



Early Childhood Regional Needs Assessment

Region 17

(DeWitt, Livingston, Logan & McLean Counties)





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Table of Contents

Region 17 Executive Summary 3

Region 17 Snapshot Infographic 5

Overview & Acknowledgements7

Introduction..... 8

Letter from State Leadership 9

Letter from Regional Leadership.....10

Early Childhood Education & Care (ECEC) in Illinois 11

Timeline..... 13

Birth to Five Illinois Regions 14

Spotlight on Region 17..... 15

Regional Community Landscape.....16

Local Community Collaborations..... 21

Early Childhood Education & Care (ECEC) Programs 22

Slot Gap..... 26

Early Childhood Education & Care (ECEC) Workforce..... 28

Parent/Family/Caregiver Voice 31

Regional Strengths & Needs..... 34

Recommendations..... 35

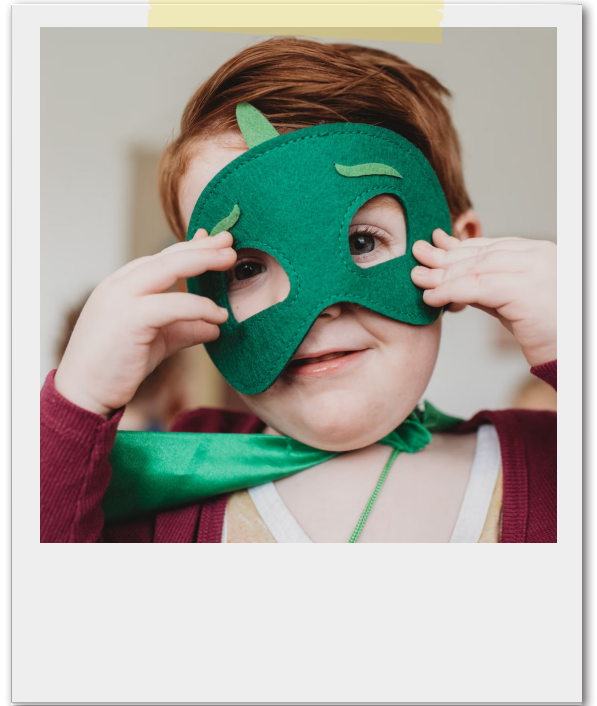
Appendices 36



Region 17 Executive Summary

In 2021, the Illinois Commission on Equitable Early Childhood Education and Care (ECEC) Funding issued a report with findings that highlighted the inequities in ECEC funding in Illinois and the need to create a better statewide infrastructure to support ECEC professionals, expand services and programs for families and caregivers, and increase enrollment in ECEC programs. The report focused on the importance of addressing racial inequities and the need to include local voices in the conversation funders and decision-makers were having about ECEC.

The experiences and knowledge families, caregivers, and early childhood professionals gain while navigating the complexities of the State's ECEC system is valuable, and understanding their lived experience in the local context is vital for decision-makers to ensure communities have access to the programs, services, and supports they need. To this end, Birth to Five Illinois was created to harness family and caregiver voices in ECEC and serve as a bridge between the communities and policymakers so family, caregiver, and professional experiences can guide the decisions made to expand or enhance services across the State.



An Early Childhood Regional Needs Assessment was created to present publicly available quantitative data and qualitative data from caregivers, ECEC professionals, and other community stakeholders collected through Action Council and Family Council meetings, focus groups, interviews, community meetings, and surveys. Throughout the process, regional barriers were documented, and recommendations were developed based on identified needs of families. This Executive Summary provides an overview of key findings from the development of the Region 17 Needs Assessment, which includes recommendations developed by our Action and Family Councils. Additional findings, analysis, and recommendations can be found in the full report.

Key Findings

The four counties in this Region differ widely in their needs. McLean County, the most densely populated in the Region, has a solid economic base and a variety of social services with a solid network linking them. ECEC programs exist but many families face long waitlists for access.

The other three counties in the Region (Livingston, Logan, and DeWitt) face barriers different from those in McLean County. These include having no licensed child care centers, no Prevention Initiative, no home visiting programs, and a limited number of licensed family child care providers.

In each of the four counties, there are issues with staff shortages compounded by low wages and lack of benefits. Other issues all counties face are waitlists for child care centers, family child care providers, and early intervention. Families lose child care assistance when their income rises slightly above the income guidelines, causing a net loss of income when they are responsible for total child care costs. Families face a difficult choice between quitting their job or facing financial hardship.

Many of the problems facing caregivers of young children are a result of society's lack of understanding the importance that the early years have a life-long effect on a child's development. Therefore, Region 17 submits the following Needs and Recommendations.

Region 17 Needs

- Address the shortage of a well-trained and well-compensated workforce.
- Increase the number of Spanish speakers in the workforce, e.g., classroom staff, home visitors, developmental screening staff, and therapists.
- Expand birth to five programming, transportation, and child care, especially in rural areas.
- Create additional affordable child care options for families.
- Promote local and regional awareness of already existing programs and resources for families.

Region 17 Recommendations

- Ensure that salaries and benefits reflect the educational and training achievements of ECEC staff and are competitive with non-ECEC fields to attract more individuals to the ECEC field.
- Increase number of Spanish speakers in the ECEC workforce by recruiting Spanish speaking high school students, specifically those earning the Illinois State Seal of Biliteracy.
- Increase publicly funded resources for ECEC programming, including transportation options to and from programs, especially in rural areas.
- Reexamine income limits for Child Care Assistance Program (CCAP) to make child care affordable and a stable source of support for more families.
- Broaden public awareness of state and federally funded ECEC programs, services, and resources.

For more information or to learn how you can become involved with Birth to Five Illinois, please contact:

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REGION 17 SNAPSHOT INFOGRAPHIC

Using a Collective Impact Model, between September 2022 and June 2023, we led our Action and Family Councils through data discussions to identify gaps and needs for children and families.

We coordinated focus groups, interviews, and surveys to gather input from community members across the Region.



17,565

Children Under
the Age of 6
in Region 17



6,359

Children 0-5
at 200% Federal
Poverty Level



4,117

Children 0-5
Without Publicly
Funded ECEC Slots

\$27,622

Average salary of full-time
child care professionals

"A parent got a higher-paying job and it cost her child care assistance. She's worse off now than before with three children costing \$600 per week. Children are with relatives and it's not good care."
- Home Visitor

After identifying the most common and pressing Early Childhood Education & Care (ECEC) needs of their communities, Regional Councils made recommendations for how best to meet them.

REGION 17 NEEDS

- Shortage of a well-trained and well-compensated workforce
- Shortage of Spanish speakers in the Early Childhood workforce
- Birth to five programming, transportation, and child care, especially in rural areas
- Affordable child care options for families

REGION 17 RECOMMENDATIONS

- Ensure that salaries and benefits reflect the educational and training achievements of ECEC staff and are competitive with non-ECEC fields
- Encourage state legislators and congressional leaders to increase publicly funded resources and programming
- Re-examine income limits for Child Care Assistance Program (CCAP) to make child care affordable for more families and keep families on CCAP longer



"Most of our employees who are impacted say that the cost is a barrier for them. They do not make a lot of money working in the education field and then to pay for expensive child care is a hardship for many employees."

- Human Resources Professional

Overview & Acknowledgements

Introduction

This Early Childhood Regional Needs Assessment presents data on Early Childhood Education and Care (ECEC) from multiple state and local sources throughout Illinois. It is a collaborative data report that relies on the expertise of entities that collect and analyze ECEC data, Birth to Five Illinois staff, Birth to Five Illinois Action Council and Family Council members, and a variety of cross-sector stakeholders in all 39 Regions across the State.

Through these Early Childhood Regional Needs Assessments, Birth to Five Illinois seeks to amplify the voices of those who have historically been minoritized, marginalized, or not invited to the decision-making table. Each Regional Needs Assessment offers parents, families, caregivers, ECEC providers, and other community stakeholders a platform for sharing valuable insights about their experiences within their local ECEC system. Additionally, it provides local, regional, and state decision-makers with qualitative information about each Region, adding critical context to the quantitative data that is available.

This report will be used in a variety of ways.

First, each Region's Birth to Five Illinois Action and Family Councils will use it to identify gaps in data that is needed to best understand ECEC in their area. Birth to Five Illinois Council members and Regional Staff will also use this report as a basis for making recommendations on how to increase enrollment in, and access to, ECEC programs and services, as well as to determine what additional services/programs and resources may be needed to support families and caregivers throughout the Region.

Second, this report will be made available to parents and caregivers so they can have a fuller picture of what is happening in their community and Region. It is our hope that families will learn more about the available programs and services, share the resources with other caregivers with young children, become advocates for ECEC, and help to drive long-term, sustainable change in their communities.

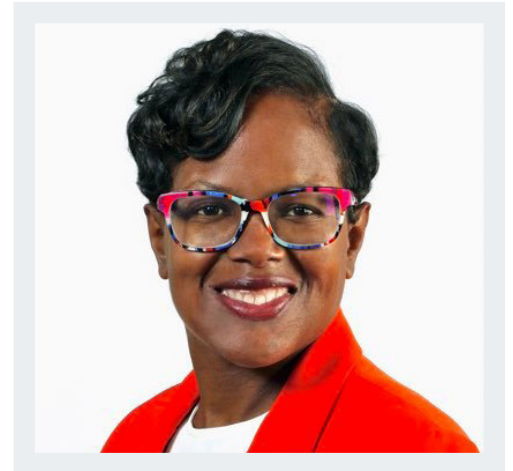
Third, policy makers, elected officials, and state agencies that administer ECEC programs will receive a copy of the report to give them a local view of the ECEC landscape in the areas they serve. The goal is to provide decision-makers with context from a community perspective so they can better understand data related to ECEC indicators and direct funding to the under-resourced areas across the State based on the feedback received from ECEC system users.

Lastly, the report will be shared with local government bodies, early childhood providers, and organizations so they can use the findings to assess and demonstrate the need for services as funding opportunities become available. Additionally, the data can be used to identify where ECEC services may need to be expanded to support the caregivers and children in the Region.



Letter from State Leadership

In under two years, I have had the privilege of partnering with the State's ECEC community to build Birth to Five Illinois, an extension of decades of foundational efforts that led to the creation of this statewide community system. In true collective impact modeling, we set out to design a system that respects and builds on the work of numerous local organizations that are working hard (often underfunded) to support children, families, and providers' access to our State's confusing and hard-to-navigate ECEC system.



While our work is not perfect, it is genuine and ever-evolving, and I am proud of the effort our Team has made to bring the vision of this equity-focused infrastructure to life. Birth to Five Illinois, while still in the development stage, has made great gains in bringing community members together under one goal, to make Illinois “the best state in the nation for families raising young children”. Our Team has gone above and beyond to make meaningful community partnerships and create space for the prioritization of family voices. My extended gratitude goes to each of the 128 people who shared the vision, brought their passion, and have worked tirelessly every day to improve ECEC experiences for the children and families in their communities.

