INFORM

INFLUENCE

IMPACT

THE ROLE OF RESEARCH IN SUPPORTING A COMMUNITY’S COMMITMENT TO ITS CHILDREN
FORWARD

CLAUDIA COULTON AND ROB FISCHER
CO-DIRECTORS, CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT
CASE WESTERN RESERVE UNIVERSITY

The Center on Urban Poverty and Community Development is pleased to issue this report on one of the Center’s areas of extended research focus—early childhood services in Cuyahoga County, Ohio. Mid 2009 marked the ten-year point of the County’s public-private partnership, “Invest in Children,” (IIC) and its accompanying evaluation research emphasis. It is appropriate to take stock of the exemplary work that has been done thus far.

IIC’s commitment to using evaluation to drive programming is a hallmark of the program, and distinctive among initiatives of this type. This story highlights how rigorous research can inform policy and practice directed toward the important goal of supporting young children and their families. We at the Center on Urban Poverty and Community Development are proud of what has been accomplished over the past decade. We hope that our experience informs other groups about how to undertake such work for the benefit of all our communities.
THE MISSION OF INVEST IN CHILDREN IS TO MOBILIZE RESOURCES AND ENERGY TO ENSURE THE WELL-BEING OF ALL YOUNG CHILDREN IN CUYAHOGA COUNTY; PROVIDE SUPPORTIVE SERVICES TO PARENTS AND CAREGIVERS; AND BUILD AWARENESS, MOMENTUM AND ADVOCACY IN THE COMMUNITY AROUND CHILDREN AND FAMILY ISSUES.

THE VISION OF INVEST IN CHILDREN IS TO ENSURE THAT ALL CHILDREN IN CUYAHOGA COUNTY REACH THEIR FULL POTENTIAL, NURTURED BY FAMILIES SENSITIVE TO THEIR NEEDS AND SUPPORTED BY A COMMUNITY COMMITTED TO THEIR SUCCESS.
Invest in Children is a community-wide, public/private partnership of individuals and organizations including government agencies, community-based service providers, medical institutions, and philanthropic and private groups all working together to help increase the development, funding, visibility and impact of early childhood services in Cuyahoga County, Ohio.

Celebrating its tenth anniversary, Invest in Children addresses the physical, social, and emotional well-being of the county’s children prenatal up to age six. The program also involves their families and caregivers.
How is success measured? How does a major initiative assess its effectiveness? How do agency leaders know when a program component needs to be adjusted? How are funders, policy-makers, and community members assured that their support is deserved?

From its inception in 1999 as Cuyahoga County’s Early Childhood Initiative (ECI), Invest in Children (IIC) has provided rigorous external evaluation by a nationally renowned team of researchers. With all components in operation beginning with infants born in the county in 2000, the ECI Partnership selected the Center on Urban Poverty and Social Change – now the Center on Urban Poverty and Community Development – to direct the on-going program evaluation. Program partners wanted to understand the extent to which services were

- Being implemented as planned
- Reaching children and families in need
- Having the desired impact on children, families and the community at large.

The knowledge gained from evaluation continues to inform the initiative and influence mid-course adjustments. It also ensures thorough documentation of what ECI/IIC set out to do and what it has accomplished. How has Invest in Children evolved over the past decade? How has the Center on Urban Poverty and Community Development’s research impacted this distinctive program?

The Center on Urban Poverty and Community Development is based in the Mandel School of Applied Social Sciences at Case Western Reserve University. The research protocols and evaluation techniques the Center designed were intended to capture the impact of the ECI/IIC as a whole, as well as that of each of its programs. Over time, it has documented the role that the ECI/IIC plays in changing the service delivery system, public policy, and community supports for young children and their families.

Multiple data sources and methods have been combined to provide a holistic view of how each component of Invest in Children is working and how all the parts connect. The magnitude of the research and evaluation has required the Center to develop efficient systems of coordination and integration, as well as close working relationships with representatives of the various stakeholder groups in the IIC Partnership. Through its role as evaluator of the Invest in Children program, the Center continues to inform, influence, and impact this ambitious initiative.

“When the Early Childhood Initiative was coming together, it was quickly determined that the Center on Urban Poverty and Community Development would serve as ‘Principal Investigator,’ and contract with similar agencies nationwide to supplement their expertise as necessary. The Center has never worked in a vacuum. The faculty and staff there have consulted peer institutions to define critical indicators in the evaluation process. Throughout the partnership, the Center has informed and influenced the ECI/IIC program with appropriate support from researchers at the Chapin Hall Center for Children at the University of Chicago and the Frank Porter Graham Child Development Institute at the University of North Carolina at Chapel Hill.”

GOLDIE ALVIS
THE CLEVELAND FOUNDATION

“(T)he Center enjoys a well-deserved reputation for providing valuable data for program evaluation and assessment. The researchers there are not pretentious and, even though they clearly have high academic standards, they present material in a way that’s accessible to a lay audience. The work they’ve done for IIC is practical, useful and appropriately localized.”

