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PARTNERSHIPS BUILDING STRONG COMMUNITIES

**Early Childcare and Education
in East New York:**

A Snapshot

January 2009

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And thanks to Joyce Friedmann and Deborah Rubien, ACT staff, for editing the report, analyzing the data, and preparing the Findings and Recommendations.

INTRODUCTION

The following research and report was initially inspired by the Early Care and Education Working Group of the *Pipeline Crisis/Winning Strategies Initiative*¹. Headed by Sullivan & Cromwell LLP and Goldman Sachs, supporters of the *Pipeline Crisis* initiative are comprised of leaders in the public and private sectors, committed to pooling their talents, knowledge and resources to help reverse the rising rates of school drop outs, joblessness and incarceration among young black men, and to increase their representation in the pipeline to higher education.

Pipeline's Early Care and Education (ECE) Working Group² recognizes that early childhood education and intervention programs are critical to developing the mind and character of children, giving them the best chance of reaching full potential. They also recognize the need for adequate capacity of early care and education as well as excellent quality of the early education, through support of professional development, family support and achievement of nationally set standards.

The ECE Working Group is addressing these issues by developing opportunities to develop the capacities of a selected group of childcare centers in the East New York section of Brooklyn, also known as Community District 5 (CD 5). The group chose East New York as their first community to reach not only because of their high concentration of African American and low socio-economic levels, but also because it is a densely populated area which has generally had low resource accessibility.

This report offers a snapshot of the current childcare situation in East New York. For the purposes of this report, we collected a sampling of data through phone interviews and on-site interviews with ten different East New York day care centers. This helped us to better understand their program offerings, funding, capacity, families, eligibilities, vacancies, family support, workforce, and community resources.

OBJECTIVES

Initially this report was designed by Agenda for Children Tomorrow (ACT) to assist the *Pipeline Crisis/Winning Strategies* Early Childcare and Education Working Group in gaining an understanding of the childcare situation in East New York. ACT recognized that the data collected could also be utilized to inform multiple childcare and early education initiatives. ACT is a public-private partnership that brings together New York City neighborhood residents, service providers, and community leaders in an alliance to promote the well-being of children, families and neighborhoods by improving services and strengthening the capacity of communities.

¹ www.pipelinecrisis.com

² Excerpted from the *Pipeline Crisis/Winning Strategies 2008 National Platform*, www.pipelinecrisis.org

ACT recognized the value of the research to inform two additional initiatives: the East New York/Brownsville Community Partnership Initiative (CPI)³ and ACT's Bushwick IMPACT Family Resource Center. Therefore, this report informs three audiences:

1. Pipeline Crisis/Winning Strategies for Young Black Men: Early Childcare and Education Working Group

The initial goal of *Pipeline's* Early Care and Education Working Group is to identify and select three centers and support their enrollment in the 2-year Quality New York Accreditation Program. A second goal is to identify and prepare two or three additional centers to achieve readiness for entering the Quality NY accreditation program. The group also plans to enroll daycare center directors in the City University of New York Professional Development Certification Training Program. As additional funds are raised, additional childcare centers will be offered a systematic and focused program of capacity building and technical assistance. Finally, the ECE Working Group would like to provide volunteer opportunities for lawyers and bankers from Sullivan & Cromwell LLP and Goldman Sachs as well as other professionals involved in Pipeline to provide professional expertise and technical assistance to the childcare centers.

2. East New York/Brownsville Community Partnership Initiative (CPI)

The East New York/Brownsville's Community Partnership Initiative (CPI) is a coalition of community agencies and organizations working in collaboration to improve child welfare outcomes in the neighborhood. Funded by the NYC Administration of Children's Services (ACS), the coalition is mandated with specific tasks. As such the CPI has formed a Childcare/Head Start subcommittee which is working to bridge the gap between childcare centers and ACS preventive services agencies by increasing the numbers of cross referrals, identifying and filling available childcare slots, and connecting childcare centers to community resources for family support.

3. ACT's Bushwick IMPACT Family Resource Center

IMPACT, an ACT initiative, is a neighborhood-based family resource center in Bushwick that offers families programming in four areas: child development, family literacy, family support and leadership development. IMPACT's particular focus is to help families of young children navigate early learning opportunities, with emphasis on enrollment into early care and education programs. The heart and soul of IMPACT is its team of Parent Advocates, parents from the community who are trained to help their peers access quality early care and education and a host of other services for family members. IMPACT has become an important place for parents of younger children to create social networks, to learn the importance of early education and to become leaders in their families. IMPACT meets quarterly with childcare center directors and other

³ The NYC Administration of Children's Services (ACS) is currently working with eleven communities across New York City on the Community Partnership Initiative (CPI). The primary goal of the initiative is to promote "a rethinking and reorientation" of child welfare work toward integrated, localized service models that can tailored to the unique needs and resources of individual communities. It is hoped that community-based partnerships, once cultivated, will lead to better coordinated, more accessible, and increasingly effective services. http://10.239.3.195:8080/docushare/dsweb/Get/Document-28764/Chapin_Hall.pdf

service providers in Bushwick, to facilitate communication, resource sharing and to identify policy issues.

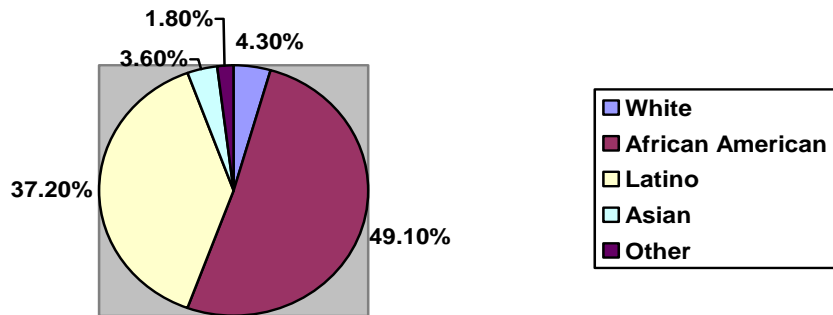
This research serves to help ACT understand the family support needs of families enrolled in the childcare centers of East New York.

DEMOGRAPHY OF EAST NEW YORK⁴

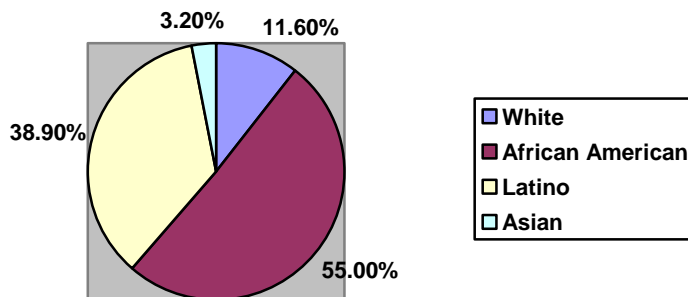
East New York is part of Community District 5 (CD 5) in Brooklyn, New York. CD 5 has a total population of 178,323. The data presented in this report includes Starrett City, a small, middle-income housing community in the south of the district. Although the Starrett City section has fewer African Americans and more middle class people than the rest of East New York, it is relevant to note that this area includes 14,915 (8.36%) of the people in this CD.