In collective impact, nothing is done alone. We have many champions to thank, including:

- The Governor, staff in the Governor's Office and the Governor's Office of Early Childhood Development (GOECD), and the dedicated members of the Early Childhood Funding Commission for their early childhood visioning and dedication to racial equity.
- The Illinois Department of Human Services (IDHS) and Illinois State Board of Education (ISBE) for their generous funding and commitment to building this community system with families and caregivers at the center.
- Illinois Network of Child Care Resource & Referral Agencies (INCCRRA) for providing the institutional, technical, and organizational support needed to launch the Birth to Five Illinois department and infrastructure.
- Illinois Action for Children (IACF) and the Illinois Early Childhood Asset Map (IECAM) for training and technical support. Many of the visualizations in this report were developed by staff from both organizations based on data they collected and analyzed on our behalf.

Most importantly, I would like to thank the hundreds of community members who signed up to serve on their Region's Action and Family Councils. It is their perspective and passion that have inspired us and made this report possible. Thank you to the countless parents who trusted their Council peers with vulnerable stories; providers who emanate passion for the children in their care; business owners offering creative solutions for the identified needs; elected officials who are fierce advocates; faith leaders who opened their doors for care and are now encouraging others to do the same; and various ECEC systems partners who offer families step-by-step support through the enrollments process, blending together the supports families need.

These Early Childhood Regional Needs Assessments are a compilation of community members' experiences; not ours. We thank them for sharing and hope we have represented them well.

Cicely L. Fleming (she/her)
Director, Birth to Five Illinois

Letter from Regional Leadership

Region 17 would like to thank, first and foremost, the Action Council and Family Council for their hard work and dedication. Their input was critical in collecting stories and making connections to focus groups and interviews to help create a Regional Needs Assessment highlighting successes as well as barriers.

The following groups were essential in helping us organize focus groups and interviews to complete the Regional Needs Assessment: Unit 5 Schools, Children's Home and Aid, Immigration Project, Pontiac Schools, Service Delivery Area 9 Child Care Resource and Referral Agency, Mt. Piscah Church, The 11th Judicial Circuit Court, and Regional Alternative School.

We would also like to recognize individuals who were willing to tell their stories at library story hours, community events, preschool screenings, and through focus groups, interviews, and surveys. Without community input the whole story for Region 17 cannot be told. Their willingness to share their positive and sometimes difficult experiences helped paint a picture that numbers alone could not. This is what makes our Regional Needs Assessment comprehensive and truly meaningful. This level of community support and encouragement is how systemic changes are made.

Our thanks also go to our supportive Birth to Five Illinois State Team who was there every step of the way guiding us and inspiring us to capture the voices of those not typically at the table. By providing us the tools to effectively guide our Councils through discussions on data, they helped us produce a Regional Needs Assessment which reflects the needs of the four diverse counties in Region 17.

Thank you,

Carol Weisheit (she/her)

Regional Council Manager: Region 17
Birth to Five Illinois



Early Childhood Education & Care (ECEC) in Illinois

ECEC in Illinois is made up of several programs, including publicly funded programs such as Head Start/ Early Head Start, Early Intervention, Early Childhood Special Education, home visiting, preschool, and center- and home-based child care. ECEC also exists within a larger system of services and supports for families, including pediatric health care, mental and behavioral health care, child welfare, and family-focused economic supports. When available, these services and supports can be confusing and difficult to navigate.

While programs and services for families and children exist across the state of Illinois, they are not accessed equitably. For example, families in rural areas oftentimes live in child care deserts and are forced to travel long distances to place their child in any program, regardless of its quality. Another example is families who speak a language other than English who may live in an area without programming in their home language, making it difficult to find educational options. A family that has little to no access to economic or material resources may live in a city with many programs but be unable to enroll their children due to the excessive cost of tuition and long waitlists for access to publicly funded slots.

Additionally, funding for ECEC has been siloed across multiple state agencies and has lacked a cohesive process for distributing funds to providers. Decentralized funding has led to unintended equity issues, leaving some areas of the State with nominal public funding for ECEC programming and others without enough funding to meet the demands of communities.



In 2019, Governor JB Pritzker declared, “Illinois will become the best state in the nation for families raising young children, with the nation’s best early childhood education and child care. My promise is this: our work won’t be complete until every child in this state enters kindergarten with the cognitive skills to think, learn, read, remember, pay attention, and solve problems, but also the social-emotional skills to communicate, connect with others, resolve conflict, self-regulate, display kindness and cope with challenges.”

To honor this commitment, the Governor’s Office formed the Illinois Commission on Equitable Early Childhood Education and Care Funding to study and make recommendations on funding that would provide more equitable access to high-quality ECEC services for all children ages birth to five. Work groups met throughout 2020 and published a report of findings and recommendations in March 2021.

The Commission made the following recommendations to address the racial, geographic, and economic inequities found in Illinois’ ECEC system:

1. Increase public investment to help better subsidize the cost families pay out of pocket.
2. Create a coordinated funding approach by centralizing state and federal funding and distribute funding in new, more targeted ways.
3. Provide a single source for information and funding for ECEC with designated regional structures to make the system easier for families and providers.

Following these recommendations, the Illinois Department of Human Services (IDHS) established the Division of Early Childhood (DEC) to help centralize and streamline the State’s existing child care, home visiting, and Early Intervention programs.

Additionally, after the Commission report recognized, “community input and data can fuel distribution of funds more effectively and equitably” and urged for the creation of a community and regional infrastructure to ensure input from families and providers is included in the state level decision-making process, the State partnered with the Illinois Network of Child Care Resource and Referral Agencies (INCCRRA) to launch our equity-focused regional system. Named Birth to Five Illinois, the goal of this new infrastructure is to create a network of community Councils across the State tasked with identifying the service needs in each region.

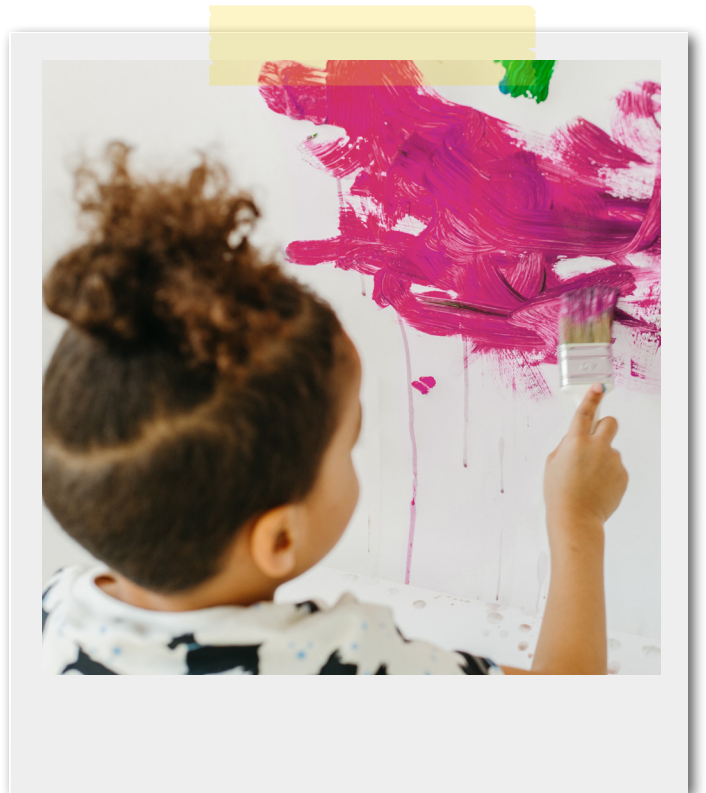
The **mission** of Birth to Five Illinois is to create a statewide regional infrastructure that will amplify input from communities in the development of policies and funding priorities. We support the mobilization of communities to build and sustain equitable access to inclusive, high-quality early childhood services for all children and families in the state of Illinois.

Our **vision** is reimagining a more equitable ECEC system that respects family and community voice and works to ensure it is centered and prioritized at every level of decision-making in Illinois.

Our **values and goals** are:

- **Family Voice:** Through this transformation centered on authentic family and community engagement, we will address the inequitable distribution of resources and services and rebuild our State’s ECEC system.
- **Racial Equity:** In an effort to move our ECEC system to one where racism no longer impacts a child’s success, we will work to dismantle barriers that have limited access to high-quality services for minoritized children in every corner of our State.
- **Collective Impact:** Birth to Five Illinois will build a system that harnesses knowledge directly from families and providers and encourages decision-makers to ensure new and/or expanded services are created to meet community needs. This community-driven framework will directly influence policy/funding at the local, regional, and state level.

Staying true to our mission and vision, Birth to Five Illinois has standardized the use of pronouns to affirm all genders and has included a land acknowledgement in each Early Childhood Regional Needs Assessments to honor the Indigenous Peoples who were forcibly removed from their land.

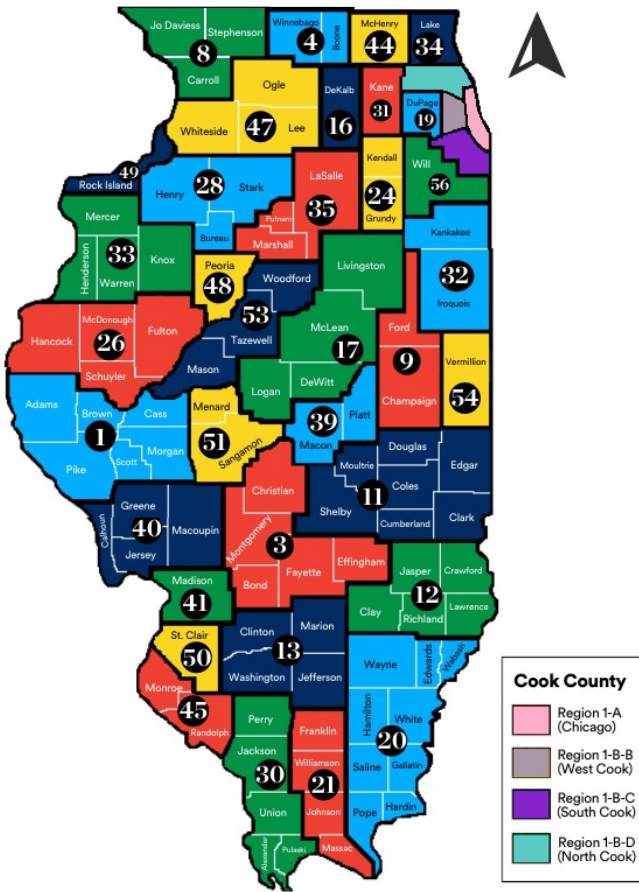


Timeline

- **March 2021**
Early Childhood Commission Report Published
- **September 2021**
Birth to Five Illinois Director, Cicely Fleming, Hired
- **February 2022**
Official Public Launch of Birth to Five Illinois
- **March 2022**
Held Regional Community Engagement Live Webinars
- **April 2022**
Established Partnerships with Existing Regional Early Childhood Collaborations
- **May – July 2022**
Hired 39 Regional Council Managers across the State
- **August – November 2022**
Hired Additional 78 Regional Support Staff
- **September 2022**
Awarded \$2.6 Million to 24 Implementation Grantees
- **October – November 2022**
Established 39 Birth to Five Illinois Action Councils
- **December 2022**
Established 39 Birth to Five Illinois Family Councils
- **January 2023**
Awarded \$575,000 to 9 Planning Grantees
- **January – April 2023**
Council Meetings & Ongoing Community Engagement (Focus Groups & Interviews)
- **June 2023**
39 Early Childhood Regional Needs Assessments Released
- **July – August 2023**
Report Dissemination & Public Input



