

Illinois State Board of Education

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Gery J. Chico Chairman

Christopher A. Koch, Ed.D, State Superintendent of Education

Date: June 30, 2014

MEMORANDUM

TO: The Honorable Pat Quinn, Governor The Honorable John J. Cullerton, Senate President The Honorable Christine Radongo, Senate Minority Leader The Honorable Michael J. Madigan, Speaker of the House The Honorable Jim Durkin, House Minority Leader

FROM: Christopher A. Koch, Ed.D. State Superintendent of Education

ULWAK-

SUBJECT: FY 2012 through FY 2013 Prevention Initiative (PI) Biennial Report

The Illinois State Board of Education (ISBE) respectfully submits this two year, FY 2012 through FY 2013 Prevention Initiative (PI) Biennial Report to the Governor and the General Assembly in fulfillment of the requirements of Section 2-3-89, subsection C, of the Illinois School Code (105 ILCS 5/2-3.89).

This report looks at characteristics of the children, parents and families served, types of services delivered, program models used by funded projects to address the needs of those receiving services, and results of the funded programs. It also explores the spread of poverty and limited education in Illinois to better understand where Prevention Initiative program sites are meeting the population's needs, and where needs are waiting to be met.

If you have any questions regarding this report, please contact Matt Vanover, Director of Public Information/Deputy Superintendent, at (217) 782-4648.

Enclosure

Cc: Tim Anderson, Secretary of the Senate Tim Mapes, Clerk of the House Legislative Research Unit State Government Report Center



EARLY CHILDHOOD BLOCK GRANT PROGRAM FOR CHILDREN BIRTH TO AGE THREE

BIENNIAL REPORT FY12 & FY13

ILLINOIS STATE BOARD OF EDUCATION JUNE 2014

Gery J. Chico, Chairman Illinois State Board of Education Christopher A. Koch, Ed.D. State Superintendent

FOREWORD

The Prevention Initiative (PI) Biennial Report for **FY12 and FY13** is provided to fulfill Section 2-3-89, subsection C, of the Illinois School Code (105 ILCS 5/2-3.89). The interpretations presented in this report do not necessarily reflect the positions or policies of the Illinois State Board of Education (ISBE). For more information, contact Jenna Chapman of the ISBE Center for Performance at (312) 814-7217 or jchapman@isbe.net.



The Illinois State Board of Education (ISBE) is required to submit a Prevention Initiative program status report to the Illinois General Assembly every two years. The report is mandated to include the following:

- 1. Characteristics of the children, parents and families served
- 2. Types of services delivered
- 3. Program models used by funded projects to address the needs of those receiving services
- 4. Unmet needs
- 5. Results of the funded programs



Section 2-3.89 of the Illinois School Code (105 ILCS 5/2-3.89), otherwise known as the Illinois Early Childhood Prevention Initiative (PI) Program, was established to provide coordinated services to infants and toddlers at risk of academic failure and their families. The components of these coordinated services include: a) screening to determine eligibility, b) parent education, c) developmental monitoring, d) family needs assessment and case management services, e) development and implementation of an Individual Family Service Plan (IFSP), f) family involvement opportunities and g) community collaborations.

EXECUTIVE SUMMARY

In **FY12**, Prevention Initiative funded **158 programs** serving **13,579 children** with a total of **\$57,841,868**. Of the children served,

73% were identified as members of racial/ethnic minority populations;

71% were in families receiving food stamps;

2% were homeless; and

2% were in foster care.

(Data Tables sec. C)

These programs were administered in the child's home (56% of programs), in a child care center (35%), or at another school (9%). Two major program models were used to address the needs of both parents and children:
Parents as Teachers (45%) and BabyTALK (43%). Other options included Prevention Initiative Center-Based Care (4%), Healthy Families America (2%), and other approved models such as the Portage Project and Nurse Family Partnership (5%). (Data Tables sec. A)

In **FY13**, Prevention Initiative funded **155 programs** serving **14,770 children** with a total of **\$53,505,132**. Of the children served,

76% were identified as members of racial/ethnic minority populations;
69% were in families receiving food stamps;
10% had biological mothers aged 18 or younger;
2% were homeless; and
2% were in foster care.
(Data Tables sec. C)

These programs were administered in the child's home (52% of programs), in a child care center (40%), or at another school (7%). Two major program models were used to address the needs of both parents and children:
Parents as Teachers (43%) and BabyTALK (47%). Other options included Prevention Initiative Center-Based Care (4%), Healthy Families America (2%), and other approved models such as the Portage Project and Nurse Family Partnership (4%). (Data Tables sec. A)

Caregiver data was collected for the first time in FY13. Of the **14,678 caregivers** served, **74%** were the child's **biological parent**; **26% did not complete high school**; **37%** were **unemployed** and actively seeking work; and **20%** were **working more than 20 hours per week**. (*Data Tables sec. B*)

The outcome measures for Prevention Initiative services changed between FY12 and FY13. Based upon the FY13 data, caregivers were reported as:

84% making progress toward or achieving parenting goals;
62% making progress toward or achieving personal education goals;
79% making progress toward or achieving community engagement & health goals;
(Surveys & Responses p. 18)

and finally, 99% of caregivers "agree" or "strongly agree" that this program helped them become better parents. (Surveys & Responses p.17)

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INTRODUCTION

The Prevention Initiative (PI) program, which was established in 1988, is authorized by Sections 1C-2 and 2-3.89 of the School Code. It is one of only two programs currently funded under the Early Childhood Block Grant (ECBG). The ECBG is a birth-to-age 5 grant program that includes PI and the Preschool for All (PFA) programs. The ECBG's purpose is to provide early, continuous, intensive, and comprehensive evidence-based child development and family support services to help families prepare their young children for later school success.

