STRENGTHENING THE GRID



2020 Progress Report



12%

Nearly 12 percent of births in Arkansas are preterm. 10%

Only 10 percent of infants and toddlers have access to high-quality child care.

38%

of third-grade students meet the reading readiness benchmark on the ACT Aspire.

With Excel by Eight (E8), we are committed to increasing children's health and education outcomes by:

- Building models for change in communities around the state.
- Identifying and resolving policy barriers that make it difficult for communities to build and strengthen their grids of resources.
- Enhancing public understanding of early childhood development to encourage action to build strong resource grids statewide.

SIES

Introduction

Imagine if every child in Arkansas was born healthy and full-term; received every well-child visit and developmental screen, with any needed follow-up services; participated in a home visiting program with their caregivers; attended quality early childhood programs; started kindergarten ready to succeed; and read on grade-level by third grade.

This vision is not yet a reality. Nearly 12 percent of births in Arkansas are preterm. Black babies are the most likely to be born preterm at 16.6 percent, followed by whites at 10.4 percent and Hispanics at 10.2 percent. Only 10 percent of infants and toddlers have access to high-quality child care, and less than half of three and four year olds are enrolled in pre-K. By third grade, 38 percent of students meet the reading readiness benchmark on the ACT Aspire. For some children, rates are even lower. Just 22 percent of Black third graders and 28 percent of Hispanic third graders met the benchmark, compared to 43 percent of white students.

Across Arkansas, there are programs and practices designed to help children, starting from birth, meet their full educational and health potential, including physical, mental, and oral health. But these resources are unevenly distributed, making it difficult for families to access what they need. The global COVID-19 pandemic has only amplified these challenges and the need for additional support.

That's why we're stepping up to help.

Since 2011, Arkansas Campaign for Grade-Level Reading (AR-GLR) has been driven by our mission to ensure all children read at grade level at the end of third grade. With the support of our more than 30 partner organizations, AR-GLR has proudly received national recognition for our work to help improve parent and community engagement, school readiness, classroom instruction, attendance, and summer learning.

But we recognize there's more progress to be made. That's why we're changing our name to Excel by Eight (E8) and re-focusing our efforts on helping advance policies that support all Arkansas children and their families, starting before birth.

Excel by Eight Team



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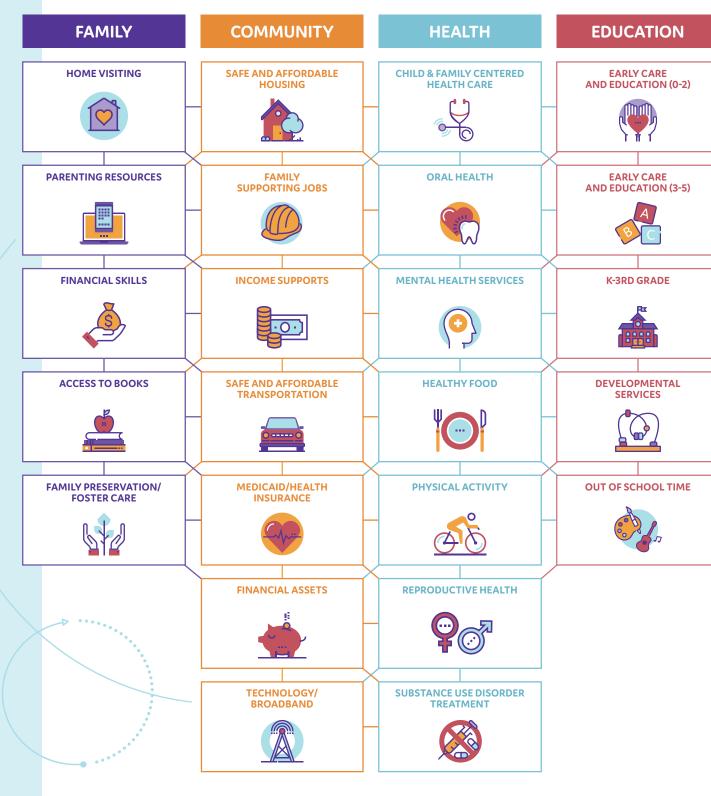
Jamie Morrison Ward President Arkansas Association for Infant Mental Health

The Grid

The array of resources children and families need to thrive operates like a power grid. Some parts may be incomplete or malfunctioning, or the connections may be frayed or broken altogether. Resources such as high-quality learning opportunities, healthy food, physical and mental health services, safe housing, and supportive relationships help children reach their full potential.

