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# **Executive Summary: Altgeld- Riverdale Early Learning Initiative Evaluation Final Report**

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# Executive Summary

To ensure that all children in the Altgeld-Riverdale community are succeeding by third grade, BPI (Business and Professional People for the Public Interest) launched the Altgeld-Riverdale Early Learning Initiative in 2012. The goal of the initiative is to establish a community-based system that can support the developmental needs of the community's youngest residents across a spectrum of capacities. Chapin Hall's evaluation of the Altgeld-Riverdale Early Learning Initiative consisted of two main components: the Altgeld-Riverdale Parenting Program Evaluation and the Altgeld-Riverdale Early Learning Coalition Evaluation.

## **Altgeld-Riverdale Parenting Program**

As part of the Altgeld Riverdale Early Learning Initiative, BPI and the Altgeld-Riverdale Early Learning Coalition introduced the Altgeld-Riverdale Parenting Program in 2014. Administered through the Catholic Charities of the Archdiocese of Chicago, this doula and home visiting program follows the Parents as Teachers model, an evidence-based national home visiting model. The program serves low income mothers under age 25 and their babies, with the primary goal to support the healthy development of the program's infants and toddlers.

## **Altgeld-Riverdale Early Learning Coalition**

As the Early Learning Initiative launched, BPI created and introduced the Altgeld-Riverdale Early Learning Coalition to serve as the Initiative's cornerstone. The Coalition — comprised of over two dozen community organizations — was launched with the overarching goal of building a comprehensive community infrastructure to support early learning in the community. The Coalition convenes monthly to discuss challenges around supporting the healthy development of children ages birth to eight in Altgeld-Riverdale. The Coalition is intended to serve as a demonstration project that will inform additional early learning collaborations in low-income, high-need Chicago communities.

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## **Evaluation Approach**

Chapin Hall researchers developed a multicomponent evaluation to assess both the Early Learning Coalition and the parenting program. Each component was designed to provide BPI with necessary information to gauge if the Initiative is being implemented as designed and if initial outcomes are sufficiently robust to support long-term, sustainable changes in the community. We worked closely with BPI and Catholic Charities staff members, along with members of the Early Learning Coalition, to

conduct the evaluation and ensure that it provided timely insight into the most pressing questions and actionable information for moving forward. All data collection activities were conducted between August 2014 and February 2018.

### **Altgeld-Riverdale Parenting Program Evaluation**

The Altgeld-Riverdale Parenting Program evaluation included two components: an implementation study and an outcomes study. The *outcomes study* measured the preliminary outcomes associated with participating in the Altgeld-Riverdale Parenting Program. It utilized four data sources to examine the preliminary and perceived outcomes of participation in the parenting program: (1) Fiscal Year 16 (FY16) comparison data from 22 comparable Ounce home visiting program sites, (2) a sample of program data for 35 consenting participants, (3) quarterly program reports with aggregated data on all participants, and (4) interviews with 11 participants. The Altgeld-Riverdale Parenting Program *implementation study* documented the extent to which the parenting program was implemented as designed and with high quality. It included three key tasks: program service data analyses, home visit and parenting group observations, and staff and stakeholder interviews.

### **Altgeld-Riverdale Early Learning Coalition Evaluation**

The Early Learning Coalition evaluation sought to better understand the perspectives of community residents about the programs in their community that support early childhood development, including any factors preventing them from enrolling their children or themselves in such programs. The evaluation utilized a community member survey, a Coalition member survey, and interviews with Early Learning Coalition members to measure the impact of the Coalition. Both surveys were administered at two time points. The community member survey gauged parents' and guardians' knowledge and use of community services for children ages 0–6 years old, as well as their beliefs about school readiness. It was designed to gauge change in Coalition members' perceptions of collaboration among members, the impact of the Coalition on their work, and specific Coalition activities. Researchers supplemented this survey with interviews of Coalition members to ask about their perceptions of the Coalition's function, goals, activities, and importance, along with recommendations for improvement.

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## **Key Findings: Altgeld-Riverdale Parenting Program Evaluation**

### **Parenting Program Outcomes Evaluation**

#### **Parenting Program Comparison Data**

The Ounce of Prevention's comparison data provided a snapshot of how the Altgeld-Riverdale Parenting Program was functioning compared to Best Practice Standards<sup>1</sup> and 22 other home visiting programs in

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<sup>1</sup> The Ounce of Prevention developed Best Practice Standards as a tool to provide quality assurance to home visiting programs.

Illinois for FY16. On seven of nine domains, the program met or exceeded the benchmark and the 22-site average. These benchmarks included doula clients engaging in home visiting services, developmental screening completion, creation of birth plans, doulas attending births, delayed subsequent births, documented medical home, and initiation of breastfeeding. Table 1 details the Best Practice Standard Benchmark, the FY16 data for the Altgeld-Riverdale Parenting Program and the FY16 data averaging the 22 other parenting program sites for each measure, as well as how the parenting program compared to the benchmark and 22-site average.