The PI program is funded with an infant/toddler set-aside from the ECBG. Under Section 1C-2(c) of the School Code, no less than 11 percent of the money appropriated for the ECBG must be used to fund programs for children ages 0-3. The law further provides that this percentage will increase to at least 20 percent by FY 2015. Public Act 98-0645, which was signed into law on June 11th, 2014 and takes effect on July 1st, 2014, changes the percentage of the ECBG that must be used to fund programs for children ages 0-3 from 11 percent to 14 percent for FY 2015, and moves the increase to 20 percent to FY 2016. The State Board is exempted from meeting these minimum percentages when, in a given fiscal year, the amount appropriated for the ECBG is insufficient to increase the PI allocation without reducing the amount of the ECBG for existing providers of preschool education programs. Currently, the ECBG infant/toddler set-aside for PI is 14 percent.

PI funds are distributed to eligible applicants (including public school districts, university laboratory schools approved by the Illinois State Board of Education, charter schools, area vocational centers, and public or private not-for-profit or for-profit entities with experience in providing educational, health, social, and/or child development services to young children and their families) on a competitive basis. Section 2-3.89 of the School Code requires PI grantees to implement research-based, comprehensive, and intensive prevention services to expecting parents and families with children birth to age 3 who are at risk of academic failure. Examples of the research-based models currently receiving PI funding are center-based services that adhere to the requirements of Early Head Start or the National Association for the Education of Young Children (NAEYC) Standards; or home-based services that adhere to the requirements of Healthy Families America, Parents as Teachers, Baby Talk, or Nurse-Family Partnership program models. All of the program models share common components, such as home/personal visits, links to community resources, screening and developmental monitoring, and individual family service planning/goal-setting processes. PI programs may be center-based (childcare programs, family literacy programs) or home-based (home visitation programs).

The PI program is intended for children who have been determined to be "at-risk" for school failure as indicated by their families' high levels of poverty, illiteracy, unemployment, limited English proficiency, or other need-related indicators (e.g., school district's rate of dropouts, retention, truancy, teenage pregnancies, and homeless students; high rates of infant mortality, birth trauma, low birth weight, or prematurity; and high rates of child abuse or neglect).

DATA SOURCES

ISBE Web Application Security (IWAS)

Funded programs must use IWAS to access the SIS and eGMS (below) databases, as well as the systems used to upload data from the Parent Evaluation 2012 [ISBE86-56A], Parent Questionnaire 2013 and Outcomes Questionnaire 2013 forms. ISBE has designed data collection instruments in response to the reporting requirements:

• Student Information System (SIS)

State-wide data system developed by ISBE and the IBM Corporation. Through this system, all students are assigned a unique identification number. The use of individual student records will:

- Increase the state's capacity to follow a student's progress over time;
- Improve data quality to support more well-informed policy decisions, resulting in enhanced educational opportunities for all children;
- Reduce the data collection burden on schools and districts; and
- > Enhance the use and relevance of state data by districts and schools.

• Electronic Grant Management System (eGMS)

The electronic Grants Management System was developed in FY 2005 with the goals of reducing grant preparation time for local education agencies, improving data quality and communications, standardizing ISBE grant applications, and improving efficiency of the grant review and approval processes. It contains financial, enrollment, and directory information.

Prevention Initiative 0-3 Parent Evaluation Form (ISBE86-56A)

A parent or guardian of each child served by a program that received Prevention Initiative funds in FY12 was asked to complete the Prevention Initiative 0-3 Parent Evaluation Form. This survey was intended to assess participant knowledge, attitudes, and behavior in relation to child development and care. The survey also included questions on self-improvement pursuits, and was implemented in FY12 and years prior.

Prevention Initiative 0-3 – Parent Questionnaire (PIPQ)

(http://www.isbe.net/research/pdfs/pi-parent-question.pdf) A caregiver (a parent or a guardian) of each child served by a program that received Prevention Initiative funds in FY13 was asked to complete the PIPQ. This survey was intended to assess participant knowledge, attitudes, and behavior in relation to child development, child care and self-care. This survey was first implemented in FY13.

• Prevention Initiative 0-3 – Outcomes Questionnaire (PIOQ)

(http://www.isbe.net/research/pdfs/pi-outcomes-question.pdf)

Prevention Initiative program staff from a program that received Prevention Initiative funds in FY13 were required to complete the PIOQ. Responses to the questionnaire were based on the Individual Family Service Plan (IFSP) and subsequent case notes completed for each family served by the Prevention Initiative program in FY13. This survey was intended to assess participant knowledge, attitudes, and behavior in relation to child development, child care and self-care. The survey also included questions on self-improvement pursuits, and was first implemented in FY13.

DATA LIMITATIONS

- This report (FY12 and FY13) will include only the data uploaded into the Student Information System (SIS).
- In FY12 the Early Childhood Block Grant (ECBG) Model Parental Training (PT) program became part of the Prevention Initiative (PI) program. Programs receiving funds for ECBG PT programs were required to transition to ECBG PI programs by 2012 – specifically to administer research-based, comprehensive, and intensive prevention services to expecting parents and families with children under age 3 who are at risk of academic failure. This transition may account for some inconsistencies between the March 2012 biennial report and the current report. The PT program served children birth to age five and their families in group settings or individually during a specific crisis. The change from offering less-intensive services (that served more children/families) to intensive home visiting services for children most at risk of academic failure (serving fewer children/families) may partially account for the decrease in children served.
- As of FY12 all information (including program and participant information) is submitted to ISBE by individual PI programs via IWAS, as described in the previous section of this report. The data elements gathered in FY12 changed to align with SIS data element requirements. As FY12 was the first year of data collection utilizing this new system, there were predictably some issues with data being entered correctly, promptly, and accurately. Though many of these issues were addressed in the FY13 data collection process, the potential exists for inconsistency and other reliability issues being present in data from both FY12 and FY13.
- Children may be registered in the Student Information System (SIS) at birth. However, all home visitation programs implemented with Prevention Initiative funds encourage families to enroll in these programs during a woman's pregnancy. The data shown in this report only include families whose children were enrolled in SIS at the time of data collection.
- When a child is identified as "homeless" in SIS, the program that the child is enrolled in is required to respond to additional data element fields within the system. This occurs relatively infrequently, and as such the extra fields are often unfamiliar to program staff and can be difficult to understand. Due to the complex nature of the "homeless" fields, they may not be fully completed; thus, the data on homelessness presented in this report may not be a complete representation of the homeless PI population. ISBE is working to improve the process of identifying children as homeless and the subsequent collection of data representing these children.
- Chicago Public Schools (CPS) reported that a number of children enrolled in the Prevention Initiative
 program were not entered into IMPACT (the CPS system that directly feeds into SIS) for both FY12 and
 FY13. Though the majority of CPS children enrolled in PI are receiving center-based care, those children
 receiving home-visit services were not entered into SIS. Other children may have been omitted from
 IMPACT/SIS due to birth certificate/identification requirements.

