

# Kent County Early Childhood Indicators

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## Summary & Highlights

October 27, 2011



The development of a highly skilled workforce is a top priority for policymakers and business leaders in Michigan as they work to rebuild the state's economy. However, a factor critical to that development often is missing from the discussion: the early education, health, and general wellbeing of our youngest children. Clear and compelling research confirms that high quality early childhood services have tremendous benefits for children and families as well as for the whole community. For every dollar invested, many more are returned to the public.

First Steps, the Great Start Collaborative, and our many partners are working together to make Kent County a community in which every young child enters kindergarten ready to succeed in school and in life. To reach their full potential, young children must be healthy and have age-appropriate cognitive, social, and emotional skills.

Our mission is to create a coordinated, integrated system of early childhood services that are high quality, culturally sensitive, voluntary, and accessible to all. Critical to that effort is our ability to measure our collective impact and report reliable, relevant information to the broader community about the wellbeing and school readiness of young children. To that end, we partnered with the Community Research Institute (CRI) at GVSU's Johnson Center for Philanthropy to identify and analyze a series of community-level early childhood indicators. That work established baseline measures for the indicators; analysis will be repeated every few years to track our progress.

### **What is an indicator?**

An indicator tracks past and current trends for a condition that we want to monitor. It can be used to measure progress toward a desired result. The information can inform policies, funding decisions, and program planning and increase public awareness.

### **How were the early childhood indicators chosen?**

The process for selecting these indicators involved more than 40 parents, educators, health care providers, private and public sector service providers, and philanthropic leaders. Work groups developed indicators in four broad categories: physical and behavioral health, early care and education, parent education, and family support. CRI provided technical support to the work groups, identifying data sources and ensuring proposed indicators were valid and reliable. The Great Start Collaborative of Kent County endorsed the indicators then CRI began collecting and analyzing the data to develop baseline measures for as many of the indicators as possible.

The development of the indicators was guided by several principles. We sought data that would allow us to compare subpopulations (based on characteristics such as race and ethnicity) and geographic areas of Kent County (individual neighborhoods). Specific areas of need often are hidden in county level data. Also, the indicators are based on data that are available currently. We recognize this does not tell us everything we need to know about the state of young children or our community's progress in developing the early

childhood system. It is a starting point, and as we move forward, we will work toward developing additional measures as needed.

### **How will the early childhood indicators be used?**

The baseline analysis identifies gaps in services and geographic areas with significant needs. Service providers can use that information to make program decisions; funders can use it to allocate resources; and policy makers can use it to inform policy decisions.

The indicators are an important tool for advocates; they highlight both the continuing struggles of children and families and the progress being made as a result of community investments in early childhood.

For the broader public, the indicators provide reliable information about how well our community is doing in preparing young children to be successful in school and life.

### **Baseline analysis of indicators**

CRI conducted a baseline analysis of 13 community-level early childhood indicators. Work groups identified several others promising indicators, but data are not available yet. Once data are available, CRI will develop baseline measures for those indicators, as well.

