SOUTH DAKOTA HEAD START NEEDS ASSESSMENT

REPORT OF SURVEY OUTCOMES

May 2020



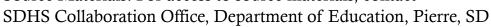


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South Dakota Head Start Needs Assessment – Report of Survey Outcomes May 2020

INTRODUCTION

The South Dakota Head Start Collaboration Office (SD HSCO) performed a survey of Head Start Grantees and Stakeholders in early 2020. The surveys, one for each group, were designed to assess the existence and extent of varied collaboration issues and methodologies used by the SD HSCO, Head Start/Early Head Start agencies, and external stakeholders to address the needs of children and families served by Head Start and Early Head Start across South Dakota.

Results of the survey process point to significant areas of moderate collaboration and knowledge shared by respondents while simultaneously indicating the need for additional education about potential linkages and service coordination opportunities that would benefit agencies and stakeholders in serving South Dakota's Head Start eligible families. Grantees expressed a strong desire for collaboration and support in emerging areas such as children having behavioral challenges and families with members dealing with substance use disorders. Stakeholders have expressed a shared identification with Head Start's mission to provide quality educational and life skills opportunities for eligible South Dakota children and families.

DESCRIPTION OF SURVEY PROCESS

The South Dakota Head Start Collaboration Office (SD HSCO) continues its work within South Dakota under the auspices of the Head Start Act. The SD HSCO is working toward the continuation of a collaboration agreement to support the needs of South Dakota Head Start Grantees and related entities collaborating to serve the needs of eligible families. To effectively design and deliver its continuation project design, the SD HSCO contracted to conduct comprehensive assessment data from Head Start grantees, Early Head Start grantees, and a broad array of stakeholder groups in the areas of collaboration, coordination, and alignment of services, along with a forward look at Head Start Child Development and Early Learning Outcomes Framework, and State Early Learning Guidelines. Information collected from this survey will be used to help inform the SD HSCO strategic plan and its submission for continuation of collaboration efforts.

The SD Head Start Collaboration Office engaged the services of Sumption & Wyland to collaborate on the design of a survey for the South Dakota grantees and current/potential collaboration partners. One version of the survey was aimed at Head Start and Early Head Start Program Directors who, by virtue of their positions, have a deep knowledge of the program's reach and a broad perspective of what is going on across the state. A second version of the survey, with a reduced number of questions, was produced and distributed to a broad array of educational, social services, human services, economic assistance, child care, healthcare, and related individuals working in the areas of children's and family services across the state. The combination of findings from the grantee and stakeholder cohorts is designed to provide the South Dakota Head Start Collaboration Office (SD HSCO) with a clear understanding of the statewide issues impacting the people engaged in the work of supporting young children and families statewide.

In collaboration with the SD Head Start Collaboration Office, the survey was sent by Sumption & Wyland using SurveyMonkey. The survey was performed exclusively by e-mail, with all e-mail addresses selected by and provided to Sumption & Wyland by the SD HSCO. All responses were sent directly to Sumption & Wyland, a consulting firm located in Sioux Falls, SD, to assure confidentiality for respondents. Sumption & Wyland provided all interpretation and analysis of the data provided. This was done to assure an independent third-party review of the data. Sumption & Wyland is led by Margaret J. Sumption, MSED, LPC, SHRM-SCP, SPHR. Sumption has a long history with Head Start, having acted in several capacities, including as a national Head Start grant reviewer, Head Start program advisory board member in her home community, and as volunteer Secretary of the South Dakota Head Start Association. She holds a master's degree in education and is trained as an elementary and special education teacher. Working with her is Michael L. Wyland, who has a 30-year career in nonprofit governance, data



analysis, and analytics. This is the third year that Sumption & Wyland has collaborated with the SD HSCO collect and analyze data for use by statewide planning leaders.

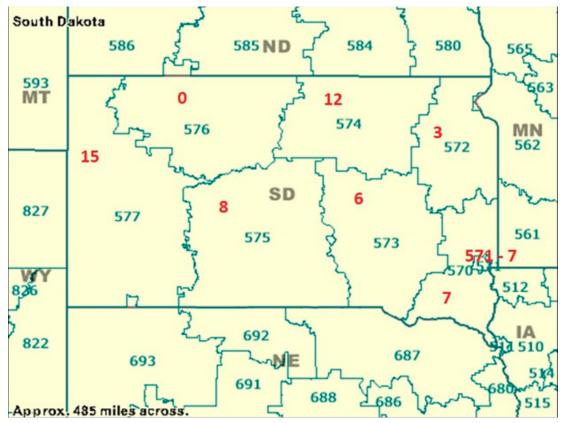
DESCRIPTION OF SURVEY PARTICIPANTS

In late January through mid-February 2020, Head Start grantee directors and program staff were invited to participate in the Head Start Collaboration Office (HSCO) needs assessment survey. Directors and program leaders were encouraged to participate directly to the data set. Fifty-eight of 106 people (minus four not contacted due to bad e-mail addresses), or 50.1 percent of those contacted as part of Head Start and/or Early Head Start programs participated in the survey. Most respondents presented a willingness to disclose their names to the data collection team of Sumption & Wyland the survey; however, five chose to remain anonymous in the survey responses.