Population Data

Forty-nine percent (49%) of the people living in CD 5 are African American:

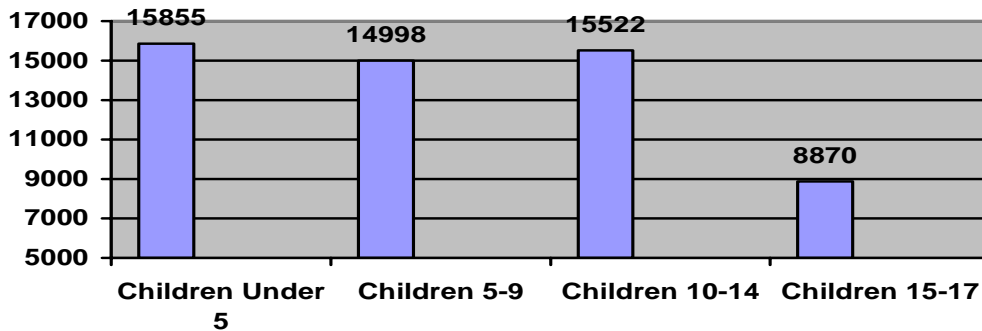


There are 55,245 children under age 18, living in East New York. Fifty-five percent (55%) of them are African American:



⁴ Citizen's Committee for Children of New York, Inc., *Keeping Track of New York City's Children, Eighth Edition, 2008.*

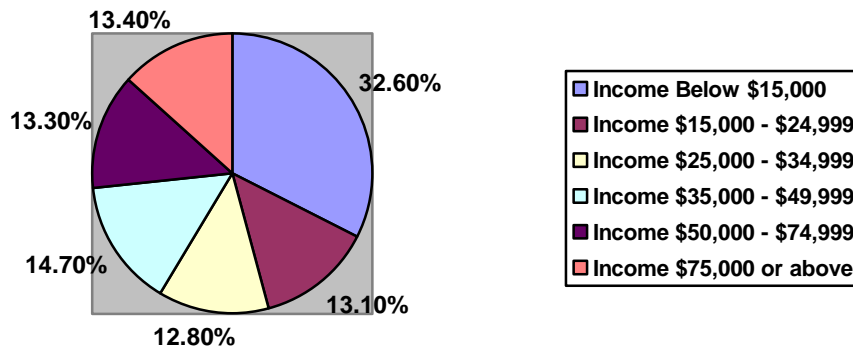
Of the 55,245 children below age 18 living in East New York, 15,855 (29%) are under age 5:



Income Data

Household Incomes:

The median household income in East New York is \$30,000, but almost one-third of all households have an income of less than \$15,000.

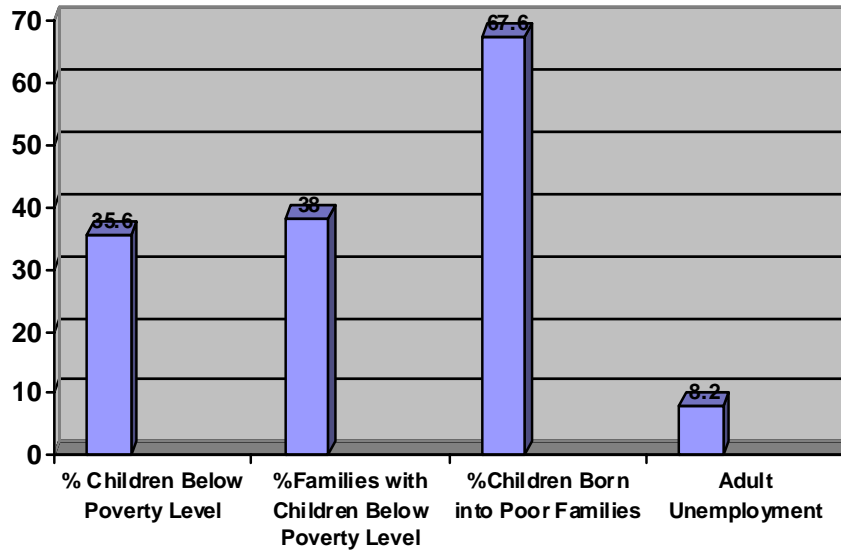


Family Incomes:

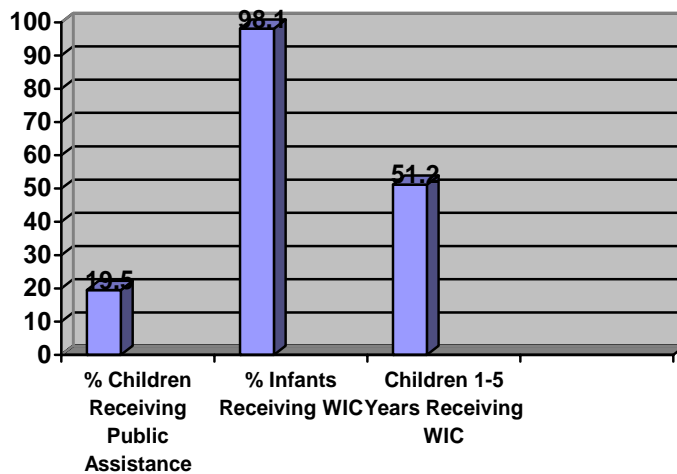
Households	Income Bracket	Families
32.6%	Below \$15,000	29%
13.10%	\$15,000 - \$24,999	13.3%
12.8%	\$25,000 - \$34,999	12.9%
14.7%	\$35,000 - \$49,999	14.4%
13.3%	\$50,000 - \$74,999	14.7%
13.4%	\$75,000 or above	15.2%

Poverty in East New York especially affects children.

- 35.6% of the residents live below the poverty line.
- 44.4% of families in East New York live at self-sufficiency standard levels.
- 29% of families make less than \$15,000.
- In 2005, 1,882 children (67.6%) were born into poverty.
- In 2005, 511 families entered homeless shelters.



East New York has a high rate of children receiving various types of government aid. In 2006, 2,348 (98.1%) infants born in CD5 and 5,072 (51.2%) children ages 1 – 5 received WIC⁵:



Household and Parent Profile Data

Households in East New York are made up of a large percentage of non-married couple families:

⁵ The Special Supplemental Nutrition Program for Women, Infants, and Children - better known as the WIC Program - serves to safeguard the health of low-income women, infants, & children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care.