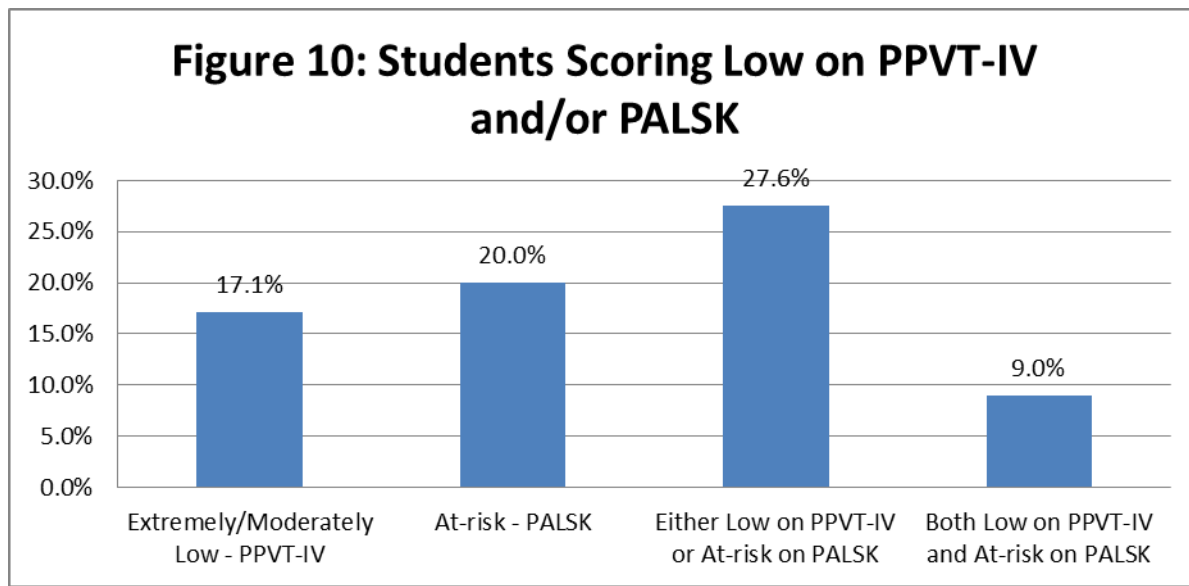
The following is an overview of four of the indicators. Please visit <http://www.firststepskent.org/news-information/community-reports/> to access the full report from CRI.

## Readiness for Kindergarten

What it is: Percent of children with age-appropriate (or above) oral language skills, as measured by the Peabody Picture Vocabulary Test (PPVT-IV) test, and age-appropriate early literacy skills, as measured by the Phonological Awareness Literacy Screening K (PALS).

Why it matters: Children who start kindergarten with age-appropriate skills are far more likely to experience success throughout their formal education than are children who start behind.

What it tells us: Language and literacy skills are among the most reliable predictors of a child's school success and are a proxy for academic readiness. A random sample of 600 Kent County kindergarteners conducted in fall 2010 shows that 27.6% do not have age-appropriate oral language or early literacy skills.