DATA CHANGES

- The Early Childhood Block Grant Prevention Initiative funding was reduced by \$4,354,556 between FY12 and FY13.
- ISBE began requiring programs to enter student/child data into SIS in FY12. Parent/caregiver data were not required to be entered into SIS until FY13.
- In FY12 ISBE discontinued the use of the following forms:
 - PI Program Record (ISBE 41-85) an aggregated project report on services, program models used, and unmet needs.
 - PI Program Participant Demographic Information (ISBE 86-60) an individual report on participant demographics, employment status, and educational level. It also included a description of the child's family structure and the family's socio-economic makeup.



Produced by the Illinois State Board of Education Center for Performance with the Divison of Early Childhood June 2014

-all data represent statewide populations unless otherwise specified

A. PROGRAM MODELS

TABLE 1: Number and percentage of PI programs by program model					
PROGRAM MODEL:	FY	12	FY	13	
PROGRAM MODEL:	Count	Percent	Count	Percent	
Parents as Teachers	104	65.8%	103	66.5%	
BabyTALK	37	23.4%	42	27.1%	
Healthy Families America	4	2.5%	4	2.6%	
Other approved models, including:					
Doula					
Nurse Family Partnership					
Portage Project	3	1.9%	3	1.9%	
Center-based care	14	3.9%	10	6.5%	
Total	158	100.0%	155	100.0%	

TABLE 2: Number and percentage of children receiving PI services by program model					
	FY	12	FY	13	
PROGRAM MODEL:	Count	Percent	Count	Percent	
Parents as Teachers	5,845	43.1%	6,680	45.3%	
Baby TALK	6,350	46.8%	6,346	43.1%	
Healthy Families America	315	2.3%	313	2.1%	
Other approved models, including:					
Doula					
Nurse Family Partnership					
Portage Project	502	3.7%	780	5.3%	
Center-based care	563	4.1%	613	4.2%	
Total	13,575	100.0%	14,732	100.0%	

TABLE 3: Number and percentage of children receiving PI services by program model - CPS				
PROGRAM MODEL:	FY12		FY	13
PROGRAM MODEL:	Count	Percent	Count	Percent
Parents as Teachers			516	9.6%
Baby TALK	4,175	100.0%	4,264	79.1%
Healthy Families America				
Other approved models, including:				
Doula				
Nurse Family Partnership				
Portage Project			394	7.3%
Center-based care			217	4.0%
Total	4,175		5,391	

B. CAREGIVER DEMOGRAPHICS

TABLE 4: Number and percentage of participating caregivers by relationship to child				
	FY	12	FY	13
RELATIONSHIP TO CHILD	Count	Percent	Count	Percent
Biological mother			10,524	71.7%
Biological father			278	1.9%
Adoptive parent			18	0.1%
Grandparent			78	0.5%
Other relative			21	0.1%
Legal guardian			3,545	24.2%
Foster parent			76	0.5%
Other			138	0.9%
Total			14,678	100.0%

TABLE 5: Number and percentage of participating caregivers by employment status				
EMPLOYMENT STATUS:	FY12		FY:	13
EIMIPLOTIMENT STATUS:	Count	Percent	Count	Percent
Unemployed			4,502	30.7%
- not seeking employment				
Unemployed			5,493	37.4%
- seeking employment				
In job training			159	1.1%
Employed				
- less than 20 hours a week			1,303	8.9%
Employed				
- 20 hours or more a week			3,002	20.5%
Self-employed			219	1.5%
Total			14,678	100.0%

TABLE 6: Number and percentage of participating caregivers by age				
	FY	FY12		13
CAREGIVER AGE:	Count	Percent	Count	Percent
Age 10 through age 15			250	1.7%
Age 16 through age 18			1,206	8.2%
Age 19 through age 24			8,259	56.3%
Age 25 through age 35			2,930	20.0%
Age 36 through age 50			662	4.5%
Unknown/other/unreported			1,371	9.3%
Total caregivers			14,678	100.0%
Total children served	13,579		14,770	

TABLE 7: Number and percentage of participating caregivers by race/ethnicity				
	FY	12	FY	13
RACE/ETHNICITY:	Count	Percent	Count	Percent
American Indian/Alaska Native			27	0.2%
Asian			257	1.8%
Black/African American			3,269	22.3%
Hispanic/Latino			3,448	23.5%
White			3,779	25.7%
Native Hawaiian/Pacific Islander			64	0.4%
Two or more races			3,834	26.1%
Total			14,678	100.0%

TABLE 8: Number and percentage of participating caregivers by education level				
	FY	FY12		13
EDUCATION LEVEL	Count	Percent	Count	Percent
8th grade or less			1,173	8.0%
Current high school student			578	3.9%
Some high school (no diploma)			2,014	13.7%
High school diploma or GED			7,313	49.8%
Vocational school training			342	2.3%
Associate degree			511	3.5%
Some college			1,899	12.9%
Bachelors' degree			848	5.8%
Total			14,678	100.0%

