, Uxbridge; 17 for Project Connect, Attleboro)	96
Parent/Family Centers (includes 16 for Family Nurturing Center)	82
Early Intervention (includes 7 for Thom Child and Family Services, 4 for Reach in Western Mass.)	79
Local / city-town run	35
Hospital (includes 3 pediatricians)	26
Cape Cod Childrens Place	23
Plymouth Family Network (PFN)	20
Public Schools	16

¹⁰ Spanish survey responses (n=14) included in this table. Results clustered and categorized, as possible, by the authors.

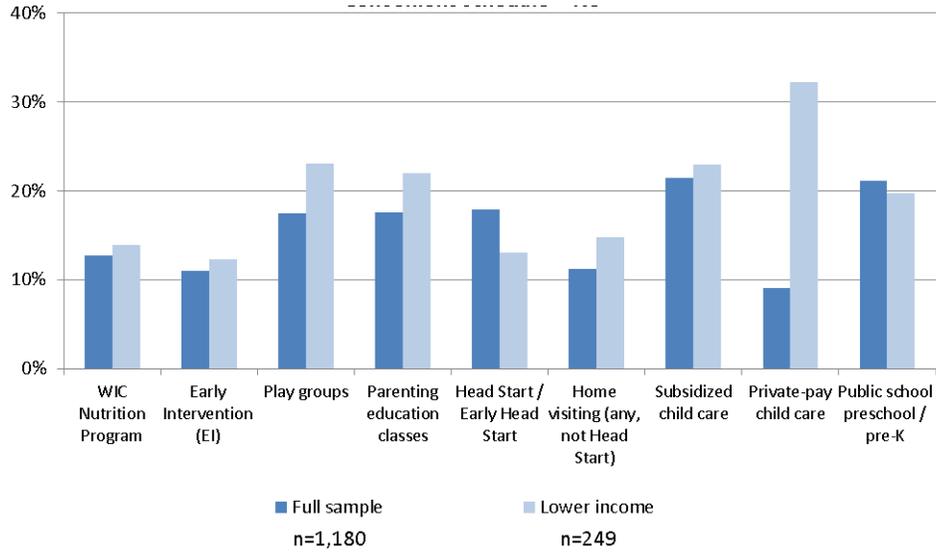
Ability Specific (i.e. autism spectrum, deaf, blind)	15
Somerville Family Learning Collaborative	14
An individual (program not specified)	12
Self / parent co-op	12
Kennedy Donovan Center	9
Private (i.e. a private company, or parent arranged for group privately)	8
Faith Based	7
ParentChild+	7
ABA provider (adaptive behavior)	6
Little Lovage Club	6
Gym	5
Online / Facebook groups	5
Music Groups	4
Other	127
Total responses	727

The survey then asked a series of questions about program satisfaction, allowing respondents to rate separately each early childhood program and service that they had experienced. Overall, respondents report being highly satisfied with all programs, with the vast majority saying “yes” to prompts including “helpful staff,” “program made you feel like you belonged”, and “program recognized you as the expert on your child.” The questions that yielded the highest dissatisfaction are presented below: Convenient schedule, convenient location, and affordability.

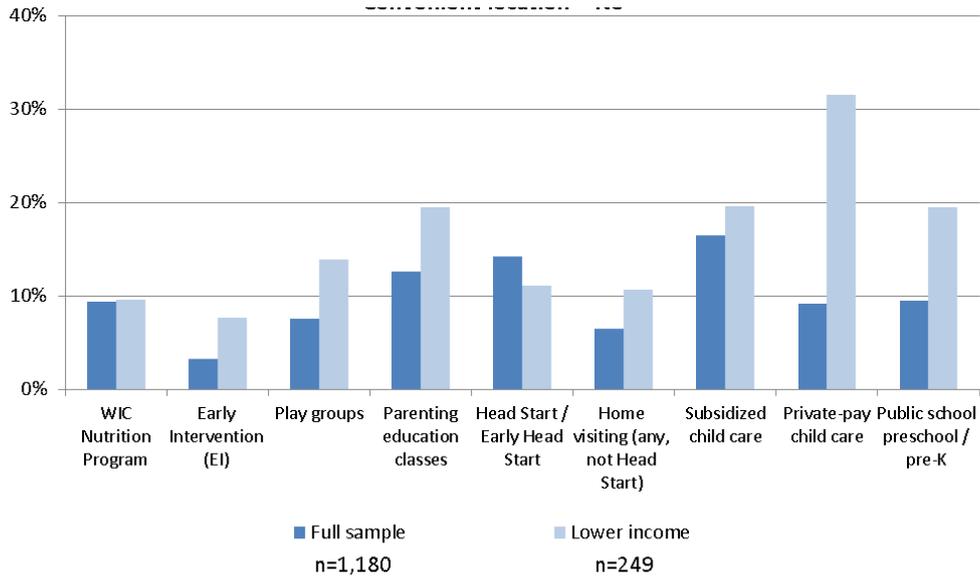
The question, “Program matched my language or culture” received an overall positive response; depending on the program 88%-98% responded “yes.” It is worth noting that the survey respondents were predominately white and English-speaking. The Spanish survey response (n=30) to this question was also positive; depending on the program 71%–100% responded “yes”. However, five of the 30 respondents (17%) answered “no” for one or more program. More follow-up research may be needed in this area, for instance multi-lingual focus groups with questions that focus on cultural match.

These three “Yes / No” sub-questions (convenient schedule, convenient location, and cost was affordable) elicited the most “No” responses.

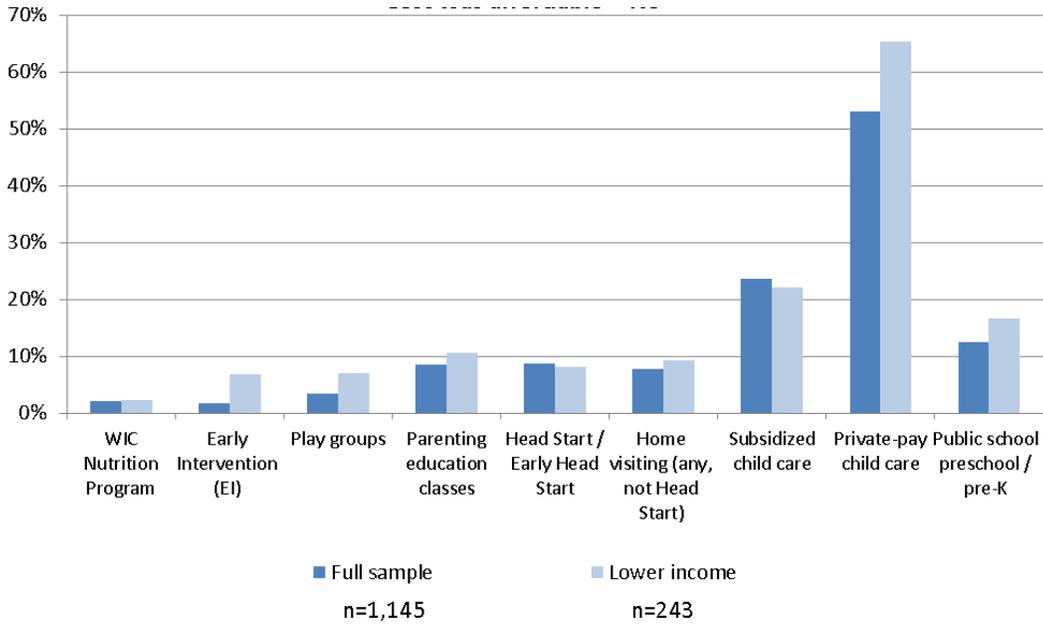
Q5: For program you are/were enrolled in, were your family’s needs met by the following for each program? (Convenient schedule=No)



Q5: For programs you are/were enrolled in, were your family’s needs met by the following for each program? (Convenient location=No)



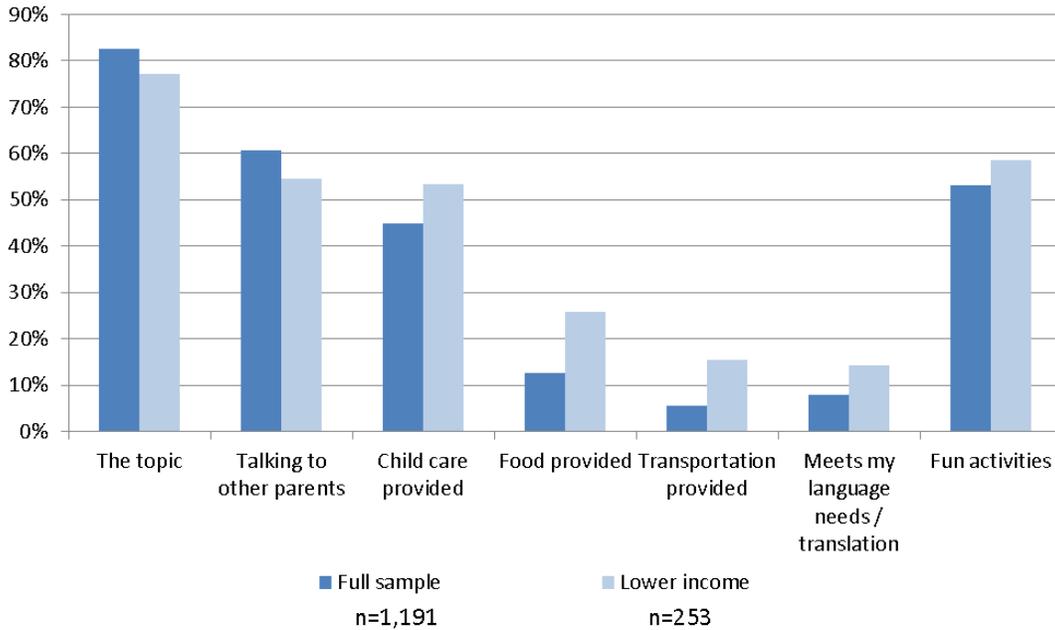
Q6: For programs you are/were enrolled in, were your family’s needs met by the following for each program? (Cost was affordable =No)



It is worth noting that several programs that are supposed to be free, no-cost (i.e. Head Start, Early Intervention, and public school programming) were noted by parents as not affordable. More analysis is needed to understand why these are unaffordable—there may be ancillary costs for services (i.e., transportation, extended-day child care) that are not covered by the programs and which create additional barriers for low-resource families.