PETER LAWSON JONES
CUYAHOGA COUNTY COMMISSIONER
Cuyahoga County’s Early Childhood Initiative (ECI) emerged from a national interest in community prevention strategies for young children. Preventive programs to intervene during the earliest years of life had been developed and studied over several decades, raising awareness of both the cost savings and the positive impacts on children and families that could be achieved through early intervention rather than later remediation.

As a result of this heightened awareness, foundations and state and local governments expanded their support of early intervention strategies. In 1998, the topic of ‘early childhood’ was included on the agenda of the National Conference of State Legislatures, with particular emphasis on childcare, school readiness, family support and home visits, maternal and child health, and early childhood program infrastructure and coordination. Early initiatives were characterized by public/private partnerships combined with executive-level, corporate sector leadership. The focus was to develop innovative strategies and target whole systems rather than individual programs.

The Early Childhood Initiative evolved with the belief that community mobilization and partnership were essential to early intervention in the lives of children and families. It developed through a pro-active, systems-wide approach to assure that all children ages 0-5 get the best possible start as a base of achieving maximum potential in life. This involved reaching a consensus on gaps in existing county services and developing strategies to address the identified needs. An integrated approach was designed using five program components that focus on three key goals:

- Effective parenting
- Healthy children
- Quality childcare
Cuyahoga County Commissioners initiated the movement to develop collaborative funding strategies to support the community-based ECI, and by early 1998 an Early Childhood Advisory Committee—formed by key public and private sector individuals—began planning the initiative. Foundation and corporate commitments to provide the necessary local funding were finalized in May 1999. By July 1, 1999 the ECI was officially in operation. All program components were in full effect beginning with infants born in 2000. Shortly after, the Center on Urban Poverty and Social Change (now the Center on Urban Poverty and Community Development) at the Mandel School of Applied Social Sciences at Case Western Reserve University was requested to lead an ongoing evaluation of the ECI.

In addition to the goals stated above, stakeholders anticipated that the ECI would drive systemic change, ultimately leading to more supportive public policy toward children and families, a more seamless and responsive service delivery system, and a community more accepting of social responsibility for the well-being of young children.

“The ECI/Invest in Children effort is a remarkable community-based effort, and truly functions as a public-private collaboration. Program directors at the Cleveland Foundation searched at the national level for the best organization to undertake evaluation of the ECI. They were directed to CWRU’s Center on Urban Poverty and Social Change. We had worked with the Poverty Center on other projects, and knew they had the expertise to lead the evaluation.”

BETTE MEYER
DEPUTY CUYAHOGA COUNTY COMMISSIONER
HOW DOES EVALUATION WORK? WHAT RESULTS DOES IT PRODUCE?
Collectively, these data show marked levels of multiple program usage within IIC, and most patterns reflect increased usage over time. These results likely reflect enhanced interaction and communication between the programs of IIC over its first 7 years of implementation. Given the expressed goal of IIC to improve accessibility to services for all families, regardless of their entry point to the system, these trends are encouraging.

OVER THE PAST DECADE, THE CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT HAS USED THE FOLLOWING EVALUATION PROCESS IN ITS WORK WITH INVEST IN CHILDREN:

- Develop program logic models to reflect the basic theory underlying the strategy
- Work with lead agencies and other key stakeholders to develop specific evaluation questions
- Create proposal and evaluation plans for review by the IIC Executive Committee
- Conduct evaluation. Methods include surveys, interviews, administrative data, observations, and case record review, as appropriate
- Report findings to Executive and Partnership Committees, and the community

AT THE END OF 2008, THE CENTER’S RESEARCH FINDINGS PROVIDED THE FOLLOWING COMPREHENSIVE INFORMATION ABOUT THE INVEST IN CHILDREN PROGRAM:

- In its first 7.5 years (1999-2006), IIC reached over 161,000 Cuyahoga County children prenatal to six years of age. The number of children served annually has grown to approximately 65,000 across all programs.
- Over 75% of children born between July 1999 and December 2006 have received one or more IIC services. Among older children age-eligible for services (born July 1993-June 1999), 40% have received one or more IIC services before age six.
- Infants are being served earlier in life over time. For the most recent birth cohort on which complete data are available, nearly three-fourths had contact with at least one IIC service before six months of age.
- There is greater evidence of IIC families engaging multiple IIC services over time.
- Nearly all children under six and infants under one year old who are touched by IIC rely on services from more than one of the components, and the extent of cross-program usage within IIC had increased sharply over the first seven years. Of particular note is the steady increase of cross program use among recipients of the newborn home visit (from 31% to 58%). As a key gateway program for first-time and young parents, this trend shows enhanced linkages to other services.
161,000

The number of Cuyahoga County children, prenatal to six years of age, reached by IIC in its first 7.5 years. The number of children served annually has grown to approximately 65,000 across all programs.