Households in East New York	
Total Households	57,008
Family Households ⁶	42,875
Married Couple Families w/own Children ⁷	10,000
Other Families ⁸	24,191
Single Mom	12,879
Single Dad	1,561

In 2005,

- Teen mothers gave birth to 319 babies (11%),
- 55 of the mothers were between 14 – 16 years old,
- 262 of the children were born to young women ages 17 – 19, and
- 69.4% of the babies were born to single mothers.

The infant mortality rate was 10.1% and babies born at a low birth weight was 10.7%. The average infant mortality rate across New York City was 5.5% and babies born at a low birth weight was 8.9%.

METHODOLOGY and OUTREACH

Methodology

Our research consisted of 1) gathering comprehensive demographic data about East New York (CD 5), 2) creating a survey to administer to childcare center directors in East New York and 3) an analysis of the data collected.

The aim for the demographic portrait was to highlight indicators of high-risk and to create a profile of the population that resides in East New York. Resources included United States Census data from 2000 and projected figures for 2006, the Citizen’s Committee for Children *Keeping Track*⁹ compilation, and the New York City Children Services Bureau of Day Care¹⁰ website.

One of the first tasks was to compile a comprehensive list of childcare centers in East New York. Surprisingly, this task met with more challenges than could be anticipated, as no list was entirely complete and information was sometimes contradictory or outdated. The listing of childcare centers was compiled from the following sources:

⁶ Family Households are households that are comprised of family units (for example, unrelated roommates living together would be considered non-family households).

⁷ “Married-Couple Families” are families which include a married couple (with or without kids).

⁸ Other Families” are families consisting of single dads with children, single mothers with children, or grandparents with children.

⁹ <http://www.cccnewyork.org/aboutkt.html>

¹⁰ <http://www.nyc.gov/html/doh/html/dc/dclh.shtml>

- Citizen’s Committee for Children,
- Childcare, Inc.¹¹,
- NYC Department of Health and Mental Hygiene¹²,
- NYC Department of City Planning¹³, and
- the Brownsville/East New York Community Partnership Initiative (CPI).

We reviewed these lists to gather basic contact information such as center phone and fax numbers, and the names of directors and addresses. *Keeping Track* was vital in gathering additional information such as program type (e.g. Head Start, Group Day Care), age range of children served, neighborhood designation, etc.

We developed a comprehensive survey as our primary assessment tool to administer to childcare center directors. The survey itself was originally modeled on a similar project conducted by the director of IMPACT and an ACT intern in the summer of 2007. The focus of that study was to determine the status of childcare in Bushwick. In order to design a survey which specifically addressed the concerns and needs of the different audiences intended for this research project in East New York, the following professionals were consulted:

- Deborah Rubien, ACT Interim Executive Director
- Loren Miller, Director, ACT IMPACT Family Resource Center
- Denise Nelson, United Way of New York City, and member of the *Pipeline Crisis* Early Childcare and Education Working Group
- Margot Hammond, Director, Center for Early Childhood Professionals at Bank Street College of Education and member of the *Pipeline Crisis* Early Childcare and Education Working Group
- Osman Boakye, Network Liaison, East New York Community Partnership Initiative (CPI)

Prior to full implementation of the evaluation instrument, two test runs of the survey were conducted with Gwenevere Goodwin, Assistant Director at Children’s Corner and Almarie McCoy, Director of East New York Family Day Care.

Outreach

The surveys were distributed in several ways. They were distributed at CPI meetings, both for the general membership and at meetings of the Childcare/Head Start Subcommittee. The researchers called all the directors from the comprehensive list of centers that they had compiled. Some surveys were hand delivered to directors and then completed by directors and faxed to the ACT office or picked up at the daycare center. Other surveys were completed by phone.

In total, there are approximately 55 childcare centers in East New York (CD5). Eleven were contacted and surveyed in August 2008. One of the centers answered too few of the

¹¹ www.childcareinc.org

¹² <http://www.nyc.gov/html/doh/html/dc/dclh.shtml>

¹³ <http://www.nyc.gov/html/dcp/home.html>

questions to include in the results, therefore this report reflects 10 childcare centers, representing approximately 18% of the centers in East New York. See Appendix for the list of childcare centers surveyed.

In reaching out to the child care centers, our researchers met with a few challenges that are useful to consider going forward. As an introduction to the community, the researchers attended a general meeting of the Brownsville/East New York CPI and a meeting of its Childcare/Head Start subcommittee. This introduction served as a launching point to connect with many directors and community leaders. It was useful to build the relationship with the CPI and explain the project to them as the research progressed through this developmental phase. However, the researchers soon found that the majority of childcare centers in the area are not well-connected with each other or the CPI network. This integration point proved not as effective as originally hoped in reaching out to a large number of childcare centers.

In seeking to set up interview times, the researchers found the directors difficult to contact. When it became evident that repeat phone calls were not effective, the researchers adjusted their strategy to a more hands-on approach. Phone calls were utilized to facilitate visits to identified centers in the area. Researchers walked through East New York, plotting the most efficient route to reach the daycare centers by using the *Community Walk*¹⁴ mapping website.

The four days spent in East New York were not without challenges but it shed light onto how our original difficulties shaped up. Firstly, the faxing of surveys two ways, both to the centers and then back to the ACT office, rendered our surveys unreadable thereby reducing our rate of return for the centers that were faxed the document. Secondly, a handful of directors were either currently on vacation or preparing for one and unable to give time to complete the survey. They were the targeted respondent population and often the only people with the knowledge and authority to provide answers to the survey. Also, in visits to centers it became apparent that there are some issues of apprehension associated with surveys of this nature, with some directors feeling “over-studied” and skeptical about the value of the research. The other major factor which we knew going into our research is that directors are extremely busy individuals and without adequate staffing, they are often too busy to take 20 to 30 minutes with someone with whom they have no prior history.

For future research, our recommendation is to go out to centers immediately after making the initial contact over the phone and focusing a concentrated effort on a local cluster over a period of days. Adequate time (at least two weeks) or a larger group of researchers should be allotted so that these concentrated efforts can be repeated in clusters across the community, thus casting the net widely for a more comprehensive community picture.