Birth to Five Illinois Regions



To provide a structure for communities, families, and caregivers to engage with the data and share their experiences, our new statewide infrastructure was created across 39 Regions. The Regions align with existing Illinois State Board of Education (ISBE) Regional Offices of Education (ROE) boundaries. To better match demographic data to the needs for ECEC programs, Illinois Action for Children (IAFC), along with the Illinois Early Childhood Asset Map (IECAM), provided maps that reflect the true boundaries of the Birth to Five Illinois Regions. Birth to Five Illinois regional boundaries align with school districts instead of strictly following county lines, which can be a challenge for gathering and interpreting data because many early childhood services are provided by, or tied to, school districts.

After the Regions were established and staffed, Birth to Five Illinois Action and Family Councils were created by Regional Selection Committees. To ensure diverse perspectives, outreach efforts focused on community members who might be new to this type of work. Action Councils are comprised of ECEC professionals, healthcare providers, faith leaders, elected officials, and other community members. Each Action Council reserved two seats for parents/caregivers to ensure

family voices were included in every discussion. Family Councils are comprised of parents/caregivers from a wide variety of family types: single parents, adoptive and foster parents, caregivers of relatives, underage parents, two parent families, multi-generational families, and more. Each Regional Selection Committee reviewed Interest Forms, and recommendations were made based on a full consideration of a submitter's role/sector, location within the Region, race/ethnicity, gender, and answers to open-ended questions.

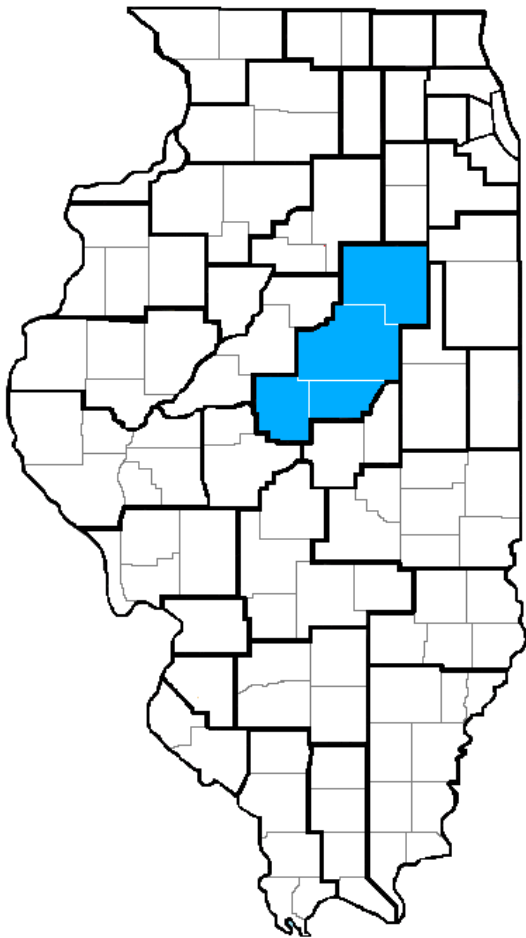
Regional Needs Assessment Methodology

Regionally based demographic, programmatic, and service provider data from IECAM and workforce data from INCCRRA were presented to Action and Family Council members during meetings and is included in the following section. The data comes from both IECAM (2020-2021) and INCCRRA (2021), unless otherwise noted. Some Regions included additional data collected during Community Based Planning or from state and/or local organizations and agencies. Action Council members were invited to bring additional aggregated data on programs and services provided by their agency/organization to complement IECAM data, while Family Council members brought their stories and experiences with the ECEC system to help contextualize quantitative data presented and discussed during meetings.

Additional qualitative data was collected community-wide through focus groups and interviews, and all Council members were invited to provide input on their Region's report. Council members developed the strengths, needs, and recommended next steps that are unique to each Region. Regional Teams, along with the support of their Action and Family Council members, created a dissemination plan and are holding community meetings virtually and in-person to share their report's findings. Throughout the fall of 2023, Regional Teams will lead their Councils through implementation planning based on the recommendations made in their report.

Spotlight on Region 17

Regional Community Landscape



Regional Boundaries

Region 17 is in central Illinois and is equidistant from Chicago and St. Louis. Interstate 55 runs through Livingston, McLean, and Logan Counties and US51 cuts through DeWitt County. McLean County is the largest Illinois county in land mass covering 1,186 square miles with the entire Region covering 3,256 square miles. Rich farmland spans across Region 17, growing corn, soybeans, wheat as well as livestock. The four-year institutions located in the Region are Illinois State University, Illinois Wesleyan University, and Lincoln Christian University, along with Heartland, Lincoln Land, and Richland Community Colleges. Region 17 covers 31 public school districts, and 21 private schools.

In addition, numerous recreational areas, state parks, and local community parks make this an attractive area for families to live in. All counties host summer and fall family-friendly festivals, including the Apple and Pork Festival, Thresherman's Reunion, Lincoln Balloon Festival, Abraham Lincoln National Railsplitting Festival, Sugar Creek Arts Festival, Sweet Corn Circus, and the Shakespeare Festival, to name a few. Antique stores, Fourth of July celebrations, the Illinois Route 66 Hall of Fame and Museum, Children's Discovery Museum, and summer farmers markets in the Region round out the reasons Region 17 is a great place to raise a family.

Region 17 enjoys relatively low unemployment with major employers like Caterpillar, OSF Healthcare, State Farm Insurance, Country Companies Insurance, Rivian Automotive, Illinois State University, Clinton Power Station, Bayer U.S.-Crop Science and Monsanto Company, with many other manufacturing, retail, and construction businesses.

Land Acknowledgement¹

Region 17 is the traditional land of the Dakhótiyapi (Dakota), Illinois, Ochéthi Šakówiŋ (Sioux), Kiikaapoi (Kickapoo), Kaskaskia, Myaamia (Miami), Peoria, Oθaakiwaki·hina·ki (Sauk), and Meškawahki·aša·hina (Fox) Peoples. These lands were the traditional birthright of Indigenous Peoples who were forcibly removed and colonized. It is necessary for us to acknowledge these Native Nations and the stories these lands continue to tell.

¹Based on information provided at <https://native-land.ca>

Regional Demographics

According to the 2020 Census, the population of all of Region 17 is 250,272. In 2021, the American Community Survey² estimates found slight decreases for DeWitt, Livingston, and McLean Counties and a negligible increase for Logan County. Across the Region, there are 17,565 children ages zero up to the age of six, with children ages three to five making up 52% of the early childhood population. Seventy-two percent of the children under five in Region 17 are white (non-Hispanic/Latine) followed by 9% Black or African American (non-Hispanic/Latine), 6% Asian (non-Hispanic/Latine) and 7% Hispanic or Latine. Five percent are identified as two or more races (non-Hispanic/Latine) (Figure 1).

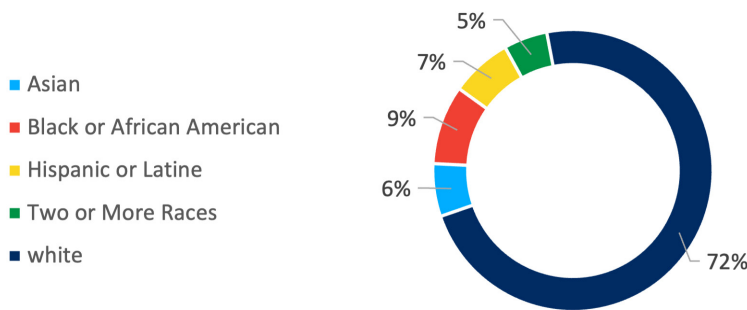
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People can choose small town, rural living while still have a relatively short commute to work in the high tech and/or manufacturing positions.

- Community Member
(Livingston County)

”

Figure 1: Children Ages Five and Under by Race and Ethnicity³



Source: IECAM
Created by: Birth to Five Illinois

Children and Families in Priority Populations

Priority populations⁴ are twelve demographic groups identified by the Illinois Early Learning Council based on criteria that they are distinctive, timely, measurable, underserved, and at-risk due to systemic barriers. These priority population categorizations are utilized by most state funded ECEC programs to identify and enroll children with the most needs and systemic barriers. Despite these identified categories of priority populations, access continues to be a barrier for families because of transportation, affordability, and program delivery.

Members of the Action Council and Family Council discussed children experiencing homelessness, children whose primary language is not English, and children in households experiencing poverty-level income as being the priority populations for Region 17.

² American Community Survey is part of the U.S. Census Bureau and can be found at <https://www.census.gov/programs-surveys/acs>

³ Not all Census race and ethnic categories reported due to small number of respondents.