**Table 1. Comparison of the Altgeld-Riverdale Parenting Program FY16 Data to the 22-Site Average FY16 Data and Best Practice Standards Benchmarks**

<b>Best Practice Standard Benchmark</b>	<b>Altgeld-Riverdale Parenting Program</b>	<b>Ounce 22-Site Average</b>	<b>Altgeld-Riverdale Parenting Program Compared To:</b>
Programs enroll 80% of Doula participants in Personal Visiting Services	94%	32%	Benchmark: <b>ABOVE</b> 22 Site Average: <b>ABOVE</b>
90% of Children are up-to-date with Developmental Screenings	95%	90%	Benchmark: <b>ABOVE</b> 22 Site Average: <b>ABOVE</b>
90% of Doula participants have an up-to-date birth plan	100%	85%	Benchmark: <b>ABOVE</b> 22 Site Average: <b>ABOVE</b>
75% of Doula participants have a Doula-attended birth	75%	73%	Benchmark: <b>MEETS</b> 22 Site Average: <b>ABOVE</b>
80% of participants delay subsequent birth during program involvement	100%	85%	Benchmark: <b>ABOVE</b> 22 Site Average: <b>ABOVE</b>
90% of children are up to date with immunizations	53%	79%	Benchmark: <b>BELOW</b> 22 Site Average: <b>BELOW</b>
90% of children are up to date with well-child visits	73%	80%	Benchmark: <b>BELOW</b> 22 Site Average: <b>BELOW</b>
92% of target children have a documented primary care provider	100%	94%	Benchmark: <b>ABOVE</b> 22 Site Average: <b>ABOVE</b>
75% of participants initiate breastfeeding	88%	85%	Benchmark: <b>ABOVE</b> 22 Site Average: <b>ABOVE</b>

### **Parenting Program Participant Outcomes Data**

Chapin Hall used quarterly program reports with aggregated data on all participants and a sample of 35 parenting program participants who gave consent for their de-identified, individual-level program data to be utilized for this study. All 35 participants in our sample were African American females, had never been married, and were under the age of 25. Thirty-three had a target child born before the end of the evaluation period. Sample data were extracted from the Ounce’s OunceNet data system for each

individual from the date of their enrollment through June 30, 2017. We examined initial outcomes for program participants which, if realized, would be suggestive of meaningful long-term impacts.

### ***Infant Feeding Patterns***

Almost all mothers in our sample (94%) initiated breastfeeding at birth. When comparing Altgeld-Riverdale program participant rates to national CDC averages for non-Hispanic black mothers and mothers living in poverty, parenting program mothers exceeded national averages immediately after birth.<sup>2</sup> Unfortunately, there was a significant drop in breastfeeding rates, with only 41% of those mothers still breastfeeding at six weeks postpartum and only two mothers breastfeeding six months later.

### ***Health Outcomes***

According to program data, 50% or fewer of the program's target children were up-to-date with their immunizations for most of the evaluation period. These numbers closely matched with the Ounce's comparison data for FY16, which found that 53% of the Altgeld-Riverdale Parenting Program target children were up-to-date with immunizations. It is not clear if these children are truly behind on immunizations or if program staff are not entering this information consistently into OunceNet.

According to quarterly reports, the percentage of children up to date with well-child visits ranged from a high of 100% down to a low of 33% during the last quarter of 2014. On average, 79% of sample children were up to date with well-child checks during the project period.

### ***Screening Tools***

The program administers several screenings at regular intervals as part of the home visiting model, including screening for maternal depression, child development, and maternal efficacy. Program data show that over the 14 quarters from January 2014 through June 2017, staff were more consistent at administering the child development and maternal efficacy screens (85% and 87% of participants, respectively, were up to date with these screens), but less so in administering the maternal depression screen (between 43% and 78% of screenings that were due were completed). During the evaluation period, of the 58 reported maternal depression screenings completed, only one resulted in a positive screen, indicating that the client might be suffering from depression. Program data for the maternal efficacy screenings showed that at intake, the average composite score for program participants in our sample was 3.23 (out of 4), meaning that the parenting tasks were rated as "easy" overall. The composite scores generally increased over time, and by the fifth administration the mean composite score was 3.94 (meaning that tasks were rated as "very easy" overall).

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<sup>2</sup> Centers for Disease Control and Prevention, Department of Health and Human Services. (n.d.). *Rates of Any and Exclusive Breastfeeding by Socio-demographics among Children Born in 2014 (Percentage +/- half 95% Confidence Interval)*. 2015 and 2016 National Immunization Surveys. Retrieved from [https://www.cdc.gov/breastfeeding/data/nis\\_data/rates-any-exclusive-bf-socio-dem-2014.htm](https://www.cdc.gov/breastfeeding/data/nis_data/rates-any-exclusive-bf-socio-dem-2014.htm)

During the maternal efficacy screening, a question is asked about how often parents read or told a story to their child during the past month. This question was only recorded in OunceNet for 19 participants (after their baby was born) during the evaluation period. The average response was 2.26, which indicates that those 19 mothers read or talked to their baby a “couple of times a month.” Of these participants, 11 had additional answers recorded in OunceNet for this question. For these 11 mothers, they were reading/talking to their babies an average of 2.91, which gets closer to reading a “few times a week.” It is not clear if the lack of answers recorded in OunceNet are because staff are not asking this question of participants or if they are simply not entering the data regularly.

### **Altgeld-Riverdale Parenting Program: Program Participant Interviews**

Semi-structured interviews with 11 program participants revealed that respondents were very enthusiastic about their participation in the Altgeld-Riverdale Parenting Program and the support they received from the program staff and their peers. They felt the program armed them with the information they needed to be good parents and support their children’s development, health, and safety. Interview respondents found the program beneficial in reducing anxiety, learning how to safely soothe and bond with their children, and reducing their sense of isolation. Parenting groups were a key recruitment and retention strategy for many interview respondents.

#### ***Commitment of Program Staff***

The commitment of program staff really made this program stand out to its participants. Respondents repetitively used the word “love” to talk about how they felt about the program and its staff. The mothers expressed feeling that the program staff genuinely cared about them, in a way they had not found in other programs. Mothers mentioned how they appreciated that they could reach out to their doula or FSW by phone or text whenever they had questions.

