



Vermont's Early Childhood
Data & Policy Center



2022 Vermont Early Childhood Family Needs Assessment



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Appendices A through L are available at:
vermontkidsdata.org/2022-family-needs-assessment

Executive Summary

Overview:

A survey was fielded to better understand the barriers families face when accessing services and supports in order to inform policy and programs in Vermont's early childhood systems (prenatal to age 8). This report provides an in-depth analysis of how well these services are working for families, the challenges they face, and what Vermont is doing well for young families. The Early Childhood Family Needs Assessment was led by the Families and Communities Committee and supported by the Building Bright Futures State Advisory Council Network and the Vermont Integration Prenatal to 3 (VIP-3) grant.

Survey and Distribution:

From over 600 respondents of the survey fielded between mid-August and mid-October 2022, Building Bright Futures and the Families and Communities Committee gained insight into the experiences of families with children under age 9 when it comes to accessing a variety of services and supports in Vermont's early childhood system.

- Respondents were asked about their experiences with accessing a range of services—everything from child care to early intervention services, healthy food, pediatric care, and transitions between settings and services.
- Respondents were given the opportunity to rate their overall experiences with seven different services and supports in Vermont's early childhood system, and were then asked to provide more in-depth feedback on up to three services.

Findings:

- Overall, respondents reported having positive experiences with the services and supports they were asked about. Responses ranged from 71% of respondents agreeing that their overall child care and early learning settings experience was positive, to 93% agreeing their experiences were positive in medical care settings.
- Respondents suggested a number of factors made their experiences either easier or more challenging when it came to accessing services and supports for their family:
 - Relationships with staff and providers, communication, timeliness of services, and distance to services were identified as supporting families' ability to connect with resources.
 - Difficulty accessing a service or support due to availability or due to cost, and difficulty navigating the complex early childhood system were frequently cited barriers for families.
- A more in-depth overview of each of the results from the main sections of the survey are available in [Appendices B-L](#).

Limitations:

A number of limitations to both the Early Childhood Family Needs Assessment and our analysis are notable when reviewing the results. These include: a self-selection bias in those most likely to complete the survey, accessibility limitations to the survey itself (including its availability in only English), a limited ability to fully analyze a large volume of data, and continued limitations related to the COVID-19 pandemic that may limit the generalizability of the findings.

Policy Considerations:

Four policy considerations have resulted from the report's findings, Families and Communities Committee discussions, and discussions with content experts. These policy considerations can be read in full in the report.

1. Evaluate and align Vermont's strategies to inform and connect families to resources

Vermont currently has multiple formal and informal resource and referral systems. However, families reported difficulty knowing where to look for information and difficulty navigating systems and resources. An evaluation of existing systems and financing streams will help identify areas for improvement.

2. Review national best practices to reduce administrative burden and promote equity of access to necessities (diapers, food, formula, etc.)

Data has shown disparities in access to nutritious food and necessities between white and non-white and multi-racial Vermonters. To best serve and support all young children and their families, it is critical that those implementing programs or developing policies review national best practices to reduce and document their steps towards eliminating these disparities.

3. Support the implementation of clear guidance on the full scope of kindergarten transitions

Positive kindergarten transition experiences are connected to improved academic achievement and positive family engagement. Data from the survey show that families have varied experiences with their children's transitions to kindergarten and that schools handle the multiple aspects of this transition differently. Guidance on kindergarten transitions and support with implementation from the Agency of Education is a critical component of successful transitions for young children and their families across Vermont. As with all official guidance, there should be a process involving statewide stakeholder engagement and utilization of existing frameworks and best practices.

4. Pursue integration of mental health services throughout Vermont's early childhood system that encourages ease of access for families with young children

Integration of mental health services within Vermont's larger systems of services and supports is an area that has been well studied and reviewed by the stakeholders within the Mental Health Integration Council. The findings of the Family Needs Assessment reinforce their recommendations, especially a recruitment campaign for the mental health workforce and incentivized integration of mental health services in primary care to promote wellness. In addition, there are other models in which families receive or are connected to mental health services such as Children's Integrated Services, Parent Child Centers, Head Start, and others that should be considered when pursuing integration.

2022 Early Childhood Family Needs Assessment

Introduction

Between mid-August and mid-October 2022, a survey designed to collect data and stories from Vermont families with children under the age of 9 was circulated widely throughout the state, resulting in 639 responses. This was a project of the Families and Communities Committee, made up of a majority of parents and primary caregivers who lead the process of developing a survey, engaging in outreach, and overseeing the production of an Early Childhood Family Needs Assessment report on a regular basis.