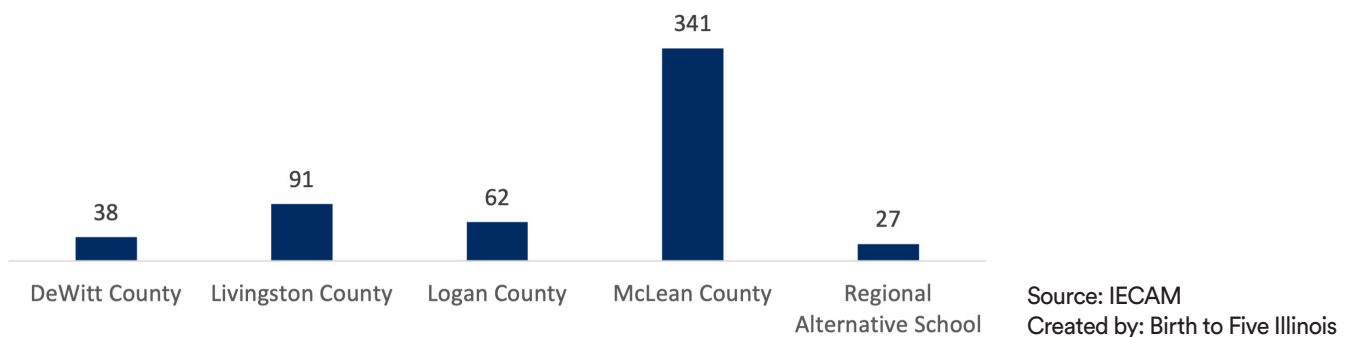
⁴ <https://oecd.illinois.gov/content/dam/soi/en/web/oecd/earlylearningcouncil/access/documents/priority-populations-updated-2021.pdf>

Unhoused Children in Region 17

The Regional Office of Education (ROE) does not collect data on the number of children experiencing homelessness younger than Kindergarten-entry age. Due to stigmatization, agencies that serve families experiencing homelessness/unstable housing are protective of sharing information and disclosing children’s living situations, as are families experiencing homelessness. Moreover, the number of those experiencing homelessness is underreported because families must self-identify as homeless, and they may not realize their living situation qualifies as experiencing homelessness. However, the number of students experiencing homelessness from Kindergarten through twelfth grade reported by the Region’s school districts (Figure 2) may provide some insight into the extent of homelessness throughout the Region.

“Parents avoid reporting being unhoused or do not consider sleeping at a friend’s house as being considered homeless.”
- Community Member (Livingston County)

Figure 2: Number of Children Receiving McKinney-Vento Services by County, School Type



As of March 2023, 23 school districts reported a total of 559 students living in families experiencing homelessness within Region 17. DeWitt County’s two school districts, Blue Ridge Community Unified School District (CUSD) 61 and Clinton CUSD 5, reported 19 students experiencing homelessness each for a total of 38 in the county.

Students experiencing homelessness in Livingston County total 91. Pontiac Community Consolidated School District 429 and Pontiac Township High School District 90 each reported 23 unhoused students. Tri-Point CUSD 6-J reported 24 unhoused students for 2022. Five other school districts in the county reported from two to eight unhoused students. For Livingston County, there are a total of 91 students experiencing homelessness.

Five school districts in Logan County reported students experiencing homelessness, with Lincoln Elementary School District reporting 24 and Mt. Pulaski CUSD 23 reporting 30. Another eight students are reported by three additional school districts in Logan County, for a county total of 62 unhoused students.

In McLean County, Bloomington School District 87 reported the largest number of unhoused students in 2022 for the Region at 191. McLean County Unified School District (USD) 5 reported the second largest number of unhoused students in the Region at 76. Five other school districts in McLean County reported from one to 34 unhoused students for a total of 341 in McLean County.

English as a Second Language

According to Illinois Early Childhood Asset Map (IECAM), there are 1,099 families who live in limited-English speaking households. Among these households, Spanish is the most common language in Region 17. The number of Spanish-speaking families has remained relatively stable between 2017 to 2020. Families with limited English face many barriers as they navigate systems, with many relying on their children to interpret information. This may lead to misinformation and parents and caregivers not receiving all the information available.

Children in Households Experiencing Poverty

In 2021, the median household income was \$57,727 in DeWitt County, \$58,676 in Livingston County, \$58,122 in Logan County, and \$68,037 in McLean County. This information is relevant when considering the numbers of children who live in families with incomes below specific Federal Poverty Level thresholds.

The Federal Poverty Level (FPL) is a measure of income level created by the U.S. Department of Health and Human Services that calculates the minimum amount of money needed by a family to cover their basic household needs, such as food, housing, utilities, and other necessities. In many cases, it is used to determine eligibility for programs and services. Someone living at or below 50% FPL is considered to be living in “deep poverty”; someone living at or below 100% FPL is considered to be living at “the poverty line” (see example in Figure 3).

Figure 3: Federal Poverty Level Guidelines at 50%, 100%, 200% for a Family of Four

	50% FPL	100% FPL	200% FPL
Family of 4	\$13,100	\$26,200	\$52,400

Source: U.S. Department of Health and Human Services
Created by: Birth to Five Illinois

Prevention Initiative (PI), Preschool for All (PFA), and Preschool for All Expansion (PFA-E) programs use the 200% FPL threshold to help determine whether a child qualifies for services. Across the Region, 20% of children birth to age five live in families with income at or below 200% FPL. Early Head Start (EHS) and Head Start (HS) programs use 100% of FPL threshold to determine eligibility. Across the Region, 9% of children ages birth to five live in families with income at or below 100% FPL.

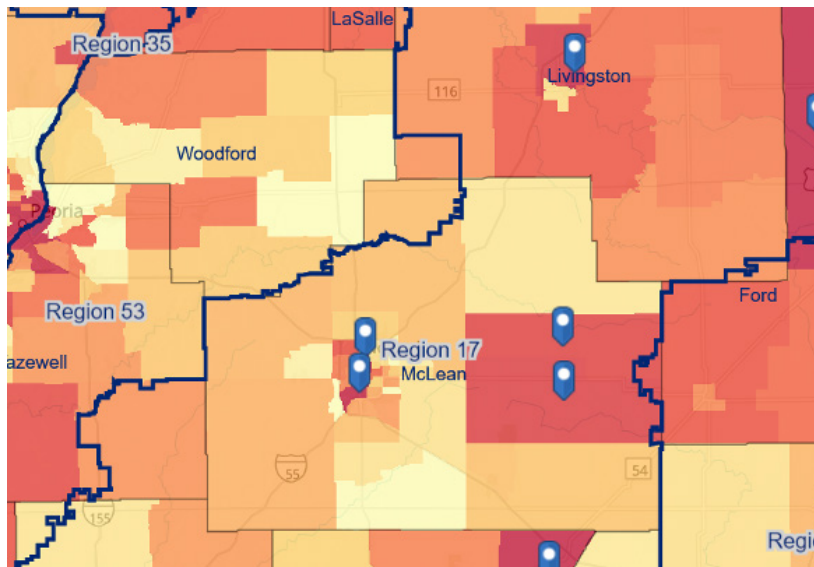
Figure 4 shows the density of children, birth to age five, within the Region who have family income at or below 200% FPL. The darker colors represent areas with a higher concentration of families at or below 200% FPL. In the lightest color (pale yellow) geographic areas, up to 21% of the children living in those areas have family income at or below 200% FPL. In the darkest color (dark red) geographic areas, 62-100% of the children have family income at or below 200% FPL.

“When the child is at the doctor and communicates with the doctor, but the parents don’t always know what is being said, the children sometimes miscommunicate and don’t tell the doctor what a parent would want them to know.”

- Community Member
(McLean County)

”

Figure 4: Location of Children Living at or Below 200% FPL

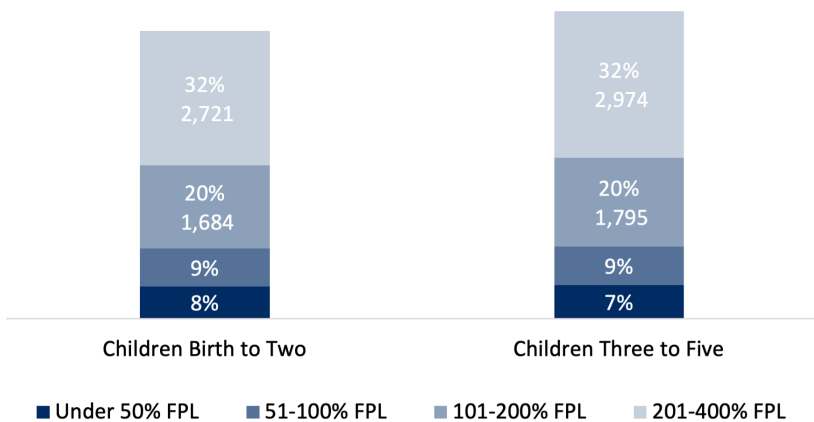


Source: IECAM
Created by: Illinois Action for Children CS3

In 2020, 3,103 children birth to age two and 3,256 children ages three to five would be income-eligible (with family income at or below 200% FPL) for Prevention Initiative (PI), Preschool for All (PFA), and Preschool for All Expansion (PFA-E) (Figure 5). For Early Head Start (EHS) and Head Start (HS) eligibility at or below 100% FPL, 1,419 children birth to two and 1,461 children ages three to five qualified for these programs.

In addition to income levels, demographic information indicates that most children under five in the Region live in a home with at least one working parent or at least one parent actively looking for full-time work (Figure 6).

Figure 5: Children Under 6 by Age by Federal Poverty Level



Source: IECAM
Created by: Birth to Five Illinois

Demographic information is important to be able to identify the number of children who are income eligible for publicly funded services. Demographics can also identify who are the priority populations and where they are located. The purpose of the priority populations list is to drive resources and attention toward improving access to high-quality, responsive services for children and families with limited to no access to economic or material resources. While the priority populations list addresses the access issue, Birth to Five Illinois strives to focus the attention of policymakers and early childhood stakeholders on identifying ways to engage these impacted communities to remove the systemic barriers causing the access issue within each Region.

Figure 6: Children Under 5 with All Parents Working



Source: IECAM
Created by: Illinois Action for Children CS3

Local Community Collaborations

Community Collaborations, as defined by Partner Plan Act (PPA), bring together stakeholders from early learning and development, health, mental health, nutrition, Early Intervention (EI), and family support. Having these four core sectors working together is crucial to ensuring that children have the resources they need to be ready to learn. At the heart of all Collaborations is the relationship established between service sectors and families.

Collaborations can be formal or informal. The only formal Collaboration in Region 17 is the All Our Kids (AOK) Network in McLean County. The AOK Network promotes healthy pregnancies, growth, and development of all children from birth to five along with supporting their parents/caregivers, and assures a high-quality, well-coordinated, easily accessible system. Other counties in the Region do not have anything similar.

“ I have volunteered in many programs in McLean County throughout the years. I never realized that I would need this community so much as my children have grown and their individual needs have required early intervention, therapy services, and other specific resources. Knowing that there is a community with supportive programs to alleviate the financial stress of these needs is invaluable to our family.

- Family Council Member (McLean County)

”

There are other groups in the Region that do not meet the formal definition of Collaboration by PPA. These informal groups coordinate, cooperate, and have a level of collaboration to improve and expand ECEC services. For example, a Local Interagency Council (LIC) is a network of families, community agencies, and providers supporting families with children from birth to age five. Within Region 17, there are three LICs: one covers Logan County, another covers DeWitt County, and the third covers Livingston and McLean Counties. These LICs are housed out of the Child and Family Connections (CFC) agencies.