An unreliable or patchy flow of resources can result in a range of child development delays, with long-lasting consequences for children's health and well-being. Creating a reliable grid, one in which all families and communities are equally plugged in, will help ensure all children have what they need to thrive.







Excel by Eight Foundations

The brain develops faster from birth to three than any period in life, building the foundation for future learning, behavior, and health. Parents play a lead role in healthy development, but many are stretched thin in the earliest years of their child's life. Whether through direct support or a community-based network of organizations and programs, the public sector has a key role to play in helping families access needed services. With this early support, infants can grow into healthy kids who are confident, empathetic, and ready for school and life. Our communities, workforce, and economy become stronger and more productive as a result.

Prenatal to Age Three is Critical for Brain Development

A child's experiences in the first three years of life are the bricks and mortar of brain development, with more than one million new neural connections forming every second. As research from the Center on the Developing Child at Harvard University shows, responsive relationships and positive experiences help build a sturdy brain architecture. This becomes the foundation for core social emotional intelligence, early executive functioning and selfregulation, and literacy-skills that are critical for long-term health and success. These experiences begin at home but can also be provided through effective programs and policies.

Early Investment Works

It's not only infants, toddlers, and families who benefit when we start early—it's entire communities. When we invest in the first three years of a child's life, we can reduce the need for more expensive interventions later. Research from Professor James Heckman at the University of Chicago found investments in highquality programs that support children from birth deliver a 13 percent annual return-significantly higher than preschool alone.

Our Policy Agenda

In 2019, the Excel by Eight Foundations Collaborative, composed of 70 members representing families, health care professionals, education providers, state agencies, government officials, researchers, advocacy groups, and philanthropists—developed a policy agenda to help support families with young children.



Strengthening the Grid

Healthy Beginnings

A healthy beginning starts before birth. Expectant mothers need access to comprehensive prenatal and postnatal care, screenings and services to ensure infants are born safely and continue to thrive. Once born, infants need access to ongoing well-child visits, developmental screenings, and any needed therapy services and social supports identified by those screens.

Supported Families

For healthy development, infants and toddlers need quality health care, stimulating learning opportunities, and nurturing, responsive relationships. A system of support should be in place at or before birth to ensure every parent and child receives the needed information, assessments and referrals for a strong start. Home visiting programs are a key strategy for providing these resources.

High-Quality Child Care and Early Learning

High-quality child care must be accessible and affordable. Whether it's in a center or through a home-based program, stimulating learning opportunities and nurturing, responsive relationships are crucial to healthy brain development. Highquality child care also gives parents peace of mind, so they can focus on work.



By 2025, our goal is to expand the number of pregnant women, infants, and toddlers receiving high-quality health and education services by more than **35,000**, with long-term plans to close the gaps between demographic subgroups.

We will achieve this by increasing the number:

- receiving screenings and supportive services that improve health and education outcomes;
- served by high-quality home visiting models; and
- enrolled in high-quality early childhood education programs.

To help achieve these goals:

- The Arkansas Chapter, American Academy of Pediatrics will pilot HealthySteps in four to five pediatric practices to enhance the use of screenings and follow-up services and then expand to serve nearly 23,000 infants and toddlers across the state.
- The Division of Children and Family Services at the Department of Human Services and the Arkansas Home Visiting Network will expand the SafeCare home visiting model to almost 1,300 families statewide.
- The University of Arkansas will create a Family Child Care Home Network to help family child care providers build capacity and increase quality for approximately 600 infants and toddlers in Northwest Arkansas.



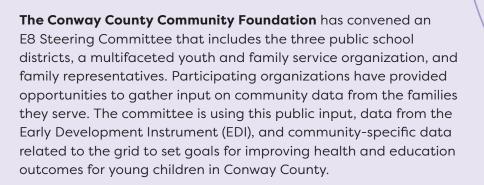


E8 Communities

In 2019, we piloted local models for change within four Arkansas counties—Conway, Independence, Monroe, and Sevier. These community-driven initiatives are led by Steering Committees that assess available resources and identify existing gaps and weak spots in their grids. Based on this local analysis, the committee members then develop plans for shoring up or better aligning the resources needed to help children and families in their communities succeed.

In 2020, Little Rock and Union County began organizing their Steering Committees and planning processes. In Little Rock, the Mayor's office is the lead organization. In Union County, the Steering Committee is building on a Community Advisory Board created by Arkansas Children's and the Medical Center of South Arkansas. These committees will undertake a process similar to the pilot communities by researching needs, prioritizing ideas based on community input, analyzing root causes, and setting goals and action plans to address the greatest opportunities for impact.