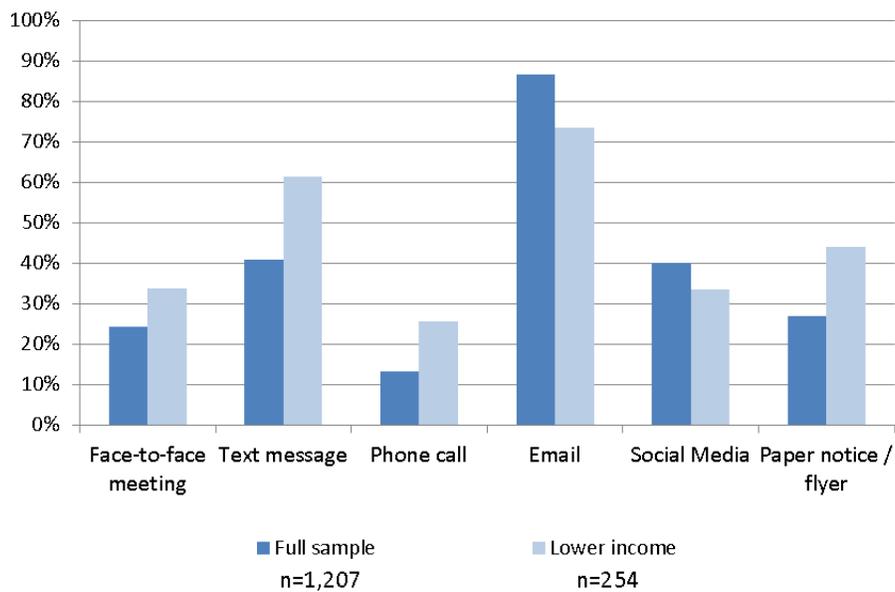
The survey asked families about meetings and events, communications formats, and referrals / sources of information. The topic of focus is the top priority for meetings and events, followed by opportunities to talk to other parents and fun activities. Provision of child care is also a priority for respondents. Patterns were similar for the full sample and the lower income group.

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



Email, text, and social media were the top preferences for communication format. However, a sizeable share also report liking paper flyers and face-to-face communication. This result suggests that in order to reach all families, programs should use multiple communications formats and offer a range of options for families.

Q9: How do you prefer to receive updates from programs or services?

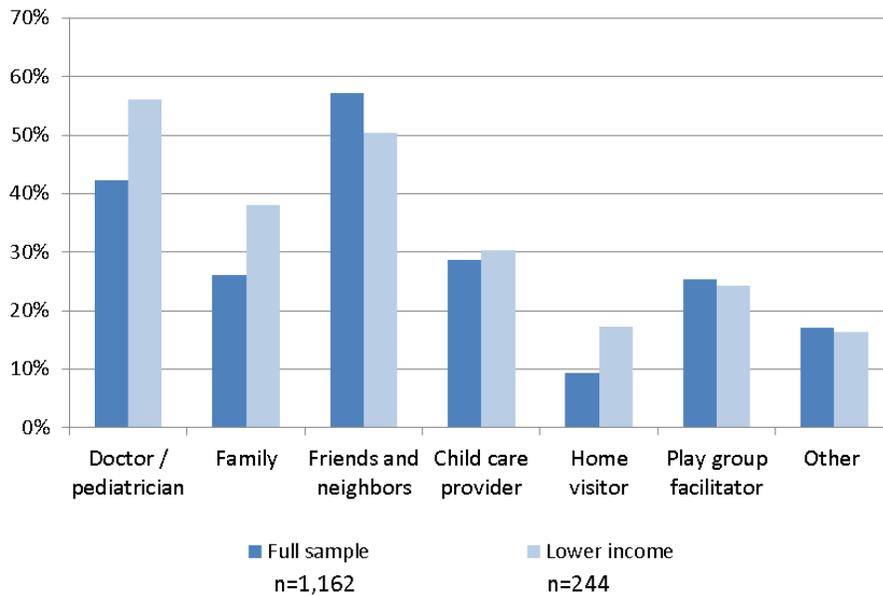


The survey then asked families, “Do you or did you visit program websites or social media pages for information?” More respondents answered “no” than “yes” to these questions.¹¹ Respondents appeared to answer yes only for programs they utilized, and then only four of the nine program types received a majority of yes responses [50-70% answering “yes” for play groups, parenting education, private-pay child care, and public pre-K, and Head Start for the lower-income sample]. Overall, families appear to use programs’ websites more than programs’ social media pages.¹²

To determine referral sources, the survey asked “Who has given you information on these programs and services?” Friends and neighbors were the top response, followed by doctor/pediatrician. Response rankings were similar for the full sample and lower-income group. Library and internet sources (online searches, Facebook) were common responses under “other.”

The top reasons families gave for not being enrolled in programs were: not eligible, hours offered don’t work for my family, and too expensive. Lower income families were more likely to choose “didn’t know about the program,” and some reported “no transportation to program” and “location not convenient,” (17% for each).

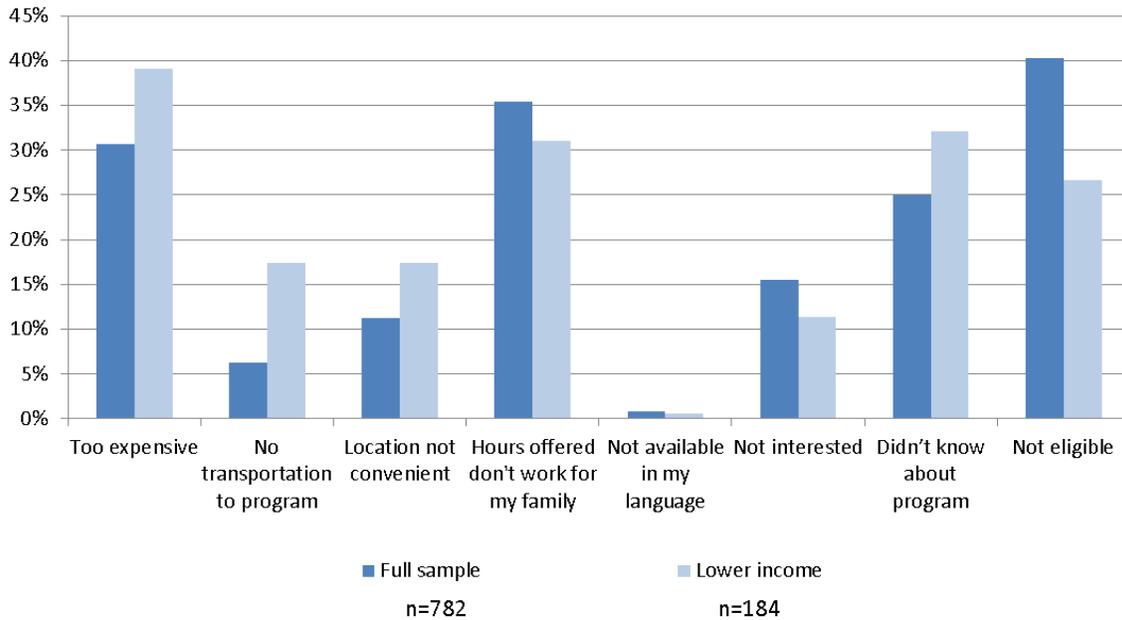
Q12: Who has given you information on these programs and services? (Check all that apply)



¹¹ Respondents were allowed to answer yes or no for each program, or skip. Given the high number of skips per program, it is presumed that most respondents skipped the programs they were not enrolled in.

¹² It may be that many programs do not have a social media presence, or have one but families do not know about it.

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



The survey asked families to select which program or service has been most helpful. This was one of the only survey questions where families could only make one choice. Private-pay child care was the top choice (33%) followed by play groups (22%). For the lower-income group, WIC was the top choice (26%) followed by Head Start and subsidized child care (15% each). The survey then asked why that program was the most helpful. Respondents shared a wide range of benefits to them and their children. A full summary of responses appears in Appendix B.

WIC

Porque me enseñó cuáles son los mejores alimentos para tener una vida más saludable

Because it taught me what the best foods are for a healthier life –Hyde Park, Boston parent

Desde q estaba embarazada de mi niño mayor de 7 años me an ayudado on todas mis preguntas y preocupaciones aún teniendo mi segundo niño de 4 años siempre me ofrecen todo lo q ellos pueden para ayudarme sea en las comidas y leche q brindan como nutrición informaciones y todo lo q yo tenga duda ellos buscan para contestarme todo lo q necesito y si no lo tienen buscan donde puedo conseguir más información ... la gente cree q esto solo es comida gratis pero ellos son más q eso.

Since I was pregnant with my eldest, who's 7, they have helped me with all my questions and concerns, and even my child, who's 4, they always offer me everything they can to help me, whether it's food and milk, or provide information on nutrition. Anything I have doubts about, they try to respond with everything I need, and if they do not have it, they look for where I can get more information... people think it is only free food, but they are more than that. –Haverhill parent

Early Intervention

Me dio apoyo y asistencia con mi hijo prematuro. Su ayuda fue vital en el desarrollo y evolución de mi hijo. Su personal altamente calificado.

They gave me support and assistance with my premature son. Their help was vital in the development and evolution of my son. The staff are highly qualified. –Springfield parent

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

Private-pay child care

We were very lucky to find someone we trusted who has lots of flexibility to help our family pay our bills while helping our son grow. –Worcester parent

Because having my 3 yr old in day care and almost 5 yr old in Pre-K allows me to work full time. –New Bedford parent

It's the only one we use. I wish we qualified for more support. The cost of living and a child in Cambridge is too much. –Cambridge parent

Play groups

The playgroups offered by Project Connect Family Center in Attleboro mimic a pre-school with play stations, hand washing, snack, and circle time with singing. I feel that it provided a great transitional stepping stone for real pre-school. –Attleboro parent

The CFCE Building Bridges program in Uxbridge, MA, has been a great resource for my child and I. It has helped me understand my child's needs and behavior. The instructors have made us feel welcomed and comfortable. It has also greatly helped with my child's development and social skills. We both love it and register every time it is being offered! I will be forever grateful for this program and the opportunity to be a part of it! –Whitinsville parent

Gets me and my 2 children ages 2 and 4 out of the house, on a routine. Builds social skills, healthy emotional support for all. I'm a stay at home mom on very tight budget, these programs save my sanity alleviates isolation and have countless benefits for my children.

–Dennis parent

Didn't ask for income guidelines, which every other place asked for and low-income families always got preferred. Our family was always over income, due to it we always got put on the waitlist . I just got turned away and felt I had to be poor to get my child a early education. -

Haverhill parent

The survey asked another open-response question, “Do you have suggestions to make any of the programs more helpful? Please tell us.” A variety of helpful suggestions were offered, many relating to program hours, schedules, affordability, and communication.

Provide more story times across the week and during times working parents have off. For example, I wanted to bring my toddler somewhere for Veterans Day but every library was closed. Didn't know of any playgroups. –Auburn parent

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

I make too much money for MOST of the programs listed. And I'm not rich. Problem 1. Childcare is astronomical and I am not poor enough for help, so my child stays with family. There's no help for the middle class that we dont pay for. That said, lactation is FREE at BIDMC and its lovely because I had a health scare and they helped so much. –Dorchester, Boston parent

More communication. The center, us and the home care provider are very stand-alone. The provider comes to the house and that is it. We barely communicate with the provider and never hear from the center. They have my email. Would love more education/ information that might be helpful to the education of our premie twins. –Plymouth parent

The final open response question was “What programs or services for yourself or your children would you like to see more of in your community?” Many creative suggestions were offered.

