Smart START

June 2000

FPG/UNC Evaluation Team
Annual Report

Services & Successes

What is Smart Start?

SMART START is a comprehensive, community-based initiative serving North Carolina children under age 6 and their families. Governor James B. Hunt and the NC Legislature established Smart Start in 1993. The major long-range goal of Smart Start is to ensure that all children enter school healthy and prepared to succeed. To achieve this goal, 81 local partnerships—encompassing all 100 NC counties—have focused both their attention and their funds on three major areas of service implementation: child care and education, family support programs, and health services. Progress in the provision and quality of services in these areas is tied to the longer-range goal of increased preparedness for school.

Collaboration and local control are basic principles of Smart Start. Each local partnership board, comprised of community leaders, child care providers, parents, teachers, human service professionals, religious leaders and business people, works collaboratively to plan and fund programs that will best meet the needs of their local community. State allocations for Smart Start have increased from $20 million in 1993–94 to $216 million in 1999–2000. Each year, Smart Start has raised an additional 10% from cash or in-kind contributions. More information about Smart Start is available at the North Carolina Partnership for Children web site (www.smartstart-nc.org).
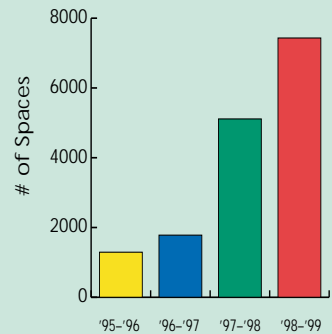
Researchers at the University of North Carolina at Chapel Hill are conducting the statewide evaluation of Smart Start. Results of several studies are highlighted here, organized within the three major areas of service implementation.

Child Care
&
Education

Child Care Availability & Affordability

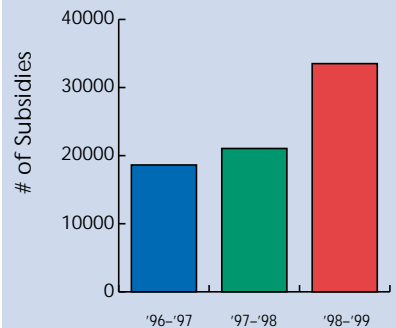**W**ith over 70% of mothers of young children in the work force in NC, parents need more child care options. Child care costs parents an average of $400-$500/month in NC, depending on the age of the child. Parents who earn low wages and parents in school or job training programs need help in paying for child care. Smart Start is meeting these needs by helping centers and family child care homes serve more children, including adding spaces for special age groups and for families working extended hours. More centers now serve children with disabilities, increasing from 40% of centers in 1994 to 59% in 1999. For low-income families, Smart Start is also helping subsidize the cost of child care in licensed centers or family child care homes.

New Child Care Spaces

of Spaces

8000
6000
4000
2000
0

'95–'96   '96–'97   '97–'98   '98–'99

[Note: Beginning in '97–'98, new types of spaces were included in the counts.]

Families Receiving Smart Start Subsidies

of Subsidies

40000
30000
20000
10000
0

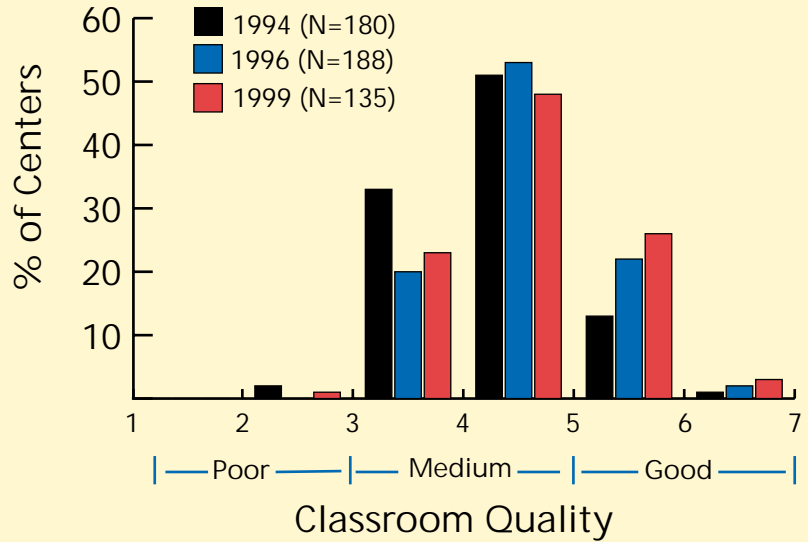'96–'97   '97–'98   '98–'99

Child Care Quality

Research shows that high quality child care environments are positively related to children's later language, math, and behavior skills. Based on these findings, Smart Start partnerships direct about 30-40% of funds towards quality improvement of child care centers and family child care homes. Grants are provided to programs for specific quality enhancement activities. Higher subsidies are given to centers that reach specific quality milestones. Technical assistance through training and mentoring helps child care providers deliver better care and education. Each year, the numbers of centers, teachers, and family child care providers who participate in these activities has increased. Our evaluation data also show that the quality of child care has increased.