She was like, “You can even contact me at any hours with any questions,” and I thought that was helpful because a lot of times I would be like, “okay, is this labor?” I was in labor for three days, so I wasn’t sure, like “Okay, what do I do? What’s best? Is this normal, is this not normal, should I get this checked out?” I would text her and she would give me—she would respond real quickly back.

#### ***Role of the Doula and Family Support Worker (FSW)***

Interviews revealed six themes pertaining to the positive role of the doula: (1) providing information about what to expect during labor and writing a birth plan, (2) supporting bonding with the baby during pregnancy, (3) assisting with communication with doctors and other hospital staff, (4) providing coaching and support during labor and delivery, (5) encouraging and supporting breastfeeding efforts, and (6) coaching on early parenting. Participants talked about learning about their bodies, how to identify the

early signs of labor, exercises they could do once their contractions started, and receiving information about epidurals and other medical intervention.

Analysis of the interviews revealed five themes related to the importance of the FSW's role: (1) teaching about the different stages of early childhood development; (2) showing participants different exercises and activities to support healthy development; (3) life coaching, including planning around education, work, and housing; (4) parenting coaching; and (5) assessing child care options. Mothers talked about an assortment of developmentally appropriate activities they did with their FSW to support different stages of child development. They also talked about learning information about the different developmental stages and tips for supporting healthy development. Participants expressed appreciation for learning how to be more aware of their baby's behaviors and expressions, allowing them to witness and support their development.

### ***Parenting Group Sessions***

The mothers spoke very highly of the group sessions. They appreciated the opportunity to get together with peers, liked the topics they discussed, enjoyed learning in a fun environment, and appreciated the food that was provided. One respondent explained how attending parenting group sessions made a big difference in her day, "Seriously, sometimes. . . I come there irritated, I'll leave out happy. Like today I walked in with a bad attitude, I walked out just fine. It's great energy, positive energy. Helpful."

Transportation for group sessions was a challenge, and parents noted that having a van might be helpful.

### ***Breastfeeding***

Almost all interview respondents chose to initiate breastfeeding. The length of time that they breastfed varied from one week to four months. Respondents talked about how their doula informed them of the benefits of breastfeeding, helped ensure they got skin-to-skin time directly after childbirth when they could initiate breastfeeding, coached them on how to get their babies to latch on, showed them different breastfeeding positions, taught them how to use breast pumps, and gave them tips about how to continue breastfeeding. Learning about the benefits of breastfeeding led some mothers who were initially averse or ambivalent to give it a try. One mother shared, "Breastfeeding wasn't something I was really wanting to do at first. I just wanted to go straight to bottle-feeding. But, it's more like they talking to me about it, I would say, 'I'll just try it out at the hospital.'"

### ***Child Care***

A few of the interviewed mothers had enrolled their children in formal child care, about half were planning to enroll their children in formal care in the future, and a couple were not interested in nonfamilial child care. Mothers who were not enrolled stated that they worried about the quality of the care available and whether their children were old enough. Respondents reported receiving help and

advice from program staff on how to select an appropriate provider. In some cases, the FSW recommended specific child care providers to the mothers and addressed their concerns about leaving their children with strangers, explained the potential benefits of child care, and coached them on how to choose a good fit.

### ***Early Literacy***

Mothers reported that their doula and FSW encouraged them to read and talk to their children earlier, more frequently, and more consistently than they would have without their support. With the support of program staff, and books provided by them, mothers said that they started to read aloud (and talk and play music) while their babies were still in the womb and then continued the practice after they were born. One respondent shared, “It was weird, because I didn’t really think he could hear me. She showed me the exercise to put my hands over my ears, and that’s how it sound to him. He understood it. I’m like, ‘He did hear me.’” They stated that they did this in order to help their babies learn to communicate, to support their brain development, and to bond with them as well. Many said they would not have thought about reading to their babies before they knew they could understand the content if it had not been for the encouragement of program staff.

### ***Reduced Anxiety***

Mothers talked about how knowing more about what to expect both during the birthing process and after childbirth helped them feel better prepared, allowed them to make informed decisions, and calmed their nerves. Respondents felt that the birth plan they created with the doula was especially helpful in reducing anxiety about the birth process. Writing this birth plan created an opportunity for them to discuss all the potential decision points that might arise during labor so that mothers could make informed decisions in advance. For example, one mother shared how she suffered from extreme anxiety before enrolling in the program, and what a difference the program made for her:

By me being a first time mother, it means a lot of stuff that I was unaware of and I didn’t know. Most importantly, when I found out I was pregnant, I started stressing a lot. I lost like 20 pounds. It had been a long pregnancy. I was worried, because my family was very negative. Now I know I got somebody to go to if I need anything or if I need to know something or what to do if this happens. I just feel like it changed me. I stopped stressing. I started feeling better. I started exercising, walking.

### ***Improved Ability to Safely Soothe Babies***

Mothers spoke about learning tips for identifying cries and soothing their babies from the FSW, doula, and from other mothers in their parenting group. For example, one mother noted how the FSW’s guidance on learning how to distinguish different cries allowed her to better understand her baby’s needs, “To learn her cries...’Cause she told me to listen for different noises she make, or different movements she do if she hungry, or if she just wanna be cuddled up, or if she just want some attention.” Some of the mothers talked about how these techniques represented a big change for them:

[I learned] don't upset her, rock her. Basically just put her to sleep, because she's fussy, so yelling at her won't get anything accomplished, it's just gonna make her nervous and everything else. So I said, "Okay." I used to have no patience, no patience. My mom was like, "You just gotta get some patience." And she's given me some patience. It helped me due to the fact that I ain't had to fuss at her. I immediately knew what to do. Like, I identified certain cries. Some would be like when her pampers is full or when she is hungry or when she's tired. I just knew all of the different ones.