C. CHILD DEMOGRAPHICS

TABLE 9: Number and percentage of participating children by race/ethnicity					
RACE/ETHNICITY:	FY	12	FY	13	
RACE/ETHNICITY:	Count	Percent	Count	Percent	
American Indian/Alaska Native	33	0.2%	31	0.2%	
Asian	317	2.3%	361	2.4%	
Black/African American	4,758	35.0%	5,106	34.6%	
Hispanic/Latino	4,101	30.2%	5,086	34.4%	
White	3,672	27.0%	3,477	23.5%	
Native Hawaiian/Pacific Islander	10	0.1%	<10*	<0.1%*	
Two or more races	688	5.1%	701	4.7%	
Total	13,579	100.0%	14,762*	>99.9%*	

TABLE 10: Number and percentage of participating children by parent marital status					
PARENT MARITAL STATUS:	FY	12	FY13		
PARENT MARITAL STATUS:	Count	Percent	Count	Percent	
Parents married	3,034	22.3%	3,337	22.6%	
Parents not married	5,316	39.1%	7,307	49.5%	
Unknown/other/unreported	5,229	38.5%	4,126	27.9%	
Total Reported	8,350	61.5%	10,644	72. 1%	

TABLE 11: Number and percentage of participating children identified as homeless					
	FY	12	FY13		
HOMELESS STATUS:	Count	Percent	Count	Percent	
Homeless	320	2.4%	284	1.9%	
Not homeless	13,259	97.6%	14,478	98.1%	

TABLE 12: Number and percentage of participating children that received Early Intervention services						
	FY12		FY13			
EARLY INTERVENTION SERVICES:	Count	Percent	Count	Percent		
Received	53	0.4%	175	1.2%		
Did not receive	13,526	99.6%	14,587	98.8%		

TABLE 13: Number and percentage of participating children with a low birth weight										
BIRTH WEIGHT: -	FY	12	FY	13						
	Count	Percent	Count	Percent						
Low birth weight	736	5.4%	813	5.5%						
Not low birth weight	12,843	94.6%	13,949	94.5%						

*ISBE does not report numbers that represent fewer than 10 students for the purposes of identity protection

TABLE 14: Number and percentage of participating children who were in foster care										
FOSTER CARE STATUS:	FY	12	FY	13						
FOSTER CARE STATUS:	Count	Percent	Count	Percent						
In foster care	198	1.5%	256	1.7%						
Not in foster care	13,381	98.5%	14,506	98.3%						

TABLE 15: Number and percentage of participating children who received child support									
CHILD SUPPORT STATUS:	FY	12	FY13						
	Count	Percent	Count	Percent					
Received child support	542	4.0%	625	4.2%					
Did not receive/require child support	13,037	96.0%	14,137	95.8%					

TABLE 16: Number and percentage of participating families that received TANF benefits										
TANF BENEFITS: -	FY	12	FY	13						
	Count	Percent	Count	Percent						
Received	6,254	46.1%	5,828	39.5%						
Did not receive	7,325	53.9%	8,934	60.5%						

TABLE 17: Number and percentage of participating children who received WIC benefits										
WIC BENEFITS: -	FY	12	FY13							
	Count	Percent	Count	Percent						
Received	11,103	81.8%	11,800	79.9%						
Did not receive	2,476	18.2%	2,962	20.1%						

TABLE 18: Number and percentage of participating families on food stamps/LINK										
FOOD STAMPS/LINK BENEFITS:	FY	12	FY13							
	Count	Percent	Count	Percent						
Received	9,571	70.5%	10,177	68.9%						
Did not receive	4,008	29.5%	4,585	31.1%						

TABLE 19: Number and percentage of participating families that received a housing subsidy										
HOUSING SUBSIDY: -	FY	12	FY13							
	Count	Percent	Count	Percent						
Received	5,606	41.3%	4,903	33.2%						
Did not receive	7,973	58.7%	9,859	66.8%						

OUTCOME SURVEYS & RESPONSES

TABLE 20: Prevention Initiative 0-3 Parent Evaluation FY12 responses Instructions to Parent/Caregiver: What changes in your behaviors and/or attitudes occurred as a result of participation in the Prevention Initiative Program? Check all that apply.

	Statement	Count	Percent
1.	Knowledge and awareness of importance of parent-child relationship.	6,767	92.7%
2.	Knowledge of appropriate parenting skills.	6,592	90.3%
3.	Knowledge of prenatal and postnatal care.	4,058	55.6%
4.	Awareness of child's health/nutritional needs.	6,055	83.0%
5.	Awareness and better understanding of child's physical and developmental growth.	6,573	90.1%
6.	Knowledge of age appropriate activities for my child.	6,540	89.6%
7.	Knowledge of my rights and responsibilities as parents.	5,778	79.2%
8.	Awareness of parent advocacy/support groups.	5,376	73.7%
9.	Knowledge of existing community/government services.	5,571	76.3%
10.	Knowledge of family function and management.	5,386	73.8%
11.	I am more responsive to my child's needs.	6,207	85.0%
12.	I spent time interacting with my child.	6,518	89.3%
13.	I encourage my child more often	6,274	86.0%
14.	I read to my child more often.	5,954	81.6%
15.	Language/literacy activities used with children.	5,639	77.3%
16.	Setting appropriate limits with young children (how to discipline).	5,596	76.7%
17.	Knowledge of dealing with guilt, anger and frustration.	5,279	72.3%
18.	<i>Providing immunization at the appropriate age.</i>	5,278	72.3%
19.	I feel better about myself as a parent.	6,198	84.9%
20.	I am more confident in my role as my child's most important teacher.	6,182	84.7%
21.	My attitudes toward school and parent-school partnership have improved.	5,083	69.6%
22.	Increase in self-esteem.	5,182	71.0%
23.	Enrolled in Bilingual Education program.	826	11.3%
24.	Enrolled in Adult Education class.	831	11.4%
25.	Enrolled in Vocational Education class.	353	4.8%
26.	Enrolled in High School.	635	8.7%
27.	Enrolled in GED class.	466	6.4%
28.	Enrolled in a college.	708	9.7%
29.	Acquired GED.	402	5.5%
30.	Acquired high school diploma.	899	12.3%
31.	Awareness of alcohol/drug abuse programs.	1,409	19.3%
32.	Enrollment in alcohol/drug abuse programs.	230	3.2%
33.	Acquired better housing.	1,454	19.9%
34.	Actively looking for a job.	1,708	23.4%
35.	Acquired a job.	1,340	18.4%
36.	Other	304	4.2%
	Total respondents	7,299	

SURVEYS & RESPONSES

TABLE 21: Prevention Initiative 0-3 – Parent Questionnaire (PIPQ) FY13 responses

Instructions to Parent/Caregiver: Based on your experience over the past year with the program, please rate how strongly you agree or disagree with each of the following statements by circling the number in the appropriate box.