- IIC families also rely on a number of other public services, but these rates have fluctuated over time. In some cases there has been a decline in receipt since 2000—cash assistance Ohio Works First (from 35% to 24%) and child care vouchers (from 20% to 11%). Food Stamp participation by IIC families dropped from 46% in 2000 to 41% in 2001, but steadily increased to 51% in 2006. The overlap with other public systems is greatest for families using ongoing home visiting, family childcare, and Healthy Start/Medicaid. With regard to involvement with the Department of Children and Family Services, the proportion of children becoming involved in the six months following an IIC service remained at approximately 11% from 2000-2006. These rates have declined since 2002 for children served through early intervention.

- IIC programs have reached considerable geographic spread throughout the county. Overall, 59% of the children reached by IIC were residents of the City of Cleveland and 41% were residents of the county outside the city. In IIC programs targeted to at-risk families, more than two-thirds of the families served resided within the City of Cleveland. Other programs serve larger numbers of families outside the city (up to 59%), reflecting greater geographic dispersion in the families they target.

“The Center on Urban Poverty and Community Development’s role as evaluator for Cuyahoga County’s Early Childhood Initiative/Invest in Children program is an excellent example of how an effort of this scope and impact should work: (1) planning, (2) implementation, (3) evaluation. The earliest thinking about ECI/IIC included attention to the issues of process and outcome.”

CLAUDIA COULTON
CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT

“In supporting the Invest in Children partnership, the Cleveland Foundation has provided guidance and made suggestions to the Center on Urban Poverty and Community Development regarding aspects of the programs that required evaluation. But developing the protocols, performing the evaluations, and interpreting research findings have been the Center’s domain; they are excellent in these roles. MSASS and the Center on Urban Poverty and Community Development have outstanding reputations and great credibility locally, nationally, and internationally.”

GOLDIE AL VIS
THE CLEVELAND FOUNDATION

The Cuyahoga County 2008 Child Well-Being & Tracking Update, prepared by the Center on Urban Poverty and Community Development, states: “The scale of IIC programs has continued to grow and the services have achieved considerable scope. Programmatic elements of IIC now reach the vast majority of Cuyahoga County’s newborns and their families. As intended, the reach continues to be both broad yet focused. IIC continues to solidify a system that combines breadth and depth in its efforts to meet the needs of the county’s young children and their families.”
WHAT HAS THE CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT PRODUCED? The following list demonstrates the scope of the Center’s research on behalf of Invest in Children.

Cuyahoga County Early Childhood Initiative Evaluations
The titles of the chapters that comprise these reports indicate the scope and comprehensive nature of the Center on Urban Poverty and Community Development’s evaluation process.

Interim Report (2001)
Early Childhood Social and Health Indicators System and Policy Change
Home Visiting Studies
Family Child Care Homes
Special Needs Child Care
Healthy Start/Medicaid Study

Developing a comprehensive community initiative on early childhood
Early childhood social and health indicators in Cuyahoga County
The scope and reach of ECI: Coverage and connections of ECI program.
Welcome Home and Early Start: An assessment of program quality and outcomes
Family Child Care Homes
Special Needs Child Care
Healthy Start/Medicaid Study
Systems and Policy Change

Phase II Final Report (2005)
Developing and sustaining a comprehensive community initiative on early childhood
Early childhood social and health indicators in Cuyahoga County
The scope and reach of ECI: Monitoring the coverage and connections of Initiative programs
Welcome Home and Early Start: An assessment of program quality and outcomes
Increasing capacity and enhancing quality in Cuyahoga County’s family childcare system
Improving special needs childcare by supporting providers and families
Medicaid Enrollment and Utilization in Cuyahoga County: Evaluating the Early Childhood Initiative amid other health systems changes

Child Well-Being Reports 2006-09


Child Care Quality Studies


Child Care Capacity Studies


IIC Program Specific & Other Reports


PRESENTATIONS
Since 2001, faculty and researchers at the Center on Urban Poverty and Community Development have delivered numerous talks at national and international meetings, research conferences, and clinical colloquia. They have shared their methods and findings with regard to their role as evaluators for the Invest in Children program with professional colleagues in the following organizations, among others:

- Academy of Health Services Research
- American Evaluation Association
- Association for Public Policy and Management
- Association for Research on Nonprofit Organizations and Voluntary Action
- International Society on Child Indicators
- National Association for Welfare Research and Statistics
- Ohio Program Evaluators’ Group
- Ohio Association for the Education of Young Children
- Society for Social Work and Research
- World Conference on Family Violence
“THE ULTIMATE GOAL OF THE ECI/IIC HAS BEEN TO CREATE A COMMUNITY COMMITTED TO ENSURING THE WELL-BEING OF ITS CHILDREN. WE’VE NOT FULLY ACHIEVED THIS GOAL. WHEN WE DO, THE WELFARE OF CHILDREN WILL BE AT THE TOP OF EVERY PUBLIC AGENDA.”