In the survey developed and fielded in 2022, the team aimed to collect information and stories about the barriers that families face when accessing services and supports available during early childhood, from the prenatal period through age 8. Respondents were asked about their experiences with accessing everything from child care to early intervention services, healthy food, pediatric care, and transitions between settings and services. The survey asked primary caregivers to rate a variety of experiences with early childhood settings, including to indicate how welcomed they felt in a given setting, if they felt their family's culture and values were respected, and if they had the access and tools to communicate their family's needs to the setting's staff.

These questions were designed to better understand the challenges Vermont families face when accessing services. This is data the Committee considers essential to informing important policy and implementation decisions in Vermont as stakeholders aim to better unify the early childhood system.

Methodology

Survey and Fielding

The Families and Communities Committee co-chairs, two parent leaders, Jen Fortman and Sarah Morrison, led the survey design, drafting, and editing process with support from the BBF Policy and Data team in the spring and summer of 2022. Throughout the process, the team reviewed numerous drafts with the Committee to inform and adjust the survey's design based on their personal experiences, understanding of the early childhood system, and family needs in their communities. In addition to the Committee, the team also consulted with a variety of public and private partners who were sent drafts of the survey for review. See Appendix A for the final survey.

Upon finalizing the survey, the team developed both an electronic version (conducted via SurveyMonkey) as well as a paper version of the Assessment. This was another careful and collaborative decision-making process by the Committee, who decided to direct most responses of the survey through the electronic copy, but strategically made a paper version available for circumstances in which it was preferable or required (for those without access to broadband internet or devices, for those responding in a setting where paper copies could be made more readily available, and for facilitating the survey process with the support of contracted cultural liaisons and interpreters).

In addition to our group of parents, family members, and early childhood stakeholders who were instrumental in developing the survey for the Early Childhood Family Needs Assessment, the team also recruited and trained a group of over 15 Parent Ambassadors from across Vermont to serve as conduits of the survey in their communities. They supported the Committee and the project by promoting the survey on social media, hanging fliers in popular community spaces, delivering paper copies of the survey to harder-to-reach communities, and more. This is one of many ways that the Committee and our team at Building Bright Futures are committed to increasing paid opportunities for family leadership and participation in the policy and decision-making process in the state's early childhood childhood system.



Jen Fortman (left) and Sarah Morrison (right), co-chairs of the Families and Communities Committee prepare paper copies of the survey and other materials for distribution.

Analysis

The Building Bright Futures (BBF) Data Team conducted basic descriptive analysis as well as in-depth qualitative analysis to identify the barriers families face when accessing services related to the early childhood period in their communities. An iterative thematic analysis was performed by BBF's Data and Policy Team independently. Themes and sub-themes were identified and refined throughout the project to best represent the data and to reach final consensus.



Report Production

The Families and Communities Committee and its family leaders were partners in all aspects of this work and co-led the survey design and data collection approach with families statewide. This team of family leaders also provided guidance and feedback throughout the analysis as key themes emerged, and will support dissemination of the findings and policy considerations. While analyzing and drafting the report, the BBF Data Team provided numerous updates to the co-chairs of the Committee and strategized with them about providing meaningful opportunities for the Committee to review and provide feedback on the data and report narrative. This process has operationalized the Committee mission to help create an early childhood system that mirrors the diverse needs of Vermont families. By providing parents and caregivers with opportunities to bring forward thoughts and concerns, and to partner in systems conversations and decision-making processes, families become leaders in designing a responsive system that works for them.

For the development of policy considerations, BBF partnered with the Families and Communities Committee and content experts to develop the policy considerations associated with this report. On April 6, 2023, the Families and Communities Committee⁵ discussed and approved the policy considerations.

Results

The Early Childhood Family Needs Assessment (FNA) captured data across 11 sections, each of which provided extensive information to be analyzed. A more in-depth overview of each section is provided in [Appendices B-L](#) while significant findings are highlighted below.