Conway County



Kindergarten teachers in the three school districts completed the EDI in the spring of 2019. In addition, five data walks were held to gather community input. In July, Community Services Inc. hosted two data walks in partnership with Room 29:11 for guardianship families, foster families, and CSI staff. The final three walks were held at the elementary schools in the Nemo Vista, South Conway County, and Wonderview districts during parent-teacher conferences. The top priorities identified by the more 170 participants were: food insecurity; children living in poverty; average annual wages; availability of child care; and substance use disorder treatment.

E8 Steering Committee:

John Gibson, Conway County Community Foundation

Shawn Halbrook, South Conway County School District

Lora Hendrix, South Conway County School District

Kaila Parker, Parent

 $\textbf{Susan Okroglic}, \ \mathsf{Community} \ \mathsf{Services}, \ \mathsf{Inc}.$

Jamie Stacks, Wonderview School District

Karey Tapley, South Conway County School District

Joy Trauth, Retired Teacher/Grandparent

Logan Williams, Nemo Vista School District



Strengthening the Grid 2020 Progress Report

Monroe County

The Excel by Eight Steering Committee operates as an extension of the health and education partnerships of the Monroe County Children in Trust (MCCIT).

MCCIT is a coalition of community partners that implements interventions to support families in need. The committee includes educators, community organizers, state agency administrators and staff, home visiting providers, and child advocates.

Approximately 60 individuals participated in the Monroe County data walks. Families provided input during parent teacher conferences at Brinkley and Clarendon elementary schools. Cottage of Knowledge gathered a family group to participate in Brinkley, and E8 Steering Committee members participated in a data walk.

E8 Steering Committee:

Bertha Bones, Clarendon School District

Vernetta Burks, HIPPY

Ruby Ellis, Clarendon School District

Rhonda Fitzhugh, Arkansas Department of Human Services

Sylvia Halliburton, Cottage of Knowledge

Lisa Flake, Monroe County Health Unit

Monica Lindley, Mid Delta Health Center

Miekka Maile, Grand Prairie Court Appointed Special Advocate

Cassandra Harvey, Monroe County Health Unit

Valerie Turner, University of Arkansas Extension Services

Cameron Welch, Clarendon School District

Candace Williams, Rural Community Alliance









In addition to the above areas, the four school districts utilized the E8 platform to collaborate on a Comprehensive State Development Grant designed to help create a school and community culture aligned with the science of reading. Each district submitted a proposal, but narrowed down collective objectives for the community engagement aspect to strengthen their chances to receive the award. Each district received the grant and will work together to provide access to developmentally-appropriate books for students who have aged out of Dolly Parton's Imagination Library. They will also engage the business community to help develop strategies that tie literacy and executive functions to workforce readiness for older youth.

E8 Steering Committee:

Jennifer Douglas, Batesville School District

Mary Katherine Hardin, STARS Academy

Crystal Johnson, Batesville Area Chamber of Commerce

Whitney Massey, Baker Family Dentistry

Lisa McGhee, Southside Schools

Bani Meharg, Midland Elementary

Dr. Lesley Milton, Tooth Be Told

Pediatric Dentistry

Debbie Mize, Child Care Aware

Tracey Owens, Cedar Ridge School District

Kimberly Poole, Southside School District

Jamie Rayford, Batesville Area Chamber of Commerce

Dr. Julia Roulier, University of Arkansas for Medical Sciences

Mindy Shaw, University of Arkansas Community College - Batesville

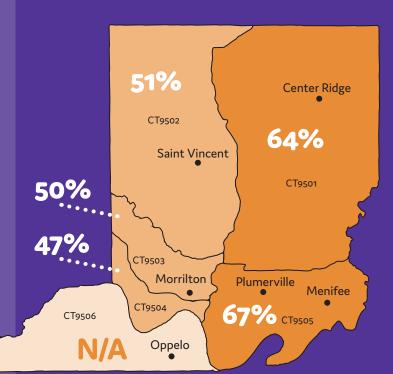
Brooke Stevenson, Parent

Nikki Yonts, Lyon College

Early Development Instrument

With support from Arkansas Children's Natural Wonders Partnership Council, E8 partnered with the UCLA Center for Healthier Children, Families, and Communities to provide the Early Development Instrument (EDI) to each E8 community. The EDI is a population measure of how young children are developing based on the five domains of early childhood development: physical health and wellbeing; social competence; emotional maturity; language and cognitive skills; and communication skills and general knowledge. Kindergarten teachers in each E8 community completed the assessment for their students, which we used to develop maps to help with future planning.