Grupo de apoyo a los padres de otros idiomas

Support groups for parents in other languages –Northbridge parent

Orientación temprana de temas que sean de crecimiento personal para los niños

Early guidance on issues related to children's personal growth –Lawrence parent

Un programa donde puedan ejercitarse o hacer alguna actividad motora en el invierno

A program where they can exercise or do some motor activity in the winter –Hyde Park, Boston parent

Sinceramente es la primera vez que conosco estos programs 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

Combination mom/kid outing where the parents and kids get to do separate activities. –Rowley parent

Fun weekend events for the whole family. Or date night events where the kids play and we get grown up time.–Brighton, Boston parent

Affordable sports, dance, theater, music instruments, arts, self defense classes –New Bedford parent

Play groups!!! And affordable child care; my mom watches the baby while I work because we can't afford day care. –Somerville parent

I would like to connect more with other moms/families –Lenox parent

Family focus group results

As stated above, five family focus groups were held throughout the state to complement the more quantitative data collected via the family survey, and reach a more diverse sample of families that were not necessarily being reached by the online survey. Each focus group had 8-12 parent participants, recruited by snowball sampling. Participants were recruited by the local program hosting the focus group, so in most cases participants were familiar with or enrolled in that program, or were brought to the focus group by a friend.

Through a wide collection of responses, the data revealed that families are disappointed by programs that are not affordable, the lack of variety in programs that are offered, inflexible hours, parent involvement options, and a nonexistent central place to receive information about programs.

Focus group participants expressed opinions and needs that were similar to those of the family survey respondents.

With the information collected, early childhood professionals and policymakers can improve programs, services and policies to better meet families' needs. There is no "one-size-fits-all," and programs must remain flexible and customizable in order to meet a wide range of family needs.

Below is a sample of focus group feedback by site. Full results appear in Appendix C.

Quincy

- Parents report accessing: EI, YMCA, QCAP, Quincy Family Resource Center, library groups.
- Not enough playground and programs where we live
- Multi-languages will be helpful
- Yes, plenty of information (through EI)
- We do not meet criteria because we are good earners, but we have an immense amount of student debt
- We haven't used any state services—would have liked social skills groups

New Bedford

- Parents report accessing: Home visiting program from Kennedy Donovan Center, PACE Head Start, Blessed Angels Academy, and Public School Preschool.
- Participants who were not enrolled in programs/activities were not sure who they should speak to with any concerns
- Parents were very helpful and immediately began sharing helpful tips.
- Parents offered suggestions for who to speak with regarding concerns: doctor / pediatrician, Swartz, KDC, Child and Family Services, the Fernandes Center, Parents as Teachers program, Dr. Bare, Greater New Bedford Community Health Center, and the Pediatric Associates of New Bedford.

- What's working? PACE Head Start, KDC home visiting, word-of-mouth, partner organizations making referrals.
- What's not working? DTA and DCF not communicating well with families, half-day child care, voucher processing takes too long, lack of pre-K programs in the area.

Brockton

- Family needs reported: Separation anxiety, child is not talking, childcare, attention span, financial needs, social emotional—dad groups to connect and share, mental health—for the entire family to stabilize.
- What makes programs/services helpful to you: socialization, talk to other adults*, learning something new, learning new techniques from parents, program (WIC) is very helpful because it helps with the nutrition needs.
- Wishes: CFCE, Free cooking classes, Family fitness program (mindfulness)*, Overall, free extracurricular activities (swim, dance), Learning more about educational programs for my child.
- Other notes: Form an organization for families and children, *Grants*, Childcare—Too expensive

Cape Cod

- No central place to get information, have to go to many websites/programs, or know the right person.
- Hours don't always work, not enough offered on weekends.
- CFCE coordinators are key: once you get to know them, "you're in the pipeline."
- Plus, parents can make friendships. A town is isolated from services. You're ok if you are in a program or service. If you're isolated or shy, you don't know what you don't know.
- Better interconnected service providers. They don't know what each other offers.
- Hospital and pediatricians should have this info. They don't know about play groups, just give a binder of (health) info.
- Importance of Early Intervention (EI). One parent moved from an off-Cape town two years ago and had no family/social connections on the Cape. EI was a lifeline, and critical source of help when she arrived. "If it wasn't for EI ..."
- Hours "Early Bird" 7:00/8:00 a.m.–12, 7 days, more afternoon; "Fringe" hours
- Offerings More free classes, health/safety, movement dance (like at Klub Kids); Kids yoga; Exercise classes—active/movement & mommy + me classes

Springfield

- What works? My son learned how to speak more, Voucher for day care so I can go back to work, Speech therapy for free, DTA, Square One helped me understand my child's development.

- What doesn't work? Services ended when my child started Kindergarten, No voucher for daycare because I make too much money not enough support to pay for tuition, early intervention ends and then you have go through the schools. They take a long time.
- What services helped? WIC, Square One, Speech therapy, Pediatrician, ABA services, Early Intervention.
- What did not help? School not believing there's a problem, The questions on income if it was income-based, Child is smart but has behavior problems and teachers wouldn't give him a support plan.
- What did you like about behavior support services? The help, the teachers, the work, They actually do want to help people, They help your kids develop better, They know what it is like to be me.
- Was not available for services because my son was "too smart," What other places for services should we go? There is no list of programs and services.

Summary—What do families want?

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).

These findings should help local programs, state agencies, and cross-sector initiatives like MPIT improve program design and implementation to better meet the needs of families with young children. Some of these topics, such as affordability, are being addressed by advocacy coalitions whose members include MPIT partners.¹³ Other work, such as improved marketing to families of available programs and services, is in-development at the state level through the PDG B-5 interagency team. MPIT partners will continue to

¹³ For example, the Common Start coalition is advocating for universal, affordable, high-quality child care in Massachusetts. Strategies for Children serves on the coalition steering committee, and MPIT partners including the Alliance of Massachusetts YMCAs and the Massachusetts Head Start Association are coalition members.

collaborate with one another to inform changes to state policy, while bringing the perspective of community partners, family engagement specialists, and families themselves to the table to inform policies and systems.

Limitations

The MPIT survey respondents had higher levels of income and education than the average Massachusetts family, and were predominately white. As such, the survey over-represents the views of these groups and under-represents black, Latinx, and Asian families, lower-income families, and parents with low levels of formal education. The lower-income group data highlighted in the survey charts is one attempt to give more weight to the responses of under-represented families, as were the focus groups. The Spanish survey response was too low to be valid for reporting in summary charts. The survey being available only in English and Spanish was another limitation. Programs and service providers are often most concerned with reaching the hard-to-reach, most at-risk families. Future MPIT surveys and focus groups would allow us to have deeper outreach and engagement with these and other populations of interest. Stronger partnerships with front-line direct service family engagement programs would help boost that engagement. In addition, recruitment and integration of parent partners on the MPIT steering committee may have helped improve survey design and outreach in ways that better met the needs of families. Lastly, the survey was administered from November to January. December response totals were low—it is impractical to survey families during the holiday season, there are also fewer working days to promote the survey. A longer survey period would likely have resulted in more survey completions, as would a shorter survey length. Any future surveys and focus groups will benefit from the lessons learned during this first attempt.

Next steps for MPIT

MPIT is currently planning for phase 2 of its work, anticipated to run from June 2020 to June 2021.

In February 2020, the project manager engaged steering committee members and MPIT partners in a discussion of sustainability, mission and vision, and MPIT short- and long-term goals.

To be successful and relevant, MPIT phase 2 must 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.

Programs and services are already adapting to meet families' new needs. These programs and family engagement specialists will likely need new supports. Some programs will unfortunately close due to loss of parent-fee and other revenues during social distancing, and later due to the longer term economic downturn.

MPIT will need to consider these challenges as it seeks to support infants and toddlers in Massachusetts.

Based on partner input in February, the tentative MPIT mission and goals are as follows:

MPIT is a collaborative public/private network focused on improving outcomes for infants and toddlers and engaging families to improve systems of support. MPIT partners will refine this mission statement in phase 2.

MPIT phase 2 goals [tentative]:

1. Continue to leverage MPIT's **unique network and focus** to add value to the 0-3 system in Massachusetts. Continue to ask: what can MPIT do that no other entity can? What are the levers of systems change that MPIT can pull?
2. Facilitate partner discussion of family engagement lessons learned during **COVID-19**. Document lessons, share to inform program and policy.
3. Strengthen family role in MPIT design and decision-making by launching a **parent advisory**. Continue to ask the guiding question: what do families want and need?
4. Launch a **data workgroup** to identify 0-3 data: universe of children, service gaps, lessons from other states. Advocate collectively for improved data systems in Massachusetts, supporting ongoing interagency data systems work.
5. Play a **supporting role** for MPIT partner's early childhood goals, including early childhood mental health, child care system improvements, advocacy efforts, and others.

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Boston Medical Center, Center for the Urban Child and Healthy Family
Boston Opportunity Agenda
Boston Public Health Commission
Brazelton Touchpoints Center
Children's Investment Fund
Children's Trust
Children's Vision Massachusetts
Commonwealth Children's Fund
Connected Beginnings Training Institute
Edward Street Child Services
Ellis
Families First
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Massachusetts Department of Early Education and Care
Massachusetts Department of Mental Health
Massachusetts Department of Public Health
Massachusetts Department of Transitional Assistance
Massachusetts Early Intervention Consortium
Massachusetts Executive Office of Education
Massachusetts Executive Office of Health and Human Services
Massachusetts Head Start Association
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Nurtury
ParentChild+
Public Health Institute of Western Massachusetts
Reach Out and Read
Roca, Inc.