Respondent Characteristics

The FNA survey resulted in 639 valid responses from families of 1,089 children, representative of about 2% of Vermont's total child population under age 9. Respondents primarily identified as white (87.9%) and non-Hispanic/Latina/o/x (92.5%). However, FNA respondents were more racially diverse than the Vermont population as a whole (87.9% white vs. 94% for the state and 87.9% non-Hispanic/Latina/o/x vs. 97.8% for Vermont). Respondents also primarily identified as female (83%) with the rest identifying as male (14%) or either another gender identity or preferred not to answer (3%). Again, when compared to the population as a whole, there were many more female respondents than in the Vermont population as a whole (83% vs. 50.3%). See Appendix B for a more complete set of demographic characteristics.

Responses were recorded in each county of Vermont. Similar to the comparison with the race and ethnicity breakdown above, when compared with the Vermont population as a whole, there were more respondents in Orleans and Bennington counties, and fewer in Chittenden and Windsor counties likely due to the reach of the Parent Ambassadors and the extended Building Bright Futures Network. The most responses were recorded in Chittenden County with 121, while the least were from Essex and Orange counties.

Access to Basic Needs

The vast majority of respondents agreed that they had access to basic physiological needs (housing, food, transportation, and other necessities). See Appendix C for a more complete breakdown of responses.

- 92% of respondents agreed that they had access to safe, secure, affordable housing.
- 94% agreed they had access to reliable transportation, although respondents eligible for 3SquaresVT (at or below 185% of the federal poverty level) were less likely to agree (85%) than those not eligible (95%).
- 91% of respondents agreed they had access to affordable food that met their needs and preferences.
- 92% of respondents agreed with the statement "My family has access to and can afford the necessities we need."

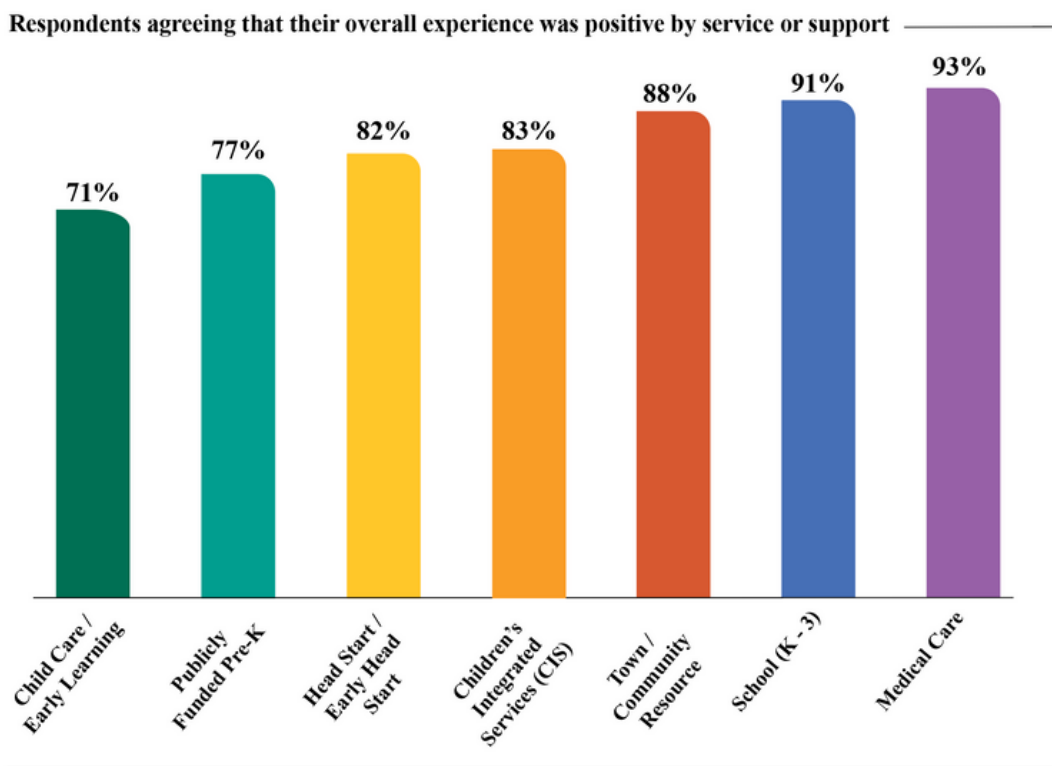
When breaking out these findings by race, non-white and multiracial respondents were less likely than white respondents to agree that they had access to food (82% and 90%) and necessities (78% and 94%) than their white counterparts. (See policy consideration 2.)