GOLDIE ALVIS, THE CLEVELAND FOUNDATION
INVEST IN CHILDREN’S LEAD AGENCIES’ GOALS & PROGRAMS

Each of Invest in Children’s goals is pursued through a number of service strategies for children, from prenatal to the start of kindergarten. These strategies focus on better preparing children to enter school in good emotional, mental and physical health, and ready to learn. Each of the programs is administered by a lead agency and implemented through partnerships with community-based organizations.

**GOAL #1 EFFECTIVE PARENTS AND FAMILIES**
LEAD AGENCIES: HELP ME GROW; CUYAHOGA COUNTY BOARD OF HEALTH; CLEVELAND DEPARTMENT OF PUBLIC HEALTH; ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES BOARD OF CUYAHOGA COUNTY

**GOAL #2 SAFE AND HEALTHY CHILDREN**
LEAD AGENCIES: CUYAHOGA COUNTY OFFICE OF EMPLOYMENT AND FAMILY SERVICES; CLEVELAND DEPARTMENT OF PUBLIC HEALTH

**GOAL #3 CHILDREN PREPARED FOR SCHOOL**
LEAD AGENCY: STARTING POINT
Effective Parents and Families

Lead agencies: Help Me Grow; Cuyahoga County Board of Health; Cleveland Department of Public Health; Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County

LEAD AGENCIES’ PRIORITIES

- Providing the information, support and encouragement—through home visiting—that parents need to help their children develop optimally during the early years of life
- Providing access to the support and services needed for families of a child with a delay or disability that will help the child to achieve optimal growth and development

LEAD AGENCIES’ ACTIVITIES

- Prenatal home visits provide support and information to expectant parents. A home visitor will partner with the family to give information about childbirth and the new baby, share community resources, and ensure that a primary care physician is in place.
- A newborn home visit from a registered nurse is available to all first time parents and parents under age 25 in Cuyahoga County. The Newborn Home visit, which occurs shortly after leaving the hospital, includes (1) reviewing the baby’s and mother’s health, (2) sharing parenting and resource information, and (3) linking parents to helpful community resources.
- Ongoing home visiting services provide information and resources parents need to raise their children successfully. These services promote the well-being of children under age three and their families, and include (1) ongoing in-home parent education and support, (2) developmental screenings (see next bullet), and (3) locating resources on topics such as early literacy, developmental milestones, and parenting tips.
- Early intervention services are designed to meet the developmental needs of each child eligible. If a child needs extra help due to a delay or disability, families can connect to a variety of specialized services.
- Developmental screenings can help address issues about a child’s development. Sometimes young children need extra help because of premature birth, health problems, or a concern about their progress in seeing, hearing, talking, thinking, playing, or moving.

HOW RESEARCH CONDUCTED BY THE CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT HAS INFORMED, INFLUENCED, AND IMPACTED THE EFFORTS OF THE LEAD AGENCIES

Example: Engaging Families in Ongoing Home Visiting

With Center coordination, a study of IIC’s home visiting strategies was led by researchers from The University of Chicago’s Chapin Hall Center for Children from 2000-2005. This early work followed participant families, and showed that parents who participated in home visits increased their confidence and effectiveness in child-rearing over time. However, the work also showed that approximately one-third of referred families received no home visits and another one-third received an insufficient number of visits to result in measurable changes. As a voluntary program, Help Me
Grow is challenged by the reality that many families do not wish to accept in-home visits for a variety of reasons. This finding prompted monitoring of engagement metrics and a more detailed examination of family engagement patterns. The focus was on program dimensions such as engaging families in a first visit, the time lapse between referral and visit, and the receipt of visits over time. Center staff analyzed the risk factors of families referred for home visiting, and how these related to the acceptance of visits. Using these data and working with IIC and others, Help Me Grow began to consider an approach to establishing a graduation of services, a tiering model based on the family’s needs. This work explored barriers to engagement. A frequently cited barrier was the requirement that service coordinators complete an Individualized Family Service Plan (IFSP) within 45 days of the referral for services. Due to delays in scheduling, this often meant that a visitor was forced to spend the entire first and second visits completing paperwork with the family. Help Me Grow conducted an engagement pilot in which they modified the requirements for the caseworker’s completion of the IFSP. This allowed the worker to focus on developing a relationship with the family before involving them in completing the extensive IFSP document. Caseworkers and families preferred the approach, but the evaluation found that the engagement rate with families with respect to the completion of home visits was no different than the standard approach. Based on these experiences, Help Me Grow identified an enhancement to their home visiting curriculum that would help visitors improve family engagement and outcomes, and planned to implement the new model in 2009.

Note: With the state’s announcement of a 43% cut in Cuyahoga County Help Me Grow’s budget and a mandate to adopt a new evidence-based curriculum, this plan was made moot.