Square One

Strategies for Children

The Boston Foundation

The One Day At A Time Dad

Together for Kids Coalition

United Way of Massachusetts Bay and Merrimack Valley

Wellesley Centers for Women: Work, Families and Children Group

WIC Nutrition Program, Massachusetts Department of Public Health

Appendix A: Recent family surveys in Massachusetts

Survey name, author, date	Issue focus, geography, sample	Key findings relevant to MPIT
<p>Making Childcare Work: results from a survey on childcare arrangements and challenges in Boston. City of Boston, Mayor’s Office of Women’s Advancement and the Economic Mobility Lab. October 2019.</p>	<p>Child care—as a work support, affordability and challenges</p> <p>Boston, n=2,616. Data collected via city census, child care question. Relative to child population in neighborhoods, Jamaica Plain, Charlestown, Roslindale, and the South End were the most over-sampled neighborhoods, while Dorchester and Roxbury were the most under-sampled.</p>	<p>Cost is the top barrier. Women are not entering/re-entering workforce due to lack of child care. Child care more challenging for age 0-2 than 3-5. 45% said child care too far away or too difficult to find. Parent/guardian care is the most frequently used care among 0-2 year olds.</p>
<p>Boston Foundation Early Childhood Survey, Family Independence Initiative. December 2017.</p>	<p>Child care - Learn how families experience child care, and what ideas they have to improve child care options and quality for themselves and their communities</p> <p>Boston, n=146 Majority of families identified as Black (48%) or Latino (32%). Data collected through online survey</p>	<p>Families were generally happy with, and confident in their child care choices. Many families used more than one type of childcare. Public preschool and daycare, at a person’s home or in a center, rated highly in school preparedness. A little over a third of parents indicated that their child care is convenient, either in location, hours or both. Families are focused on education and enrichment, but also convenient, affordable care. Parents want financial support and educational resources. Most families spent between \$0 and \$500 a month on child care, with roughly 1 in 5 caring for children at home. Parents want resource to improve their own lives, such as getting a better job. Parents turn to their families first for advice on child care. Parents are augmenting their children’s education at home.</p>
<p>Boston 2019 Community Health Needs Assessment. Boston CHNA-CHIP Collaborative. Spring 2019.</p>	<p>Social determinants of health and the influences of factors such geography, income, institutional racism, educational and occupational advancement, and others.</p> <p>Boston, 91 organizations and 2,500 individuals engaged in a CHNA community survey n=2,404, online and in-person, 13 focus groups with community residents (n=104), and 45 interviews with organizational and community leaders to gauge perceptions of community needs, strengths, and opportunities. Participatory, collaborative approach.</p>	<p>Education was the fifth most cited factor in a list of 20 by respondents when asked what defines a “healthy community.” Children with special needs, undocumented students, and those who have experienced trauma were identified as groups that needed more support in and outside of the classroom. Urge to develop strategies to address trauma, such as early interventions with wrap around service models (interventions at multiple levels). 76.2% of Boston Public School students are deemed high needs, as either low-income, economically disadvantaged, being a current or former English Language Learner, or having a disability.</p> <p>Participants believed that students in lower income neighborhoods were not necessarily receiving the same quality education as those in more affluent neighborhoods within Boston. Some parents discussed lottery systems that made it challenging to access neighborhood schools that were perceived to be of higher caliber.</p> <p>Focus group participants described the need to work multiple jobs in order to afford childcare, which impacted their ability to be engaged in their child’s life. Nearly one-quarter (23.1%) of parents of children under 18 years old indicated that they had trouble paying for child care. Not only was the cost identified as a barrier for parents, but key informants also described long waitlists for childcare, especially for younger children under the age of 3 years old. Key informants (parents) expressed that childcare was especially difficult during the summer time</p>

		<p>and on school breaks. Haitian Creole, Portuguese, and Spanish speakers were significantly more likely than the rest of the sample to indicate having trouble paying for child care</p> <p>Perceptions of Parenting and Child Health: Not a top concern, but arose as part of larger concerns about family economics or parenting practices. Cultural differences. Some immigrant families report challenges with different parenting styles in America (more permissive, outspoken children) than in home countries.</p>
<p>Family resource survey. Berkshire United Way, 2017. In Early Childhood Assessment and Sustainability Plan. Berkshire United Way. 2019.</p>	<p>Accessing family resources and families' suggestions for improvement.</p> <p>Pittsfield, n=86</p> <p>Full report/plan provides a framework for a sustainable model that supports a 0 – to age 5 pathway toward success in school. Reviews multiple data sources: program data, provider survey, and BUW's Results Based Accountability System, Clear Impact Scorecard. Scorecard tracks data showing how many people are being served, outcomes they are reaching, and trends over time.</p>	<p>Families generally felt that they were treated with respect when seeking resources, needs are met in a timely manner. They rely on a variety of organizations to help them find resources. The respondents offered suggestions for improvement including: social media and website information, community events and activities for children.</p> <p>WIC most frequently mentioned resource (45%).</p> <p>Frequent barriers of home visiting programs: not having enough staff, families not knowing about them, and families having mental health challenges. Scheduling visits can be a problem, visiting programs work with many young parents who have jobs and varying schedules. A need for a point person at various organizations to help make referrals and connections to their services.</p> <p>Bolstering the services available to directly serve parents and caregivers has the greatest potential to positively influence the overall well-being of the family unit in general, and ultimately increase third-grade reading proficiency.</p> <p>Head Start and quality child care providers were described as highly effective once families gain consistent access to them.</p>
<p>Home Visiting for System Involved Young Mothers: A Longitudinal Investigation of Risks, Supports, and Outcomes. Tufts Interdisciplinary Evaluation Research (TIER). May, 2018.</p>	<p>Home visiting, child welfare, juvenile justice.</p> <p>Data were drawn from a randomized controlled trial (RCT) evaluation of Healthy Families Massachusetts (HFM), a statewide, universal, voluntary newborn home visiting program for first-time young parents under 21.</p> <p>70 juvenile justice involved women: 53% (n=37) in the program group 47% (n=33) in control group.</p>	<p>The need to foster collaborations between home visiting and child welfare and justice system representatives.</p> <p>Mothers faced significant challenges in their romantic relationships—home visitors could benefit from further training and support around helping mothers resolve these challenges and cope with relationship instability.</p> <p>Mothers were also more likely to make progress when home visitors provided advanced support versus check-in only support, and when mothers were receptive (accepted help, followed through) to home visitors' advice and help.</p> <p>The most commonly discussed domains between home visitors and mothers included the mothers' relationships with the father of the baby and/or partner, health, school, parenting, housing, behavioral health, and employment.</p>
<p>Family Resource Center – Program Evaluation Report. University of</p>	<p>Assess impact that Family Resource Center (FRC) services and participation have on families—assess</p>	<p>Parents described the ways in which FRCs provided supports for housing-related needs; child emotional and behavioral challenges and school-related needs; their own mental health needs; and basic material needs. Parents also described the value of the parenting classes, support</p>

<p>Massachusetts Medical School. March, 2019.</p>	<p>quality, improve services, and identify family outcomes</p> <p>Focus groups with 44 parents (14% of the parents were grandparents) receiving FRC services across the Commonwealth. Racially diverse: 30% White, 27% Black, 46% Latinx. Parents were from the FRCs located in Lowell, Fitchburg, Martha's Vineyard, Boston, and Greenfield.</p> <p>Key informant interviews with FRC staff, including Program Directors, Clinicians, and School Liaisons</p>	<p>groups and other activities, as well as the efforts the FRC makes to connect families to resources in the community.</p> <p>Overall impressions of FRCs by parents: (1) treats struggling and vulnerable parents with respect, (2) offers a community and the value of being able to connect with other families like theirs, (3) a place where they can bring a full range of issues – FRC is willing to tackle anything, (4) FRCs are “parenting” the parents</p>
<p>Commonwealth Preschool Partnership Initiative (CPPI) planning grantee reports. 2016-2018.</p>	<p>Preschool experiences, preferences, and barriers. Beliefs about school readiness.</p> <p>Local family surveys conducted in:</p> <p>Haverhill (n=361), Lowell (n=265), New Bedford (n=182), Pittsfield (n=102 preschool parents + n=180 kindergarten parents), Cape Cod (n=59), Lee (n=50), Worcester, Brockton, and Fall River</p>	<p>Parent demand is high for free, high-quality preschool.</p> <p>Both full-day and part-day programming needed, depending on family situation.</p> <p>Affordability and lack of information and/or communication are key barriers. Many families are ineligible for current programs due to income, or, are on long waitlists.</p> <p>Some parents require transportation.</p> <p>Cultural factors: some families prefer to keep child at home, may not know/trust programs if they are new arrivals, or may prefer cultural/language match.</p> <p>Parents value preschool for school readiness and child development, and indicate a range of priorities: social skills, pre-academic skills, transitions and school behaviors, independence.</p>
<p>MIRA Coalition “Issue Inventory” for MPI Kellogg ECEC Consortium. Massachusetts Immigrant and Refugee Advocacy Coalition (MIRA). 2018.</p>	<p>Focus groups of program providers and other stakeholders working with immigrant and refugee families with young children.</p>	<p>Family engagement: cost of living is high – families have little time due to working multiple jobs.</p> <p>Build engagement around what parents have time for, and what they prefer. Try numerous common times and locations, no perfect formula.</p> <p>Working with immigrant and refugee families: there is either no one serving the family or too many providers serving the family, creating confusion. Translation is essential. Lots of confusion about eligibility and rules.</p> <p>Dual-language learners (DLL): providers must emphasize home language as an asset, not a barrier, and reinforce “right to speak.” Continuum of training needs improvement, from early education to higher education. Not enough DLL professional development offered by EEC or others.</p>

Appendix B: Family survey—highlights from open response questions

Spanish Survey

Q13, 14 Which program or service has been most helpful? Why was that program/service the most helpful? De todos los programas y servicios, ¿cuál fue de mayor ayuda? ¿Por qué fue ese programa/servicio de mayor ayuda?

WIC (top response, 34%)

Porque me enseñó cuáles son los mejores alimentos para tener una vida más saludable

Because it taught me what the best foods are for a healthier life—Hyde Park, Boston parent

Desde q estaba embarazada de mi niño mayor de 7 años me an ayudado on todas mis preguntas y preocupaciones aún teniendo mi segundo niño de 4 años siempre me ofrecen todo lo q ellos pueden para ayudarme sea en las comidas y leche q brindan como nutrición informaciones y todo lo q yo tenga duda ellos buscan para contestarme todo lo q necesito y si no lo tienen buscan donde puedo conseguir más información ... la gente cree q esto solo es comida gratis pero ellos son más q eso.

Since I was pregnant with my eldest, who's 7, they have helped me with all my questions and concerns, and even my child, who's 4, they always offer me everything they can to help me, whether it's food and milk, or provide information on nutrition. Anything I have doubts about, they try to respond with everything I need, and if they do not have it, they look for where I can get more information ... people think it is only free food, but they are more than that. –Haverhill parent

Early Intervention (EI)

Me dio apoyo y asistencia con mi hijo prematuro. Su ayuda fue vital en el desarrollo y evolución de mi hijo. Su personal altamente calificado.

They gave me support and assistance with my premature son. Their help was vital in the development and evolution of my son. The staff are highly qualified. –Springfield parent

Child care that is subsidized, including vouchers (EEC financial assistance)

No puedo pagar todo por mí mismo. Personas especiales cuidaron a mi hijo.

I can't pay the full cost by myself. Special people cared for my son. –Lowell parent

Play groups

Porque me ayudo mucho en en cómo jugar con mi hijo ayudo a socializarse con otros niños a leer libros, aprendió manualidades a compartir tanto padres y niños nos ayudo a trabajar y jugar compartir muy bonito me encanta.

Because it helped me a lot in how to play with my son, it helped him to socialize with other

children, to read books, he learned crafts, to share. It helps both parents and children to work and play and share very nicely. I love it. –Allston, Boston parent

Q15 Do you have suggestions to make any of the programs more helpful? Please tell us. ¿Tiene sugerencias para cómo hacer que uno de estos programas sea de mayor ayuda? Por favor díganos.

En los talleres y programas para padres deberían tener diferentes horarios y ofrecer cuidado de los niños, para que así haya mayor participación de los padres. También un poco más de promoción de los mismos.

In workshops and programs for parents they should have different schedules and offer childcare, so that there is greater participation of parents. Also a little more promotion of them. –Hyde Park, Boston parent

Hacer campañas en tv radio etc

Make campaigns on tv, radio, etc. –parent, town not given

Mejor comunicación de los proveedores con los padres.

Better provider communication with parents. –Lowell parent

Más reuniones para informar a los padres sobre la educación de sus hijos

More meetings to inform parents about their children's education –Springfield parent

Una forma de hacerles llegar a los padres más información de los diferentes programas que hay porque más de la mitad de los padres incluyéndome no sabemos de muchos de los programas o solo lo escuchamos por personas escucharon de otra persona quizás haya un programa que me pueda interesar para mis hijos y ni se que exista.