Experiences with Services and Supports

The largest section of the survey was focused on a family's experience with services and supports. In order to better understand the challenges Vermont families face when accessing services, respondents were provided with an opportunity to rate their experience with seven services and supports, and three opportunities to provide in-depth feedback about a specific service or support. Since respondents' use of specific services varied, the number of responses for each setting ranged between 257 for Head Start and Early Head Start and 606 for medical care settings. The number of responses for each setting or support ranged based on respondents' use of that service or support.

An in-depth exploration of each service and support is provided in [Appendices D-L](#) while significant findings are highlighted below.

As can be seen in the figure below, responses ranged from 71% of respondents agreeing that their overall child care and early learning settings experience was positive, to 93% agreeing their experiences were positive in medical care settings.



Key Themes

Seven key themes emerged across the services and supports from both qualitative and quantitative responses. Of note, respondents had different experiences with services and supports, and the themes above were not universally experienced (e.g. a positive experience with communication or a challenging experience navigating the early childhood system).

Themes related to positive experiences: Respondents highlighted three key interrelated themes: relationships with staff and providers, communication, and ease of access.

Relationships: Interactions with providers and staff are a large part of receiving any service or support. Respondents used words like friendly, welcoming, exceptional, supportive, knowledgeable, and caring. Respondents particularly appreciated quick response times, providers who listened carefully, and providers who reached out to check in.

Communication: Closely tied to relationships, communication was highlighted as a key contributor to positive experiences. Respondents highlighted specific communication strategies including clear and concise guidance, multiple modes of communication (e.g. apps, check-ins, texting), and spending time together to make sure that there was a common understanding among staff, providers, and families. In addition, coordination and communication between providers (e.g. OB/GYN and pediatric offices, pre-K and kindergarten teachers) were highlighted as an important part of a positive experience.

Timeliness and distance to services: Respondents highlighted two key factors that impacted their ability to access resources: availability of timely services, and geographical proximity. While seemingly basic, these factors were often highlighted or insinuated when respondents were describing a positive experience.

Quotes from Families: Positive experiences

"The library offers so many great resources for families with young children. They bring their programs throughout Burlington, explain things clearly on the web, and the staff are so helpful and knowledgeable. They really make you feel part of a community."

- Caregiver in Chittenden County

"Our pediatrician's office is in the neighborhood, and has been amazingly responsive, supportive, and helpful."

- Caregiver in Chittenden County

"My kindergartener joined the town t-ball team a few months after moving here. It was a great way to get to know other families in our area!"

- Caregiver in Addison County

Themes related to challenging experiences: Across services and supports, three common themes emerged: difficulty accessing a service or support due to availability, difficulty accessing a service or support due to cost, and difficulty navigating the complex early childhood system.

Difficulty accessing a service or support due to availability: For the majority of the services and supports, respondents identified limited availability as a key barrier to access. This could be due to geographical distance, limited or no openings, or services that were a mismatch with the respondent's needs and desires. Of note, although mental health services were not one of the seven services and supports specifically identified in the survey, difficulty accessing mental health services was highlighted by respondents and in meetings of the Families and Communities Committee. (See related policy consideration 4.)

**Quotes from Families: Difficulty accessing a service or support due to availability
(See policy consideration 4)**

For child care and mental health services in particular, availability was identified as a key barrier.

Child care:

"I took a day off of work to call over 30 providers trying to find a spot for our daughter."

- Caregiver in Chittenden County

Mental health services:

"Wait lists for mental health professionals in our area are outrageous!"

- Caregiver in Windsor County

"Children's mental health services are hard to find, even for a persistent, well-educated parent in Chittenden County."

- Caregiver in Chittenden County

"Impossible to get this service. Been waiting for a very long time for referral to [the organization] and have only received a letter saying we received it and will be in touch when we can. Unacceptable for children that need mental health services."

- Caregiver in Franklin County

"It has not been easy for my child & I to get mental health counseling. Both my child & I were waitlisted at at least 15 plus different counseling centers or private counselors & we remained without therapy for over 2 years until we both finally got in at separate places."

- Caregiver in Chittenden County

For child care and food shelves, a **mismatch of hours** was identified as a key barrier.

Child care: *"I spent HOURS looking up childcare providers... I couldn't afford 97% of the places I reached out to. Or the hours they could offer wouldn't work, or they only had an opening like two Wednesdays per month or some crazy thing like that."*

- Caregiver in Windsor County

Food shelves: *"Food shelves aren't open every week and when you are trying to feed a family of 6 it takes a lot of \$\$ and then other bills slip and get behind."*

- Caregiver in Addison County

Difficulty accessing a service or support due to cost

While there are free and low-cost services and supports, and financial assistance for some families, the cost of child care in particular was highlighted as a key barrier to access and financial comfort.