	Statement	Stro disa		Disa	gree	Ag	ree	Strongl	y agree
		#	%	#	%	#	%	#	%
1.	I feel good about myself as a parent	17	0.3%	50	0.8%	1,789	27.8%	4,578	71.2%
2.	I understand how my child grows	13	0.2%	42	0.7%	2,094	32.5%	4,285	66.6%
3.	I know about how to help my child stay healthy	15	0.2%	33	0.5%	1,812	28.2%	4,574	71.1%
4.	I take my child to the doctor regularly	23	0.4%	70	1.1%	1,327	20.6%	5,014	77.9%
5.	I know how to get my child interested in appropriate play activities	16	0.2%	95	1.5%	2,404	37.4%	3,919	60.9%
6.	I am able to respond appropriately to my child even when I am upset	18	0.3%	142	2.2%	2,568	39.9%	3,706	57.6%
7.	I am able to keep my child safe	12	0.2%	31	0.5%	1,371	21.3%	5,020	78.0%
8.	l encourage my child to move around, explore and play	12	0.2%	52	0.8%	1,536	23.9%	4,834	75.1%
9.	I am able to parent even though it can be challenging	14	0.2%	47	0.7%	1,920	29.8%	4,453	69.2%
10.	I am able to set appropriate limits for my child	13	0.2%	95	1.5%	2,306	35.8%	4,020	62.5%
11.	I know how to show my child love, physical closeness and positive feelings	16	0.2%	28	0.4%	1,267	19.7%	5,123	79.6%
12.	I know different ways to respond to my child's needs, emotions and behaviors	14	0.2%	64	1.0%	1,963	30.5%	4,393	68.3%
13.	I do activities that promotes brain development (sing, nursery rhymes, toys)	18	0.3%	101	1.6%	1,865	29.0%	4,450	69.2%
14.	I know how to get support for me and my child	19	0.3%	85	1.3%	1,959	30.4%	4,371	67.9%
15.	I know how to find community resources for me and my child	21	0.3%	153	2.4%	2,197	34.1%	4,063	63.1%
16.	Participation in this program has helped me become a better parent	21	0.3%	28	0.4%	1,301	20.2%	5,084	79.0%
	Total respondents	6,434							

SURVEYS & RESPONSES

TABLE 22: Prevention Initiative 0-3 – Outcomes Questionnaire (PIOQ) FY13 responses

Staff rates each statement based on the interactions they have had with the family over the course of the fiscal year. The "N/A" and "Support" ratings do not require supporting documentation; the "No Progress", "Progress", and "Accomplished" ratings require additional documentation be provided in the family's file to support the rating. Supporting statements found in documentation are general and may apply to many different and/or specific goals within a family's chart.

	Statament	N	/A	Sup	port	No Pro	ogress	Prog	gress	Accom	plished
	Statement	#	%	#	%	#	%	#	%	#	%
1.	Parent displays his/her rights and responsibilities as a parent	920	13.8%	534	8.0%	229	3.4%	2,108	31.5%	2,899	43.3%
2.	Parent obtains quality prenatal care/postnatal care	3,808	56.9%	208	3.1%	85	1.3%	789	11.8%	1,800	26.9%
3.	Parent displays knowledge of the importance of family relationships and how they affect their child	599	9.0%	763	11.4%	340	5.1%	2,466	36.9%	2,522	37.7%
4.	Parent engages in coping techniques (breathing, exercise, etc.)	2,181	32.6%	910	13.6%	496	7.4%	1,873	28.0%	1,230	18.4%
5.	Parent shows love/warmth, physical closeness and positive feelings to child	765	11.4%	579	8.7%	187	2.8%	2,059	30.8%	3,100	46.3%
6.	Parent responds to child's cues, feelings, words, interests, and behaviors	615	9.2%	597	8.9%	254	3.8%	2,434	36.4%	2,790	41.7%
7.	Parent supports/encourages child's exploration, curiosity and play	520	7.8%	605	9.0%	315	4.7%	2,627	39.3%	2,623	39.2%
8.	Parent engages in setting appropriate limits	581	8.7%	778	11.6%	506	7.6%	2,964	44.3%	1,861	27.8%
9.	Parent initiates appropriate play activities	514	7.7%	676	10.1%	403	6.0%	2,752	41.1%	2,345	35.1%
10.	Parent responds to child's health concerns and well-baby checks	1,011	15.1%	479	7.2%	170	2.5%	1,598	23.9%	3,432	51.3%
11.	Parent provides for the nutritional needs of the child	846	12.6%	587	8.8%	225	3.4%	1,963	29.3%	3,069	45.9%
12.	Parent promotes child's physical/motor development	599	9.0%	496	7.4%	238	3.6%	2,559	38.3%	2,798	41.8%
13.	Parent promotes child's social and emotional development	531	7.9%	561	8.4%	298	4.5%	2,731	40.8%	2,569	38.4%
14.	Parent promotes child's speech and language development	578	8.6%	525	7.8%	329	4.9%	2,750	41.1%	2,508	37.5%