“I’ve been impressed that the ECI/IIC program has considered evaluation an essential part of the overall plan from the beginning. Hallmarks of this public-private partnership are its commitment to evaluation, and its inclusion of the Center on Urban Poverty and Community Development every step of the way. IIC and the Center have a broad view, and approach their work asking the question, “How can we build a system?”

A good evaluation can produce unanticipated results and, therefore, identify unanticipated needs. The Center’s research findings have given us a lot of information about linkages between services utilized by clients. Knowing about these linkages has helped us plan programs more effectively. IIC joint projects have helped pull the county together for the benefit of its children. Integration of the various components of the IIC is very important, and the Center has provided support for this philosophy.”

MELISSA MANOS
HELP ME GROW
LEAD AGENCIES’ PRIORITIES

• Enrolling children in Healthy Start–free health insurance for children of low-income and working families through the Healthy Start Outreach campaign
• Promoting the importance of preventive health care through the establishment and use of a family’s “Medical Home”
• Preventing newborns from lead exposure through Lead Safe Living

A “Medical Home” is the one common place for a child’s health care that embraces a coordinated and respected partnership between the child, the parents/caregivers, and the child’s primary care doctor, and is reinforced by community-based providers who work with families. A consistent primary care provider knows the family, the child’s social support structure, and the child’s health and development history.

Four components of IIC’s Medical Home Initiative:

• Health insurance enrollment
• Preventive health care utilization
• Provider quality improvement practices
• Effective children’s health policy

IIC LEAD AGENCIES AND THE CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT

Example: Use of preventive health care

In 2001, 2003, and 2005, the Center on Urban Poverty and Community Development studies of Medicaid/Healthy Start for children showed progress in successfully enrolling eligible families and helping them avoid unnecessary disruption in their coverage. In addition, an analysis of utilization of preventive care showed increasing proportions of newborns on Medicaid in Cuyahoga County receiving the recommended number of well-child visits in the first year of life. However, even after this progress, the majority of newborns were not getting the full number of needed visits (the rate of success advanced from 22% of children born in 1999 to 39% in 2003).

This finding resulted in two IIC initiatives. One effort involved enhanced communication to parents about the importance of preventive care for newborns. This communication was comprehensive and coordinated through all the IIC service strategies, so that parents received a consistently reinforced message about the importance of these visits.

The second effort involved exploring tactics for identifying and engaging families before they had gotten off track in using preventive care for their infant. During 2006-2007, the Center on Urban Poverty and Community Development supported the work of a planning body exploring programmatic approaches to the issue. The committee included representatives from IIC; the Cuyahoga County’s Offices
of Health and Human Services, Employment and Family Services, and Board of Health; the Supplemental Food Program for Women, Children and Infants; and also representatives from the two Medicaid-managed care organizations operating in the county. The Center’s analyses showed that, among Medicaid families where the newborn had received no well-child visit in the first four months of the infant’s life, 34% were engaged with other IIC services during that same time. This suggested to the committee that it may be possible to develop an “early warning system” in which families that missed a visit could be identified quickly and engaged through an existing relationship with a community agency. Though the concept had merit, the committee ultimately decided that the plan was unworkable due to the inability to secure the essential data from the state in time to intervene with families.

Another concept that developed in these discussions involved the notion of using dedicated staff to assist parents of newborns in navigating the health care system and maintaining the schedule of needed well-baby visits, immunizations, etc. This resulted in the Medical Home pilot program launched in January 2008 at two clinic locations. The pilot assigned a family liaison to each site to recruit families into the project and work with them to effectively use preventive and other necessary health care services for their newborn and their family. To date, the project has served approximately 250 families. Preliminary data show that, compared to historical controls, parents have improved their appointment keeping and children are receiving more preventive services. A full evaluation of the pilot using a standardized tool will examine parents’ knowledge and confidence in using health care services.

“Our primary involvement with the Center on Urban Poverty and Community Development as the IIC’s evaluation team has focused on health insurance and medical care for families. The Center helped us understand how families actually use health insurance, and the importance of promoting the concept of a ‘medical home’ for their children. The Center’s documentation on the patterns of use of health insurance helped us identify problems in the current system and build support for a positive alternative.

The Center has a great diversity of skill and experience. One of its most notable strengths is that the people there are tuned to the realities of gathering and evaluating data in live social and political climates. They are cognizant of the needs and constraints of real-world organizations.

Our association with the Center has influenced our deep commitment to the evaluation process. They understand that the research findings they produce must be relevant, and help identify actionable choices. Their work reflects social and political realities. They operate with a high level of integrity that demonstrates the importance of transparency and value to the community.

As our office’s internal resources diminish and external demands grow, it will be even more important to demonstrate efficacy. We count on the Center’s research efforts to inform our priorities.”

JOSEPH GAUNTNER

CUYAHOGA COUNTY EMPLOYMENT AND FAMILY SERVICES
Starting Point is Northeast Ohio’s childcare and early education resource and referral agency serving families, early childhood professionals, and the community.