Kindergarten transitions

Respondents who shared their experiences with kindergarten transitions related mixed experiences. For some families, the process was seamless with support for the family as a whole from the school, and their pre-K program and/or other community when applicable. For other families, the process was unclear and caused anxiety for the child and family. (See policy consideration 3.)

Quotes from Families

Difficulty accessing a service or support due to cost

"We pay almost the same amount as we do for our mortgage for our son's care but have no other options available to us as my wife and I both need to work to afford to live in this area."

- Caregiver in Chittenden County

Kindergarten transitions (See policy consideration 3)

"We accessed public pre-K. Handling the forms for Act 166 with the school district was seamless, and both providers were exceptional at welcoming us into the community, caring for our children and keeping us involved."

- Caregiver in Chittenden County

"Kindergarten begins in a week and we are dreading the transition. We still haven't received any communications regarding how drop-off works or what the daily routine looks like. After much digging on the website, I was able to find out what time school starts and ends."

- Caregiver in Lamoille County

The early childhood system is difficult to navigate

Vermont's early childhood system is complex and often difficult to navigate. Respondents highlighted challenges including knowing where to go for information, understanding which services and supports were available and how they connect to each other, and difficulties with paperwork and communication. (See policy consideration 1.)

Quotes from Families (See policy considerations 1 and 2)

As outlined by one respondent, *"There are so many different ways that services are offered and it is not always clear how they are related. Word of mouth is a primary way that I learn about services and supports, but that is limited by my circles. Various directories are confusing and can provide conflicting information. A bunch of the resources are also far away."*

- Caregiver in Windham County

"When the resource was fully explained and direction on how to connect to that service was provided. Example: pantry soft home delivery food service. Once I heard about it and was provided a link, it saved me so much grief and struggle with getting food that it lifted me up a little and took some stress off my shoulders. Huge win for my needs. This helped 8 months after the resource was available so that part was a miss in providing me the resources in real time."

- Caregiver in Chittenden County

"Not being from here originally I had no idea what systems were in place. Each system (WIC, food stamps, Medicaid etc.) has different financial eligibility requirements and it's incredibly confusing. For a long time I didn't even know I was eligible for some financial assistance for our healthcare because I assumed it was the same as food stamps."

- Caregiver in Caledonia County

Limitations

Several limitations are of note in four areas: self-selection bias, survey limitations, analysis limitations, and the COVID-19 pandemic.

Self-selection bias

While the Early Childhood Family Needs Assessment (FNA) survey had a robust sample of 639 valid responses, it is important to note that the findings above are based on the sample of respondents rather than the self-reported experiences of all Vermont families with young children, as illustrated below:

- Respondents were potentially more likely to be connected to resources and services in the early childhood system given that the survey was administered by Parent Ambassadors, their networks, and social media.
- The vast majority of respondents participated in the survey via SurveyMonkey and therefore had a way to access the internet for non-critical tasks.
- As outlined above, a high proportion of respondents agreed they were able to meet their basic needs (housing, food, transportation, etc.). See Appendix C for more information.

Survey limitations

- The survey did not ask about all early childhood services and supports, which may have limited the elevation of key positive or challenging contributors to family experiences. For example, special education services, mental health services, and home visiting were not specifically identified.
- The survey was in English, which may have excluded potential participants. Translators were made available to a small group of individuals at a single in-person event.
- The survey was also long—the paper copy was seven pages. Potential respondents without the capacity for such an in-depth survey may not have participated in or completed the survey (although all sections of the survey were optional after the two screening questions).

Analysis limitations

- Limited scope of analysis: The Family Needs Assessment survey produced an abundance of information. While a great deal of time and expertise went into analyzing the Family Needs Assessment data, it was not possible to analyze all of the data. Further analyses from partners may support a deeper understanding of other questions by using the rich data provided by respondents.
- The limited sample size in several counties prohibited further breakdowns of the data.

The COVID-19 pandemic

While not a limitation like self-selection bias above, the COVID-19 pandemic certainly impacted the results above. The continuing influence of the pandemic may impact the generalizability of the findings above.