Percentage of Children Developmentally on Track for all Domains





Sevier County

The E8 Task Force in Sevier County is

a committee of an existing community development initiative, Sevier County Coalition, that works hand-in-hand with economic development efforts in the area to ensure connections across the resource grid are transparent and cohesive.

With equity at the forefront, the E8 Task Force focused on conducting data walks in settings that were easily accessible to all residents regardless of transportation access, language fluency, work schedules and other challenges. In total, the task force hosted seven data walks and solicited input from more than 300 community members, including Spanish-speaking and Marshallese-speaking communities. The data walks identified food insecurity, childhood obesity, teen pregnancy, and average annual wages as key priorities. The Task Force is now utilizing this community input and the completed EDI to set goals.

E8 Steering Committee:

Erika Buenrrostro, University of Arkansas Cossatot Community College

Cheryl Byrd, Sevier County Health Unit

Janet Cantrell, University of Arkansas Extension Services

Omar Gallardo, Community Member

Deborah Hedge, Sevier County Health Unit

Kimberly Johnson, Little Bitty City Enrichment Center

Kim Kennemore, De Queen-Mena Education Service Cooperative

Ray Reynolds, De Queen First Assembly

Mary Runnels, Arkansas Department of Human Services

Amy Smith, Horatio Public Schools

Beth Tody, Horatio Public Schools

Angie Walker, Office of Dr. Randy Walker

14 Strengthening the Grid

Excel by Eight Milestones

	FAMIL	Y		BASELINE	2030 GOAL
		Funded home visiting slots ⁵	2018-19	8,221 2,036 (0-2) 6,185 (3-5)	30,000 15,000 (0-2) 15,000 (3-5)
		Children receiving books through Dolly Parton's Imagination Library ⁶	2019	30,031/month	191,000/month
	COMMUNITY			BASELINE	2030 GOAL
		Children (0-18) under 200% of poverty that are uninsured ⁷	2019	5.9%	5.6%
	HEALTH			BASELINE	2030 GOAL
MEASURES		Medicaid recipients 3 – 6 years of age who had one or more well-child visits with a PCP during year ⁸	2017	54%	57%
		Medicaid recipients birth to five who received any dental or oral health service ⁹	2018	28%	29%
	()	Medicaid recipients receiving dyadic mental health services ¹⁰	2019	N/A	TBD
		Statewide ratio of free and reduced-price school breakfast to lunch participation ¹¹	2018-19	67%	70%
		Child food insecurity rate ¹²	2017	23%	20%
		6th, 8th, 10th, & 12th graders that ever used any drug, including alcohol, marijuana, tobacco, and other illegal drugs ¹³	2018	20%	18.5%

	EDUCATION			BASELINE	2030 GOAL
MEASURES		Child care vouchers paying for a slot in a Level 3 Better Beginnings rated program ¹⁰	2018-19	Infants and Toddlers 2,086 3- 5 year olds 3,649	All vouchers pay for slots in Level 3 programs.
		Children receiving at least one ASQ or Brigance screen at 9, 18, and 30 months and autism screen at 18 and 24 (or 30 months)	2019	NR	32,025 35%
		3rd graders meeting reading readiness benchmark on the state assessment, the ACT Aspire ¹⁵	2018-19	38%	80%
		4th graders reading at proficient or above according to the National Assessment of Educational Progress ¹⁶	2019	31% Arkansas ranks 42nd	Arkansas ranks in the top 25 states
		Students receiving dyslexia interventions ¹⁷	2018-19	4.8%	20%





Excel by Eight Steering Committee

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Arkansas Hunger Relief Alliance

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Chrissy Chatham

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Sandra Withers, Healthy Child Care Arkansas

Leeann Woodrum, Arkansas Children's Clinical Network



Early Successes on Policy Goals



New Legislative Caucus Formed to Address Child Wellbeing

In 2020, Arkansas legislators formed the Early Childhood Wellbeing Caucus to inform state lawmakers about ongoing issues and establish a legislative agenda for the Arkansas General Assembly. The caucus is co-chaired by Senator Trent Garner, a Republican, and Representative Denise Garner, a Democrat. At the initial meeting, members learned about the importance of early brain development, with a focus on prenatal to age three. Following a pause for COVID-19, the caucus met again to discuss the significant disruption to childhood vaccinations that resulted in 75,000 fewer shots in the first half of 2020 compared to the same period in 2019 and the state's ongoing efforts to help child care centers and family child care homes during the pandemic.