STARTING POINT’S PRIORITIES
- Providing the information, support and encouragement—through home visiting—that parents need to help their children develop optimally during the early years of life
- Providing access to the support and services needed for families of a child with a delay or disability that will help the child to achieve optimal growth and development

STARTING POINT WORKS TO
- Link families with child care services
- Increase the supply of child care
- Improve the quality of child care
- Stimulate early education alternatives
- Plan child care and early education initiatives
- Address child care and early education issues

STARTING POINT AS AN IIC LEAD AGENCY AND THE CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT

Example: Promoting high quality early care and education

From inception, the ECI/IIC has focused on promoting quality childcare. For the first five years, the primary strategies for accomplishing this were providing technical assistance (TA) and support services to family childcare home providers, and TA and training regarding care for children with special needs. Technical assistance is customized to meet the needs of the provider. The Center on Urban Poverty and Community Development conducted evaluations of each of these program strategies, and issued reports in 2003 and 2005.

The work with family child care home providers showed that the quality in these settings, as measured by a standardized observation tool, is very difficult to improve. Following a sample of home-based providers over the course of one year, the work indicated that quality did not improve on average, though the providers that accepted the most TA visits did show more improvement. The work on special needs childcare showed that the services provided resulted in enhanced knowledge, skills, and capacity to deal with the challenges of serving children with special needs in the childcare setting; these results were reported by teachers and center directors. The efforts also showed that approximately 80% of these children were able to remain in the care setting for at least six months, rather than facing expulsion as often happens in such circumstances.
When IIC released its strategic plan in late 2005, the focus on quality of early care figured prominently in the strategy of preparing children for school. One of the bold elements of the plan was an emphasis on moving the county toward a commitment to universal pre-kindergarten (UPK). The IIC partners knew that such an initiative would require extensive additional planning and would need to be data-driven. They convened a community-wide UPK planning effort in 2006. In addition, IIC funded three studies to support the process—studies of childcare capacity, childcare quality, and childcare financing—the first two of which were conducted by the Center on Urban Poverty and Community Development.

The capacity study documented the scale and diversity of the existing early care and education system as well as the current and projected need. Though the county was found to have an adequate supply of slots overall, there were marked geographic differences by neighborhood, with some areas having insufficient capacity to meet families’ needs (see accompanying map on page 22). Using a standardized observational assessment, the quality study collected data on the quality of care in a random sample of nearly 180 center-based care settings in the county. This study showed that, on average, these facilities rated in the ‘good’ range, and identified a number of factors found to be associated with quality.

IIC used the capacity and quality studies to understand the early care and education context in Cuyahoga County and to plan a UPK pilot project. In fall 2007, locally funded UPK slots for nearly 1,000 children were made available through 24 early care and education programs in Cuyahoga County, and the pilot project is completing its second year.

“As an alumna of CWRU’s Mandel School of Applied Social Sciences, where the Center on Urban Poverty and Community Development is based, I’d like to stress the word ‘Applied.’ The work the Center does for the Invest in Children program is sophisticated, data-driven research that serves practical purposes. Our agency and the IIC effort have used the Center’s research findings to seek out best practices, refine operational methods, and even adjust our philosophical views.

For example, in 2006 the Center did Child Care Capacity and Child Care Quality Studies that helped Starting Point determine supply and demand demographically so that we could project future needs accurately and plan accordingly. The Center has not only informed our agency on capacity issues, but has also evaluated the quality of care in many settings ranging from family child care homes with six or fewer children being cared for in an individual’s home to large publicly-sponsored childcare facilities.

Just as important, the Center has generated research findings that have helped ‘sell the case’ to funders. Accountability is at the top of every funder’s list. It’s important to be able to demonstrate that what we’re doing makes a positive difference, and to be able to adjust our course if necessary. The Center puts information in context. The faculty and researchers routinely probe their findings, and follow up to be sure that research results are interpreted so that they are useful to the ‘people on the ground.’ Another thing that distinguishes the Center is their inclusiveness. In creating evaluation tools, they sit with agency leaders and ask, ‘What do you need to know?’

The Center on Urban Poverty and Community Development has a fine reputation, and has played a major role in the IIC program’s development. It’s a great example of local research being performed by national experts.”

BILLIE OSBORNE-FEARS
STARTING POINT
“The Center on Urban Poverty and Community Development has developed a database with records on every child born in Cuyahoga County since 1992. This is an amazing resource. The Poverty Center collects, merges and interprets this data, and also works with data gathered through direct observation of children and families. This resource enables researchers at Case—and throughout the academic community—to gain a longitudinal perspective on children in the county.”

REBEKAH DORMAN
INVEST IN CHILDREN/OFFICE OF EARLY CHILDHOOD
The Center on Urban Poverty and Community Development houses and maintains a unique data system focused on the well-being of and services to children in the metropolitan Cleveland area. With leadership funding from the Cuyahoga Board of County Commissioners, through the County's Office of Early Childhood, the Center has brought together a range of data sets and linked them at the child level. These data focus on children age birth to six, but in some cases include data on older children. The data system allows for the examination of patterns of experiences of children in cross-section and over time, and at the neighborhood level (or other geographies). The data sets that are currently linked (or to be linked) in the system are included in the table below.

