

Access Committee - All Families Served Subcommittee  
Recommendation on Priority Populations  
February 2019

*Executive Summary*

The All Families Served subcommittee determined that a comprehensive review and update to the 2013 priority populations recommendation was needed since the priority populations list had not been updated since its initial inception five years ago. The review was in response to significant shifts to both the federal and state political landscape, emergence of new policies and priorities, and changing resources. The subcommittee developed a new recommendation that includes an updated priority populations list and new community-level priorities and risk factors, which will require Early Learning Council (ELC) cross-committee collaboration to fully address. In addition, system-wide alignment, professional development and staff support, and data collection, especially in regard to racial equity, continue to need improvement. The All Families Served subcommittee recommends that each ELC committee review the recommendations and consider how to integrate the recommendations into their committee work. We urge consideration of the priority populations by state agencies and other state advisory councils as well. It is the recommendation of this subcommittee to regularly review and update the list of priority populations every three years.

*Background*

In FY13, the Hard to Reach Subcommittee of the Family and Community Engagement Committee presented a final recommendation regarding underrepresented and underserved populations to the Early Learning Council, which was approved. The recommendation identified eight priority populations and encouraged communities and individual early care and education programs to increase their service to these populations. In addition, the committee recommended to the Governor's Office of Early Childhood Development that the seven Early Childhood Innovation Zones (pilot communities) identified in the Early Learning Challenge Grant engage in planning to increase service to those populations and that other committees of the Early Learning Council consider the populations as they conduct their work.

Since 2013, the committee has adopted a new name, the All Families Served Subcommittee, but its charge to improve access to early learning programs for the highest need children and families largely remains the same. The Illinois early learning community has largely embraced the priority populations identified in the 2013 recommendation, as evidenced by the intentional focus on these populations by the Innovation Zones and efforts to align enrollment priorities for the Preschool Expansion Grant program to the priority population list. In addition, general awareness of the unique needs of the priority populations, as well as the barriers they face in accessing high-quality early care and education programs, has increased among the Illinois early learning community, resulting in greater interest in developing policies and program models to serve our most vulnerable children and families.

Five years after the initial recommendation regarding priority populations was adopted, there has been a significant shift to both the federal and state political landscape that has brought new leadership, new policies and priorities, and changing resources. Additionally, the general population in Illinois has

experienced some changes as well. In consideration of these dynamics, and in recognition that the needs of children and families do not remain static over time, the All Families Served subcommittee determined that a comprehensive review and update to the priority populations list was needed.

In a series of meetings, the subcommittee reviewed the impact of the initial recommendation, studied data on children and families, and consulted with experts in order to update and affirm existing priority populations. A work group convened to consolidate the information from the subcommittee meetings to produce a comprehensive list. The subcommittee also worked to articulate a vision for engaging in rigorous efforts to provide excellent service and support to priority populations in all of Illinois's early care and education programs and services, and to ensure that the priority population recommendation can be a living document that continues to responsively guide the state's early learning priorities as the landscape continues to change with time.

### *Purpose of Priority Populations Recommendation*

Most state-funded early care and education programs have systems in place to identify and enroll priority populations; however, barriers to serving children and families with high needs persist. Many children who stand to benefit most from what early learning programs and services can offer remain unable to access these programs. Addressing these barriers must begin by clearly identifying who these children and families are and committing to increasing access to services across programs in a coordinated effort. Adopting a universally recognized list of priority populations can serve to not only galvanize the Illinois early learning community around a common goal of enrolling more children with high needs in our programs, but can also foster shared language and understanding across programs about the characteristics and needs of these particular populations, raise public awareness, and drive improvements to services that can and must include changes to program delivery and design, data collection, and professional development. Ultimately, the purpose of the priority population recommendation is to drive resources and attention toward efforts to improve access to high-quality, responsive services for children and families with the highest needs, and to promote coordination and alignment across the various parts of the early childhood landscape (prenatal to age 5) in service of that goal.

### *Priority Populations*

The subcommittee identified the following criteria for determining a population to be a priority:

- **At Risk:** Children and families who face economic disadvantage and a lack of a support system.
- **Under-served:** Children and families who do not receive equitable resources compared to other students in the academic pipeline and do not have adequate access to early childhood programs due to the programs' location, cost, enrollment requirements, or capacity to serve the comprehensive needs of families.
- **Measurable:** Programs can identify and track the population for the purpose of evaluating changes to a population's access to programs and services.
- **Timely:** Children and families whose needs or challenges are particularly relevant to the current landscape and/or conditions.
- **Distinctive:** A population that is well-defined and standalone.