¹⁴ www.communitywalk.com

TYPES OF CHILDCARE in EAST NEW YORK

The following types of childcare center services are available in the East New York area:

- **Family Day Care:** Childcare for 3-6 children (maximum) provided in the home of a person not related to the children. Family day care centers are regulated by the New York State Department of Social Services. Family Day Care requires a fee, based on ability to pay and whether the slots are subsidized by the Human Resources Administration (HRA) (for families on public assistance) or by Administration for Children's Services (ACS).
- **Group Family Day Care:** Childcare for 6-12 children provided in the home of a childcare provider that is not related to the children. Group family day care centers are regulated by the New York State Department of Social Services. Group Family Day Care requires a fee, based on ability to pay and whether the slots are subsidized by HRA or ACS.
- **Group Childcare:** Childcare centers with 7 or more children located in an institutional setting. These sites are regulated under the New York City Health Code. Group childcare requires a fee, based on ability to pay and whether the slots are subsidized by HRA or ACS.
- **Head Start Centers:** These are federally funded programs for children 2.9 years old to four years old. All Head Start programs have Family Workers and a mandated parent involvement component. Head Start is a half-day program, but most centers blend funds from other sources in order to provide a full day of services. Head Start services are free for families that meet the income eligibility.
- **Universal Pre-Kindergarten (UPK):** UPK serves 4-year olds and is overseen by the NYC Department of Education. UPK programs are located in elementary schools or community based organizations. They are free.
- **School-age program:** School-age childcare is provided on a regular basis to children ages six through twelve years. Known as "Out of School Time," services are provided through public schools, childcare centers, community programs or a family day care or group family day care provider. This program is regulated under the New York State Department of Social Services and subsidized by Department of Youth and Community Development (DYCD) and HRA. Families on Public Assistance (HRA) receive vouchers for Out of School Time services that include pick up and vacation time care, and are typically at a community program, family day care or group family day care provider.

The number of childcare slots in East New York continues to be of limited capacity in relation to the size of the under age 5 population (15,855) and the need. As a result, many children do not receive the benefits of early childcare, UPK or afterschool care. The chart below lists typical childcare and the capacity for each in East New York.

Types of Care	Capacity
Children 6 and under	2,477
Group Family Day Care (2 – 12)	1,162
Family Day Care (2 – 12)	726
Head Start	608
School Age Children	3,856
Estimated Unmet Need for Subsidized Care (6 & under)	1,040
UPK ACS/Head Start	173
UPK ACS Contract	447
UPK ACS Voucher	0
UPK Special Ed	0
UPK Private Childcare	164
UPK Group Family Day Care	0
UPK Family Day Care	0
UPK No Permit Required	66
UPK DOE	666
TOTAL SLOTS	1,516

SURVEY DATA

The data presented is based on completed data for 10 childcare centers. See Appendix for a copy of the survey.

Section 1: General

The specific types of childcare sites surveyed for this report include: Group Childcare, Group Family Day Dare, Family Day Care, and School-age Program.

The centers surveyed offered the following programs:

Types of programs offered:	
Pre-Kindergarten/UPK	6
Head Start	1
Group Day Care ¹⁵	9
Family Day Care	1
Group Family Day Care	1
Private	4
CACFP- Food program* ¹⁶	4

¹⁵ Data from types of programs offered under “group day care” and “day care” were combined, since they completely overlap.

¹⁶ CAFPP is federally funded program that reimburses child care providers for some of their food costs. Providers are required to maintain careful records of expenditures, prepare nutritional meals and prepare weekly menus. Implication: are enough sites taking advantage of CAFPP?

The centers offered the following support services to their clients:

Support services offered:		
Inclusion Classes		8
Early Intervention (0-3 yrs)		3
Pre-School Education (3-5 yrs)		9
Individual Therapy (3-5 yrs):		
	Speech	6
	Occupational	2
	Play	2
	Individual	1
Bilingual Classes		2
Enrichment Activities/Programs for Gifted and Talented		2
Gifted and Talented Testing Prep		1 pending
Other Special Needs		2

Section 2: Funding Source

Centers received funding from the following sources:

Source	
ACS	10
HRA	6
DOHMH (For Early Intervention)	1
DYCD (for after school care)	0
DOE (for UPK)	3
Private	5

Section 3: Capacity

Out of the 10 centers surveyed, the number of slots available, size of facility, number of staff members, ratio of teachers per student, and hours of operation varies from center to center.

The smaller childcare centers (50 students or less) open before 8 a.m. and tend to have more flexible hours than the larger programs. The larger centers open at 8 a.m. None of the childcare centers surveyed stay open past 6 p.m. Six of the childcare centers are fully enrolled while the others have just a few slots available for new students.

Below is a summary of the breakdown of slots available and filled, the student to teacher ratio, the student to room ratio and the hours that the centers are open. For more details on the age and number of students per room, please refer to the ECE Analysis/Student per room breakdown in the Appendix.

Student/Teacher/Classroom Ratios, Population and Hours of Operation									
Slots	Filled	Avail	Staff	Teachers	per student	rooms	per room	age	hours
45	45	0	12	8	5.6	3	15	2.0-6.0	7a - 5:30p
60	60	0	13	5	12	5	12	3mth-6yrs	8a - 6p
25	25	0	6	4	6.25	3	8.3	2 - 6.0	7:30a - 6p
170	165	5	40	20	8.5	11	15.45	2.0-4.0	8a - 6p
130	130	0	24	17	7.6	9	14.4	0 - 2 yrs	8a - 6p
14	14	0	5	4	3.5	4	3.5	2.0-5.0	6a - 6p
95	87	8	22	10	9.5	5	19	2.0-6.0	8a - 6p
60	55	5	16	9	6.67	3	20	2.0-6.0	8a - 6p
25	20	5	6	3	8.3	2	12.5	2.0-6.0	7a - 6p
95	95	0	n/a	n/a	n/a	n/a	19	2.5-5.0	8a - 5p

Section 4: Family Diversity

The following languages are spoken, by students, parents and teachers at the East New York centers¹⁷:

Languages	Spoken by the Children	Spoken by the Staff
English ¹⁸	90%	~99%
Spanish ¹⁹	69	24
French ²⁰	1	1
Creole ²¹	4 -5 students	1
Chinese	None	none
Russian	None	none
African Dialect ²²	10 – 11 students	1

¹⁷ Please note that we do not have language breakdown data from Urban Strategies Day Care Center # 1. They have 95 students and ten staff members.

¹⁸ Seven centers reported that 100% of their staff spoke English. 2 reported that 1 staff member at each of these centers did not speak English and there is no data from one center.

¹⁹ Luis Muñoz Marin Early Childhood Academy reported that 6 members of their staff speak Spanish but there is no data on the number of Spanish speaking students. They have 170 students and 40 people on staff. 3 centers reported that neither their students nor staff spoke Spanish. 3 centers had a high percentage of Spanish speaking students and staff.

²⁰ Six to seven children at the Children's Corner Day Care Center and one staff member speaks French.

²¹ Three to four students at the Children's Corner Day Care Center and one staff member speak Creole.

One student at the Luis Muñoz Marin Early Childhood Academy speaks Creole but there is no-one on staff that speaks Creole.

²² The Children's Corner Day Care Center are the only to report that some of their students (10 -11) speak African dialects.