Child and Family Connections are the regional intake agencies for children and families to enter the Illinois Early Intervention (EI) system. Early Intervention programs address the needs of children who are ages birth to three who have delays in development or a medical diagnosis that typically results in a developmental delay. While the LICs do not meet the model described by Partner Plan Act as Collaborations, LICs meet to discuss relevant services, eliminate duplication of services, assist parents' efforts in accessing services, make referrals between programs, and are responsible for Child Find activities. Child Find is a component of the Individuals with Disabilities Act (IDEA) that requires states to have a comprehensive system to locate, identify, and refer all children with disabilities, as early as possible through age 21, for EI or special education services.

“ The earlier we identify and start intervening, the better the outcomes for the child.

- Community Member (Livingston County)

”

“ Communication before crisis - how do we message things ahead of time to prevent last-minute engagement only?

- Community Member (McLean County)

”

Currently, no formal or informal local Early Childhood Collaboration serves DeWitt, Livingston, and Logan Counties, making it difficult to coordinate services for families across county lines. Identifying Local Community Collaborations, whether formal or informal, is important to assess whether gaps exist in services, information, or coordination in Region 17. The McLean County AOK Network is the only county-wide Collaboration, indicating that there is room for growth and additional formal Collaborations within Region 17. Early Childhood Education & Care (ECEC) Programs

Early Childhood Education & Care (ECEC) Programs

Many ECEC programs exist throughout Region 17. Each program has specific admission criteria and age requirements for children and families to meet before services can be secured (Figure 7).

Figure 7: Early Childhood Education Programs

Program Name/ Type	Funding Source/ Eligibility	Eligible Population	Number of Sites
Early Head Start (EHS)	Federal Meet specific FPL levels or receive other federal programs	Infants, toddlers under age three, pregnant people, children classified as homeless, foster children	Dewitt - 1 Livingston - 1 Logan - 1 McLean - 3
Head Start (HS)	Federal Meet specific FPL levels or receive other federal programs	Preschool children age three to Kindergarten entry, children classified as homeless, foster children	Dewitt - 1 Livingston - 1 Logan - 2 McLean - 4
Prevention Initiative (PI)	Illinois State Board of Education (ISBE)/ multiple factors	Pregnant people, children birth to age three	Dewitt - 0 Livingston - 0 Logan - 1 McLean - 2
Preschool for All (PFA) & Preschool for All Expansion PFA-E	Illinois State Board of Education (ISBE)/ multiple factors	Children age three to Kindergarten entry age	Dewitt - 4 PFA Livingston - 7 PFA Logan - 1 PFA McLean - 8 PFA, 2 PFA-E
Early Intervention (EI)	Illinois Department of Human Services (IDHS)/significant delay in at least one area of development	Children birth to age three	In all counties
Early Childhood Special Education (ECSE)	Local, State, Federal/ qualify in one of 14 categories defined by the Individuals with Disabilities Education Act (IDEA)	Children age three to Kindergarten entry age	In all counties
Illinois Department of Human Services (IDHS) Home Visiting	State, Federal/multiple factors	Pregnant people and families with children from birth up to Kindergarten entry	Dewitt - 0 Livingston - 0 Logan - 0 McLean - 1
Child Care Assistance Program (CCAP)	State, Federal/below 200% FPL	Families working or attending school with children under the age of 13	In all counties

Source: IDHS, IECAM, ISBE Created by: Birth to Five Illinois

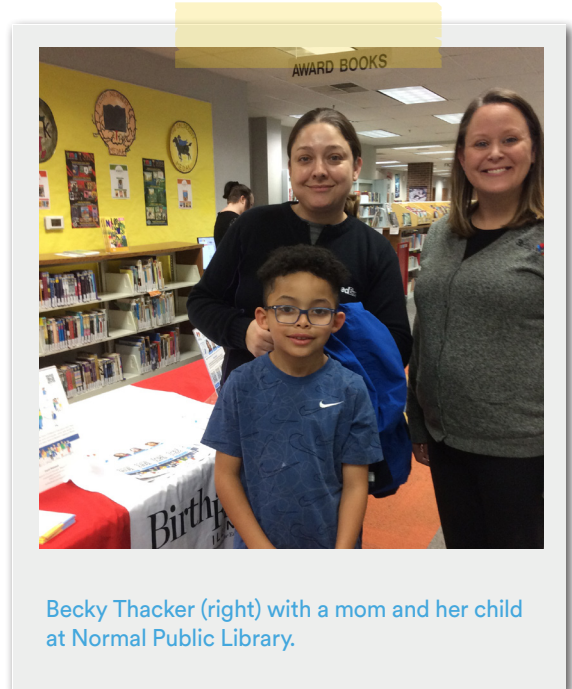
Child Care Services

Families have several options as they look for programming for their young children. Many of these programs provide “part day” sessions of four hours or less, or “school day” sessions of 6-6.5 hours. For full-time working families, even if they qualify for a publicly funded program, the length of classes may not meet their child care need.

Some families eligible for a publicly funded program might want to enroll their child for those services, however, transportation may be an issue. Because of issues related to transportation families may choose a licensed/licensed exempt center or family home which fits their workday schedule.

“Some people aren’t near a bus stop. Even if a parent has a car, sometimes they can’t afford repairs. If they take a bus to get the child to care, they are late for work. We have a couple of shops to refer them to for repairs, but they still must pay. Sometimes parents will google repairing their own car because they can’t afford the repairs.

- Home Visitor (McLean County)



Becky Thacker (right) with a mom and her child at Normal Public Library.

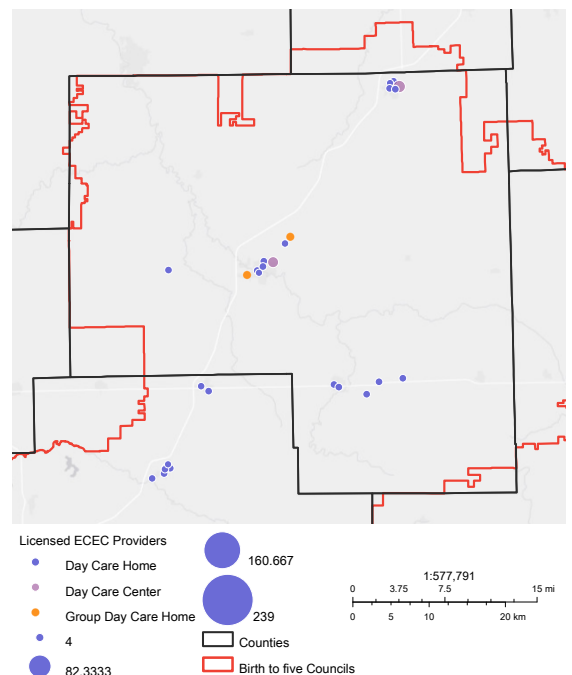
In Figure 8, the number of available centers (purple circle), family homes (up to eight children, blue circle), and family group homes (up to 12 children, gold circle) are shown for Livingston County. It is evident that there are few providers of any type available in the outlying areas outside of the county seat of Pontiac.

In Figure 9, the map indicates the number of available centers (purple circle), family homes (up to eight children, blue circle), and family group homes (up to 12 children, gold circle) within Logan and DeWitt Counties. Unlike Livingston County, few programs exist in the county seats, Lincoln for Logan County and Clinton for DeWitt County. There are even fewer choices for families living in the rural parts of both counties.

“[There are] not enough providers and people don’t know where to find providers online.

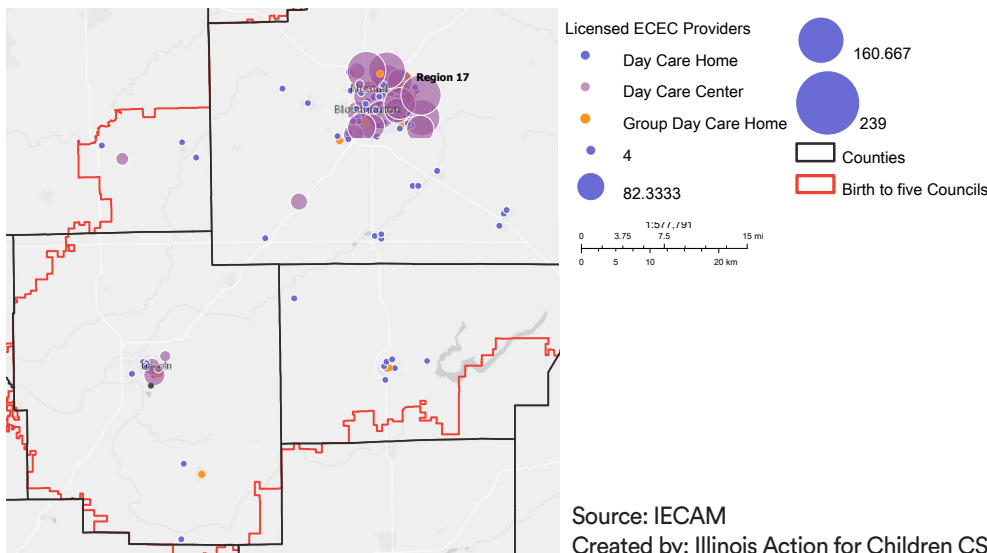
- Home Provider (Logan County)

Figure 8: Location of Licensed Child Cares in Livingston County



Source: IECAM
Created by: Illinois Action for Children CS3

Figure 9: Location of Licensed Child Cares in Logan, DeWitt Counties

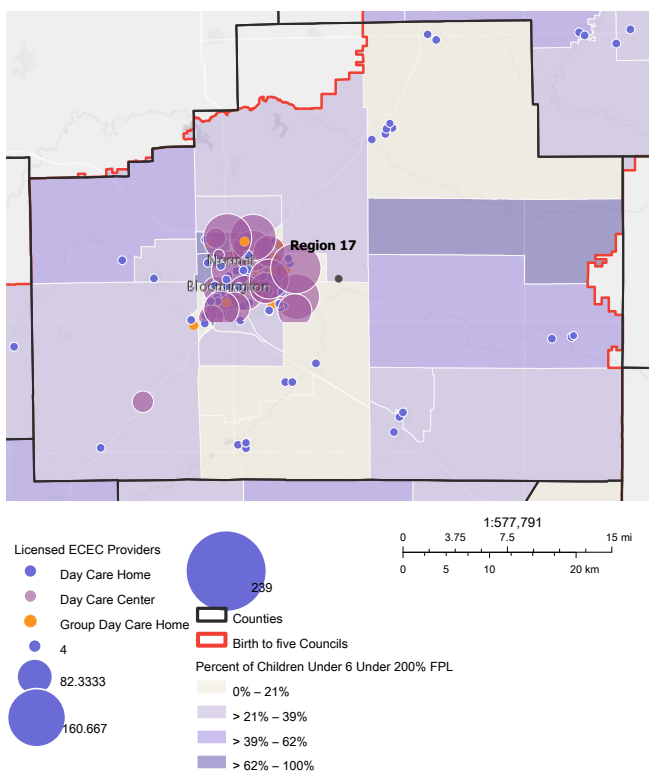


“ ... Fragmentation of the system, so many doors, and dead ends that parents have to go through. ”

- Action Council Member (McLean County)

In Figure 10, parents/caregivers have more options in the twin cities of Bloomington/Normal compared to the other parts of Region 17. There are more centers of various sizes, more family child care homes, and group child care homes to choose from. While there may be more options in Bloomington/Normal, there are still issues with affordability, accessibility, and quality. The rural areas of McLean County suffer the same as rural areas in Livingston, Logan, and DeWitt, with fewer options for families to choose from when locating care for their young children.