SURVEYS & RESPONSES

TABLE 22 CONT'D

	Statement	N	/A	Sup	port	No Pro	ogress	Prog	gress	Accom	plished
	Statement	#	%	#	%	#	%	#	%	#	%
15.	Enrolled in English as a Second Language (ESL)	5 <i>,</i> 400	80.7%	401	6.0%	166	2.5%	427	6.4%	296	4.4%
16.	Enrolled in adult education	5,855	87.5%	260	3.9%	155	2.3%	218	3.3%	202	3.0%
17.	Enrolled in vocational education	6,095	91.1%	184	2.8%	133	2.0%	135	2.0%	143	2.1%
18.	Enrolled in high school	5,688	85.0%	125	1.9%	111	1.7%	202	3.0%	564	8.4%
19.	Enrolled in GED course	5,730	85.7%	341	5.1%	237	3.5%	202	3.0%	180	2.7%
20.	Enrolled in college	5,398	80.7%	329	4.9%	180	2.7%	425	6.4%	358	5.4%
21.	Completion of GED	5,777	86.4%	231	3.5%	225	3.4%	198	3.0%	259	3.9%
22.	Completion of high school	4,833	72.6%	112	1.7%	118	1.8%	225	3.4%	1,372	20.6%
23.	Engaged with alcohol/drug abuse program	6,196	92.6%	156	2.3%	98	1.5%	136	2.0%	104	1.6%
24.	Engaged with safe, stable housing	3,119	46.6%	357	5.3%	266	4.0%	864	12.9%	2,084	31.2%
25.	Engaged with Child Care Resource and Referral (CCRR)	5,158	77.1%	395	5.9%	174	2.6%	319	4.8%	644	9.6%
26.	Engaged with child care	4,395	65.7%	447	6.7%	199	3.0%	555	8.3%	1,094	16.4%
27.	Engaged with Child and Family Connections	4,991	74.6%	280	4.2%	159	2.4%	388	5.8%	872	13.0%
28.	Engaged with adult counseling	5,688	85.0%	305	4.6%	176	2.6%	286	4.3%	235	3.5%
29.	Engaged with family counseling	5,748	85.9%	346	5.2%	194	2.9%	239	3.6%	163	2.4%
30.	Engaged with domestic violence shelter	6,259	93.6%	173	2.6%	98	1.5%	90	1.3%	70	1.0%
31.	Engaged with food/clothing bank	4,774	71.4%	370	5.5%	151	2.3%	530	7.9%	865	12.9%
32.	Engaged with nutrition program (WIC)	2,337	34.9%	259	3.9%	111	1.7%	776	11.6%	3,207	47.9%
33.	Engaged with health department services	3,018	45.1%	276	4.1%	122	1.8%	738	11.0%	2,536	37.9%
34.	Engaged with primary care physicians (medical home)	2,800	41.9%	232	3.5%	130	1.9%	674	10.1%	2,854	42.7%

Parenting goals in pink; personal education goals in yellow; community engagement and health goals in lavender.

SURVEYS & RESPONSES — FURTHER INFORMATION

PREVENTION INITIATIVE 0-3 - PARENT QUESTIONNAIRE (PIPQ)

- Staff administers this questionnaire once at the end of every fiscal year (June 30). When a family transitions out of the program mid-year, staff administers this questionnaire prior to the last visit with the family. All questionnaires must be entered into IWAS on or before July 1.
- Staff administers this parent questionnaire to at least one parent/caregiver for each child in the program. If two parents are actively participating, both may complete a form if they wish. If a family has two or more children between the ages of one month and three years, a questionnaire would be completed for each child enrolled.
- Staff administers this questionnaire to a parent/caregiver only if the child is one month old or older and the family has been enrolled in the program for at least one month. Both of these criteria must be met for a parent/caregiver to complete this form.
- This questionnaire is an anonymous survey for parents or caregivers; therefore, this information is not identifiable to the individual child, parent, or family. Staff assists parents/caregivers who have literacy challenges.

PREVENTION INITIATIVE 0-3 – OUTCOMES QUESTIONNAIRE (PIOQ)

- Staff completes this questionnaire once at the end of every fiscal year (June 30). When a family transitions out of the program mid-year, staff should complete this questionnaire after the last visit with the family. All questionnaires must be entered into IWAS on or before July 1st.
- Staff completes this questionnaire for each family enrolled in the program.
- Staff completes this questionnaire for a family if they have met both of the following criteria:
 - (a) the child is one month or older, and
 - (b) the family has been enrolled in the program for at least one month.
- This questionnaire is an anonymous survey for staff to complete; therefore, this information is not identifiable to the individual child, parent, or family.
- Documentation may be included in the Individual Family Service Plan (IFSP), the Transitional Plan, or in the case file notes. Supporting statements are general and may apply to many different and/ or specific goals within a family's chart. Staff use their best judgment to capture a snapshot of the family that shows changes or progress over the fiscal year.

Further definition of the rating system:

- **"N/A" (not applicable)** The topic/goal was achieved prior to enrollment with PI program OR the subject did not apply to the family.
- **"Support"** The topic/goal was brought up by the professional; however, the parent did not see this as a priority for the family.
- "No Progress" A goal was made but no progress was documented.
- **"Progress"** The topic/goal was determined to be a priority for the family, a goal was made, and progress was documented.
- "Accomplished" The goal was achieved.