The following populations were determined to meet the criteria:

- Children of teen parents
- Children experiencing homelessness
- Children in families in poverty or deep poverty
- Children/families with Department of Children and Family Services involvement
- Children with disabilities
- Children of migrant or seasonal workers
- Children in families with low caregiver education attainment
- Children in families that face barriers based on culture, language, and religion
- Children of a parent or legal guardian with a disability
- Children/families with refugee or asylum status
- Children in families who face barriers due to immigration status

### *Community-level Priority Risk Factors*

The All Families Served Subcommittee also identified community-level priority risk factors and recommends that resources be prioritized for programs and services in communities throughout the state that have these characteristics. Examples of resources that should be deployed to priority communities include, but are not limited to, targeted professional development and staff supports that appropriately address community needs, funding for program and service slots, and funding to support time for staff to engage in collaboration both within early childhood programs and across other critical service systems that meet the needs of families with more complex needs. Program design should intentionally consider these community-level priority risk factors in order to appropriately address the needs of children and families in these environments. Finally, the subcommittee recommends that additional cross-committee work with the Early Learning Council occur to address community-level risk factors.

The subcommittee identified the following community-level priority risk factors:

- High unemployment/poverty rates
- High rates of substance use
- High rates of community violence
- High incarceration rates
- Rural isolation

### *Additional Risk Factors and Considerations*

Many important risk factors were considered when determining the priority populations. Although worthy of additional discussion and potential work, not all risk factors were deemed appropriate for inclusion in the priority population list at this time. The primary reasons for excluding some of these risk factor categories and characteristics include the fact that some simply did not meet the criteria set forth by the committee, some overlapped significantly with other populations that are already included and were therefore likely to still be impacted by future policy and practice improvements, and some did not

constitute a defined “population” but rather a child or caregiver characteristic that may require a more clinical intervention that may be outside the scope of practice of many early learning programs and services. The All Families Served subcommittee commits to continue to work as necessary to improve services to children and families who experience risk factors of all kinds that create barriers to early care and education programs and services.

### *Data Challenges*

Collecting data on enrollment and various challenges faced by priority populations is essential for state and local systems to properly remove barriers to enrollment in high-quality, responsive services and programs. In order to serve children and families better, we need to understand the landscape of who is receiving services and who is missing from early care and education programs. Unfortunately, some state systems do not currently collect all of the relevant data on priority populations and may not currently have the systems in place to do so.

As data collection efforts continue to have challenges, access to data on the racial breakdown of the families and children of priority populations becomes even more difficult. While the racial breakdown of children enrolled in different state-funded programs does exist, alarmingly, the racial breakdown of priority populations enrolled in programs is only available for children experiencing homelessness who are enrolled in Early Childhood Block Grant funded programs. Data of the racial breakdown of enrolled priority populations would allow programs to focus their efforts to build equity in services for these vulnerable children and families, of which children of color are often overrepresented. In addition, the byproduct of collecting racial data is raising awareness and increasing knowledge of the racial inequity that exists on a wide scale. Systems at all levels need to make tracking and collecting data a priority.

### *Recommended Action Steps*

As the All Families Served Subcommittee continues its work, it will focus on recommending policy, funding, and resource allocation changes to serve more families from priority populations, as well as providing support to communities, state agencies, and other ELC committees as needed as it relates to expanding access to high-quality, responsive programs and services for priority populations. Additionally, efforts to build racial equity and improve data collection and usage will undergird future work of the subcommittee. It is also the recommendation of this subcommittee to regularly review and update the list of priority populations every three years.

The All Families Served subcommittee calls on state agencies and other ELC committees to consider priority populations in all other recommendation development and initiatives, whenever possible and relevant. The All Families Served Subcommittee stands ready and willing to work in partnership with each of these governmental and advisory bodies to implement the following recommendations.

The All Families Served Subcommittee recommends the following action for state agencies:

- State agencies that fund early care and education programs and services should review the recommendation and consider policy, alignment, data collection efforts and other changes that reflect a commitment to improve services for these priority populations.

- State agencies should review this recommendation with relevant advisory bodies (e.g. DHS Child Care Advisory Council, DCFS Day Care Licensing Council, etc.) and identify opportunities to integrate a focus on priority populations into their work.
- As the state works toward building racial equity in Illinois' early care and education programs and services, state agencies should provide data on the racial breakdown of all priority populations.
- State agencies that administer early care and education programs and services should work together to ensure accurate, reliable, and aligned data collection on priority populations in all relevant programs.