Figure 10: Location of Licensed Child Cares in McLean County



Throughout Region 17, the rural areas can be considered “child care deserts.” According to Child Care Aware of America, “areas or communities with limited or no access to quality child care are child care deserts.” These deserts limit options for parents and caregivers as they try and locate care to be able to work.

The maps indicate the location of children up to age six living in households with income at or below 200% of the FPL; the darker the color, the higher the density of children with family income at 200% FPL. In some areas with a greater density of children at the 200% FPL, there are a limited number, or no child care programs for families to access.

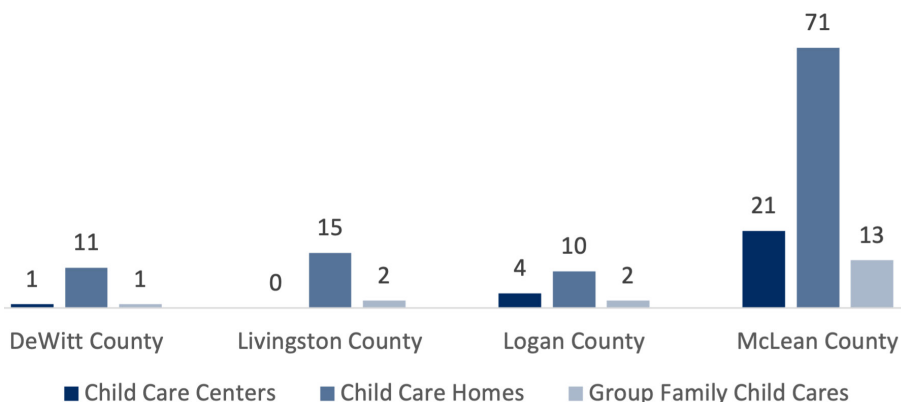
“ Good to have licensed family child care homes since families can’t afford centers. ”

- Family Council Member (McLean County)

Source: IECAM
Created by: Illinois Action for Children CS3

Figure 11 shows the total number of licensed child care options in Region 17. Parents and families may be using license-exempt friends and family care; data on license-exempt providers are not collected and not included in this map.

Figure 11: Number of Licensed Child Care Centers



Source: IECAM
Created by: Illinois Action for Children CS3

In addition to proximity and location, another aspect of programs in Region 17 is that of quality. Publicly funded programs such as Preschool for All (PFA), Preschool for All Expansion (PFA-E), and Head Start/ Early Head Start (HS/EHS) are required to obtain a quality rating through ExceleRate Illinois. This rating indicates that a provider has completed the State’s quality rating process. ExceleRate Illinois provides standards, guidelines, resources and supports to help a program make changes that lead to

better quality outcomes for children. Licensed child care centers, family child care homes, and family group homes are not required to participate in ExceleRate Illinois, but they can apply. A benefit for participation in ExceleRate Illinois is that the higher the rating a child care provider obtains, the more money they are eligible to receive through the Child Care Assistance Program (CCAP).

CCAP is funded by the Illinois Department of Human Services and operates through the local Child Care Resource and Referral (CCR&R) agencies. Figure 12 shows the number of programs participating in ExceleRate and those that choose not to. Any program with a gold rating will be reimbursed through CCAP at a higher rate than a silver or bronze program. Those programs choosing not to participate in the program receive a base amount of reimbursement through CCAP and remain at the basic licensed level. Programs that are licensed meet the basic health and safety requirements set forth by the Illinois Department of Child and Family Services (DCFS) licensing requirements.

Figure 12: Number of Programs by Quality Rating Scale

County	Licensed	Gold	Silver	Bronze
DeWitt	11	3	1	0
Livingston	17	3	4	1
Logan	11	3	2	2
McLean	98	5	10	1

Source: DCFS
Created by: Birth to Five Illinois

Understanding the variety of programs available in Region 17 is important due to the different eligibility requirements families must meet to qualify for services. While the programs appear to be plentiful, the quality of programs varies widely and the accessibility throughout the Region is not equitable. More details on accessibility are identified in the Slot Gap section.

Slot Gap

The term “slot gap” in ECEC services is the difference between the number of children birth to age five and the number of enrollments (slots) funded in ECEC programs. This difference can be used to determine the service gaps existing within a Region as well as within each county. A slot gap can be calculated for different types of ECEC services and different age groups, for example: publicly funded services, state funded versus federal funded services, services for children birth to three, services for children three to five, and child care services, among others. Slot gap gives an indication of the need for expanded ECEC services; however, it is not a fully complete measure because it does not account for families who choose not to engage with their local ECEC programs. While the slot gap for birth to three exists throughout the Region, it is most prevalent in the counties of Livingston, Logan, and DeWitt since few or no programs exist for this age group. The slot gap for children three to five also exists throughout the Region and for a different reason – programs exist and there are not enough slots to serve all the children.



A group of people smiling for a photo on a bench.

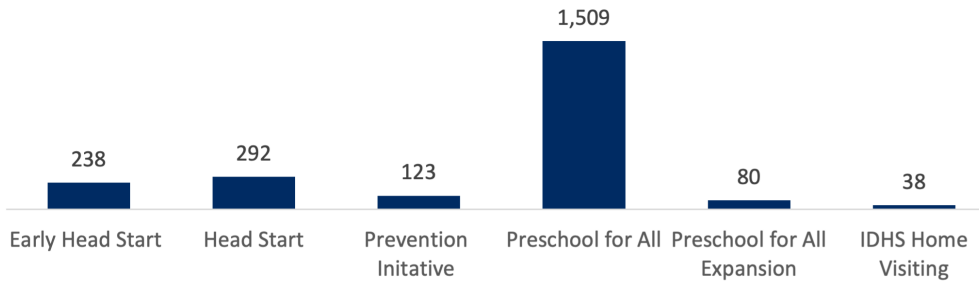
Publicly Funded Programs

In Region 17, there are 3,103 children under three years of age who are income-eligible for publicly funded programs using 200% FPL as the income threshold. (The publicly funded programs for this age range and income threshold are Prevention Initiative (PI) and Illinois Department of Human (IDHS) Services Home Visiting.) Within this number of children, there are 2,742 income-eligible children for Early Head Start (EHS), with its eligibility threshold of 100% FPL. The funded enrollment capacity for these three programs is 361. Overall, there is a gap of 1,285 slots within the Region for children younger than age three who are eligible for publicly funded services.

These three programs provide a total of 361 birth-to-three enrollment slots across the Region. A community member pointed out that not all the 361 slots are center-based enrollments that working families can utilize for their child care needs. Many of the slots are home visiting programs offering in-home services for one to two hours per week. Further, this number for capacity does not include the 38 funded enrollments for the IDHS Home Visiting program because it serves children from birth to five years old.

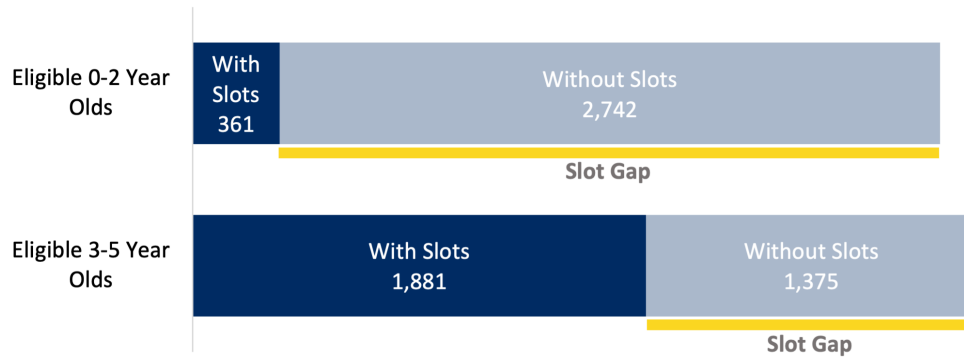
There are 3,256 children ages three to five within Region 17 who are income-eligible for publicly funded programs using 200% FPL as the income threshold. (The publicly funded programs for this age range are Preschool for All and Preschool for All Expansion.) Within this number of children, there are 1,461 income-eligible for Head Start, with an eligibility threshold of 100% FPL. The funded enrollment capacity for these programs is 1,881. Overall, there is a gap of 1,375 slots within the Region for children ages three to five years old who are eligible for publicly funded services.

Figure 13: Capacity by Publicly Funded Program Type



Source: IECAM
Created by: Illinois Action for Children CS3

Figure 14: Publicly Funded Capacity Slot Gap



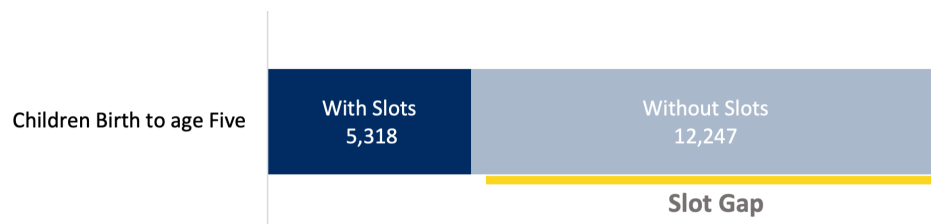
Source: IECAM
Created by: Illinois Action for Children CS3

Child Care Slot Gap

Another option available for families is child care provided by community-based programs. These programs address the need for working families and working families who may need assistance with child care fees through the Child Care Assistance Program (CCAP).

According to IECAM data for 2021, there were 17,565 children younger than six years old in Region 17. The total capacity of licensed child care centers and family child care homes as well as license-exempt centers is 5,318 (Figure 15). If all families with children younger than six in Region 17 needed/wanted child care, there would be 12,247 children without the availability of child care services.

Figure 15: Child Care Slot Gap



Source: IECAM
Created by: Illinois Action for Children CS3

“Bloomington/Normal gets the spillover from other counties where they can’t get care. But even McLean County doesn’t have enough spots for the number of children.”