A way of getting more information to parents about the different programs that there are, because more than half of the parents, including me, don't know about many of the programs, or we only hear it from people that heard from someone else. Perhaps there's a program that might interest me for my children and I don't even know that it exists. –Haverhill parent

Q17 What programs or services for yourself or your children would you like to see more of in your community? ¿Qué programas o servicios para usted o sus hijos le gustaría ver más en su comunidad?

Diversos idiomas

Various languages –parent, home town not given

Grupo de apoyo a los padres de otros idiomas

Support groups for parents in other languages –Northbridge parent

los que sean necesarios para una buena educación

those [programs and services] that are necessary for a good education –Dorchester, Boston parent

Orientación temprana de temas que sean de crecimiento personal para los niños
Early guidance on issues related to children's personal growth –Lawrence parent

Programas para niños y padres
Programs for children and parents –Hyde Park, Boston parent

Day care que apliquen todas las clases sociales
Day care that all social classes can apply for. –Holyoke parent, middle income, not eligible for child care, has participated in play groups and parenting classes

Sinceramente es la primera vez que conosco estos programs 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

Grupos de deportes para niños
Sports groups for children –Lynn parent

Programas de nutrición y Zumba
Nutrition programs and Zumba –Dorchester, Boston parent

Un programa donde puedan ejercitarse o hacer alguna actividad motora en el invierno
A program where they can exercise or do some motor activity in the winter –Hyde Park, Boston parent

English Survey

Q13, 14 Which program or service has been most helpful? Why was that program/service the most helpful?

Private-pay child care (top response, 33%)

We have an absolutely incredible daycare, however, it is just barely something we are able to afford. My partner and I both work in education and have made many financial sacrifices to send our child to this daycare because we value the educational opportunity that it provides her. We are currently expecting our second child and applying for tuition assistance to ensure we can send our second baby here as well. We are grateful to have a daycare with two lead teachers who have 25+ years of experience in the field, a school that is dedicated to professional development, supportive of parents, values play, social interaction, and above all, loves our child. They provide developmental portfolios twice a year, meaningful face time with both my partner and myself at drop off and pick up, and communicate daily using the

Kaymbu app. We receive daily photos, projects sent home, parenting resources, conference meetings, etc. They took an hour with us before our family joined the session to sit down to get to know our daughter and us as a family. As new parents, I feel incredibly supported by this daycare. We spent about 6 months at another facility in the same town and are blown away by how incredible the communication is with our current system. Philosophically, I struggle with the fact that in a state as progressive and focused on education as MA is, money can buy you such significantly improved childcare. –Concord parent

I am employed as an early childhood educator at my son's private school. I have been given an accommodated schedule to have him enrolled part-time with a 1/2 cost discount on tuition. This is the only way we could afford such a high-quality program. –Billerica parent

They are a customer service based provider. They make sure my child's education meets certain standards. Early Intervention flat out told me my son needed to stay at an abusive daycare because she already had the staff trained... she ignored my concerns with his care. – Sudbury parent

Because having my 3 yr old in day care and almost 5 yr old in Pre-K allows me to work full time. –New Bedford parent

It's the only one we use. I wish we qualified for more support. The cost of living and a child in Cambridge is too much. –Cambridge parent

We were very lucky to find someone we trusted who has lots of flexibility to help our family pay our bills while helping our son grow. –Worcester parent

Play groups (second response 22%)

The playgroups offered by Project Connect Family Center in Attleboro mimic a pre-school with play stations, hand washing, snack, and circle time with singing. I feel that it provided a great transitional stepping stone for real pre-school. –Attleboro parent

The CFCE Building Bridges program in Uxbridge, MA, has been a great resource for my child and I. It has helped me understand my child's needs and behavior. The instructors have made us feel welcomed and comfortable. It has also greatly helped with my child's development and social skills. We both love it and register every time it is being offered! I will be forever grateful for this program and the opportunity to be a part of it! –Whitinsville parent

Gets me and my 2 children ages 2 and 4 out of the house, on a routine. Builds social skills, healthy emotional support for all. I'm a stay at home mom on very tight budget, these programs save my sanity alleviates isolation and have countless benefits for my children. – Dennis parent

Didn't ask for income guidelines, which every other place asked for and low-income families always got preferred. Our family was always over income, due to it we always got put on the waitlist. I just got turned away and felt I had to be poor to get my child a early education. –

Haverhill parent

Early Intervention (EI)

Corrected a congenital problem. Convenient, free, professional, friendly. –Northampton parent

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

Improved my child's gross motor and speech delays. Also it's like having a parenting consultant every week. Any time I have a question or concern I have someone to ask. –Arlington parent

E/I in NH is on top of meeting and helping out families of children with disabilities. Unfortunately there's nothing in NH that supports Deaf babies learning so we have to commute to MA for the learning centers' Parent Infant Program 2/week. –Concord NH parent

Head Start or Early Head Start

The programs focus is the family. So many doors of knowledge open up instantly. The monthly meeting have so much to offer and if you are a private person speaking to the teachers one on one or the family advocate really helps. –Easthampton parent

A Home visiting program (of any kind, not Head Start home visiting)

Because the providers of the program are deaf and use ASL like me and my children. Communication is completely accessible and I feel included and informed. They are the most knowledgeable In ASL, deaf community and culture as they provide for my deaf children and our family. –Belmont parent

WIC

I was a new teen mom and Wic program was very resourceful and non judgmental. –Dorchester, Boston parent

WIC was the most helpful program because it provided my family's foundational needs (food) when we needed it. Unfortunately, WIC ridiculously restricted what types of food we could buy, essentially treating us (clients) like children incapable of making good food choices. I suppose shame on recipients is the price society demands for giving vulnerable families a handout. I sure felt it when I was at the check-out counter with a melting-down 2

year old and infant strapped to my chest, being told by the clerk that my peanut butter was the “wrong” kind, even though it cost the same as the “right” kind. So I sucked up my pride and took my melting-down toddler past the frustrated and embarrassed-for-us people behind us in line, all the way back to the peanut butter aisle to get the “right” peanut butter. More walking around the grocery store was the last thing she needed, but we were forced to do it because of the inflexibility of the program. Overall, the program is vital because it provides food to the most vulnerable. However, WIC could be SO much better at helping people by eliminating the shame and inconvenience its restricted choices foster. (And also, very few people need THAT much milk, but could use other things not on the approved list.) The newer fruit and veggie vouchers, which are much more flexible for clients, are a great example of better. –

Canton parent

Parenting education classes or workshops

Because the topics were relevant and helpful to understanding how I can be a better parent. I like “mom and me” things, but to be honest, as a single parent, the things I get the most value out of as a parent, are the ones where childcare is provided and I can connect with other parents and early educators. It’s most helpful for me to have the time to connect with other adults and to learn more about being a better parent from people who have the information. –

parent, town not given

Child care that is subsidized, including vouchers (EEC financial assistance)

Great Program I could otherwise never afford. –Danvers parent

Our daughter has learned so much and grown through her childcare at the Y. –Beverly parent

Convenient meeting times and locations. Easily accessible for questions. Very helpful, I don’t think I would be able to work without it and afford to take care of my boys. Things are tight. –

Athol parent

Other

New Moms’ Group at Little Lovage Club was great because it was a playgroup, support group, and information sharing all in one. I also like when our schools have their leaders speak to parents, and when they’ve brought in parenting speakers...builds community and is informative at the same time. –Boston parent

I can’t pick between his EI and preschool teams. They were both helpful in their own ways for the stages we were at for my son. My second EI coordinator was key in getting me into second opinions for ASD and hearing loss diagnoses while school picked up and went forward right after getting these diagnoses (started school 3 months after ASD diagnosis and 3 days after finally getting his hearing aids). –Medway parent

Q15 Do you have suggestions to make any of the programs more helpful? Please tell us.

Provide more story times across the week and during times working parents have off. For example, I wanted to bring my toddler somewhere for Veterans Day but every library was closed. Didn't know of any playgroups. –Auburn parent

The playgroups suggested through EI were full of sick kids and dirty toys. My son had a compromised immune system and that was his only opportunity to interact with children his age and we couldn't continue going because he kept getting extremely sick from the germs! Toys NEED DAILY SANITATION and parents CANNOT bring their sick kids!! –Pepperell parent

I make too much money for MOST of the programs listed. And I'm not rich. Problem 1. Childcare is astronomical and I am not poor enough for help, so my child stays with family. There's no help for the middle class that we don't pay for. That said, lactation is FREE at BIDMC and it's lovely because I had a health scare and they helped so much. –Dorchester, Boston parent

Early Intervention was helpful in the beginning, but we ended up switching to private physical therapy for our daughter in order to be more specialized with her care (I wouldn't have done this if EI had provided a therapist specific for the PT). It would be great if our private daycare was subsidized in some way (in terms of being more helpful to our finances). 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

Playgroups and parenting classes are never held on weekends. Feels like these resources are only for stay at home moms, but working moms need them too! –Boston parent

Reach out to every child related business and let them know what services you offer. Leave information at the hospitals or form a coalition where all hospitals must tell new parents about ALL the opportunities in their area regardless if the hospitals make a commission off those businesses or not. –Concord, NH parent

Currently, there is a disconnect between agencies that provide child care vouchers, particularly for foster children. There is Family Day Care Inc and Child Care Choices; they do not communicate. It can also be challenging to travel within work hours to complete paperwork, and renew paperwork, for EEC voucher. There should be ways to complete - at the very least - the renewal 100% online, so that parents do not need to miss work. –Brighton, Boston parent

Separate children with anger issues or developmental issues who are violent or aggressive from other children. Too many times my child has been abused by the two listed above, and by parents that struggle to control them. –parent, town not given

More communication. The center, us and the home care provider are very stand-alone. The provider comes to the house and that is it. We barely communicate with the provider and never hear from the center. They have my email. Would love more education/ information that might be helpful to the education of our premie twins. –Plymouth parent

Let disabled people have more information on how to go about qualify for childcare. I kept getting turned down due to dta telling me that I had to work or do the school program, which is impossible for me due to the amount of appointments I have to go to to be able to keep myself straight, so that I could be a mother. Even my dta worker couldn't guide me. And new England farm workers requires you to work.... I feel like the system forgot about mental health needs, and people like me that fall into that category –Holyoke parent

Year round coverage. Gaps in June and August between summer and school year programming are hard on families. Websites should be updated regularly and be set up considering the user experience. Old sites with poor architecture make it hard for parents to find what they need. Public schools rely on websites to keep parents informed but the sites are not user friendly it updated quickly. –Wakefield parent

More providers in the community need to be aware of services for young children and refer all families. –Tyngsboro parent

Q17 What programs or services for yourself or your children would you like to see more of in your community?