(Prevention Initiative Implementation Manual, Page 394)

UNMET NEEDS

Research shows that two primary factors can contribute to a child's future academic stagnation, when present at an early age: **poverty**, and **limited parental education**. In addition to correlating with lower academic achievement, these factors are more likely to be present in the lives of children with multiple other risk factors (e.g. single-parent household; primary home language other than English). [*Rathbun, Walston & West, 2005*]

- In the state of Illinois, approximately **five hundred thousand parents lack a completed high school education**, accounting for **14% of parents and guardians statewide.** In the Cook County, Rockford, and Waukegan metropolitan areas, the number of parents with a limited education may be as high as **twenty-two thousand**, representing up to **45%** of parents in these areas. (*Data represent most recent year available: FY 2011*)
- Meanwhile, over two hundred thousand children age 5 and under live at or below the 100% Federal Poverty Level, or about a quarter (25%) of children age 5 and under statewide. Cook County accounts for almost half of these children, with over one hundred thousand children age 5 and under living at or below the 100% Federal Poverty level (about 45% of the statewide total). (Data represent most recent year available: FY 2012)

By choosing to visually explore the spread of poverty and limited education in Illinois, we can better understand where **Prevention Initiative program sites (red dots in the following maps, as of FY13)** are meeting the population's needs, and where needs are waiting to be met.

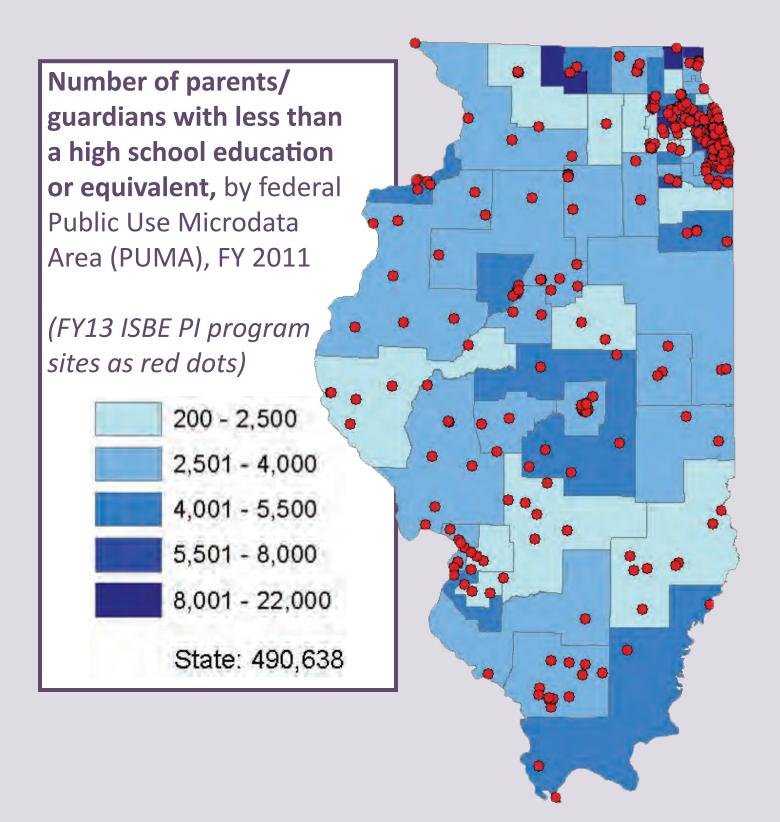
While the county boundaries in the poverty map are likely familiar, Public Use Microdata Area (PUMA) boundaries (as seen in the parental education map) are probably less so. Per the federal government's census website:

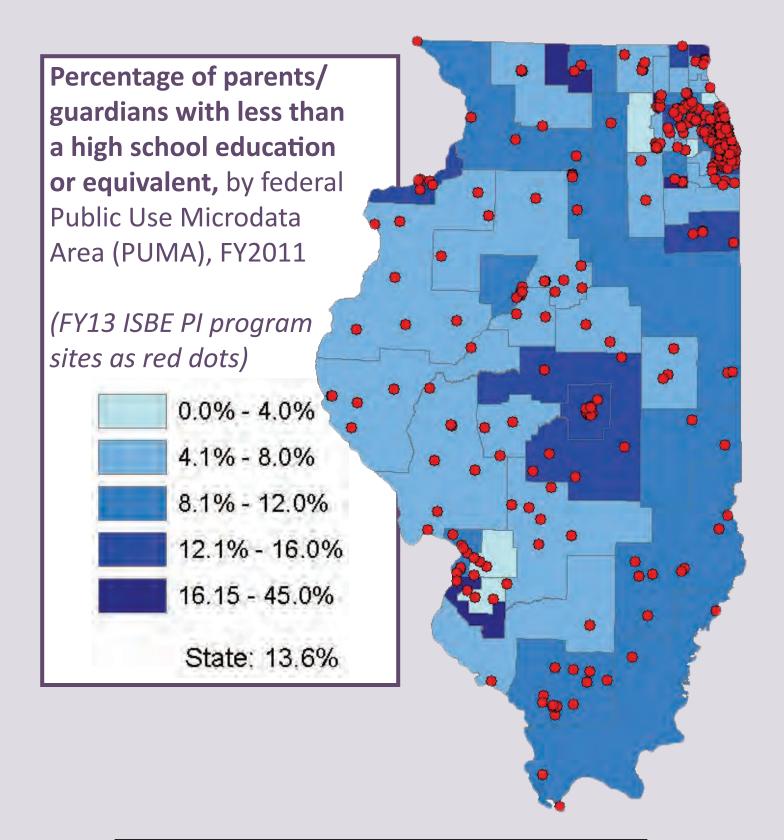
"Public Use Microdata Areas (PUMAs) are statistical geographic areas defined for the dissemination of Public Use Microdata Sample (PUMS) data. They are also used for disseminating American Community Survey (ACS) and Puerto Rico Community Survey period estimates.