A current principal use of the data system is for the ongoing evaluation of early childhood services in Cuyahoga County. The County's Office of Early Childhood (Invest in Children) contracts with the Center to evaluate services and track the well-being and service usage of children in the county.

Since 2007, the Center has prepared statistical profiles of children age 0-6 for all municipalities within Cuyahoga County.

### CUYAHOGA COUNTY

#### CHILD DATA REGISTRY

#### DATA SOURCE

<table>
<thead>
<tr>
<th>DATA SOURCE</th>
<th>YEARS LINKED</th>
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<tbody>
<tr>
<td>Birth certificate records</td>
<td>1992-2007</td>
</tr>
<tr>
<td>Death certificate records</td>
<td>1992-2007</td>
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<td>Public Supports &amp; Services</td>
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<td>Child welfare</td>
<td>1992-2005</td>
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<tr>
<td>Cash welfare (TANF)</td>
<td>1997-2007</td>
</tr>
<tr>
<td>Food Stamps</td>
<td>1997-2007</td>
</tr>
<tr>
<td>Child care vouchers</td>
<td>1997-2007</td>
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<tr>
<td>Medicaid/Health Start enrollment</td>
<td>1997-2007</td>
</tr>
<tr>
<td>Medicaid/Healthy Start claims and encounters</td>
<td>1997-2005</td>
</tr>
<tr>
<td>Specialized Early Childhood Services</td>
<td></td>
</tr>
<tr>
<td>Home visiting services: prenatal, newborn, and ongoing</td>
<td>1999-2007</td>
</tr>
<tr>
<td>Early intervention services</td>
<td>1999-2007</td>
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<tr>
<td>Special needs child care assistance</td>
<td>2000-2005</td>
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<tr>
<td>Early childhood mental health services (0-3)</td>
<td>2007-2008*</td>
</tr>
<tr>
<td>Other Data</td>
<td></td>
</tr>
<tr>
<td>Kindergarten attendance (Cleveland Metropolitan School District students only)</td>
<td>1996-2009*</td>
</tr>
<tr>
<td>Kindergarten readiness assessment–literacy (CMSD only)</td>
<td>2005-2008*</td>
</tr>
<tr>
<td>Elevated child blood lead levels (selected children only)</td>
<td>2006-2009*</td>
</tr>
<tr>
<td>3rd grade proficiency test data (CMSD only)</td>
<td>1996-2009*</td>
</tr>
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*Data not yet linked
“THE IIC PARTNERSHIP COMMITTEE NEEDS TO KNOW WHAT ‘MOVES THE NEEDLE,’ AND FORMAL EVALUATION IS A WAY TO GET THAT INFORMATION. WE KNOW THAT IIC HAS ADVANCED THE WELL-BEING OF CHILDREN, AND NEED THE HARD DATA TO DEMONSTRATE THAT FACT. WE ALSO NEED TO CONSIDER WORKING WITH ECONOMISTS TO SEE WHETHER THE CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT’S DATA CAN BE USED TO INFORM ASSUMPTIONS ABOUT OUTCOMES. BY ‘CONNECTING THE DOTS,’ WE MAY BE ABLE TO ARTICULATE MORE COMPELLING RESULTS, AND THEN USE THESE RESULTS TO RELATE IIC’S SUCCESS TO OVERALL CHILD AND ADULT WELL-BEING AND OUR REGION’S ECONOMIC DEVELOPMENT. IIC IS AMONG THE BROADEST, MOST COMPREHENSIVE EFFORTS OF THIS KIND IN THE NATION, AND SHOULD BE USED AS A MODEL FOR OTHER INITIATIVES, INCLUDING THOSE TO BE FUNDED BY THE OBAMA ADMINISTRATION.

AS THE EVALUATOR FOR IIC, THE CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT HAS DELIVERED RESEARCH RESULTS THAT ARE ACADEMICALLY SOUND. OUR CHALLENGE IS TO USE THIS DATA TO PRODUCE INFORMATION THAT WILL BE USEFUL AND SUPPORT THE CONTINUING INVESTMENT IN THIS AREA AS IIC IS HELD ACCOUNTABLE BY PUBLIC AND PRIVATE FUNDERS.”

LESLIE DUNN, INVEST IN CHILDREN PARTNERSHIP COMMITTEE AND MT. SINAI HEALTHCARE FOUNDATION
INVEST IN CHILDREN has attained a scope such that the majority of young lives in Cuyahoga County are being touch by the program. Given this dramatic scale, a number of issues are currently receiving attention. Supported by the Center on Urban Poverty and Community Development’s evaluation team, IIC is exploring these questions:

Are there families within IIC’s scope with needs that have not been adequately addressed?