Combination mom/kid outing where the parents and kids get to do separate activities. –Rowley parent

Parent/child yoga!!! Spanish language programs - to help families who are trying to raise their kids to speak two or more languages!!! It is IMPOSSIBLE to find Spanish language support on the North Shore - focus is always on teaching children English. Languages are important for developmental and cultural reasons!! –South Hamilton parent

For my children I would like to see more fun activities, like going on a field trip exploring new things. I do really like the playgroup and like for it to be more than once a week. For parents if they can provide at least a bus pass for those who doesn't have a car to bring their children in the bus.—Dorchester parent

Affordable sports, dance, theater, music instruments, arts, self defense classes –New Bedford parent

Behavioral counseling for non early intervention candidates –Swampscott parent

More weekend programs for young children through public libraries and community centers. More information and access to parks and recreational facilities to provide safe places for kids to play and explore. Pop up children’s museums and family friendly events should continue to provide more frequent access to affordable engagement opportunities.—Salem parent

Fun weekend events for the whole family. Or date night events where the kids play and we get grown up time. –Brighton, Boston parent

I would like to connect more with other moms/families –Lenox parent

Play groups!!! And affordable child care; my mom watches the baby while I work because we can’t afford day care. –Somerville parent

Appendix C: Family focus group details and notes

Overview

The Massachusetts Partnership for Infants and Toddlers (MPIT) conducted family focus groups to complement the more quantitative data collected via the family survey. The goal of the focus groups is to build a comprehensive analysis of what is working, or not working, for birth-5 programs and services.

The focus groups were also designed to reach families who were not being reached by the survey. A review of the demographics of the initial wave of survey respondents showed a sample with higher income and education levels, and predominately white. Focus groups were planned to reach racially diverse, multi-lingual, and lower-income populations. MPIT targeted communities with higher need, including Gateway Cities.

Framing questions for the focus groups were drafted by the Steering Committee, with the intention of aligning with the “whole child / whole system” framework of the PDG B-5 grant, and also the family survey.

The MPIT project manager worked with MPIT partners to identify local host sites for focus groups, beginning with partners in Gateway Cities (small cities, typically with higher need).

Five focus groups were conducted from November 2019 to January 2020, in New Bedford, Springfield, Brockton, Yarmouth, and Quincy. Each focus group included 8–12 parents who currently have children enrolled in child care programs, some of these included home visiting programs, Head Start, public school preschool, ABA services, WIC, Early Intervention, and CFCE.

To ensure participation, local host sites provided a mix of child care, food, and stipends (gift cards). Translation was available as needed—the Brockton session included four facilitators, each speaking a different language (Haitian Creole, Cape Verdean Creole, Spanish, English), and the New Bedford session was conducted entirely in Spanish.

Through a wide collection of responses, the data uncovers that families are disappointed by programs that are not affordable, the lack of variety in programs that are offered, inflexible hours, parent involvement options, and a nonexistent central place to receive information about programs.

Focus group participants expressed opinions and needs that were similar to those of the family survey respondents.

With the information collected, early childhood professional and policymakers can improve programs, services and policies to better meet families’ needs. There is no “one-size-fits-all,” and programs must remain flexible and customizable in order to meet a wide range of family needs.

Quincy Focus Group

South Shore YMCA, November 21, 2019

Attendees

- 12 parents from two YMCA early learning centers, who were attending a Parent Workshop “How to reduce stress in your Child’s Life.”
- Format: Focus group framing question sheet was handed out to parents, who wrote down their responses, copied verbatim below. 25 parents attended the workshop, of which 12 submitted written responses.
- Facilitators: Sarah Cowan and Kristine Swan, South Shore YMCA.

For each of the four areas below, we want to know: what’s working and what’s not working to:

- help you find and connect to activities or program
- convenient times/locations where you and/or your child participate
- listen to any concerns or suggestions you have

1. Supporting you and your child in these early years (for example: playgroups, home visits, parenting workshops, etc.)

What’s working/positive

- EI Services
- I know about the programs given at the Y and QCAP
- Yes, Quincy Family Resource Center, Library groups, learning links, EI group, Quincy mom playgrounds

What’s not working/negative/suggestions

- Haven’t heard of much—I have received very little information
- Not enough playground and programs where we live
- I don’t know much about state programs & I find it not easy to get a whole lot of info on these- just Googling is not enough. There should be a way to deliver info to parents more effectively
- I’m not aware of a lot of the state programs but will be interested in knowing about them
- Want to know more about social activities for toddlers in Quincy over weekend
- Preschool/kindergarten would be perfect place for parenting training
- Multi-languages will be helpful
- After work hours help parents to attend
- When he was first born

2. Your feedback on child care or preschool experiences (for example: voucher for child care, Early Head Start or Head Start, Public School Preschool, etc.)

What’s working/positive

- I do know about these programs: voucher and EEC/Head Start, Early Head Start, Public Schools

We have the information about child cares in and around

- Yes, plenty of information (through EI)
- Preschool

What's not working/negative/suggestions

- We do not use voucher or any other help because of immigration process and etc. but child care is really expensive even in Y
- We do not meet criteria because we are good earners, but we have an immense amount of student debt
- Public school services for kid on autism spectrum in Quincy are not very available. There must be more educators with expertise and training to meet the demand.

3. Helping you if you are worried about how your child is doing (for example: talking to your doctor, filling out a screening form, etc.)

What's workin /positive

- Talking to doctor, talking to my child's teachers, looking online
- Yes, speaking with a doctor but also talking to old EI therapists
- Only E. Intervention
- Teacher/School, Doctor
- No issues

What's not working/negative/suggestions

- Not really helpful
- Want to know more information

4. Providing services if your child needs some extra help (example: Early Intervention (EI), Preschool Special Education, Mental Health services, consultation).

What's working/positive

- We did EI through pedi [atrician].
- Yes: Bay State, QCAP, South Shore Support Services
- Preschool
- Good

What's not working/negative/suggestions

- We haven't used any state services—would have liked social skills groups
- E.I. works for us but other than that, I'm lost when my son is above 3 years old
- We know some EI services—wanted to know how we can get more help from schools/other programs
- None, haven't heard much,
- Not enough or easy to access

New Bedford Focus Group

Family Resource and Development Center, January 23, 2020, 5:00–7:00 p.m.

Attendees

- 8 parents, all receive services from the Family Resource and Development Center.
- Format: group discussion in Spanish, with two facilitators asking questions and taking notes. Food and child care provided.
- Facilitators: Maria deMelo, School Liaison; Emma Rivera, Family Support Worker.

Summary notes by Maria deMelo with *Titus DosRemedios additions in italics*

After informing families as to the reason for the group, participants were asked which if any programs are their children currently enrolled. Of the eight participants, four of the families were involved in the following programs: (1) Home visiting program from Kennedy Donovan Center, (2) PACE Head Start, (3) Blessed Angels Academy, and (4) Public School Preschool.

Reasons children were not enrolled in any programming stemmed from costs (unaffordable), being unemployed, waiting on voucher approval, and lack of familiarity with the services offered in the area as a couple of participants came from Hartford, Connecticut which has a pre-kinder program for 3 & 4 year olds. This specific program does not currently exist in this area.

One parent gave advice to another who was on the voucher waitlist—if you say you have a job or are taking ESL classes, it will speed up the process.

Parents learned about programs from friends and family. One had enrolled in Early Head Start in Puerto Rico, and was familiar with the program that way.

People enrolled in a program would address any concerns they have about their child with program staff such as a director, teacher or the person in charge. The parent who has a child enrolled at PACE Head Start stated she would speak to her Family Advocate who not only helped enroll her in the program but remains in communication with her and has visited her at home a couple of times.

Participants who were not enrolled in programs/activities were not sure who they should speak to with any concerns. Parents were very helpful and immediately began sharing helpful tips.

The only father present in the group shared he goes to his child's pediatrician with concerns. His pediatrician helped him through referrals so that his child who has a variety of needs could be evaluated and receive the appropriate treatment.

Other participants agreed that the doctor is a good resource to start with to express concerns. Other options shared were Swartz, KDC, Child and Family Services, the Fernandes Center, Parents as Teachers program and Dr. Bare.

A participant in the group inquired about her need for a pediatrician for her hyperactive two-year-old. A couple of suggestions were provided which included the Greater New Bedford Community Health Center and the Pediatric Associates of New Bedford.

One parent shared that there had been a death in the family at home, possible reason for child's behavior change.

The parent who is enrolled in the home visiting program shared that when she expressed similar concerns of defiance and hyperactivity the home visitor shared that many of the child's behaviors are appropriate based on the current age and stage of development.

Participants shared that Jacob's elementary school also has a preschool program and sometimes students behave one way at home and another way at school.

What's working?

- PACE Head Start (PHS) location
- PHS providing families with a greater understanding about raising a son and dealing with challenging behaviors (child enjoys attending program)
- The existence of Family Child Care centers
- Communication between CF Services and PHS works
- KDC Home Visiting Program
- Child & Family Services Care Team meetings with other providers of the assigned family
- Support and assistance from Family Resource and Development Center staff
- Word of mouth
- Partners. For e.g. Gifts to Give staff/volunteers directing families to the resource center for support

What's not working?

- DTA and DCF not communicating well with families or other community partners
- PHS part day schedule. *Half-day care prevents a parent from being able to get a job.*
- Difficulty finding a child care center
- Having a relative babysit as it's not a long-term solution; it limits the relative from being able to acquire adequate employment
- Time taken to process voucher
- Calling Child Care Works as no one picks up the phone or responds in a timely manner
- The non-existence of Pre-Kindergarten programs in this area

Brockton Focus Group

Adult Learning Center, 211 Crescent St., January 8, 2020, 3:00–5:00 p.m.

Attendees

- 8 parents, invited by facilitators through CFCE network.
- Format: one-on-one or small group discussions guided by multi-lingual facilitators at three separate tables based on primary language: Haitian Creole, Cape Verdean Creole and Spanish.
- Parents guided through a shortened, paper version of the family survey, facilitators recorded answers.
- Coordinator, Joni Block, Brockton CFCE Coordinator.

Number of children and ages

For the parents that provided this information, there were a range of children, 1-4 per parent, and at various ages from 3 months to 19 years.

“Early Education Lead Teacher” written on one form –presumes parent is a teacher.

1. QUESTIONS ABOUT YOUR CHILD: What topics do you have the most questions about regarding your child’s needs? [Check all that apply] Sorted by number of responses

- Education—4
- Social skills—4
- Developmental delays or disabilities—2 note: Hearing, Contractive Finger—difficulty with holding
- Language/speech—2
- Behavior—2
- Reading—2
- Other (please specify): **Mental health**
- Food/diet; Health and safety—0 responses each

2. WHERE DO YOU FIND INFORMATION: If you have questions or concerns about your child, who do you ask? [check all that apply] Sorted by number of responses

- Family—4
- Doctor/pediatrician—3
- Friends and neighbors- 3
- Internet searches—3
- Other (please specify): **Depending on the situation, Facebook groups**
- Child care provider—0 responses

3. 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, 'Yes—enrolled' or 'No'] Program descriptions provided but omitted here. Sorted by number of responses.