The self-described position titles of respondents to the grantee survey is included in the appendices of this document. The position titles were varied, with many respondents identifying a similar title but few respondents identifying the exact same title.

When asked to describe their primary role within their agency, 12 percent of respondents self-identified as being a director, 28 percent as a manager, and 59 percent indicated another role with a Head Start grantee agency.

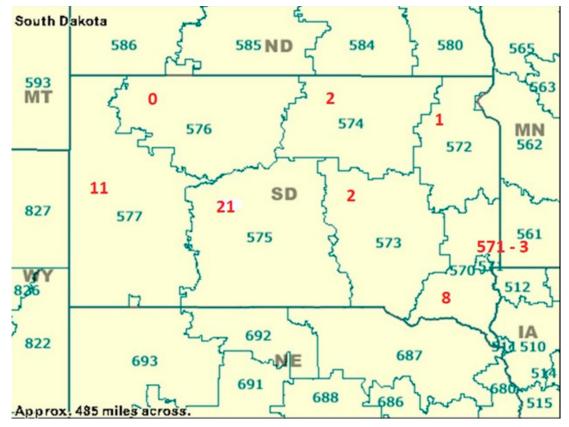
The breakdown of respondents by ZIP code region in the grantee survey is as follows:



The geographic representation of the grantee respondents was well dispersed. All but one of the geographic regions were represented in the survey and indications from the analysis of respondent zip codes, respondents to the survey were identified as serving individuals from that unrepresented region. All answers were de-identified in this summary. It appears, from information provided, that all Early Head Start/Head Start programs participated at some level in this survey.



The survey of stakeholders yielded 53 responses out of 83 requests sent (minus one not contacted due to a bad e-mail address). The representation of respondents was geographically dispersed in a similar pattern found in the Head Start grantee group. The overall response rate was 64.6% for this group. Stakeholder respondents were weighted heavily toward state and local government with a clear representative sample coming from child care, health care, social service, human service, and local education agencies. The breakdown of the respondents by ZIP Code region is as follows:





HEAD START GRANTEE SURVEY

Findings

In providing the outcomes of the survey process, the researchers are presenting data collected specifically by Head Start Grantee respondents in this section. It is important to note that a second, companion, survey was provided to a broad respondent group of "stakeholders" selected by the South Dakota Head Start Collaboration Office. As a note to the reader, the broad "Stakeholder" group findings will be reported in the next section and will reflect a very similar point of view as is seen in data specifically derived from the "Head Start Grantee" respondents.



The source materials for this document, provided to the South Dakota Head Start Collaboration Office, include the raw data for each of the survey questions from both surveys, except for questions that would reveal the name and/or specific agency and/or specific location of any respondent. This was done in accordance with the promise that the identity all survey respondents would remain anonymous and only aggregated and non-attributable responses would be reported.

Head Start Grantee respondents were asked to provide information about their current levels of collaboration with groups and other programs serving children and families. The chart below provides the raw data from all respondents when ask the specific question about collaboration:

CURRENT COLLABORATION

Q. 7. What level of collaboration does		ram have with the fellowin	a a a a a a a i a a	organizations	or programa?
Q. 7. What level of collaboration does	your prog	grann nave with the followin	g agencies,	organizations,	of programs:

	High level co	laboration	Moderate co	notarodation	Low level co	aboration	No relation	ship	Unkno	wn
State Dept of Social Services Childcare Services	14.29%	6	50.00%	21	19.05%	8	0.00%	0	16.67%	
DSS Early Childhood Enrichment Centers (ECE local service provid	16.67%	7	33.33%	14	23.81%	10	4.76%	2	21.43%	1
Child Care Licensing	21.43%	9	21.43%	9	19.05%	8	21.43%	9	16.67%	
Child Care Subsidy	14.63%	6	24.39%	10	19.51%	8	21.95%	9	19.51%	
Coordination with Child Care Programs in service area	14.29%	6	26.19%	11	35.71%	15	7.14%	3	16.67%	
Child Welfare agencies	12.20%	5	63.41%	26	12.20%	5	4.88%	2	7.32%	
TANF (Temporary Assistance for Needy Families)	16.67%	7	54.76%	23	11.90%	5	4.76%	2	11.90%	
McKinney-Vento Homeless Liaison	2.38%	1	14.29%	6	21.43%	9	23.81%	10	38.10%	1
Organizations addressing housing needs	11.90%	5	47.62%	20	26.19%	11	4.76%	2	9.52%	
Local Part B 619 Services	7.32%	3	14.63%	6	14.63%	6	4.88%	2	58.54%	2
Local Part C Birth to Three Services	30.95%	13	42.86%	18	16.67%	7	2.38%	1	7.14%	
Foster Care Services	17.07%	7	51.22%	21	24.39%	10	0.00%	0	7.32%	
MECHVBright Start Home Visiting	7.14%	3	19.05%	8	28.57%	12	26.19%	-11	19.05%	
Adoption Services	2.50%	1	10.00%	4	22.50%	9	32.50%	13	32.50%	1
Community Health Services	41.46%	17	41.46%	17	7.32%	3	0.00%	0	9.76%	
Medical Home Providers	26.83%	11	53.66%	22	7.32%	3	4.88%	2	7.32%	
Dental Home Providers	30.95%	13	50.00%	21	4.76%	2	4.76%	2	9.52%	
Mental Health Services	38.10%	16	40.48%	17	16.67%	7	0.00%	0	4.76%	
WIC and other nutrition services	30.95%	13	50.00%	21	7.14%	3	2.38%	1	9.52%	
Law Enforcement	16.67%	7	35.71%	15	30.95%	13	7.14%	3	9.52%	
Substance Abuse Disorder Providers	4.76%	2	28.57%	12	28.57%	12	14.29%	6	23.81%	1
Domestic Violence Services	7.14%	3	45.24%	19	28.57%	12	7.14%	3	11.90%	
Engloyment and Training Services	9.52%	4	35.71%	15	26.19%	11	9.52%	4	19.05%	
Adult Education	4.88%	2	26.83%	11	36.59%	15	12.20%	5	19.51%	
English Language Learner services	16.67%	7	19.05%	8	35.71%	15	7.14%	3	21.43%	
South Dakota Statewide Family Engagement Center	2.38%	1	19.05%	8	26.19%	11	14.29%	6	38.10%	1