The All Families Served Subcommittee recommends the following action for specific Early Learning Council committees or subcommittees:

- The Community Systems Development Subcommittee should define the community-level risk factors identified by All Families Served and develop recommendations for addressing these factors.
- The Data, Research, and Evaluation Subcommittee should develop recommendations for strengthening the collection and tracking of data on priority populations, and work with state agencies to implement these recommendations.
- The Quality Committee should identify the components of quality that are most critical to ensuring that early care and education programs and services are prepared to welcome and support children from priority populations. The committee should also develop recommendations for how to embed those critical quality components into early care and education programs, including through leveraging the ExceleRate system. Additionally, the Quality Committee should complete a scan of relevant professional development and supports currently available to early childhood professionals related to serving priority populations. Finally, the Quality Committee should identify gaps in current professional development supports, particularly supports related to racial equity and families with mixed immigration status, and develop recommendations for filling those gaps.

The All Families Served Subcommittee urges all other Early Learning Council committees and subcommittees to, at minimum, review this recommendation and consider how to integrate efforts to improve access to high-quality, responsive programs and services for priority populations into their committee work.

### *Conclusion*

In closing, the All Families Served Subcommittee looks forward to continued partnership with state agencies, other ELC committees, and other stakeholders to advance access to high-quality, responsive early care and education programs for children and families from priority populations. The Subcommittee stands ready to work with our partners and support their efforts in any way needed.

| 2019 Priority Populations                        | Definition  |
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| Children of teen parents                         | A family meets this criterion if either parent of the child was under the age of 19 at the time of the birth of the first child.  |
| Children experiencing homelessness               | Pursuant to subtitle VII-B of the McKinney-Vento Homeless Assistance Act (42 U.S.C. § 11434a(2)), a family is considered homeless if they lack a fixed, regular, and adequate nighttime residence, including: children sharing the housing of others due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; who have a primary nighttime residence that is a public or private space not designed for or ordinarily used as a regular sleeping accommodation for human beings; who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and migratory children who meet this definition.  |
| Children in families in poverty or deep poverty  | Family with income at or below 100% and 50% FPL, respectively.  |
| Children/families with child welfare involvement | Families involved with the Illinois Department of Children and Family Services, including those receiving intact family services, families with a parent who is a youth in care, or children in foster care.  |
| Children with disabilities                       | As defined by Section 300.8 of the Individuals with Disabilities Education Act, child with a disability means a child evaluated in accordance with §§300.304 through 300.311 child evaluated as having a developmental delay, an intellectual disability, a hearing impairment (including deafness), a speech or language impairment, a visual impairment (including blindness), a serious emotional disturbance (referred to in this part as “emotional disturbance”), an orthopedic impairment, autism, traumatic brain injury, another health impairment, a specific learning disability, deaf-blindness, or multiple disabilities, and who, by reason thereof, needs special education and related services. <sup>1</sup> This definition also applies to children ages birth to three, who are eligible for Early Intervention, including children with a developmental delay, children with a medical diagnosis with a substantial likelihood of significant delay, children who are at risk for a substantial delay, and children ages 0-3 with a measurable delay who are evaluated and found ineligible for Early Intervention. <sup>2</sup> |
| Children of migrant or seasonal workers          | Children in families that require a change in residence from one geographic location to another due to the nature of that labor or; require one or both parents to be absent from the family’s permanent place of residence for the purpose of seeking or maintaining agricultural or seasonal employment.  |
| Families with low caregiver education attainment | Primary caregiver has less than a high school diploma or GED.   |

<sup>1</sup> <https://sites.ed.gov/idea/regs/b/a/300.8/a>

<sup>2</sup> <http://www.dhs.state.il.us/page.aspx?item=96963>

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| Families that face barriers based on culture, language, and religion | Family is unable to access necessary resources due to limited English proficiency, linguistic isolation, and/or religious or cultural belief, practices or norms that differ from those of the service providers.  |
| Children of a parent or legal guardian with a disability             | Primary caregiver with a medically determinable physical or mental impairment that substantially limits one or more major life activities as confirmed by medical professional or mental health professional.  |
| Children/families with refugee or asylee status                      | Refugee as defined by the U.S. Department of Homeland Security is a person outside his or her country of nationality who is unable or unwilling to return to his or her country of nationality because of persecution or a well-founded fear of persecution on account of race, religion, nationality, membership in a particular social group, or political opinion. An asylee is a person who meets the definition of refugee and is already present in the United States or is seeking admission at a port of entry. <sup>3</sup> |
| Children in families who face barriers due to immigration status     | Children in mixed immigration status families, undocumented families, and immigrant families impacted by policies including public charge. A mixed status family is a family whose members include people with different citizenship or immigration status <sup>4</sup> .  |

<sup>3</sup> <https://www.dhs.gov/immigration-statistics/refugees-asylees>

<sup>4</sup> [https://www.nilc.org/issues/health-care/aca\\_mixedstatusfams/](https://www.nilc.org/issues/health-care/aca_mixedstatusfams/)