### ***Reduced Sense of Isolation, Increased Connections and Encouragement***

The Altgeld-Riverdale community, on the southern edge of Chicago, is geographically isolated from the rest of the city, with little access to many businesses and services, including limited public transportation. Not only is the community geographically isolated, but many of the mothers who live there reported social isolation within the community as well. For example, one mother stated that although she had lived there for ten years, "we don't really know nobody out here... we just knew we had to, just to stick to yourself." In such an isolating community, bringing mothers together to meet and support each other can make a very powerful difference in participants' lives.

### **Parenting Program Implementation Evaluation**

The Altgeld-Riverdale Parenting Program implementation study documented the extent to which the parenting program was implemented as designed and with high quality. It included three key tasks: program service data analyses, home visit and parenting group observations, and staff and stakeholder interviews.

### **Parenting Program Service Data**

The number of active participants in the program increased over time with a maximum of 26 participants in the second quarter of 2016. The majority of program interactions between staff and participants (84%) occurred during home visits, with most of the remainder occurring during group sessions or doula visits to the hospital for childbirth support. The majority of participants were highly engaged in the program and followed their service plan, and those two domains were aligned.

### **Home Visit and Parenting Group Observations**

Staff members and program participants appeared to have strong and trusting relationships. Participants were engaged in the learning activities, asked questions freely, and appeared to listen carefully as information was presented during home visits and group sessions. Staff members followed through with their planned content during the home visits, deftly managing distractions and practical obstacles (e.g., sleeping baby, other people in the home). Additionally, for group sessions, staff created a plan that included a topic for discussion and information sharing. With the number of participants fluctuating from session to session, program staff needed to be responsive and flexible to the unique needs of each group

and were forced to make quick adjustments to their plans based on the number of participants and children in attendance.

### **Parenting Program Staff and Stakeholder Interviews**

Staff reported that there were three primary pathways for young women to enroll in the program: door-to-door outreach by staff, word of mouth, or referral from the TCA Health clinic staff. Participant retention was strong due to the personal connection developed with their home visitor and doula; the nonjudgmental and supportive attitude of staff; and because the young women who participate in the program sincerely want to be good parents and understand that the education and support they receive from the program can help them reach that goal. Weekly parenting groups were a key engagement and support strategy for some participants, but transportation for the groups remained a challenge.

Supervision was a critically important component of the program throughout the evaluation period, with excellent supervision provided throughout most of the program's life. Potential staff burnout due to full caseloads, low salaries, high stress, and community violence remained a concern. Strong supervision was a protective factor, but preventing burnout remained an issue.

The most common unmet needs facing families were insufficient access to viable employment options, housing instability, concrete needs (e.g., diapers, formula, cash), and mental health support. Staff members attempted to help with employment issues by sharing job announcements they are aware of, but this strategy does not provide systemic support for participants. Mental health issues were frequently mentioned as an area of need for program participants. Staff and service providers agreed that most clients experience high levels of stress as well as exposure to traumatic events, such as community violence. They believe that the program provides critical emotional support to the young women as they navigate this challenging time in their lives, but also acknowledge that some young women might need additional intervention.

Staff members emphasized the importance of capitalizing on early learning opportunities with participants and their babies, and early literacy remained a strong focus of the program throughout the evaluation. Many parents were uncomfortable with trying to read to their babies, so staff members encouraged them to use a variety of strategies to help their babies learn (e.g., talking to the baby, making up a story based on pictures in a book).

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## **Key Findings: Early Learning Coalition Evaluation**

The Coalition is a partnership of over two dozen community organizations, all dedicated to identifying and addressing the needs of young children in their community. The intended outcomes of the Coalition include establishing an early learning network in the community, increasing enrollment and attendance in

early childhood care and education programs, and improving the quality of programming and facilities for the local schools and the other organizations that support children and families. The Early Learning Coalition evaluation was designed to assess whether the coalition is reaching these goals. It includes three components: the community survey, an Early Learning Coalition member survey, and Early Learning Coalition member interviews.

## **Community Survey**

One of the Coalition’s major aims has been increasing enrollment in the various programs and services for young children and families in the community. Therefore, the evaluation sought to better understand the perspectives of community residents about community programs that support early childhood development, including any factors preventing them from enrolling. The Time 1 Community Survey was administered between December 2014 and February of 2015, and the Time 2 survey was administered between April 2017 and May 2017 to a different sample of participants. The survey consisted of three sections: demographic information about the respondent, respondent familiarity and enrollment status with selected programs and services in the community, and respondent beliefs about what children need to know and do to be ready for kindergarten.

Respondents were asked about the following community services and programs:

- (1) Altgeld-Riverdale Parenting Program;
- (2) TCA Health Clinic and Mobile Van (medical, dental, and other clinical services);
- (3) Other TCA Health programs (non-medical programs such as gardening, fitness, and nutrition programs, etc.);
- (4) Head Start programs;
- (5) Pre-K programs;
- (6) Altgeld Library activities;
- (7) Aldridge Summer Camp (also known as “Camp Fit Kids”); and
- (8) Carver Park Kids Summer Camp.

### **Familiarity and Enrollment in Community Programs**

For each early childhood program or service in the community, the survey asked: (1) whether the participant was familiar with the service; (2) if yes, whether the participant had enrolled or planned to enroll their child in the service; and (3) if not, why the participant did not plan to utilize the service.