Of the seven centers that responded to this question regarding language, 289 students (41%) are from immigrant families. Please note that this number skews high because one center with 60 students reports 93% of their students are from immigrant families, another center with 14 students reports that 70% are from immigrant families, and another center reports that of their 25 students 60% are from immigrant homes. The other four centers report between 0% - 20% of their students are from immigrant homes, representing 430 students (59%).

It is not clear if the immigrant families speak dual languages. It is also not clear if the staff is aware of all the languages the children and family members speak at home.

- Blake and Milford Daycare Center reported that 50% (30) of their students speak Spanish while 93% of their students are from immigrant families and True Worship Church Day Care Center reported that 24% (6) of the students speak Spanish yet 60% (14-15) of their families are from immigrant families.
- The Kid's Private Playhouse did not report any other languages spoken by their students or staff yet they indicated that 70% (10) of their children are from immigrant families.
- The Urban Strategies Day Care Center and the Luis Muñoz Marin Early Childhood Academy did not report on this question.

Spanish is the predominant language spoken, second to English. Out of the 719 students that this survey represents, 69 speak Spanish, one speaks French, 4-5 speak Creole, and 10 – 11 speak an African dialect. The total number of students reported that speak a language other than English is 86 but it is not clear if those students speak English as well.

Eight of the centers reported that 73% of the children resided in single family homes. Most of the centers reported estimates that ranged from 60% to 95%. One center, a group day care center with 45 students²³ reported as few as 20%²⁴. We have no data from 2 of the centers.

Section 5: Eligibility

The following is a breakdown of causes for delays in service or reasons why families may be ineligible for childcare²⁵. Because of the small sample size, we chose to add a column combining the “always” and “sometimes” response to help illustrate the predominant reasons families may be ineligible. The data suggests that income ineligibility, a parent’s work status or school status, and the New York State child support requirements are the most common reasons for ineligibility.

²³ Brooklyn Development Center: Early Childhood Services, Inc.

²⁴ The Brooklyn Development Center: Early Childhood Services, Inc., a Group Day Care Center, reported that 20% (9 children) of their 45 slots were children from single parent homes.

²⁵ Only 8 of the 10 centers surveyed responded.

Cause	Always/Sometimes	Never
Income ineligibility	7	1
Parent doesn't work	7	1
Parent in school	5	3
NY State Child Support Requirement	7	3
Lack of space	3	5
Medical exams	2	6
Lack of toilet training	3	5
Out of catchment area	3	4

Section 6: Vacancies

Though most centers expected to be fully enrolled in September '08, maintaining full enrollment is often challenging due to a variety of factors. Some of the reasons noted were:

- Children left the program because parents stopped working or were sanctioned for noncompliance with HRA regulations;
- Parents were not in compliance²⁶ with ACS regulations;
- An increase in childcare providers in the community resulted in increased competition; and
- The quantity of subsidized slots was insufficient to meet the need.

Six of the centers maintain a waiting list. The length of time a family typically waits varied from 3 weeks to 6 months²⁷. The number of families on waiting lists varied from 0 to 50.

Eight of the ten centers surveyed stated that there is a demand for infant childcare spots that they cannot meet at this time. One center noted that their decision not to provide infant slots was that it is too costly to achieve all of the required regulations²⁸.

Section 7: Family Support

Most centers surveyed did not provide many direct family support programs, (characterized by counseling, social service supports and referrals, child development or

²⁶ Because there are a variety of reasons that a person may not be in compliance, this question warrants additional research. Some reasons may include that families are found ineligible or were not able to properly recertify.

²⁷ Please note that parents may opt to make alternative child care arrangements, such as care at another center or something less formal, rather than wait for care.

²⁸ There seems to be a high demand for infant child care but few available slots. Thus infants tend to go to family day care or informal arrangements are made. So while there may be vacancies for 3-4 year olds, there is demand for infant toddler slots. The exact numbers cannot be determined from this data and warrants further research. For NY State day care regulations: <http://daycare.com/newyork/>
 For NYC day care regulations: Department of Health and Mental Hygiene, Article 47, Page 23: <http://home2.nyc.gov/html/doh/downloads/pdf/public/notice-adoption-hc-art47-0308.pdf>
 For NYC day care regulations summary: www.nyu.edu/family.care.

parenting education, leadership opportunities, etc.), yet nearly every director spoke to the need for more funding for such programs.

Typically, if the center encounters a family in need, the director will assist them herself or she will refer them to a trusted partner or local office for assistance. None of the centers interviewed had staff dedicated or adequately knowledgeable about family support resources. Only 50% of the centers were aware of ACS-funded Preventive Services in their community, which serve families with children (from birth to age 18), who are particularly stressed or experiencing difficulties. Many centers expressed a need for more information on referral systems in their neighborhoods.

Some of the larger centers are able to provide family programs in the following areas:

Family Program	Utilization
Parenting Skills Workshops	1 program: three times a year
Health Care Enrollment	2 centers
Immunizations	1 center refers clients
Public Assistance Programs	1 center
Employment Seminars	2 centers
Mental Health	1 center
Special Needs Assistance	2 centers
Housing	1 center

Section 8: Workforce

Many of the centers' teaching staff are currently enrolled in, or have graduated from, a childcare education program and/or certificate course:

Education Level	Centers		Staff	
	Yes	Yes	No	n/a
New York State Certified	7	11	2	
Study Plan (work/study)	8	26		1
Child Development Associates Degree (CDA)	2	9	5	2
CCP 30-hour Training Session	2	18	5	2
Directors have CPAC Training	3	3	1	5

One center was involved with an accreditation program.

The highest staff turnover rates were reported amongst the Assistant Teacher positions and the cooking staff.

Section 9: Community Resources

When asked if the agencies have partnerships with any outside organizations only four have partnerships with the Brooklyn Public Library and three with Cool Culture²⁹. Only one of those four have relationships with both the library and Cool Culture. One agency has a connection with ENY Neighborhood Youth. Of the ten centers surveyed, three reported that they have not developed partnerships with other community organizations.

Organization	Partnership
Brooklyn Public Library	4
CUNY Center for Professional Development	0
Cool Culture	3
Health Care Clinics	0
Educational Programs (afterschool/charter schools)	0
ENY Neighborhood Youth	1

Five centers were aware of the Brownsville / East New York Community Partnership Initiative (CPI). Five centers knew nothing about the CPI.

When asked if the directors and their staff would be interested in receiving technical assistance in any the following areas, most answered yes:

Skill Area	Assistance Requested
Teaching Skills	7
Management Skills	6
Board Development	5
Fundraising and Fiscal Management	6
Safety	7
Communication with Parents	6
Child Development	7
Parent Involvement	5

Section 10: Comments

When those surveyed were asked to report any additional challenges they wanted to address they cited issues of management, leadership, lack of money to improve services and salaries, scheduling, competition, retaining qualified staff, and the ability to keep enrollment numbers at full utilization.