- Family Council Member (DeWitt County)

Early Childhood Education & Care (ECEC) Workforce

In Region 17 many families depend on the Early Childhood Education and Care (ECEC) workforce to help children develop and have the readiness skills to be successful in school and in life.

“A strength of ECEC staff is patience and the ability to take it all and knowing that it’s not personal.”
- Family Council Member (McLean County)

Qualifications of ECEC Staff

Among the Region 17 ECEC programs, the education and credential requirements vary depending on the type of program. Data from INCCRRA for Region 17 show there are 88 licensed child care center directors, 1,022 child care staff, and 179 home providers. A child care center director must have 60 semester hours of college credits with 18 hours related to child care and/or development of children birth to age six. Child care center teachers must meet the basic requirement of 60 hours of college credits with six credit hours related to child care and/or development of children birth to age six. Teacher aides/assistants must have a high school diploma or equivalent. Directors, teachers, and aides/assistants must participate in 15 hours of professional development per year.

Family child care home providers must be certified in first aid, the Heimlich maneuver, and infant/child cardiopulmonary resuscitation and complete six or more hours of training to provide care to children with disabilities. Family child care providers must also complete 15 hours of professional development per year. Family child care provider assistants must be at least 14 years of age and at least five years older than the oldest child they supervise.

Publicly funded programs, such as Head Start and Early Head Start, require different qualifications for staff. Head Start center directors must have at least an associate degree in early childhood. Half of the teachers in a Head Start program must possess at least an associate degree and the other half must possess a bachelor’s degree, while Early Head Start teachers must have a Child Development Associate (CDA) credential. All teaching assistants must have at least a CDA. Figure 16 shows the educational attainment for all licensed centers and family child care (FCC) homes⁵ in the Region, including Head Start, Early Head.

Figure 16: Educational Attainment of Licensed Center Directors, Teachers, and FCC Providers⁶

	High School/ GED	Some College	Community College Certificate	Associate Degree	Bachelor’s Degree	Graduate Degree
Licensed Center Directors	*	5	0	11	58	9
Licensed Center Teachers	490	34	28	181	225	32
FCC Home Providers	93	8	6	20	38	6

Source: INCCRRA
Created by: Birth to Five Illinois

⁵ FCC includes family child care providers and assistants, substitute/floaters, and other direct and indirect service providers.

⁶ Cells with an asterisk * indicate fewer than five but more than zero respondents.

In the ECEC field there are two distinct workforces: staff in publicly funded programs and staff in child care programs. The former must have degrees and/or a Professional Educator License (PEL) while the latter must have only a specific number of college credit hours. The fact that there are two levels of qualifications based on the type of setting (publicly funded programs versus child care programs) is one of the reasons there may be a difference in the quality of services.

“

I think directors have a tough job and it keeps getting harder. Early childhood is looked on as a low paying job. Schoolteachers have summers off. We aren't recognized for the importance of our jobs and are looked down on by schools.

- Child Care Center Director (McLean County)

”

“

“We spend the time doing the interview, checking references, hire, train, and get Gateway training. Two separate people hired then quit after one week because the work was too hard.

- Action Council Member (McLean County)

”

In a focus group with early childhood center directors, it was evident that the stress of the pandemic exacerbated an already fragile ECEC system. Struggling as a field before the pandemic and then recognized as “essential workers” during the pandemic has taken a toll. Directors are having a difficult time recruiting and retaining qualified staff. The reasons directors cite for this lack of candidates are low

pay in the field, lack of benefits, and an ever-shrinking pool of candidates. According to the Illinois Child Care Resource and Referral Statewide System Child Care Salary Profiles, salaries in Region 17 range from \$24,960 to \$30,368 (while median income ranges from \$57,727 to \$68,037). Family home providers throughout the Region are feeling the stress, too. Long hours, low pay, and a dwindling number of ECEC workers throughout the Region are affecting providers.

Diversity of Workforce

When comparing the race/ethnicity of staff to the race/ethnicity of children (Figure 17) they generally mirror each other in Region 17. However, for families who are not white or who speak a language other than English, their preference is often for program staff who are more like their family. As an example of the tension that can occur, a community member who is African American shared about her experience with her son's white therapist who was not providing adequate support nor answering her questions about the service plan. Because the parent felt the interaction was directly related to her race, she searched for an African American therapist. With this new therapist, she felt more engaged because her questions were answered, she was given appropriate activities, and she was included in the process. She shared that this was a drastically improved experience and her son's progress skyrocketed. This is evidence of the need for more culturally responsive training so that staff can possess greater sensitivity to parents/caregivers and/or to individuals of different races/ethnicities.



A close-up photo of a young child.

When comparing the race/ethnicity of staff to the race/ethnicity of children (Figure 17) they generally mirror each other in Region 17. However, for families who are not white or who speak a language other than English, their preference is often for program staff who are more like their family. As an example of the tension that can occur, a community member who is African American shared about her experience with her son's white therapist who was not providing adequate support nor answering her questions about the service plan. Because the parent felt the interaction was directly related to her race, she searched for an African American therapist. With this new therapist, she felt more engaged because her questions were answered, she was given appropriate activities, and she was included in the process. She shared that this was a drastically improved experience and her son's progress skyrocketed. This is evidence of the need for more culturally responsive training so that staff can possess greater sensitivity to parents/caregivers and/or to individuals of different races/ethnicities.

In addition, workforce data provided by the Illinois Network of Child Care Resource and Referral Agencies (INCCRRA) indicate that 96% of the workforce is female. Of the children under five, 72% are white, nine

percent are Black or African American and seven percent are Hispanic. A true representation of the population would see more ECEC teachers who reflect all the children within Region 17.

Figure 17: Number of Licensed Centers and Licensed Family Child Care Staff by Race, Ethnicity⁷

	Asian	Black or African American	Hispanic or Latine	Native American/Alaskan, PIslander, or Other	Multi-Racial	White
Licensed Center Directors	0	7	*	0	0	76
Licensed Center Teachers	15	119	50	9	29	778
FCC Home Providers	0	13	*	*	0	160

Source: INCCRRA
Created by: Birth to Five Illinois

Workforce Development

There are three incentive programs to assist in the recruitment and retention of early childhood teachers. The Early Childhood Access Consortium for Equity (ECACE) offers scholarships towards education at participating public universities and community colleges as well as any private institutions that choose to participate. These scholarships can be used to improve access to associate’s, bachelor’s, and master’s degrees, and other licensure endorsements, prioritizing those working in early childhood care settings such as child care centers, preschool and Head Start programs, and family child care homes. Region 17 has both Heartland Community College and Richland Community College participating in this initiative. Heartland Community College, which covers Livingston, Logan, and McLean counties, had 25 individuals take part in this scholarship program to work on a degree. Richland Community College in DeWitt County had no participants in the program in 2022. Since the ECACE program is relatively new, the expectation is that these numbers will grow as more public awareness occurs.

A second incentive in the State directed at hard-to-staff public schools is the Grow Your Own program. This initiative is designed to recruit, develop, and retain diverse community members to become teachers. In return for a forgivable loan, an individual commits to teaching for at least five years in a hard-to-staff public school.

A third incentive within Region 17 is a \$900,00 grant awarded to Illinois State University (ISU) from the Illinois Board of Higher Education (IBHE) for early childhood faculty preparation. The grant dollars are to support in-service teachers to become higher education faculty in the spring of 2023. The ISU’s early childhood faculty preparation grant will support 25 in-service teachers to be prepared to train future early childhood teachers in the profession. This grant aims to increase the number of highly qualified early childhood faculty in Illinois in May 2023.

Outside of the incentive programs, Gateways to Opportunity through the Illinois Network of Child Care Resource and Referral Agencies (INCCRRA) offers the Great START Wage Supplement Program and the Gateways Scholarship Program for those who are currently teaching in a licensed program and people who meet other eligibility requirements. These two programs help individuals supplement their wages or offset the costs of working on an associate’s, bachelor’s, or master’s degree.

All these programs are important to note to address the gaps in how program staff can access funds to achieve a higher level of education. This increase in education will professionalize the field and increase understanding of child development, age-appropriate curriculum, and the importance of working with families which, in the long run, will benefit the children.

“Higher wages are needed to attract more people to the industry and career path.”
- Community Member (Livingston County)

⁷ Cells with an asterisk * indicate fewer than five but more than zero respondents.

Family/Parent/Caregiver Voice

Throughout the work of Birth to Five Illinois, family and community engagement is at the forefront. To transform the Early Childhood Education and Care landscape, it is through these voices that the inequitable distribution of resources and services can be amplified. Then, the work can begin to build a system that keeps family and provider experiences centered to directly influence policy makers. While gathering data and stories from families since July of 2022, parents/families/caregivers have identified several issues while trying to access ECEC services for their children. Others have identified positive experiences.

Cost/Affordability

Figure 19 shows comparisons between the median income and the annual cost of child care.⁸ As an example, a family paying \$9,100 and making the median income of \$57,727 in DeWitt County would be spending 16% of its budget on child care and still have cost of living expenses yet to pay. Child Care Assistance Program or CCAP is a statewide child care subsidy to help working parents, foster parents, parents in training, or individuals in higher education who have income under 225% FPL. Despite the goal of the program, families describe their challenges with the CCAP income eligibility thresholds as they get a raise or a promotion. When some parents/caregivers reach the top threshold for assistance and are faced with losing their child care subsidy, they must make a difficult decision: refuse a raise, drop out of the workforce, or pay the full cost of care which puts a burden on the family budget.

Figure 19: Child Care Cost by County and Household Income

County	Median Household Income	Average Weekly Cost: Child Care Centers ⁹	Calculated Annual Cost: Child Care Centers	Average Weekly Cost: Family Child Care Providers ¹⁰	Calculated Annual Cost: Family Child Care Providers
DeWitt	\$57,727	\$175-191	\$9,100-9,932	\$128-141	\$6,656-7,332
Livingston	\$58,676	\$175-191	\$9,100-9,932	\$150-153	\$7,800-7,956
Logan	\$58,122	Unavailable	Unavailable	Unavailable	Unavailable
McLean	\$68,037	\$264-328 ¹¹ \$175-191 ¹²	\$13,728-17,056 \$9,100-9,932	\$173-193 \$150-175	\$8,996-10,036 \$7,800-9,100

Source: INCCRRA, U.S. Census

“Single parents have a hard time paying for child care and for housing.”
- Community Member (McLean County)

“Child care costs shouldn’t be more than your mortgage.”
- Family Council Member (McLean County)

⁸ Annual cost is calculated by multiplying weekly cost by 52.

⁹ Costs for infant/toddler care are higher than preschoolers and school-age.

¹⁰ Costs for infant/toddler care are higher than preschoolers and school-age.