Observations in approximately 185 child care classrooms sampled from 18 NC counties were conducted in 1994, 1996 and 1999, using a widely accepted measure of child care quality. These observations show a significant improvement in quality over time, with an increasing number of centers being rated as providing "good" to "excellent" care (a rating of 5 or more on a scale of 1 to 7). Partnerships using a larger proportion of their funds for child care had greater increases in quality, and centers participating in more Smart Start quality improvement activities showed greater increases.
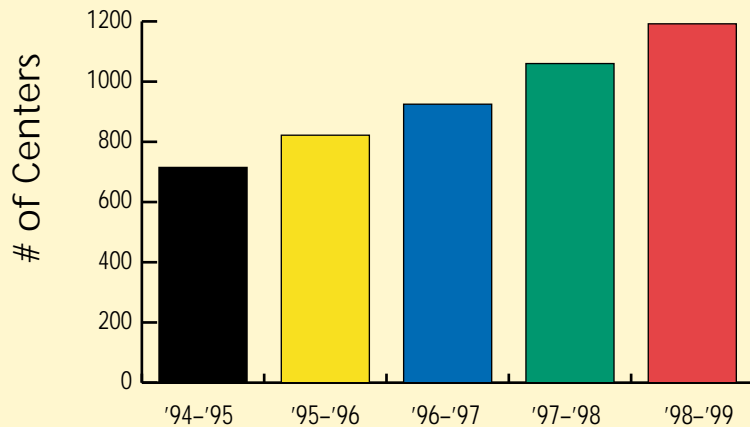
Another index of quality improvement is the licensing level of a center. The number of centers licensed at the higher AA level in NC has increased from 619 in 1993 to 1,128 in 1999. The number of NC centers accredited by NAEYC, the largest national early childhood organization, has also risen from 28 in 1992 to 150 in 2000.

Quality of NC Preschool Child Care

Legend:
- 1994 (N=180)
- 1996 (N=188)
- 1999 (N=135)

Y-axis: % of Centers

X-axis: Classroom Quality

| — Poor — | — Medium — | — Good — |

Higher Quality AA Centers in NC

Y-axis: # of Centers

X-axis: '94–'95, '95–'96, '96–'97, '97–'98, '98–'99

Family Support Programs

An important goal of Smart Start is to help families effectively fulfill their roles as primary providers, nurturers and teachers of their children. Smart Start programs provide families with information, education, and support to help their child be prepared for success in school. Smart Start is funding family resource centers, training in parenting skills, parent education opportunities, and family literacy and home visiting programs. In 1998–99, over 23,000 families participated in family resource centers and over 65,000 families received some type of parent support. While these programs seem to be having a positive impact, families in NC still have a great need for such support. A 1997 study of 356 Smart Start families described the characteristics of families involved in Smart Start:

■ Smart Start families are working families. Sixty-three percent (63%) of low-income and 90% of middle-income Smart Start families in the sample were employed.

■ Smart Start families are engaged with their children in educationally important activities. They read, played number games, told stories, and sang together as often, if not more often, as a national sample of parents of preschoolers.

■ Smart Start families believe in their ability to cope. A high percentage of Smart Start families (79%) reported that they have the strength to cope with the pressures on them, although this percentage was slightly lower than that found in a random sample of NC families (84%).

■ Smart Start families are involved in religious activities with 60% reporting active participation in their place of worship. However, 25% of families were not involved in any community group.

*"Thanks to Smart Start,
my child's vision problems were detected early.
Since the problems have been corrected,
my child has just blossomed and
I know he'll be ready for school next year."*

- **Smart Start families want to know more.** Almost one-fourth of families interviewed said they needed parenting education programs.