Most people interviewed showed a sense of pride in the work that they were doing and the positive results of their efforts. The strengths they were most proud of included

²⁹ Cool Culture builds bridges between families from low-income communities and cultural institutions in New York City, so that children from all economic backgrounds can benefit from early exposure to these outstanding resources, www.cool-culture.org.

reputation, contribution to the students and community they serve, teaching, and retaining a good staff.

FINDINGS

Section 1: Types of programs centers offer

The early childcare centers in East New York are addressing a variety of special need issues including early intervention, individualized therapy and enrichment. Eight of the centers offer inclusion classes, whereby students with special needs are integrated in the classrooms with children that do not have identified special needs. This is a positive trend that has been seen throughout the city in the preschool grades and in the higher grades as well.

Six of the schools offer speech therapy, and others offer occupational, play and individual therapies, which demonstrates that there is either a growing need, or an existing need for these types of early intervention programs that is now being documented.

Two centers have enrichment activities/programs for the gifted and talented and one center will soon be offering gifted and talented test preparation.

Section 2: Funding sources

All ten of the centers surveyed receive payment from ACS. This is a likely indication of the need for subsidized childcare slots in East New York. In addition to ACS, most centers receive payment from a combination of sources including HRA, DOHMH, DOE, as well as private funds. Each of the government entities has its own set of guidelines for receiving funding for services. One can surmise that the childcare centers have to spend a lot of time and energy to figure out and manage the blended funding.

Section 3: Capacity

According to the Citizen's Committee for Children, the number of childcare slots in East New York continues to be limited in relation to need. As a result, many children do not receive the benefits of an early childhood or Universal Pre-Kindergarten education.

Yet, of the 10 centers surveyed, six are at full enrollment. This may point to the need to increase the overall number of childcare slots in East New York. The other four centers report availability but do not specify for which age group. This indicates the need to work with these directors to fill the vacancies. ACS recently announced the loss of slots to centers that routinely had 15 or more vacancies. The loss of these slots may cause some centers to close classrooms, and ultimately to close the center. Given that the demographics of East New York include many low-income households and a significant number of single parents, the need for adequate childcare capacity can be extrapolated because of the dire need to work.

It is also important to note that the survey revealed that none of the centers are open past 6 p.m., limiting the capacity for parents to work later than 5 p.m.

Section 4: Family Diversity

It is reported that an average of 41% of the children are from immigrant families. Yet, out of the 719 students in these 10 centers, only 85-90 speak a language other than English. Similarly, the number of English as a Second Language (ESL) students in child care centers does not sufficiently reflect the larger percentage of ESL students in East New York as a whole. This may be an indication that child care centers are not effective at attracting immigrant families, which is common in many neighborhoods. Thus cultural awareness and cultural competence remains a priority for staff, both to support the immigrant parents of children served and to provide effective outreach to immigrant families.

Finally, the numbers of children from immigrant families tended to be clustered within certain childcare centers, indicating word of mouth as a successful recruitment strategy.

Single parent households:

Eight of the centers reported that 73% of the children reside in single family homes. This information suggests that single parents are also working parents and have a high need for childcare. This may also point to the need for family support given the particular stressors of single parenting.

Section 5: Eligibility

The data suggest that the myriad of eligibility requirements from different funding sources, primarily ACS and HRA, often leave parents unable to access early education for their children. In our survey, four most prevalent reasons given for ineligibility were: income ineligibility, a parent's work status or school status, and the New York State child support requirements.

Section 6: Vacancies

Six of the centers maintain waiting lists of anywhere from 0 to 50 students. The average waiting time can vary from 3 weeks to 6 months. Any wait for a parent who has been offered a job can place that job in jeopardy. More research is needed to further explore whether childcare centers "lose" the families as they wait for vacancies.

A large percentage (80%) of those surveyed stated that there is a demand for infant childcare spots, indicating a large unmet need. Infant day care has even more rigorous demands for a childcare center including lower staff/children ratios.

Section 7: Family Support

A childcare center is an effective access point for parents seeking additional services for their families. Parents often view a childcare center favorably as they are entrusting the care of the young children to the staff. This means a family may be more likely to accept interventions and referrals from childcare staff.

The findings of the research reveal an unmet capacity to provide family support services for families with children attending childcare. Typically if the center encounters a family in need, the director will assist them herself or refer to a program she knows, or she will refer them to a trusted partner, or local office for assistance. Only 50% of the centers are aware of Child Preventive Services in the area and many expressed a need for more information on referral systems in their neighborhoods. None of the centers have staff dedicated to assisting families, such as required by Head Start centers.

The findings demonstrate that many of the centers are working in isolation and cut off from resources available to support them, as well as their clientele.

Section 8: Workforce

Many of the centers' teaching staff are currently enrolled in, or have graduated from, a childcare education program. Of the 9 centers that reported, 72% of their directors, teachers and assistant teachers are enrolled or have achieved professional training in childcare.

Most people interviewed showed a sense of pride in the work they are doing and the positive results of their efforts. The strengths they were most proud of included: a good reputation in the community, making a contribution to the students and community they serve, teaching, and retaining a good staff.

The data demonstrates that many of the teachers and director have a strong desire to further develop their capacities and connect with their communities.

Section 9: Community Resources

Of the ten centers surveyed, three reported that they had not developed partnerships with other community organizations. Five centers are aware of the Brownsville / East New York Community Partnership Initiative (CPI) yet the other five centers know nothing about the CPI. The CPI coalitions in the 11 demonstration neighborhoods are portals of information about a variety of support programs in those communities. Participants report that attending the monthly meetings is an important way that they obtain information about programs.

The data suggests that the vast majority of childcare centers in the area are not well connected with each other, the CPI network or other community based organizations. Many expressed interest in learning more and making these connections. This is an important finding and needs to be explored further.

RECOMMENDATIONS

1. Connect to existing community coalitions.

The most outstanding and consistent information that the data and survey reveal is that many of the centers work in isolation without connecting to community resources and the

opportunity to network with other centers or organizations. An on-going effort must be made to help centers build and sustain valuable connections within their communities.

There are existing coalitions that already bring together numbers of providers and would be excellent resources for the childcare centers in East New York. Two of those coalitions are:

- a. East New York Community Partnership Initiative -- In particular, East New York CPI is working to strengthen the connection between childcare centers and ACS-funded prevention programs. The more that the childcare centers could involve themselves with CPI, the more they can establish easy lines of communication and cross-referrals between themselves and prevention programs.
- b. Brooklyn Perinatal Network -- This is a coalition of providers that advocates for and serves the health needs of families with very young children.

2. Connect to other childcare and Head Start centers in East New York.

A number of communities have formed early childcare coalitions that serve as important avenues for exchange information among childcare centers. They have been useful vehicles for professional development training, dissemination of information about learning opportunities, sharing resources (such as part-time staff), addressing vacancies, understanding and complying with regulations and advocating for policy changes.