Accessibility Barriers

Parents and caregivers shared various accessibility issues for ECEC services. One example is a preschool-age child who qualifies for a half-day publicly funded program, yet they need full-day care, and the parent is unable to find transportation between the two care locations. A second issue families describe is the need for a center-based or a home-based program but living in a child care desert with limited choices. A third issue families face in a child care desert is the length of commute to find child care.

Long waitlists for Early Intervention services (in all three of Region 17's Child and Family Connections (CFC) offices) are a barrier to accessing therapy for their child. Some parents face a lack of services and others who can find services are facing therapist shortages. For a two-year-old child, a year-long wait list is half their life. This presents a multi-faceted problem including workforce shortage, lack of capacity in programs, and limited accessibility for families.

“Transportation is a big issue. A lot of programs in districts are half day and parents work full-time. What do parents do?”
- Home Visitor (McLean County)

“This has always been a waiting game for our family. Currently, we are trying to acquire EI for physical therapy for our daughter and it is so disheartening how much hurry-up-and-wait time there is.”
- Family Council Member (DeWitt County)

“If there is such a concern about the workforce in Illinois and the US, then we need to start with our youngest members of society and support the families and educational efforts made. Those children are the future, and we are doing a disservice by not providing them with what they actually need to be successful in the future.”
- Action Council Member (Logan County)

Many families report a lack of widely available public information so that families who are not already connected to services can become aware of community resources. Often families rely on social media or friends who are connected to services to get their questions answered. For families who have English as a second language, it was noted several times that they are not taken seriously when it comes to their children. A parent mentioned that this is why many bilingual speakers do not say anything or seek help: because they struggle with speaking up due to fear that the authorities will not listen or will just ignore them and their needs. Yet another parent reported that a diagnosis that occurred in another country does not automatically transfer, and families must start all over with trying to get help for their children.

Families in Region 17 face several challenges obtaining the services their child or their family need. Accessibility is the overarching barrier for families due to 1) the limited number of programs and program options, whether publicly funded or community based; 2) affordability related to child care services; and 3) access to public information about ECEC programs.

While Council members and community members voiced concerns about their experiences of accessing and receiving ECEC services, they also talked about positive experiences:

- A parent shared about a home visitor who helped to connect the family with additional services.
- A parent reported being very pleased with the teachers at her son's Preschool for All classroom.
- A parent reported having a very positive experience with the Resource and Referral Network when applying for the child care subsidy program.

“

Speech for my son was through the pediatrician and Head Start. He received speech therapy at the school and is being evaluated every three months until Kindergarten.

- Family Council Member (McLean County)

”



Two adults pleasantly gazing at an infant baby.

Regional Strengths & Needs

The Family Council, Action Council, and community members at large all expressed that Region 17 has many strengths in the current ECEC system. While praising the existing programs, they also acknowledged that there were areas in which ECEC may be more accessible and equitable to families and where it may better support providers.

Strengths

- Region 17 is a diverse area in central Illinois. Families who would like more amenities choose to live in a mid-sized city like Bloomington or Normal in McLean County. Others may choose small town life in Pontiac, Clinton, and Lincoln in Livingston, DeWitt, and Logan Counties, respectively. Still, others choose to live in the many small villages or unincorporated areas in more rural areas located throughout small farming communities in all four counties.
- For the early childhood landscape, the strengths lie in the relationships built between parents and their child's teacher, family child care provider, therapist, or home visitor. There are 20 Preschool for All and two Preschool for All Expansion sites throughout the Region. Early Head Start programs exist in four locations and every county has at least one Head Start. Licensed child care centers and licensed family child care homes are primarily located in McLean County due to the density of the population. Another strength in Region 17 is the existence of the All Our Kids (AOK) Network which provides coordination and collaboration between many social service agencies and schools to meet the needs of families with young children.
- The Action Council and the Family Council discussed many issues during the last few months. After examining demographics, priority populations, ECEC programs, workforce, Collaborations, and family/caregiver engagement within Region 17, the Councils arrived at five Need Statements and 11 Recommendations.

Needs

1. Address the shortage of a well-trained and well-compensated workforce.
2. Increase the number of Spanish speakers in the workforce, e.g., classroom staff, home visitors, developmental screening staff, and therapists.
3. Expand birth to five programming and child care, especially in rural areas.
4. Create additional affordable child care options for families.
5. Promote local and regional awareness of programs and resources for families.

Recommendations

1. Address the shortage of a well-trained and well-compensated workforce:
 - Ensure that salaries and benefits reflect the educational and training achievements of ECEC staff and are competitive with non-ECEC fields to attract more individuals to the ECEC field.
 - Urge the appropriate public bodies and officials to expand the Career and Technical Education Pathway training opportunities to bring high school students into the ECEC field.
 - Advocate to the appropriate public bodies and officials to create better alignment between qualifications required by child care licensing standards and qualifications required by state and federal ECEC funders.
2. Increase number of Spanish speakers in the workforce, e.g., classroom staff, home visitors, developmental screening staff, therapists:
 - Recruit Spanish speaking high school students, specifically those earning the Illinois State Seal of Biliteracy, to the ECEC workforce.
 - Encourage the appropriate public bodies and officials to develop Career and Technical Education Pathways for high school students to increase the number of Spanish speaking ECEC staff.
3. Expand birth to five programming, transportation, and child care, especially in rural areas:
 - Encourage state legislators and congressional leaders to increase publicly funded resources and programming by utilizing the Illinois Commission on Equitable Early Childhood Education and Care Funding 2021 report.
 - Develop recruitment plan for family/group child care home providers in rural areas.
 - Address the lack of transportation to and from a child's program/programs.
4. Create additional affordable child care options for families.
 - Re-examine income limits for the Child Care Assistance Program (CCAP) to make child care affordable for more families and keep families on CCAP longer. This would allow people with income over 225% Federal Poverty Level (FPL) to qualify and prevents a sudden loss of CCAP benefits due to increased stability of family income.
5. Promote local and regional awareness of already existing programs and resources for families.
 - Broaden public awareness of publicly funded state and federally funded ECEC programs, services, and resources.
 - Increase collaborative efforts such as the AOK Networks into every county.

In compiling this report, it is our hope that local and state leaders will use this information to advance ECEC services in the Region. We will continue our community engagement efforts to expand our understanding of the ECEC needs of local families and providers. If you have further questions about these recommendations or would like to get involved with the work of Birth to Five Illinois in Region 17, please find our contact information on the front inside cover of this Early Childhood Regional Needs Assessment.

Appendices

Appendix A: Citations

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Appendix B: Focus Group and Interview Questions

Throughout the development of the Regional Needs Assessment, focus groups and interviews were conducted with caregivers, providers, elected officials, and other community stakeholders. Below are questions developed for caregivers and others. In the interest of time and space, only select questions are included.

Families, Parents, and Caregivers

1. There are many Early Childhood services available in our Region. What Early Childhood services does your family use/has your family used?
2. How have you found out about Early Childhood programs or services, or found care for your child(ren)?
3. Do the child care services you are using now meet your family's needs? If not, please describe what would better fit your family's needs.
4. What, if anything, has been particularly helpful in making Early Childhood Education and Care work for your family?
5. What barriers or challenges has your family had with using Early Childhood services in your community?
6. Have any of the children in your care been referred to services? What was that process like?
7. What services do not currently exist in your community that you think would help families, in general? What services would help parents/caregivers, specifically?
8. Is there anything else you think I should know about Early Childhood education, care, or services in your community, our Region, or in the state?

Early Childhood Professionals and Others

1. What challenges do you think families have in accessing Early Childhood Education and Care programs and services?
2. What programs do you know of in the Region that serve children birth through age five and their families?
3. What services do not currently exist in your community and/or this Region for young children and/or their families that you would like to see?
4. What data do you think would be helpful in better understanding how priority populations access Early Childhood care and services, or the barriers/challenges they have accessing care and services?
5. Is child care readily available and close to employers in your community?
6. What accommodations has your business or company made for professionals with young children? How have these accommodations impacted your business or company?
7. Have you connected with child care providers in the community to build relationships and build relationships with partners to provide the care you need for employees?
8. What changes have you seen in the community over the past few years? (This could mean shifts in demographics, the number of recent refugee/immigrant families, access to safe, affordable housing, schools consolidating/closing.)
 - a. How do you think those changes impact early childhood education and care now and in the future?

9. What are the possible drivers of the gap in care in the Region?
 - a. What do you think could be done to narrow or close the gap?
10. COVID has impacted the care/ more work from home/ part time. How have these changes impacted the care not already mentioned above?

Circuit 11th Family Court Judges

1. Please describe the children and/or families you work with, e.g. who are they, what challenges do they face?
 - a. What are their prospects once they enter the court system, and what determines their short- and long-term prospects?
2. From your perspective, what is it like for children, parents, caregivers, and families to navigate the court system? Do you believe the system fairly and effectively represents children's interests? What about parents/families/caregivers?
3. What would you change or improve, if anything, to ensure the system more effectively supports children and their families?
4. What public or private resources/programs do children and families have access to once they are involved in the court system?
5. What would you change or improve, if anything, to ensure resources and programs more effectively support children and families?
6. Do you believe that more effective and/or more easily accessible programs and services would prevent some children/families from being involved in the court system? If so, please describe the programs and services and how and in what ways they might prevent involvement?
7. What does the court system do to hold (involved) parents and families accountable for ensuring children's physical, mental, social and emotional needs are met?
8. What happens when the accountability systems reveal shortcomings and/or failures?
9. What are your overall thoughts, opinions and perspectives on both state and local policies, programs, systems, and resources that support children and families?

Underage parents

1. How do you get your information when you have questions about parenting?
2. Do the child care services you are using now meet your family's needs?
 - a. If not, please describe what would better fit your family's needs.
3. Have any of the children in your care been referred to services? i.e., Early Intervention or Special Education services? What was that process like?
4. What are some stigmas associated with being an underage parent?
5. How have these stigmas affected your family when utilizing resources like? (i.e., healthcare, CCAP, food assistance, transportation, financial burdens, not being taken seriously by healthcare professionals and child care staff, lack of family support, etc.)
6. Has being a underage parent affected your mental health and do you feel isolated?
 - a. What resources do you use when you feel isolated?
7. What services do not currently exist in your community that you think would help families and caregivers?

Human Resource (H.R.) Professionals

1. What trends have you seen in employment over the last 2-3 years (hiring, recruitment, challenges)?
2. Does your company or business offer child care onsite for employees?
3. What trends have you seen in employment over the last 2-3 years (hiring, recruitment, challenges)?
4. Does your company or business offer child care onsite for employees?
5. What changes or accommodation has your company made due to the child care needs of your employees?
6. What impact do you think COVID had on families accessing early childhood care or services in your community?

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