- **Not all Smart Start families have easy access to help.** Low-income families were more than twice as likely as middle-income families to report one or more barriers to obtaining needed services, including cost of services, inconvenient hours, lack of child care, and negative attitudes of the staff at service agencies.
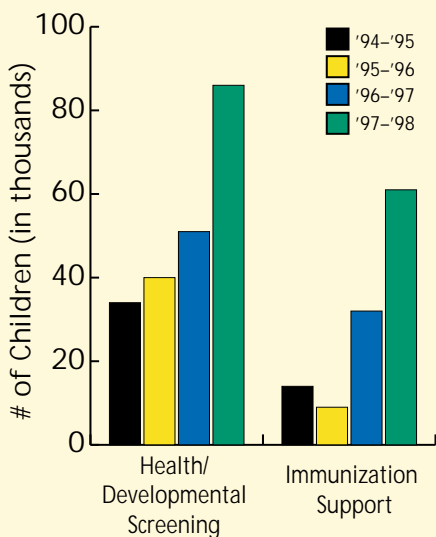
Smart Start is funding a wide variety of family-focused programs, many serving the need for information, education, and training as expressed by parents. Coordination of family services and needed transportation services has also helped improve access to family programs.

Health Programs

To learn and grow at optimal rates, children need to be healthy, and receiving proper immunizations and screenings are key factors in promoting young children's health. Smart Start funds a variety of efforts to make immunizations available and convenient for families. To help identify health and developmental problems early—when interventions can be more effective—Smart Start provides screenings in child care programs. Data show that progress is being made in both these areas. The number of children receiving immunizations and developmental screenings has increased substantially each year. And, because over half of the accidents in child care occur on playgrounds, safety is being encouraged through monitoring programs and grants to replace old equipment with new, safer equipment. In a study of playgrounds, those that had been part of a Smart Start improvement program were significantly more safe than those in an adjacent county that had not been part of a Smart Start program.

Screening & Immunization Support Over Time

Legend:
- '94–'95
- '95–'96
- '96–'97
- '97–'98

Y-axis: # of Children (in thousands), scale 0 to 100

Health/Developmental Screening:
- '94–'95: 34
- '95–'96: 40
- '96–'97: 51
- '97–'98: 86

Immunization Support:
- '94–'95: 14
- '95–'96: 9
- '96–'97: 32
- '97–'98: 61

Children Ready to Succeed

A major long-term goal of Smart Start is that children arrive at school healthy and ready to succeed. The child care, family support, and health efforts funded by Smart Start should all contribute positively to children's developmental status when they enter kindergarten. A recent study of 508 kindergartners in 6 counties shows that Smart Start *is* making a difference. Children who attended child care centers that were very involved in Smart Start quality improvement activities entered school with a significantly better understanding of language (higher receptive vocabulary scores) and more positive teacher ratings of their skills. They were also significantly less likely to have behavior problems.

Children's Skills at Kindergarten Entry

	Smart Start	Non Smart Start
Teacher's Overall Mean Rating	4.4	4.2
% children with low language skills	8%	15%
% children with behavior problems	10%	18%

Smart Start— More Than the Sum of Its Parts

Smart Start is a leading example of "reinventing government" by returning decision making about family services to local communities, asking all parts of the community to work together in a partnership to improve the lives of chil dren and families, and allowing greater flexibility in how and what types of programs are implemented. Several studies of collaboration and community involvement have been conducted using interviews and focus groups with partnerships and community members. Some key findings are:

■ Participants report improved local inter-agency collaboration among organizations that serve young children and their families. They credit the Smart Start planning process for this improvement. Many participants feel that collaboration is one of the most striking successes of Smart Start.

■ The great majority of partnerships have included children with disabilities and their families in their partnership plans and are allocating an average of 8% of their funds for these children. Inclusion is a strongly supported belief among partnership board members and service providers.

■ Parent and business involvement in the local partnerships is essential for partnerships to fully involve their communities. Keeping everyone involved is a challenge shouldered mainly by the executive directors. Partnerships that have higher parent and business involvement rely on multiple strategies, including recruiting key community leaders, offering a wide range of roles to participants, and supporting participation.

Smart Start Works

Smart Start's goals of better child care, improved well-being of families, and greater health resources for children are being achieved. Evidence also shows that children who have attended child care centers that are very involved in Smart Start activities are more prepared for kindergarten. The thousands of people in Smart Start decision-making and service delivery roles are using their ideas and energies to improve the well-being of North Carolina's young children and their families. ■

For more detailed information about the Smart Start Evaluation, please contact Dr. Donna Bryant at (919) 966-4295. Copies of all the evaluation team reports are available on the web at www.fpg.unc.edu/~smartstart or by calling Marie Butts at the number above.

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