At both Time 1 and Time 2, over 75% of respondents reported familiarity with TCA Health’s clinical services, the Head Start programs, and the PreK programs. Additionally, about half of respondents were familiar with TCA Health’s non-medical programs, the library program, and the summer camp programs. Compared to the other programs, fewer respondents reported familiarity with the Altgeld-Riverdale

Parenting Program at Time 1 (32%) and Time 2 (39%). The majority of respondents who were familiar with these programs had enrolled or planned to enroll, suggesting that increasing awareness of these programs would likely increase enrollment. Both familiarity and enrollment in Head Start significantly increased from Time 1 to Time 2. This may be the result of efforts by the Coalition to encourage enrollment in early childhood care and education programs (e.g., pre-K, Head Start) in the community through various activities.

In addition, there were marginal increases in enrollment for the Altgeld-Riverdale Parenting Program and both summer camp programs. Respondents who have lived in the community longer, who resided in Altgeld Gardens, and who were grandparents/guardians generally expressed greater familiarity with more programs. While at Time 1, respondents age 35 and older were more familiar with the Altgeld-Riverdale Parenting Program and more likely to be enrolled in Head Start, this was no longer the case in the Time 2 survey. At both Time 1 and Time 2, reasons for nonenrollment were mostly related to beliefs about eligibility criteria for specific programs or already being enrolled in other programs.

### **Kindergarten Readiness**

An additional bank of items was used to assess attitudes towards Kindergarten readiness. These were adapted from items in the Community Attitudes on Readiness for Entering School (CARES) measure which assesses parent attitudes about what skills and abilities children need in order to succeed in Kindergarten.<sup>3</sup> Respondents were asked to think about a child who will begin kindergarten in the fall, and for each item, rate how important or necessary it is for a child starting Kindergarten, using a 4-point Likert scale: (1) not too important, (2) somewhat important, (3) very important, but not essential, and (4) absolutely necessary.

The CARES measure includes two scales: Classroom Readiness and General Readiness. Items in the Classroom Readiness scale include academically oriented items such as counting, knowing basic shapes, the alphabet, and following teacher directions. The overall mean score for the Classroom Readiness scale was similar at Time 1 and Time 2, and mean scores for each item fell between 3 (“very important”) and 4 (“absolutely necessary”). Interestingly, the Classroom Readiness item ranked most important at both Time 1 and Time 2 was “Follows teacher’s directions,” indicating that child compliance is perceived as very important.

The General Readiness scale contains items related to other domains of child development, including social-emotional competence, health and physical development, executive functioning, curiosity, and other developmentally appropriate skills. Compared with the Classroom Readiness scale, there was a

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<sup>3</sup> Piotrkowski, C. S., Botsko, M., & Matthews, E. (2000). Parents' and teachers' beliefs about children's school readiness in a high-need community. *Early Childhood Research Quarterly, 15*(4), 537-558.

wider range in scores across all of the items in the General Readiness scale, yet the mean scores for each item also fell between 3 and 4 at Time 1 and Time 2. The item ranked most important at both time points was, “Is rested and well-nourished. Health care needs are met.” The item “Can express feelings/needs” trended towards an increase but was not significantly different. The mean for the General Readiness scale for the sample was not significantly different at Time 1 and Time 2.

Although parents tended to rank most things as “very important” or “absolutely necessary,” significant differences were found between the Classroom and General Readiness scales. At both Time 1 and Time 2, respondents rated academic skills (Classroom Readiness) as significantly more important for children to have to be ready for kindergarten, as compared to the importance of social-emotional/general skills ( $p < .0001$ ). Community respondents’ prioritizing academic/classroom skills over other skills for kindergarten readiness reflects trends found elsewhere in the literature. While teachers are more likely to endorse social skills and curiosity as essential, parents have been found to place greater emphasis on academic skills.<sup>4,5,6</sup>

### **Early Learning Coalition Member Survey and Interviews**

The Altgeld-Riverdale Early Learning Coalition aims to establish and sustain an early learning network in the community, improving the quality of programming for the local schools and early childhood care and education centers, and improving the facilities for these and other organizations that support children and families in the community. The evaluation was designed to examine whether the Coalition activities effected change in these and other outcomes. The Coalition is comprised of members representing the organizations in the community that provide programs and services to children and families, thus it was important to obtain the perspectives of the community residents as well as the Coalition members on the impact of the Coalition in the community.

#### **Coalition Member Survey: Quantitative Findings**

The Coalition member survey assessed members’ perception of three broad areas relating to the Coalition: (1) collaboration among Coalition members; (2) participation and members’ own work; and (3) specific Coalition activities. The response options for the survey items were on a 4-point Likert scale from “strongly disagree” to “strongly agree,” followed by a field for optional comments. The Coalition survey was administered twice—Time 1 was in June-August of 2015, and Time 2 was in July-September of

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<sup>4</sup> Abry, T., Latham, S., Bassok, D., & LoCasale-Crouch, J. (2015). Preschool and Kindergarten teachers’ beliefs about early school competencies: Misalignment matters for Kindergarten adjustment. *Early Childhood Research Quarterly*, 31, 78-88.

<sup>5</sup> Hatcher, B., Nuner, J., & Paulsel, J. (2012). Kindergarten Readiness and Preschools: Teachers’ and Parents’ Beliefs within and across Programs. *Early Childhood Research & Practice*, 14(2), n2.

<sup>6</sup> National Center for Education Statistics. (1993). *Public school Kindergarten teachers’ views on children’s readiness for school*. Washington, DC: US Department of Education.