- WIC Women, Infants, & Children (WIC) Nutrition Program—4
- Play groups—4
- Early Intervention (EI)—3
- Public school preschool—3
- Parenting Education/Workshops—Classes, meetings YOU have participated in—3
- Head Start or Early Head Start—1
- A Home visiting program (of any kind, not Head Start home visiting)—1
- Private-pay child care (family pays full tuition)— 1
- Child care that is subsidized, including vouchers (EEC financial assistance)—0 responses

4. How did you find out about the program you used? ... For example: family, doctor, or friends, MA 211, etc.

- doctor's office (2x)
- Case Manager—Father Bill's¹, the neighborhood, family

5a. For programs you are/were enrolled in, were your family's needs met by the following for each program? 'YES / NO' or skip.

Name of Program	Convenient schedule	Convenient location	Good program content	Good outreach and communication by program	Matched my language or culture	Cost was affordable
WIC	Yes One response-finds her needs meet with what WIC offers at this time	Yes	Nutrition, breastfeeding	Yes, they check in with you	None Enjoy that they have someone that speaks Spanish	Zero
Early Intervention (EI)	Met at location	Comes to you	Wonderful	Check	Check	Zero
Father Bill's	After school hours	Location is good	Coloring books, reading		Child being always around children	Daycare cost— Being around often

¹ *Father Bill's & MainSpring (Brockton, Massachusetts) - a registered 501(c)3 charitable organization, has been a leading innovator of ending homelessness. Their mission is to end and prevent homelessness in Southern Massachusetts with programs that provide emergency and permanent housing and help people obtain skills, jobs, housing, and services.

5b. What other needs does your family have?

CFCE, Separation anxiety, Child is not talking, childcare, attention span, Financial needs, Social emotional—Dad groups to connect and share, Mental health—for the entire family to stabilize

6. Supports for you... What is important to you about meetings or events organized by any program?

Sorted by number of responses.

- Food provided—**8**
- Talking to other parents—**3**
- Child care provided—**3**, note: family friendly
- Meets my language needs/offers translation—**2**
- Fun activities—**1**
- **Side notes:** familiar faces, Location: close to home
- Transportation provided; The topic—**0 responses each**

7. Communication... How do you prefer to receive updates from programs or services? Sorted by number of responses.

- Email—**3**
- Face-to-face meeting—**2**
- Text message—**2**
- Phone call—**1**
- Social media; Paper notice/flyer—**0 responses each**

8. Of all the programs and services, which was the most helpful?

- Early Intervention (EI); Head Start or Early Head Start—**1 response each**
- Other (please specify): **playgroups, story time, workshop**
- All other programs, zero responses.

Why was that program/service the most helpful?

- Socialization, talk to other adults*, learning something new, learning new techniques from parents, program (WIC) is very helpful because it helps with the nutrition needs.

9. If you or your children are not enrolled in any programs or services, why not? [Check all that apply]

Too expensive—**3 responses**

All other options, zero responses (No transportation to program; Location not convenient; Hours offered do not work for my family; Not available in my language; Not interested; Didn't know about program; Not eligible)

10. Wishes—What programs or services for yourself or your children would you like to see more of in your community?

- CFCE, Free cooking classes, Family fitness program (mindfulness)*, Overall, free extracurricular activities (swim, dance), Learning more about educational programs for my child

11. Today there are many online resources (websites, social media, apps) for parenting and early childhood. Do you use any of these online resources?

- Brain Building in Progress; PBS Parents; Vroom—**1 response each**
All other options, zero responses (OneToughJob.org; Care.com; Centers for Disease Control (CDC), including the Milestone Tracker App; Ready4K; ReadyRosie)
- **Other** parenting/early childhood website/social media (please list):
Facebook, Instagram, WhatsApp, South Shore 365 website, CFCE
 - [one unnamed app]Not completely free, free only for a limited time
 - Notes: \$186/3 days—too expensive

12. What is the birth year of your children who are younger than 10 years old?

- A. Child one: 2 years, 2011 (9 years), 2015 (5 years), 2010 (10 years), 2019
- B. Child two: 2016 (4 years),
- C. Child three: 2 years,
- D. Child four: 11 months

13. What is your race and/or ethnicity? You may choose all that apply (U.S. Census categories) Sorted by number of responses.

- Black or African American—**4**
- Latinx—**1**
- White—**1**
- American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander- **0**

14. What language is spoken most often in your home?

- Haitian–Creole; English; St. Lucian Creole; Spanish

15. What is your highest education level?

- Some high school—**0**
- High school graduate or GED—**1**
- Some college but no degree—**2**
- Associate degree (AA)—**0**
- Technical school—**0**
- Bachelor’s degree (BA) from a college or university—**2**
- Graduate degree or higher—**1**

Other notes

- Form an organization for families and children
- *Grants*; Childcare—Too expensive
- 7—4—non-working or working,
Development delays— words, Childcare—at least 8 hours

Cape Cod Focus Group

M. E. Small Elementary, West Yarmouth, January 21, 2020, 5:30–7:30 p.m.

Attendees

- 12 parents, invited by facilitators through CFCE network.
- Format: parent café, small group discussion at three separate tables, three main questions / prompts, parents discussed and wrote on chart paper then shared summaries with the full group.
- Facilitator, Cindy Horgan, executive director, Cape Cod Children’s Place, Cape regional CFCE coordinator.

Q1: Where do you get information on activities, programs, services, and child development? Who do you get information from?

Summary notes by Titus:

- No central place to get information, have to go to many websites/programs, or know the right person.
- Hours don’t always work, not enough offered on weekends.
- CFCE coordinators are key: once you get to know them, “you’re in the pipeline.”
- Plus, parents can make friendships. A town is isolated from services. You’re ok if you are in a program or service. If you’re isolated or shy, you don’t know what you don’t know.
- Better interconnected service providers. They don’t know what each other offers.
- Hospital and pediatricians should have this info. They don’t know about play groups, just give a binder of (health) info.
- Transportation isn’t working for all parents.
- Need more free activities, most cost \$.
- Town rec centers don’t cater to young children/families—they’re empty (many times).
- Importance of Early Intervention (EI). One parent moved from an off-Cape town two years ago and had no family/social connections on the Cape. EI was a lifeline, and critical source of help when she arrived. “If it wasn’t for EI ...”

Parent chart paper notes [*Titus’ additions in italics*]:

Where we get info: Google, Facebook, Early Intervention, CFCE, CapeCodChildren’sPlace.com, Friends, Libraries, Macaroni Kid

Take Aways:

- Provide One Central Hub for Activities
- More opportunities for full classes
- Centralized information & schedule
- Library websites (separated)
- Personal connections only
- Hospital and pediatricians with male information (they have EEC)
- Many organizations (don’t know each other)
- Indoor activities, drop in
- Transportation isn’t working (activity)

- Sports (cost \$) → focused playground
- Nights and weekends
- What's the free stuff (?) [parents discussed needing more free activities, most of what's available is unaffordable]
- [There should be] Somewhere to go always [at any time]
- Perfect time: playground alternatives—early morning/evening
- Age appropriate activities at different times.
- 0 → 2: 10 to 12/1 & 4/6
- 2 → 5: after school & evenings—5:30–7:00 p.m. & weekends
- * Rules about food:
- LATER
- Coordinated with school hours for 2nd kids [difficult for parents when schools / school-age schedules vary from B-5 program schedules]
- EARLY drop in (8:00 a.m.–12:00 p.m.)
- Parents training for facilitating groups—rotating “hosting”
- Outdoor adventure activities in winter—school vacation
- Music class/dancing
- Language groups (Spanish/Portuguese)

People who are isolated from that connection

- Libraries = nothing for little kids—social media
- Through friends— Mary Wilson
- Cape Cod Children's Place + Mary Wilson = CPCs
- Finding the pockets of info
- You don't know what you don't know
- Positive sign—once connected to Mary or Cindy... get info

C.C. Hospital breastfeeding group

- Groups formed → in daycare = lose connection because not *[available]* at evenings
- Suggestions: pediatricians and daycares

Q3: Times and locations, what works and what doesn't?

Summary notes by Titus:

- Hours “Early Bird” 7:00/8:00 a.m.–12:00 p.m., 7 days, more afternoon; “Fringe” hours
- No place for kids to play from 7:00–9:00 a.m. Need places to go at all hours 8:00 a.m.– 8:00 p.m.
- Holiday/vacation activities are too expensive (or non-existent—they close!)
- Offerings More free classes, health/safety, movement dance (like at Klub Kids); Kids yoga; Exercise classes—active/movement & mommy + me classes
- No Spanish speaking support group—“we're a bilingual family, and it would be nice”
- Parenting groups for single parents
- Co-ops + “we work” type places, with child care
- Ages Age appropriate groups, groups by age. Coordinate times for multiple kids (multiple ages)

Parent chart paper notes [*Titus' additions in italics*]:

Perfect World

- Early bird classes; Everyday classes; More afternoon classes
- More daddy & me classes
- More free classes
- More safety classes—fire safety—CPR

- Swim classes @ local hotels
- More stranger danger info
- More age apt. groups
- More movement dancing; More Miss Lori classes—Klub Kidz; Kids Yoga

Limited things at night

- At night →distance + choice for p.m. options
- Time
- Minus sign—child care is offered
- Weekends = super early—7:00 a.m.-ish
- ****Less events from 12-13 naps**** →before or after 12:00–3:00 p.m.
- Weekdays = after 5:30 p.m.–7:00/7:30 p.m.
- *Vacation weeks
- Exercise class
- Single parents [*offer more parenting/workshop groups for them specifically*]
- + drop in on weekends

Q3: What is your experience with early education and care (think “brain building”)? What is your feedback on preschools: cost, location, schedule, curriculum, transportation—any aspect.

Summary notes by Titus:

- Make it less burdensome.
- Free, year-round, better calendar alignment between public school and private
- Workforce underpaid
- Add more parent involvement in the classroom, help with snack, rotate
- Consistent quality standards across programs
- Universal. Provide (at least some amount of) preschool for all
- Affordable options needed. One parent on voucher waitlist for 2 years, when she finally got a voucher, no one would take it.
- Hours: 9:00 a.m.–3:00 p.m. doesn’t work, “shoulder time” needed 3:00–5:30 p.m.. And it shouldn’t be so costly.
- “Wraparound care”
- Cultural shift—how do we create it?—value and pay for it—see other countries.
- Other states have free preschool and kindergarten.
- Hard to take child out of public preschool because got a voucher + hours were better—Both didn’t want to leave it
- More options for September babies—missed kindergarten by 1 day—had to do a third year of preschool

Parent chart paper notes [*Titus’ additions in italics*]:

Affordable Preschool

- “I was on a waitlist for a voucher for two years. When I finally got it, I couldn’t find anyone who would take it.”
- More vouchers and more slots
- Open earlier, stay later; Especially 7:00–9:00 a.m., 3:00–5:00 p.m.
- More \$ for daycare workers
- Most childcare is 9:00 a.m.–3:00 p.m.. For care for full time workers (3:00–5:30 p.m.) costs are high. Care options are limited
- Head Start does it all! Found them! Nutrition, advocates, transportation.
- If you make more \$42,000 before taxes then you don’t qualify. Raise that amount at least \$20,000/year more. Stop squeezing middle class families!