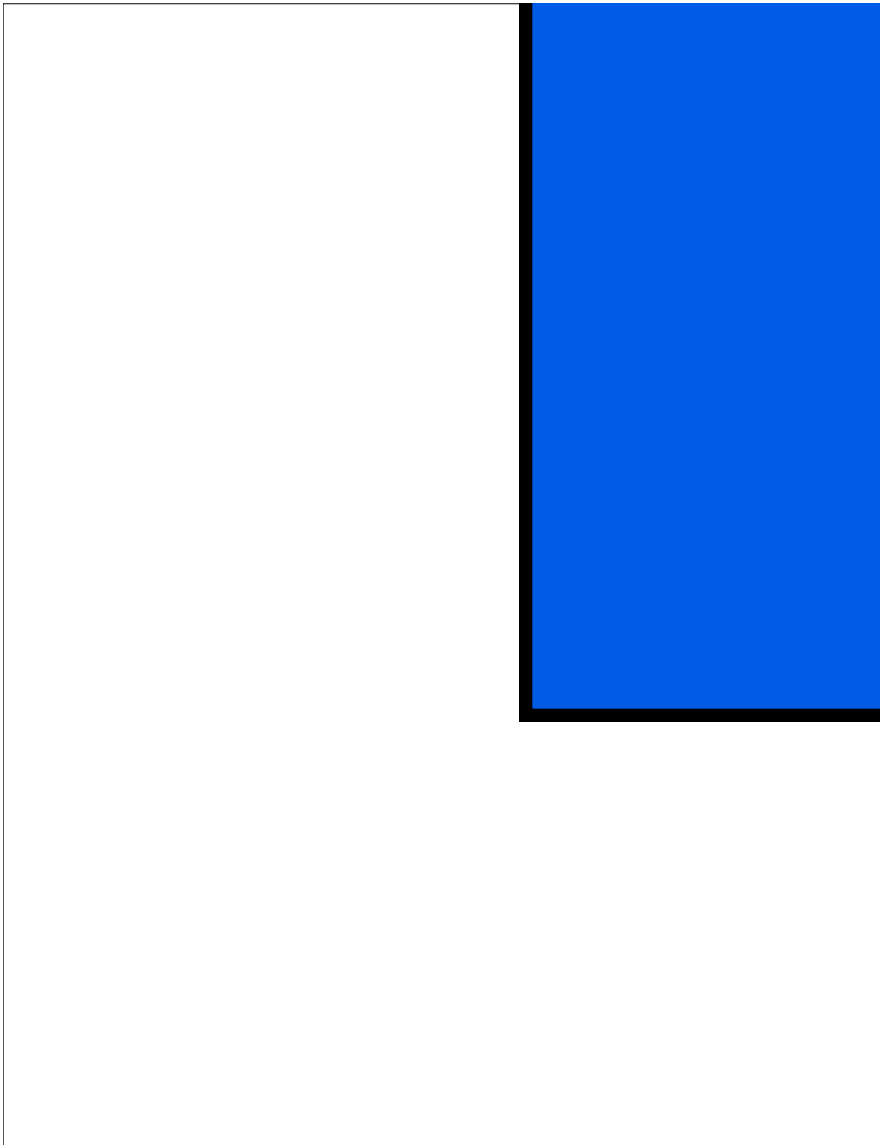


## At-risk Index

What it is: A composite of five items from the American Community Survey: percent of children under age 6 at or below 185% of the Federal Poverty Level (FPL); percent of children under age 6 at or below 75% of FPL; median household income; percent of children under age 6 who are Hispanic; percent of children under age 6 who are non-white.

Why it matters: Many factors (e.g. poverty, immigration status, race & ethnicity) put children at risk of social problems, ranging from dropping out of school to getting involved in crime. Researchers caution against relying too heavily on poverty statistics to determine risk, so this index includes additional factors.

What it tells us: The most significant concentration of children at the highest risk is in the core city of Grand Rapids. Areas of Wyoming, Kentwood, Sparta, Gaines Township, and Alpine Township also have neighborhoods with a large proportion of children at risk.