2017. Twenty-seven respondents (87%) completed the Time 1 survey, and 20 respondents (67%) completed the Time 2 survey.

Overall, respondents responded quite favorably about the Coalition at both time points. The first section of items inquired about the respondents' perception of collaboration among the Coalition members, and the mean response to each of the Collaboration items was between "agree" and "strongly agree" at Time 1 and Time 2. At both Time 1 and Time 2, respondents tended to "strongly agree" that the Coalition has taken the time to learn about the community and its needs and assets. Survey respondents at Time 2 ranked highest the sense of shared ownership and mutual respect among Coalition members. Some of the lower ranked items at both time points referenced whether the Coalition is providing leadership opportunities and building leadership capacity to sustain the Coalition. Means comparisons tests were conducted to examine the responses for changes over time, revealing one significant decline: respondents felt that the Coalition served an important, unduplicated purpose in the community more strongly at Time 1 than at Time 2.

The next section of the survey presented items about members' participation in the Coalition and its impact on their work. Again, survey participants generally "agreed" or "strongly agreed" with the statements about the positive effect of the Coalition on their work and their organizations. The statement with which participants tended to agree the strongest at both Time 1 and Time 2 was that participation in the Coalition helped members and their organizations build relationships within and outside the community. No significant differences between mean scores over time were found.

The third section of the survey assessed respondents' perceptions of the importance of various Coalition activities. Respondents rated each activity from 1 ("not at all important") to 4 ("extremely important"). There were no significant differences over time. The large majority of respondents rated both pre-K/Head Start enrollment and supporting schools in creating comprehensive student supports as "extremely important"—all respondents at Time 1 and all but one respondent at Time 2. The Pre-K to Kindergarten Transitions Project and out-of-school time/summer programs (e.g., Kids Science Lab, Camp Fit Kids) were also rated as quite important, as was the Altgeld-Riverdale Parenting Program. The Community Beat website was rated the lowest in importance, although respondents still considered it "somewhat important." Overall, survey respondents tended to perceive all of the Coalition activities as important, yet the pre-K/Head Start enrollment and comprehensive student supports were perceived as the most critical activities.

### **Coalition Survey and Interview: Qualitative Findings**

The Coalition survey asked three open-ended questions and contained fields for optional comments following each item's rating scale. The open-ended questions included: (1) what are the Coalition's most

significant accomplishments, (2) what could be done to improve Coalition work, and (3) what is missing from the Coalition. To better understand the survey data and to obtain richer, deeper data on the experiences of the Coalition members, we also conducted interviews with a sample of Coalition members at Time 2. We conducted interviews with 10 individuals representing nine different organizations.

Feedback about the Coalition was overwhelmingly positive. Several themes regarding Coalition accomplishments were apparent at both Time 1 and Time 2 (see Figure 1). The most common theme at both time points was that the Coalition brings together community stakeholders and facilitates new partnerships. Some examples provided were the Coalition helping a local school form a collaboration with the library, a partnership between TCA Health and Youth Guidance creating Camp Fit Kids, and a home visiting program learning how participant parents can access mental health services.

The second most common theme mentioned at both time points was that the Coalition brought new services to the community. Some of the new programs and services mentioned were the new doula program, an afterschool tutoring program, Kids Science Lab, and monthly professional development workshops about trauma-informed practice at a local elementary school. Respondents also reported observing increased parent engagement and strengthened parent-child relationships, which they attributed to the Coalition.

**Figure 1. Early Learning Coalition Outcomes Reported by Members at Time 1 and Time 2**

- | <b>Altgeld-Riverdale Early Learning Coalition Outcomes</b>                 |
|--|
| 1. Brings together community stakeholders and facilitates new partnerships |
| 2. Brought new services to the community                                   |
| 3. Increases enrollment in early childhood programs and schools            |
| 4. Facilitates member participation and engagement                         |
| 5. Increases parent engagement   |
| 6. Supported the designation of Altgeld-Riverdale as an Innovation Zone    |

While many positive impacts of the Coalition were highlighted, challenges were also reported by respondents. Several respondents noted that limited resources among the local organizations presented an obstacle to regular participation in the Coalition, as some organizations are short-staffed and cannot send a staff member to the meetings. Respondents provided suggestions to address these challenges and improve the Coalition. The most common suggestion was to clarify the goals of the Coalition and track progress towards these goals. Additionally, many respondents at both times recommended increasing outreach to both community residents and organizations. To increase outreach in the community, respondents suggested marketing strategies using the Early Learning Coalition logo. Others recommended regularly reaching out to organizations in the community that serve children and families to be sure all

organizations are represented in the Coalition. Another common suggestion at both times was to increase parent engagement in the Coalition and in programs and services in the community.

The interviewed Coalition members noted a few changes they had observed since they first started attending meetings. Multiple interview respondents mentioned changes in BPI facilitator, meeting time, and meeting format. Respondents also reported that the BPI staff have been consistent and shown their commitment to the community. The change in meeting time from late afternoon to lunchtime was preferred by some respondents, while others found the new time less convenient. Finally, respondents noted that previous Coalition meetings were more focused on networking and group discussions, while recent Coalition meetings also included presentations in relevant areas. The more blended format of recent meetings allows for a balance of discussions and presentations, facilitating relationships among Coalition members while also continuing to build knowledge about useful topics.

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## **Conclusions and Recommendations**

Chapin Hall's multicomponent evaluation was designed to provide BPI with necessary information to gauge if the Initiative is being implemented as designed and if initial outcomes are sufficiently robust to support long-term, sustainable changes in the community. We found that the parenting program is an essential support for families with young children in the community and should be maintained. We also found that the Early Learning Coalition is a critical strategy to bring service providers together to focus on ways to positively impact the first eight years of children's lives in the Altgeld-Riverdale community. Findings and recommendations in this report can help Coalition members and BPI prepare for the future of the Coalition's innovative efforts in this community.