- No parental leave. We need paid parental leave. There are models for this from other countries like Sweden, Norway, Germany...
- No job security for new parents; We need job security for new parents
- Quality child education, not just day care
- We need a cultural shift to prioritize early education and compensate early childhood workers
- Co-op information [brief discussion among parents on how to start a co-op]
- Early education: language support (Spanish/Port.)
- Minimum for every kid (universal preschool)—FREE OPTIONS
- Flexibility with schedules
- Transportation
- Food/school provided/rotating schedule
- More options/choice (more preschools)
- Information/standards of care and ratings and assessments (services music/art)
- *[increase]* Pay for preschool teachers (↑)
- Parent involvement options
- Free preschool
- Summer support; Year round preschool
- Private/public school matching schedules

What's Missing in Early Education

- More options for Sept. babies—late kindergarten
- More music classes w/limited spots (offer more)
- No transportation w/kid without IEPs
- Community involvement
- Lower prices on preschool—intergraded program; Lower prices on programs

Springfield Focus Group

Square One, January 29, 2020, 5:00–7:00 p.m.

Attendees

- 8 parents who serve on Square One’s Young Children’s Council.
- Format: discussion was integrated into a Council meeting.
- Facilitator: Jenise Katalina, Chief Family Services Officer, Square One.

1. What support do you and your child receive in these early years? (preg-5yrs)

Free lunch, Food Stamps, ABA services, pre-school, Square one, voucher for day care, early intervention.

2. What works?

My son learned how to speak more, Voucher for day care so I can go back to work, Speech therapy for free, DTA, Square One helped me understand my child's development.

3. What doesn't work?

It (services) ended when my child started Kindergarten, No voucher for daycare because I make too much money not enough support to pay for tuition, early intervention ends and then you have go through the schools. They take a long time.

4. How has it been to access child care and /or pre-school? Why?

Easy, Cut it tight on an opening spot for when it came time to start work, Signed her up ahead of time, Pre - school was easy. It is harder to find infant and toddler care.

5. How could it have been better?

If I had help applying for voucher, More lenient on attendance, Knowing places with openings already, I had to keep calling around until I found somewhere, If I had qualified for a Voucher.

6. How do you get help if you are worried about how your child is doing?

Square One workers, Talk to family, friends, teachers, Ask doctor, Talk to my home visitor.

7. What services helped?

WIC, Square One, Speech therapy, Pediatrician, ABA services, Early Intervention.

8. What did not help?

School not believing there's a problem, the questions on income if it was income-based, Child is smart but has behavior problems and teachers wouldn't give him a support plan.

9. What services do you get if your child needs extra help?

Behavior therapy, Voucher for free pre-school daycare. Speech therapy, Early Intervention, Didn't get any until the age of 7.

10. How did your child get these services?

Through early intervention, By being homeless in shelter and collecting DTA, Through doctor, ABA services, My home visitor.

11. What did you like about these services?

The help, the teachers, the work, They actually do want to help people, They help your kids develop better, They know what it is like to be me.

12. What don't you like about these services?

That it ended when he started school, Kids aged out. I still wanted help, The fact they don't keep calling if you're on a waitlist.

13. Anything else to share?

Was not available for services because my son was "too smart," What other places for services should we go? There is no list of programs and services.

Appendix D: Family Survey

Do you have children birth to age 5? If you do, then we need your help.

Massachusetts Partnership for Infants and Toddlers is a new statewide early childhood collaboration, and we are helping the state write a plan for programs and services for young children. We need your advice and ideas. We would like to know what is most useful and helpful for families.

This survey will take 10-15 minutes to complete. You may skip or not answer any question. It is voluntary and answers will be kept confidential. After the survey period, three (3) respondents will be chosen at random to win a \$100 gift card of their choice.

Thank you.

1. What topics do you have the most questions about regarding your child's needs? [Check all that apply]

- Health and Safety
- Education
- Social skills
- Language / speech
- Developmental delays or disabilities
- Behavior
- Reading
- Food / diet
- Other (please specify): _____

2. If you have questions or concerns about your child, who do you ask? [Check all that apply]

- Doctor / pediatrician
- Family
- Friends and neighbors
- Child care provider
- Internet searches
- Other (please specify): _____

3. 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, 'Yes—enrolled' or 'No']

Yes No

- WIC** Women, Infants, & Children (WIC) Nutrition Program. Provides healthy foods, nutrition education, breastfeeding support, and referrals to healthcare and other services.
- Early Intervention (EI)** A program for infants and toddlers (birth to 3 years old) who have developmental delays or are at risk of a developmental delay.
- Play groups** Small groups for families and their infants and toddlers, typically provided in welcoming community spaces such as libraries, schools, and community centers. May be provided by a CFCE, a family center, or other agency. Parents and caregivers interact with their children through play, connect with one another, and learn about their child's development.
- Parenting education classes or workshops** Classes for parents to learn about any topic related to parenting. This could be one class or a series of classes, offered by any organization in your community.
- Head Start or Early Head Start** Early learning and school readiness program for children from birth to age five from low-income families. Head Start emphasizes the role of parents as their child's first and most important teacher. Many Head Start programs also provide Early Head Start, which serves infants, toddlers, and pregnant women and their families, and may include home visiting.
- A Home visiting program (of any kind, not Head Start home visiting)** May include Healthy Families, ParentChild+, Parent Together, or another kind. Receive visits in your home from a trained family support specialist. Address the parent's and the child's health, positive parenting, play and learning, school readiness and/or injury prevention.
- Child care that is subsidized, including vouchers (EEC financial assistance)** Child care financial assistance for families in need who are eligible. You may be placed on waiting list if funding is not immediately available. Families pay a small fee. Typically at a center, family child care home, or private school.
- Private-pay child care (family pays full tuition)** Typically at a center, family child care home, or private school.
- Public school preschool / pre-K** Offered by your local public schools, typically located in an elementary school.

4. If you answered “Yes” for play groups, parenting education, or home visiting, who provided these services? [Open response]

The next four questions are in a table format, please answer what you can.

5 and 6. For programs you are/were enrolled in, were your family’s needs met by the following for each program? ‘YES / NO’ or skip.

Name of Program	Convenient schedule	Convenient location	Good program content	Good outreach and communication by program	Matched my language or culture	Cost was affordable
WIC						
Early Intervention (EI)						
Play groups						
Parenting education classes or workshops						
Head Start or Early Head Start						
A Home visiting program (of any kind, not Head Start home visiting)						
Child care that is subsidized, including vouchers (EEC financial assistance)						
Private-pay child care (family pays full tuition)						
Public school preschool / pre-K						

7 and 8. For programs you are/were enrolled in, are/were your family's expectations met by the program? 'YES / NO' or skip.

Name of Program	Helped your child	Helped you as parent	Program gave you information	Program made you feel that you belonged	Program respected your values, beliefs	Program recognized you as the expert on your child
WIC						
Early Intervention (EI)						
Play groups						
Parenting education classes or workshops						
Head Start or Early Head Start						
A Home visiting program (of any kind, not Head Start home visiting)						
Child care that is subsidized, including vouchers (EEC financial assistance)						
Private-pay child care (family pays full tuition)						
Public school preschool / pre-K						

9. What is important to you about meetings or events organized by any program?

- The topic
- Talking to other parents
- Child care provided
- Food provided
- Transportation provided
- Meets my language needs / offers translation
- Fun activities

10. How do you prefer to receive updates from programs or services?

- Face-to-face meeting
- Text message
- Phone call
- Email
- Social media
- Paper notice / flyer
- Other (please specify): _____

11. Do you or did you visit program websites or social media pages for information?

Name of Program	Do you visit program's website?	Do you follow program on social media?
WIC		
Early Intervention (EI)		
Play groups		
Parenting education classes or workshops		
Head Start or Early Head Start		
A Home visiting program (of any kind, not Head Start home visiting)		
Child care that is subsidized, including vouchers (EEC financial assistance)		
Private-pay child care (family pays full tuition)		
Public school preschool / pre-K		

12. Who has given you information on these programs and services? [check any that apply]

- Doctor / pediatrician
- Family
- Friends and neighbors
- Child care provider
- Home visitor
- Play group facilitator
- Other (please specify): _____

13. Of all the programs and services, which was the most helpful?

- WIC
- Early Intervention (EI)
- Play groups
- Parenting education classes or workshops
- Head Start or Early Head Start
- A Home visiting program (of any kind, not Head Start home visiting)
- Child care that is subsidized, including vouchers (EEC financial assistance)
- Private-pay child care (family pays full tuition)
- Public school preschool / pre-K
- Other (please specify): _____

14. Why was that program/service the most helpful?

15. Do you have suggestions to make any of the programs more helpful? Please tell us.

16. If you or your children are not enrolled in any programs or services, why not? [check all that apply]

- Too expensive
- No transportation to program
- Location not convenient
- Hours offered do not work for my family
- Not available in my language
- Not interested
- Didn't know about program
- Not eligible

Please say more (optional): _____

17. What programs or services for yourself or your children would you like to see more of in your community?

18. Today there are many online resources (websites, social media, apps) for parenting and early childhood. Do you use any of these online resources?

- OneToughJob.org
- Brain Building in Progress
- Care.com
- Centers for Disease Control (CDC), including the Milestone Tracker App
- PBS Parents
- Ready4K
- ReadyRosie
- Vroom
- Other parenting/early childhood website/social media (please list) _____

Now a little about you:

19. What is the birth year of your children who are younger than 10 years old?

- A. Child one _____
- B. Child two _____
- C. Child three _____
- D. Child four _____
- E. Child five _____

What is your race and/or ethnicity? You may choose all that apply (U.S. Census categories):

- American Indian or Alaska Native
- Asian
- Black or African American
- Latinx
- Native Hawaiian or Other Pacific Islander
- White
- Prefer not to say
- Other (please specify) _____

21. What language is spoken most often in your home?: _____

22. How would you describe your marital/partner status?

- Married or Partnered
- Single
- Separated, Divorced or Widowed

23. What is your highest education level?

- Some high school
- High school graduate or GED
- Some college but no degree
- Associate degree (AA)
- Technical school
- Bachelor's degree (BA) from a college or university
- Graduate degree or higher

24. From these categories, choose the one that represents your family's total income range from all sources:

1 = Less than \$5,000	7 = 50,001-70,000
2 = 5,000-10,000	8 = 70,001-90,000
3 = 10,001-20,000	9 = 90,001-120,000
4 = 20,001-30,000	10 = 120,001-150,000
5 = 30,001-40,000	11 = 150,001-200,000
6 = 40,001-50,000	12 = More than 200,000

25. How many adults are supported by this income? 1 2 3 4 more than 4

26. How many children are supported by this income? 1 2 3 4 more than 4

27. What town / city do you live in? _____

28. Massachusetts Partnership for Infants and Toddlers (MPIT) is a new statewide early childhood collaboration. Would you like to receive updates from us in the future?: ('No' or 'YES - enter your email address here': _____

29. If you checked "Yes" and entered your email address, you will have the chance to win a \$100 gift card for completing this survey. Three (3) respondents will be chosen at random to win. If you checked "No" but would still like a chance to win, please enter your email address or phone number so we can contact you if you win. We will not send you other updates.

Thank you for taking the Family Survey!

Visit the MPIT web page after February 2020 for a summary of the family survey results:
strategiesforchildren.org/MPIT.html.