Policy Considerations

Four policy considerations have resulted from the report's findings, Families and Communities Committee discussions, and discussions with content experts. These considerations for policy and program implementation are specific to this data project and its partners, and have not been formally endorsed by the State Advisory Council or other stakeholders.

1. Evaluate and align Vermont's strategies to inform and connect families to resources

Vermont currently has multiple formal and informal resource and referral systems. However, families reported difficulty knowing where to look for information, information being out of date, difficulty navigating early childhood systems and resources, and relying heavily on word of mouth. An evaluation of existing systems and financing streams will further explore these gaps and identify areas for improvement.



2. Review national best practices to reduce administrative burden and promote equity of access to necessities (food, diapers, formula, etc.)

Data from the Family Needs Assessment Survey along with food security research¹ have shown disparities in access to nutritious food and necessities between white, and non-white and multi-racial Vermonters. To best serve and support all young children and their families, it is critical that those implementing programs or developing policies review national best practices to reduce and document their steps towards eliminating these disparities. Partnering with impacted communities while reviewing best practices is a key step in ensuring effective implementation and just decision-making.

Policy Considerations (continued)

3. Support the implementation of clear guidance on the full scope of kindergarten transitions

Positive kindergarten transition experiences (*from a school-based pre-K program, a private community-based pre-K program, and for those not participating in pre-K programs*) are connected to improved academic achievement and positive family engagement. Data from the FNA show that families have varied experiences with their transitions. Because there is no formal guidance on these transitions, Vermont schools handle the multiple aspects of transition to kindergarten differently including: information collected for registration, outreach to families and programs, transition meetings,^{i,2} and orientations. Guidance on kindergarten transitions and support with implementation from the Agency of Education is a critical component of successful transitions for young children and their families across Vermont. As with all official guidance, there should be a process involving statewide stakeholder engagement and utilization of existing frameworks and best practices.

4. Pursue integration of mental health services throughout Vermont's early childhood system that encourages ease of access for families with young children

Integration of mental health services within Vermont's larger systems of services and supports is an area that has been well studied and reviewed by the stakeholders within the [Mental Health Integration Council](#).³ The findings of the Family Needs Assessment reinforce their recommendations, especially a recruitment campaign for the mental health workforce and incentivized integration of mental health services in primary care to promote wellness. In addition, there are other models in which families receive or are connected to mental health services such as Children's Integrated Services, Parent Child Centers, Head Start, and others that should be considered when pursuing integration.



ⁱ For students with an Individualized Education Plan (IEP) through IDEA Part B, there are federally required transition services or coordinated set of activities including meetings to support the transition to kindergarten for the child and family.²

References

1. Niles, M., Bertmann, F., Morgan, E., Wentworth, T., Biehl, E. (2020). The Impact of Coronavirus on Vermonters Experiencing Food Insecurity. *University of Vermont*. Retrieved from <https://scholarworks.uvm.edu/cgi/viewcontent.cgi?article=1021&context=calsfac>
2. U.S. Department of Education, Individuals with Disabilities Education Act. Transition services, Subchapter I (Part A), 1401-34. Retrieved from <https://sites.ed.gov/idea/statute-chapter-33/subchapter-i/1401/34>
3. Hentcy, K. Mental Health Integration Council (2023). Vermont Department of Mental Health. Retrieved from https://mentalhealth.vermont.gov/sites/mentalhealth/files/doc_library/DMH_MHIC_Report_042023.pdf

Publication Information



Building Bright Futures (BBF) is Vermont's early childhood public-private partnership, charged under Vermont Title 33 § Chapter 46 and the Federal Head Start Act (Public Law 110-134) as Vermont's Early Childhood State Advisory Council (SAC), the mechanism used to advise the Governor and Legislature on the well-being of children in the prenatal period through age 8 and their families. BBF maintains the vision and strategic plan for Vermont's early childhood system. BBF's Network infrastructure includes 12 Regional Councils, seven VECAP Committees, and the State Advisory Council. Learn more at buildingbrightfutures.org.

The Vermont Early Childhood Data and Policy Center is a nonpartisan, independent source of data, research, publications and important information for policymakers, stakeholders, and the public on issues and priorities for children ages birth through age 8 in



**Vermont's Early Childhood
Data & Policy Center**

Vermont. Using evidence to inform policy is a key component of how we can improve the well-being of children and their families across Vermont. The Center is a critical tool for answering policy questions by centralizing data from the complex early childhood system.

Learn more at vermontkidsdata.org.

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