### **Staff Members are Foundation of Parenting Program**

The parenting program employs exemplary staff members who bring a strong commitment to excellence, a non-judgmental and supportive attitude, and the ability to build strong relationships with participants. Staff believe that the young women who participate in the program sincerely want to be good parents and as a result, provide them with the education and support they need to reach their potential and overcome barriers. Program participants trusted the staff members and were therefore willing to open up, ask questions, and engage with the material being presented during home visits and group sessions. One key to preventing burnout and ensuring staff members were able to implement the program with fidelity was regular, supportive, and accessible supervision.

### **Recommendation**

Program staff are the lynchpin to program success, and staff members should be supported and acknowledged through a variety of mechanisms, including strong and accessible supervision, maintaining reasonable caseloads, and appropriate remuneration.

## **Parenting Program Meets or Exceeds Standards**

The Altgeld-Riverdale Parenting Program met or exceeded Illinois Home Visiting Best Standard Practices benchmarks on seven of nine measures in FY16. These domains included doula clients engaging in home visiting services, developmental screening completion, creation of birth plans, doulas attending births, delayed subsequent births, documented medical home, and initiation of breastfeeding. Additionally, the program exceeded the average of 22 other home visiting programs in Illinois on these same seven Best Practice benchmark measures. The program did not meet or exceed the standards or the other 22 sites in up-to-date well-child checks and immunization rates.

### **Recommendation**

Program staff and stakeholders might consider accessing these types of comparison data annually to have an objective measure of program implementation and preliminary outcomes. When the program is performing below the Best Standard Practice benchmark, it can engage in corrective action to ensure it meets the standard moving forward.

## **Low Parenting Program Immunization Rates**

Program participant children were not up-to-date with immunizations. In FY16, only 53% of target children had received the recommended immunizations for their age. It is not clear if these children are truly behind on immunizations or if program staff are not entering this information consistently into OunceNet.

### **Recommendation**

If children are receiving immunizations on schedule and the program staff are simply not keeping up with that information in OunceNet, staff can prioritize collecting these data more frequently. However, if program staff are not sure whether parents are immunizing their children, or parents are in fact not immunizing children on schedule, more focus should be put on changing this pattern to ensure child health outcomes are as positive as possible.

## **Parenting Program Parent Groups a Key Strategy**

The parenting groups were a key strategy for program retention; deepening relationships between staff and participants; building a support network for young mothers; and conveying important child development, health, and other information to parents. Groups are held weekly during the school year and participation levels vary. One barrier to participation was transportation—for many mothers, the group meeting place (an apartment inside Altgeld Gardens) is not safely accessible due to inadequate sidewalks, distance from participants' homes, and the inability to easily and safely transport babies or toddlers on

foot. As a result the two primary program staff members transported most parenting group participants each week, which takes up a great deal of staff time.

### **Recommendation**

BPI and Catholic Charities should explore alternative transportation strategies, including a large van or bus to transport larger numbers of program participants and their children. Perhaps there is another local program or church or school that has a van that could be shared with the program.

### **Parenting Program Early Literacy Data Inconclusive**

Data were inconclusive about the early literacy emphasis of the home visiting program. Based on qualitative data it appeared that program staff were discussing the importance of reading or talking to babies during the first three years of life. Interview respondents reported that staff encouraged them to read and talk with their children earlier, more frequently, and more consistently than they would have without their support; as a result, they were reading and talking to their babies more. However, the quantitative program data were not clear on whether or not staff are discussing this concept with participants or having any measurable change in behavior. It could be that staff are in fact discussing early literacy issues with mothers but are simply not asking them the specific question that is captured and tracked in OunceNet.

### **Recommendation**

Program staff should track the early literacy question more consistently in OunceNet to ensure results can be used to modify program content. If mothers do not report increased reading with their child over time, staff should explore what barriers exist for increased early literacy efforts in the home.

### **Breastfeeding Initiation Rates High**

Program participants were initiating breastfeeding at a higher rate than national estimates for similar populations, and qualitative data indicate that was in large part due to the program's influence. Staff share information about the benefits of breastfeeding, mitigate young mothers' concerns about breastfeeding, and encourage them to try it at birth. Unfortunately, rates drop sharply within the first six months of birth. It is unclear what the structural barriers are to breastfeeding continuation, but individual reasons given by interview respondents were milk supply decline, medication issues, conflicting work or school schedules, and the lack of equipment.

### **Recommendation**

Program staff should continue their efforts to encourage mothers to initiate breastfeeding. The Early Learning Coalition, as well as Catholic Charities program and administrative staff, could explore the systemic barriers to continued breastfeeding for this population. Based on that information, strategies

could be developed to address non-individual level factors contributing to breastfeeding cessation. For example, lactation consultants might come to parenting groups on a regular basis to assist with breastfeeding support.

### **Participants Have Unmet Needs**

The Altgeld-Riverdale Parenting Program serves low income mothers under age 25 and their babies who face challenges in employment and mental health support. According to qualitative data results, program participants were motivated to become the best mothers they can be and are willing learners. However, they face challenges, including employment (and the resulting lack of financial resources) and mental health. The majority of participants were not working, and according to qualitative results, there were few jobs available in this geographic area and the jobs that are available were not ones leading to self-sufficiency. Regarding mental health, quantitative data does not show any problematic patterns with maternal depression amongst program participants. However, qualitative data identified concerns about mothers' mental health and the services available to address issues. It is not clear whether or not program participants are actually suffering from clinical depression or other types of mental health difficulties, but there is a disconnect between results on the depression screener and the qualitative data.