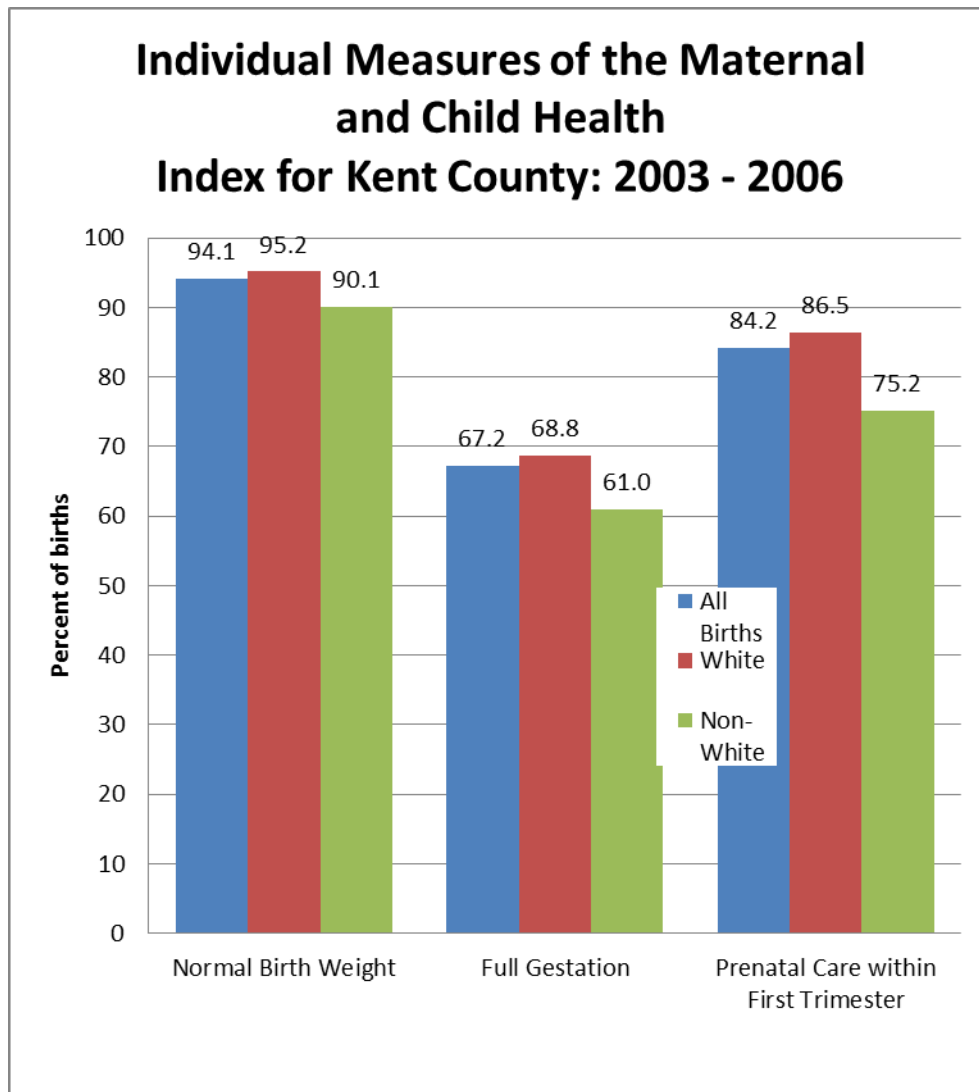


## Maternal and Child Health Index

What it is: A composite of three items: percent of births delivered at terms (38-43 weeks of gestation); percent of births for which prenatal care began within the first trimester; percent of infants with a satisfactory birth weight.

Why it matters: Each of the three components of the index is an important indicator of the health of newborns. Poor birth outcomes, such as being born too small or too early, can impact a child's long-term ability to learn.

What it tells us: Sixty-seven percent of babies in Kent County were born at a normal gestational age and 94% at a normal birth weight. Eighty-four percent of expectant mothers began prenatal care in the first trimester. In all three categories, the percentages are lower for non-white babies than for Kent County as a whole and for babies covered by Medicaid compared to those who are privately insured.



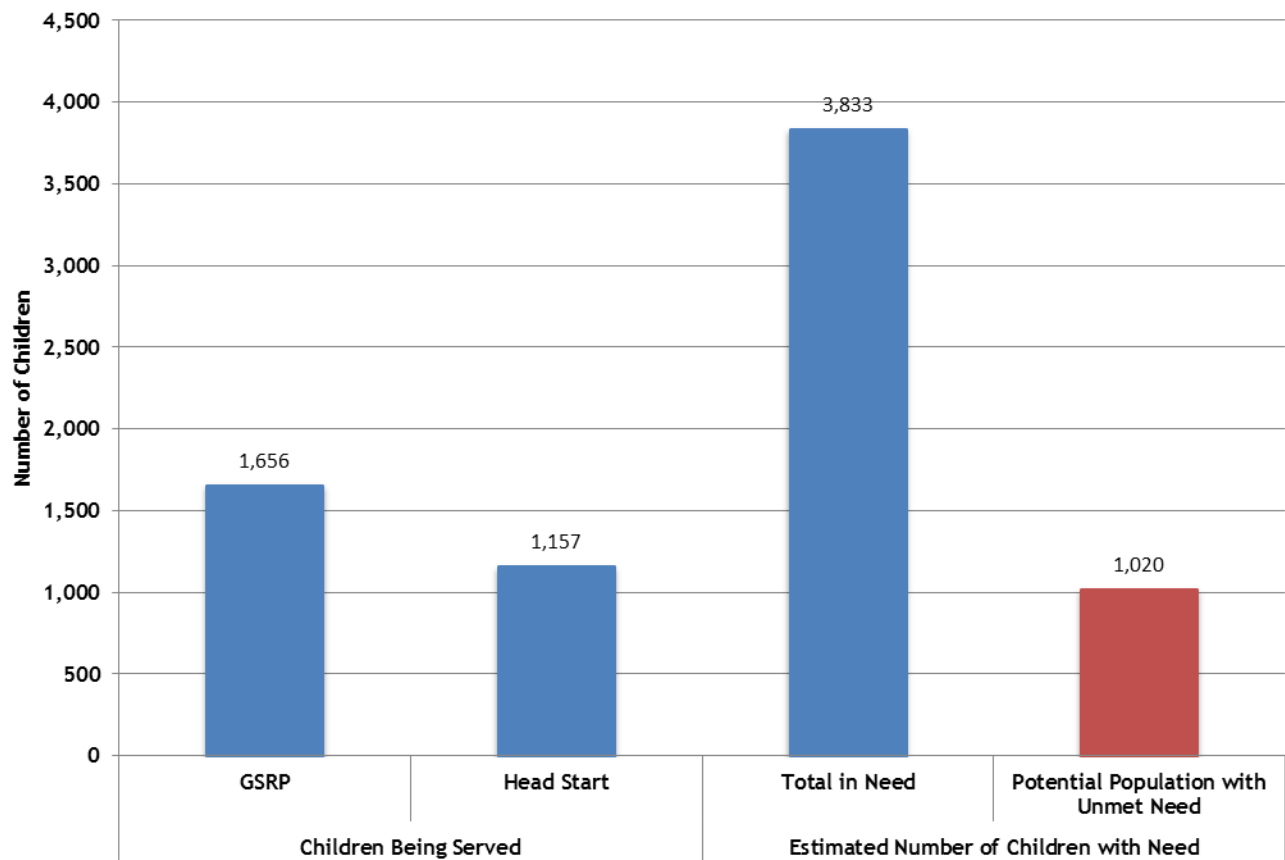
## At-risk Children Enrolled in Preschool