Are there additional or different programs that would better serve the families who have received benefits thus far?

How can the community best be mobilized as a strong constituency in support of early childhood development and/or as advocates to attract more resources to fund the needs of this age group?

Answers to these questions will point to avenues for refining IIC’s overall strategy as a comprehensive system for promoting healthy children, effective parents, and quality early care and education. It is evident that IIC has established a foundation to reach nearly the entire early childhood population and to provide intensive support to children and families in Cuyahoga County. This combination of breadth and depth is an accomplishment that should be understood and appreciated by the public. IIC’s goals and achievements should be articulated to assure new parents that their community values young children, and that resources are available to assist them during this vital stage of development.

In an era of tightening resources, investments in early childhood compete with all other domains of public and private programming, from workforce development to public infrastructure. Research on program delivery and effectiveness can be a deciding factor in whether essential data are available when decisions about policy and practice are made. Through a commitment to effectively generate and interpret information...

... THE CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT CAN ENSURE THAT DATA INFORM THE DIALOGUE, INFLUENCE THE DECISION PROCESS, AND IMPACT THE POLICY OUTCOME, RESULTING IN IMPROVED SOCIAL CONDITIONS IN THE COMMUNITY.

INVEST IN CHILDREN REPORTS IN PROGRESS
Child Well-Being and Tracking Study
Universal Pre-Kindergarten Pilot Study
Primary Lead Prevention Study
Early Childhood Mental Health Study
Medical Home Pilot Study
Newborn Nurse Home Visit Study
“Over the past ten years, the Center on Urban Poverty and Community Development has been instrumental in helping IIC think about its purpose and priorities, in establishing realistic goals, and in interpreting results in ways that either reinforce on-going practices or suggest modification to ensure more effective results. Many of IIC's component programs were in place when the initiative took off, and the Center's work has provided information about how to best utilize these programs.”

LISA BOTTOMS, THE CLEVELAND FOUNDATION

The Center on Urban Poverty and Community Development seeks to address the problems of persistent and concentrated urban poverty. The Center is dedicated to understanding how social and economic changes affect low-income communities and their residents. The Center views the Cleveland region as both a focus for building communities and producing change locally, and as a representative urban area from which nationally-relevant research and policy implications can be drawn.

The Center’s research, conducted by center staff and faculty members of Case Western Reserve University’s Mandel School of Applied Social Sciences, where the Center is based, produces both academic, peer-reviewed research papers, and numerous summaries and data briefs aimed at the broader audience of policy-makers, activists and the general public. The Center also serves as a "convener," bringing together community development professionals from the region and from around the country to share data, research and ideas.

Founded in 1988 as the Center on Urban Poverty and Social Change, the Center changed its name in 2006 to the Center on Urban Poverty and Community Development. Its commitment to addressing the issues of urban poverty remains at the core of its work, as does a commitment to social change. The new name emphasizes the means through which such change must take place. The Center is currently conducting research on welfare reform, neighborhood change, community safety, child and family, and program evaluation. The evaluation work is designed to generate data for program operators and funders to ensure accountability and inform efforts intended to improve programs.

“The Center on Urban Poverty and Community Development has developed a database with records on every child born in Cuyahoga County since 1992. This is an amazing resource for Invest in Children. The Center collects, merges and interprets this data, and also works with data gathered through direct observation of children and families. For example, the IIC’s Universal Pre-Kindergarten Pilot Study has used trained observers to chart individual progress in a variety of settings. The Center also developed a questionnaire for parents regarding perceptions and expectations of UPK. This resource enables researchers at CWRU—and throughout the academic community—to gain a longitudinal perspective on children in the county.”

ROBERT STAIB
INVEST IN CHILDREN/OFFICE OF EARLY CHILDHOOD

“What's particularly noteworthy is the commitment made by the evaluation collaborators to not only collect data to show to funders, but to use that data to improve the delivery of services in the near term. We here at the Center on Urban Poverty and Community Development want the evaluation to reflect reality—not some idealized version—of the programs and their outcomes. The IIC partners have always wanted to get it right in terms of programming, and help the field learn how to best meet the needs of young children and their families.”

ROB FISCHER
CENTER ON URBAN POVERTY AND COMMUNITY DEVELOPMENT

“What impressed me was that, from the beginning, the ECI had enlisted a partnership with the Center on Urban Poverty and Community Development so that the initiative could be data-driven. The research results informed day-to-day management, and also evaluated progress. As long as I was involved, the focus on evaluation was a key component of the IIC, enforced and encouraged by the Partnership Committee. At that time, there weren’t a lot of early childhood initiatives across the country that focused on data for accountability and for management, and I’ve always considered that an important and unique feature of ECI/IIC. The Center’s analyses, in particular, were helpful to program staff and to funders in identifying next steps: What activities should the programs emphasize? How should existing efforts be modified for improvement?”

DEANNA GOMBY, DEANNA GOMBY CONSULTING
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