### **Recommendation**

Program staff that work directly with participants might benefit from forming collaborative working relationships with employment program staff in the community. Parenting program staff currently try to help participants by telling them about job openings they personally know about, but it might be more effective to ensure the mothers have access to formal services in this arena. Regarding mental health, more information needs to be gathered to better understand the complexity of this issue. There are numerous areas that need to be explored—the impact of community-level violence, poverty, relationship difficulties, parenting stress, etc. Furthermore, the availability and accessibility of appropriate mental health support is an important consideration. BPI and Catholic Charities might consider ways to explore this issue directly with program participants and program staff to ascertain what the actual needs are, and how to meet those needs.

### **Academic Skills Valued over Social-Emotional Skills**

Parents and guardians in the community rated academic skills as more important than social-emotional skills in preparing children for school. Research has found that while parents from low-resource communities tend to emphasize academic preparedness, this can come at the expense of social-emotional development, as information about the benefits of non-cognitive development has generally not been

properly shared with parents.<sup>7</sup> However, the parents/guardians in Altgeld-Riverdale have been exposed to this message in recent years, largely through Coalition activities that have emphasized the importance of social-emotional competence in early childhood. For example, the Pre-K to Kindergarten Transitions Project implemented “Pre-K Kids and Parents Night” events, where parents and children participated in hands-on activities that encouraged social-emotional learning.

### **Recommendation**

Efforts to raise awareness about the importance of social-emotional learning in early childhood should continue in the Altgeld-Riverdale community. Coalition stakeholders might consider ways to highlight the importance of social-emotional readiness not only amongst parents but also amongst early childhood teachers in the community. Research shows that early childhood settings play an essential role in the development of the prosocial skills needed for success into adulthood.<sup>8</sup>

The Pre-K to Kindergarten Transitions Project highlights the importance of social-emotional learning and provides practical strategies to teachers and parents. The Transitions Project increases knowledge and changes teachers’ and administrators’ practice to support children’s social-emotional needs, teaches parents of pre-K students about the transition process and how to support their child’s learning and social-emotional development, and increases awareness in the community of the importance of the transition from pre-K to kindergarten. More events like the “Pre-K Kids and Parents Night” with hands-on activities could be offered to parents with children ages 0-8 throughout the community to demonstrate concrete ways the early childhood classrooms can support social-emotional learning.

### **Increase Familiarity with and Enrollment in Early Childhood Programs**

Some residents with young children who are eligible for early learning programs in the community are not familiar with or enrolled in these programs. The Community Survey findings indicate that parents and guardians of young children in Altgeld-Riverdale are generally familiar with health services and early childhood education programs. However, 29% of respondents were unaware of Head Start at Time 1, which decreased to 23% at Time 2, and over 20% of respondents were unfamiliar with the pre-K programs at both times. At least half of respondents were unfamiliar with the Parenting Program, the library program, and the summer camp options. The majority of respondents who were familiar with these programs had enrolled or planned to enroll, suggesting that increasing awareness of these programs would

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<sup>7</sup> Klein, L. G. (2002). Introduction. Set for success: Building a strong foundation for school readiness based on the social-emotional development of young children. In *The Kauffman early education exchange* (Vol. 1, No. 2, 1–5, pp. 1–5).

<sup>8</sup> Heckman, J. J. (2012). The case for investing in young children. *Defending Childhood: Keeping the Promise of Early Education*. Teachers College Press, New York, 235-242.

likely increase enrollment. Reported enrollment has significantly increased in the Head Start programs, which may be the result of efforts by the Coalition to encourage enrollment in early childhood care and education programs in the community through various activities. Enrollment remained steady in the other early learning programs in the community. Respondents who reside in Altgeld Gardens, who have lived in the community longer, and who are grandparents/guardians generally expressed greater familiarity with more programs.

### **Recommendation**

To be motivated to enroll their children in these programs, families with young children must both value social-emotional learning and believe that the early childhood programs in the community provide this type of learning. Continuing to hold the early learning enrollment fairs in the community may encourage enrollment.

Additional outreach might improve familiarity with the library program, the summer camps, and the parenting program. Discussing the parenting program's outreach and recruitment strategies with the Coalition may generate ideas that could benefit other programs aiming to improve their outreach. The Coalition may, for example, be able to strategize how to best leverage the knowledge of the community members who are most familiar with programs and services. Research shows that most parents rely on networks and family, neighbors, and others whom they trust to recommend services and programs.<sup>9</sup> Therefore, increasing word-of-mouth throughout the community about the early childhood services and programs may be the most effective method of increasing familiarity and enrollment.

### **Early Learning Coalition Opportunities**

Feedback about the Coalition was overwhelmingly positive. When Coalition members were asked about the most significant accomplishment of the Coalition, they reported that the Coalition brought together community stakeholders and facilitated new partnerships. These partnerships and the Coalition meetings raised community awareness of programs and services for children and families. Coalition members felt that the Coalition positively impacted the organizations and members of the community overall, yet goals of the Coalition and future plans are unclear. Recommendations provided by Coalition members included clarifying goals (which has occurred in recent Coalition meetings) and tracking progress, increasing outreach and parent engagement, encouraging member participation in the Coalition (e.g., assigning roles, forming new subcommittees), and expanding the mission beyond early childhood.

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<sup>9</sup> Iruka, I. U., & Carver, P. R. (2006). Initial Results from the 2005 NHES Early Childhood Program Participation Survey. (NCES 2006-075). U.S. Department of Education, Washington, DC: National Center for Education Statistics.

## **Recommendation**

Although the Coalition remains strong, there are specific strategies that might be explored to fortify it moving forward. For example, creating new subcommittees could be a productive way to create new leadership opportunities for Coalition members. We also recommend regularly reminding the Coalition of their newly established goals and to begin tracking progress towards these goals. As the Coalition considers specific strategies, clear action plans and timelines should be developed and tracked to ensure the Coalition continues the important work in which it has been engaged.