3. Connect centers to the Department of Education (DOE) and the Department of Health & Mental Hygiene (DOHMH).

As the centers prepare their students to succeed in their public school education, it is essential that the centers develop and maintain a connection with the DOHMH and the DOE.

The need for early intervention (EI) for students across the city is increasingly apparent. It is recommended that relationships be brokered between the centers and the DOHMH (children ages 0 – 3)³⁰ so that students at their centers consistently have opportunities to be evaluated and receive the early intervention services they need. When a student's needs are addressed early in their development, these interventions mitigate and often eliminate learning difficulties when they get older. Studies show that it is far more difficult and more expensive to redress learning and developmental delays after the first three to five years.

Likewise, the centers must strengthen their relationships with the CPSE (Committee on Preschool Special Preschool) unit of the DOE that evaluates and offers services for children ages three to five years old³¹.

Early childcare centers are a necessary and effective intermediary to increase access to services for families. Quality early childcare programs need to address the many types of

³⁰ For children ages 0 – 3, early intervention evaluations are administered by the Department of Health and Mental Hygiene.

³¹ Evaluations for children ages 3 – 5 are administered by the DOE's Committee for Preschool Special Education (CPSE).

special needs that children have, whether they are dual language needs, developmental delays, remedial academic needs, accelerated academic needs, physical therapy needs, occupational therapy needs, speech therapy needs, and/or social skills development. Staff should be trained in how to sensitively address these issues and be supportive to the parents and child through the process.

Another effective mechanism used by early childcare centers is to train peer advocates to work with parents. Quite often families are unaware of the array of needs their child may have and the services that are available. A parent may feel stigmatized by both the needs of their child and by accessing the services, and therefore may not pursue help on behalf of their child. Another major obstacle to utilizing services is the difficulty of navigating the EI and CPSE systems to obtain an evaluation and ultimately, the services needed. Peer advocates can help a parent navigate a delivery system.

Lastly, training should also be offered to teach staff and parents how to advocate on behalf of the children.³²

4. Prepare for new DOE requirement for Gifted and Talented testing.

Two of the centers reported that they provide enrichment activities/programs for the “gifted and talented” students and one may soon be providing test preparation for the gifted and talented K-12 programs. Beginning September 2009, the DOE is requiring that all entering Kindergarteners take an entrance exam for the gifted and talented programs and a school readiness exam. Though test preparation might not be required for the students, professional development for the teaching staff to tailor curriculum to best prepare students to succeed at these exams should be considered. Centers should also be prepared to help parents find the test centers in their neighborhoods and file the paperwork necessary to register for the exam. An additional staff support person may be needed to help the centers and parents navigating the DOE system.

5. Insure that curriculum and staff are culturally aware and culturally competent.

Centers reported that approximately 41% of their students come from immigrant families, demonstrating the need for cultural awareness training. This is intertwined with the need for family support services. To infuse a family support model in a childcare center, the staff must incorporate practices that are culturally aware. This is the most effective way to engage parents to play an active role in their child’s education.

The centers reported that out of the 719 students the survey represents, 86 speak a foreign language. While language is not the only way to communicate respect to a parent, there are times when a shared language is critical. Childcare centers funded by ACS should have access to the Language Line provided by ACS, which provides telephonic and in-person interpretation.

More research is needed to get a full picture of the cultural backgrounds of the families of the children enrolled.

³² Trained Parent Advocates, such as those in the Bushwick IMPACT initiative, have had a high rate of success promoting special needs services and supporting parents in their community.

6. Establish family support services.

Centers report a high percentage of their children are from single parent homes yet only one center offers Parenting Skills Workshops and none offer support groups. Similarly, immigrant families face particular challenges in navigating systems, integrating new child rearing norms, satisfying educational expectations and engaging in their children's schooling. Children of immigrant families, even more so when English is not their first language, benefit significantly from early efforts to close achievement gaps. Challenges to immigrant and single parent families, as well as stress associated with parenting in general, can be alleviated through linkages to resources, services and opportunities. On-site parenting classes, child development workshops, support groups, and/or parent networking meetings would increase accessibility.

In addition to connecting to available support services in the neighborhood, quality childcare programs include a family support component that engages parents in the fabric of the school. Offering parent workshops and other types of presentations are important but much more effective when the parents have a meaningful say in what is offered and the format in which it is offered. If this approach is followed and parents feel included and listened to, cultural awareness will become part of the approach as well.

ACT's IMPACT project has been cited as a public/private partnership of early care and education by *Pipeline Crisis/Winning Strategies*³³. A peer-to-peer approach has been very effective at engaging parents in their child's education. Parent advocates also developed their capacity as leaders of their families and leaders within their communities. IMPACT's Parent Advocates were initially recruited from two local Head Start programs, which had undergone family support training available through the aegis of ACT. This clearly revealed Head Start as the first access point for parents to community resources and a marking point for acknowledging and nurturing their own leadership skills. These parents later noted that the training they received was their first experience of having felt supported, listened to and recognized for their leadership potential. A similar model can be developed in East New York, either through a free-standing program or in conjunction with an existing community program.

7. Promote professional development and educational opportunities for all staff.

As demonstrated by the number of directors and staff who are currently enrolled, or have completed educational programs and/or certification courses in early childcare and education, it is recommended that resources are made available for continued professional development, through certificate programs, degree bearing programs, training, coaching and technical assistance.

The newly created Children's Program Administrator's Credential (CPAC) by the CUNY Professional Development Institute has proven to be an important avenue for training due to its particularly accessible format.

³³ *The Pipeline Crisis/Winning Strategies for Young Black Men, Draft Reports of the Working Groups*, Friday, July 13, 2007, pg. B-2.

The survey results indicated interest in technical assistance in the following areas: teaching skills, management skills, board development, fundraising and fiscal management, safety, communication with parents, child development and parent involvement. There are a number of existing resources, free or low-cost, that could meet some of these requests. The recommendation is to establish a systematic means of communicating the information to childcare directors. The most effective means of communication would have to be determined, whether it be a website, mailings or a resource booklet. In addition, establishing a pool of substitutes for teachers who want to pursue educational and professional development, as well as resources for compensating them, would be a critical piece.

8. Provide technical assistance to directors on how to blend funding sources and how to access additional funding sources.

Funding for childcare centers is more limited as compared to Head Start centers that have Assistant Directors, Educational Directors and Family Service Directors. Directors of childcare centers often carry the entire load of administrative, educational, family support, programming and operational responsibilities. Until additional funding is available to provide staff relief, technical assistance is a cost effective and necessary resource for directors. There are several sources available to help individuals and organizations learn more about grant writing and the importance of diversifying their funding sources. We recommend that a resource book be created and distributed to the centers with a listing of the grant writing courses and resource centers that are available to them.