What it is: The numerator is the number of four-year-old children in Kent County enrolled in public preschool (Michigan’s Great Start Readiness Program or the federal Head Start). The denominator is the number of first grade students in Kent County receiving free or reduced cost lunch at school. (We estimate that number is similar to the total number of four-year-old children with economic risk factors. It is a proxy for total need).

Why it matters: Preschool has a number of positive effects on children, both in the short term (in elementary school) and long term (as adult wage earners). However, many low-income children are not enrolled in preschool, due in large part to insufficient funding to serve all eligible children.

What it tells us: 73% of at-risk four year olds are enrolled in public preschool, meaning more than one-quarter of low-income children are not. It is important to note that this is a conservative estimate of unmet need since this analysis considers only economic risk and there are additional risk factors (e.g. primary language other than English, low educational attainment of parents) that make children eligible for public preschool.

**Estimated Number of Economically At-Risk 4 Year Olds with Unmet Preschool Needs: 2011**



The following is a list of all community early childhood indicators that have been analyzed by CRI and those that were recommended by work groups but do not have available data.

### Analyzed Indicators

- Children ready for kindergarten (% of children performing at or above grade level on language & literacy assessments)
- At-risk index (% of children under age 6 at or below 185% of poverty, % of children under age 6 at or below 75% of poverty; median household income; % of children under age 6 who are Hispanic; % of children under age 6 who are non-white)
- Maternal and child health index (% of births at full term, % of births with prenatal care in first trimester, % of births with satisfactory birth weight)
- At-risk children enrolled in preschool (4-year-olds in publicly funded preschool)
- Postpartum depression (rate of depression for screened Medicaid-eligible women)
- Access to preventive health care (proxy is hospitalization rate for ambulatory care sensitive condition)
- Parent education index (% of births where mother did not smoke during pregnancy, % of births where mother did not consume alcohol during pregnancy, % of births with 18 months between pregnancies, % of births where there are data about the father)
- Children appropriately immunized (% of appropriately immunized children age 19-35 months)
- Substantiated victims of abuse and/or neglect (rate of cases for children ages 0-5 per 1,000 children)
- Children living in poverty (% of children ages 0-5 in poverty)
- Elevated blood lead level (% of tested children ages 0-72 months with elevated level)
- Child care affordability (measure of family income deficit to pay for full-time child care)
- Family service needs index (% of households receiving food stamps, % of 3 or 4 years olds in preschool, % of single-parent households with children under age 5)

### Indicators for which CRI is working to access data

- Medical home (proxy is % of children of Medicaid who have received all age-appropriate medical checkups)
- Dental home (proxy is % of children of Medicaid who have received all age-appropriate dental checkups)
- Identification of special needs (we are working to determine the most appropriate indicator to measure early identification and intervention for children who qualify for special education services)

### Recommended indicators for which data are not currently available

- Children read to daily
- Housing & transportation index
- Body mass index