SafeCare Expands Statewide

In 2018, the Division of Children and Family Services at the Department of Human Services and the Arkansas Home Visiting Network launched SafeCare. In addition to improving risk and safety assessment and management, this program is designed to protect children in their homes and prevent their entry into foster care. During weekly visits for up to 18 weeks, home visitors work with parents of children ages five and under to improve parenting skills and create a safe and nurturing home environment. They focus on fostering positive parent-infant/child interactions, home safety, and child health care. SafeCare began as a pilot and is now operating statewide and served 667 children in 2020.

Early Steps to School Success Launched in Arkansas

With support from the Division of Child Care and Early Childhood Education at the Department of Human Services, Save the Children launched a new home visiting program in 2019 called Early Steps to School Success. Early Steps focuses on the five years before a child enters the formal education system as an important window of learning and enrichment. They provide home visits from birth to age three; parent support groups; referrals to center-based early childhood programs at age three; a book bag exchange until kindergarten entry; and a transition program to provide preschool and kindergarten support. Since its launch, Save the Children has partnered with 12 elementary schools in seven counties and now serves 216 children. It plans to expand to two additional counties in the 2020-2021 school year to reach a total of 650 children.

Increasing Child Care Quality Through Higher Education

In 2019, the Arkansas Early Childhood Association launched T.E.A.C.H., the Teacher Education and Compensation Helps Early Childhood® Scholarship Program. Through T.E.A.C.H., early childhood educators receive scholarships and paid time off to take classes to obtain certificates and degrees. They also receive a bonus upon completion of their scholarship contract. Current partner colleges include the University of Arkansas at Fort Smith, University of Arkansas Community College Batesville, University of Arkansas Community College Morrilton, University of Arkansas Pulaski Technical College, University of Arkansas at Monticello College of Technology - McGehee, University of Arkansas at Monticello - Crossett, Phillips Community College of the University of Arkansas, and Northwest Arkansas Community College. T.E.A.C.H. began with 16 students in the spring 2020 semester. This fall, 50 are enrolled. Over half work in infant and toddler classrooms, where the need for quality improvements are the greatest. The majority of those enrolled in the program work for centers that have a Better Beginnings rating that is below 3 stars. This additional training will help those centers increase the quality of their care.

Arkansas Makes Steps Toward Paying for Developmental Screenings

Arkansas is one of only five states that does not reimburse health care providers for developmental or autism screenings through Medicaid. As a result, many infants and toddlers miss out on needed services. In a significant step forward, the Department of Human Services (DHS) recently began requiring pediatricians and family physicians to conduct development screenings at 9, 18, and 30 month well-child visits using either the Ages and Stages Questionnaire (ASQ) or the Brigance Inventory of Early Development. It also required autism screenings at 18 and 24 months using either the Modified Checklist for Autism in Toddlers (M-CHAT) or the Pervasive Developmental Disorders Screening Tests-II (PDDSDT-II) Stage1. In coordination with Arkansas Medicaid, Arkansas Foundation for Medical Care will soon begin a quality improvement project focused on improving the use and documentation of these developmental screenings in primary care practices. To further ensure adoption of this requirement, DHS

must now reimburse physicians for providing these services.

Strengthening the Grid



Take Action

There are many ways individuals, businesses, policymakers, and community leaders can help strengthen resource grids. Find a way (or two) that you can be part of the solution.



• Make sure the children in your life receive all of their well-child check ups and developmental screens at their 9, 18, and 30 month visits.

Families

- Use the Better Beginnings website to help find quality early childhood programs for your children or those children in your extended family.
- Make sure children get therapies and other services necessary to address developmental delays or other barriers that may prevent them from achieving their full potential.

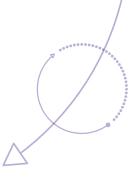
Communities

- Develop partnerships among early childhood education providers, schools, and local dentists to ensure children receive preventive oral health care.
- Work with mental health providers in your community to make sure they are providing mental health services for young children and their caregivers together.
- Start an advocacy group to funnel resources and expertise needed to expand green spaces for outdoor recreation, foot paths, and bicycle trails.



- Support Medicaid reimbursement of developmental and autism screenings and coordination of services identified as necessary by the screens.
- Help expand home visiting programs so more families have access to parenting, health, and education resources.
- Increase public support for early care and education and pre-K programs.



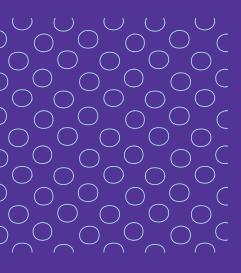


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