We recommend that grant writing courses/workshops be designed and taught in East New York that specifically address the needs of the East New York Early Care and Education centers. This type of outreach not only provides directors/staff with a valuable tool, it will also help connect them with the other centers and resources within their community.

Finally, and perhaps most importantly, directors need to know how to blend a variety of childcare funding streams in order to create a financially viable program. It is often the directors with years of experience who know how to maneuver the regulations and funding parameters. The recommendation is to establish a technical assistance resource utilizing the knowledge of experienced directors as well as government representatives. For example assistance should be provided to ensure that directors are aware of how to draw down federal CACFP dollars and other federal funding.

9. Conduct further research on childcare capacity.

Further research and a needs assessment is recommended to fully understand all aspects of childcare capacity. The first is to determine whether there are centers that offer more flexible hours, that is, staying open past 6 p.m., weekend hours and early morning hours. A corresponding assessment of the needs of parents can be conducted.

Likewise, more research is needed on the number of, and the demand for, infant slots.

A second aspect of capacity is the number of slots available compared to the need in the community, and in particular, the impact of slots that ACS is eliminating because of under-utilization. There are new budget cuts expected in winter 2009 and the impact of those cuts on East New York should be tracked and analyzed.

Conducting a survey with families on waiting lists is recommended to see what their needs are and to determine ways to reduce the number of children on various childcare waiting lists.

10. Advocate for changes in eligibility requirements.

It is recommended that childcare centers play a more active role in advocating for changes in the eligibility requirements, and conversely, that the various oversight agencies spend time in East New York speaking with parents and directors about eligibility obstacles. One example is the New York State requirement that parents show they are legally pursuing child support from absent parents. A second example is a parent who works and whose salary exceeds the income maximum even by a few dollars will be cut from being eligible for subsidized care.

While child care centers and their families can be a powerful force in advocating for change, we acknowledge the reality that directors of early care and education centers are often swamped with center operations. Building capacity to make change can be a several step process, and some centers will be more ready for advocacy activities than others. Joining coalitions, connecting them to existing efforts and city wide organizations are useful first steps.

APPENDICES

Section 2: Funding

Where do you receive funding from and what percentage of your funding comes from these sources?

Source	Y/N	Percent
ACS		
HRA		
DOHMH (For EI)		
DYCD		
Private: _____		
Other: _____		

Section 4: Capacity

Capacity	Number
Maximum Number of Children Served	
Other Sites? Capacities:	
<hr/>	
Number of Classrooms	
Other Sites?	

Classroom	Hours	Ages	# of Slots	Comment
Overall Center				

Do you have infant/toddler slots? _____
 How many? _____

Section 5: Families:

What languages are spoken at your center?

Language	Children Speak it?	Staff speaks it?
English		
Spanish		
French		
Creole		
Chinese		
Russian		
...		
...		

Family Program

Utilization

- Parenting Skills Workshops
- Health Care Enrollment
- Immunizations
- Public Assistance Programs
- Employment Seminars
- Mental Health/ Special Needs Assistance
- Other:

2. When you have a family who needs more than what your center can provide, who do you have on staff that oversees referrals to outside agencies? _____

3. What kind of referral system do you utilize? _____

4. Do you have access to the kinds of support services that you need to do your job well?

a. How beneficial are they?

1 2 3 4 5

5. Do you know what and where the Child Prevention Services are in your area? (These are the programs to help children in high risk situations) _____

Section 8: Workforce

1. How many people do you have on staff? _____

Directors _____ Child Care Providers _____

Teachers _____ Assistant Teachers _____

Support Staff / Other: _____

2. What is a good estimate for your staff turnover rate? _____

3. How many teachers are certified by New York State? _____

a. How many teachers are on a study plan (work-study)? _____

b. Child Development Associate’s Degree (CDA)? _____

c. CCP 30-hour training sessions? _____

4. Do you have any issues with coverage? _____

Section 9: Community Resources:

1. Do you have any partnerships with any outside organizations?

Organization

Partnership?

Brooklyn Public Library
CUNY Center for Professional
Development
Quality New York
Cool Culture

2. Are you aware of the Brownsville / East New York Community Partnership Initiative (a.k.a. CPI, Brownsville / East New York Neighborhood Network)? _____

3. Are you involved in any accreditation programs? _____

4. Would you be interested in receiving technical assistance in any area?

Area

Assistance?

Teaching Skills
Management Skills
Board Development
Fundraising and Fiscal
Management
Safety
Communication with Parents
Child Development

Section 10: Comments:

1. What would you describe as the area that presents the greatest challenge for your center? _____

2. What would you describe as your center's greatest strength? _____

3. Has anyone ever asked you these questions before? _____

4. What is the best way to contact you? (Phone, Email?) _____

CENTERS SURVEYED

Center Name	List Origin	Other	Type	Capacity
BROOKLYN DEVELOPMENT CENTER:EARLY CHILDHOOD SERVICES INC. 888 Fountain Avenue Brooklyn, NY 11208	NYC DOHMH	NYC DPC	Group Day Care - Public	45
BLAKE-MILFORD DAY CARE CENTER 334 Milford Street Brooklyn, NY 11208	NYC DOHMH	NYC DPC	Group Day Care - Private	60
A CHILDS HOME DAY CARE 327 New Lots Avenue Brooklyn, NY 11207	NYC DOHMH	NYC DPC	Group Day Care - Private	25
THE CHILDREN'S CORNER DAY CARE CENTER 565 Livonia Avenue Brooklyn, NY 11207	NYC DOHMH	NYC DPC	Group Day Care - Public	180
HEAVENLY MIRACLES ACADEMY SERVICES,INC. 533 Blake Avenue Brooklyn, NY 11207	NYC DOHMH	NYC DPC	Group Day Care - Private	130
THE KIDS PRIVATE PLAYHOUSE 757 Hendrix Street Brooklyn, NY 11207			HRA Day Care and Head Start	14
LUIS M. MARIN EARLY CHILDHOOD ACADEMY 851 Liberty Avenue Brooklyn, NY 11208	NYC DOHMH	NYC DPC	Group Day Care - Public	95
MARIE DURDIN CHILD CARE CENTER 2700 Linden Boulevard Brooklyn, NY 11208	NYC DOHMH	NYC DPC	Group Day Care - Public	60
TRUE WORSHIP CHURCH DAY CARE 872 Crescent Street Brooklyn, NY 11208	NYC DOHMH	NYC DPC	Group Day Care - Private	25
URBAN STRATEGIES DAY CARE CENTER #1 1091 Sutter Avenue Brooklyn, NY 11208	NYC DOHMH	NYC DPC	Group Day Care - Public	95