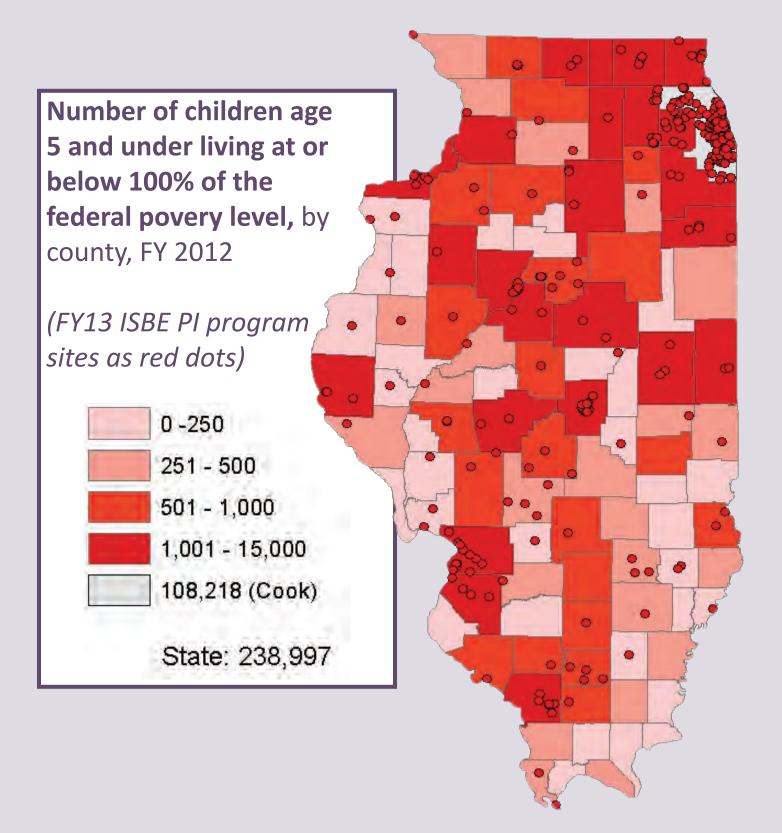
PUMAs: Nest within states or equivalent entities; Contain at least 100,000 people; Cover the entirety of the United States, Puerto Rico, Guam, and the U.S. Virgin Islands; Are built on counties and census tracts; Should be geographically contiguous."

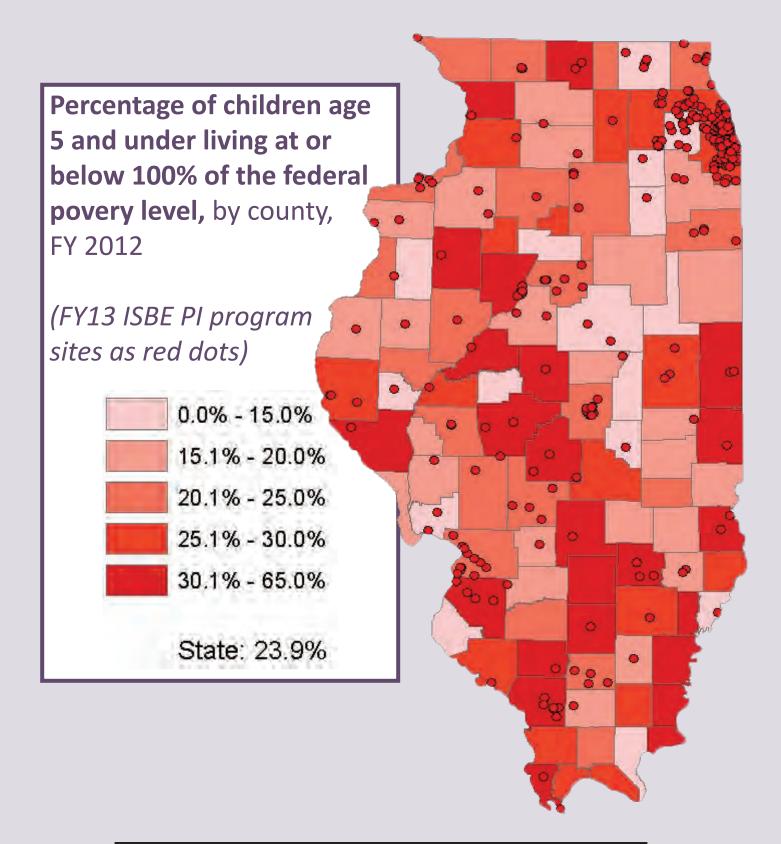
Percentages on this map should thus be read with the population minimum of the PUMA in mind.

Maps on the following pages were created by and under the advisement of the Illinois Early Childhood Asset Map (IECAM) project, located at the University of Illinois at Urbana-Champaign.









ADDITIONAL RESOURCES

A Statewide System Evaluation of the ECBG (Birth to Age 5 Years) was contracted and completed by the Erikson Institute/Herr Research Center for Children and Social Policy. The final segment of the project was an evaluation measuring the quality of PI programs. The Illinois Prevention Initiative (PI) Birth to Age Three Evaluation Summary Report containing the findings of the study was presented to ISBE September 6, 2012.

Summary Report

http://www.isbe.net/earlychi/preschool/pfa-report/pi-0-3/pi-eval-summary-rpt.pdf

- Fact Sheet 1: Home Visitor Characteristics and Quality http://www.isbe.net/earlychi/preschool/pfa-report/pi-0-3/fact-sheet-home-visitor.pdf
- Fact Sheet 2: Program Quality http://www.isbe.net/earlychi/preschool/pfa-report/pi-0-3/fact-sheet-prog-quality.pdf

ISBE Student Information System data elements

http://www.isbe.net/sis/html/data_elements.htm

ISBE Early Childhood 0-3 Prevention Initiative Program Data Analysis and Accountability webpage http://www.isbe.net/research/htmls/pfa_prev_init.htm

Request For Proposals (RFP): Prevention Initiative Birth to Age 3 Years (FY12) http://www.isbe.net/earlychi/pdf/pi rfp 12.pdf

Prevention Initiative Implementation Manual

http://www.isbe.net/earlychi/pdf/prevention-intiative/manual-complete.pdf

IECAM - University of Illinois Early Childhood Asset Map http://iecam.illinois.edu

Rathbun, A., West, J., & Walston, J. (2005, April 15). **Relationships between Family Risks and Children's Reading and Mathematics Growth from Kindergarten through Third Grade**. ERIC. Retrieved from http:// files.eric.ed.gov/fulltext/ED490454.pdf



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