Q. 8. Please list entities or organizations you would recommend having connection or collaboration with the South Dakota Head Start Collaboration Office (HSCO) to enhance services supporting Head Start children and their families. (i.e.; homelessness, foster care, services to children with disabilities, child welfare, medical care, mental health, behavioral challenges, substance abuse, family engagement.)



Q. 9. Thinking about Question 8 above, what successes can you cite?

Q. 10. Thinking about Question 8 above, what suggestions or concerns would you like to express?

When reviewing the responses to these questions from Head Start Grantees, several elements stood out to provide areas of opportunity for collaboration going forward.

Findings:

- 1. Respondents report collaboration happens but collaboration is not considered as "high". Collaboration with community health centers yielded the most collaboration with grantee agencies, with 34 respondents ranking it high or moderate. Following closely in that number were dental home providers also at 34, medical home providers at 33, and mental health services at 33, and child welfare agencies at 31 ranking either high or moderate. When looking deeper into the data, only community health and mental health received a high ranking for collaboration (over 15 respondents). This would indicate a significant amount of opportunity to build and deliver coordination information for delivery to grantee programs that would encourage expansion of collaboration with groups known to be important to head start families.
- 2. Over half of Grantee respondents stated "unknown" in their understanding or collaboration with Part B 619 services. This program provides supports for children 3-5 years of age who are in need of special education to allow them to receive a "free and appropriate public education" (FAPE) under the federal Individuals with Disabilities Education Act (IDEA). Other areas standing out as "unknown" by grantee respondents included South Dakota Statewide Family Engagement Center, Adoption Services, Substance Use Disorder Services, and Homeless Liaison Services. Building understanding of these programs and services to Head Start Grantee personnel would provide greater capacity for grantees to refer families quickly to meet critical child-centered or family-centered concerns.
- 3. Low levels of collaboration were noted by respondents in the areas of law enforcement, local area child care programs, substance use programs, domestic violence services, employment and training programs, and adult education. These programs are most often directed at the adults in families served by Head Start. Grantees indicated significant opportunity for Grantees to build awareness and capacity to refer parents for needed services that could substantially strengthen the resiliency of families. This effort would likely pay off for children of these families being provided with direct developmental education and school readiness services hese programs are most often directed at the adults in families served by Head Start. Grantees indicated significant opportunity for Grantees and capacity to refer parents for needed services that could substantially strengthen the resiliency of families served by Head Start. Grantees indicated significant opportunity for Grantees to build awareness and capacity to refer parents for needed services that could substantially strengthen the resiliency of families served by Head Start. Grantees indicated significant opportunity for Grantees to build awareness and capacity to refer parents for needed services that could substantially strengthen the resiliency of families. This effort would likely pay off for children of these families being provided with direct developmental education and school readiness services that could substantially strengthen the resiliency of families. This effort would likely pay off for children of these families being provided with direct developmental education and school readiness services.
- 4. Narrative comments indicate that substance use disorders, mental health services, issues impacted children in foster care, and transition services (Head Start to school) were high priority needs. In reviewing the data, 17 of the 58 respondents (29%) provided expanded written response describing the needs they believe are of high importance to build their programs and meet the needs of families. The items lifted up in this qualitative data are clearly consistent with the quantifiable data collected.

When asked what Head Start Grantees would want to have in the form of collaboration through marking on a list of options, they provided clear recommendations of what they believe would help them expand their reach and depth of services. The following chart provides the raw data from the Head Start Grantee survey respondents:

DESIRED COLLABORATION

Q. 11. What program partnerships would you like to see explored and/or enhanced by the South Dakota Head Start Collaboration Office (HSCO) in the next five years?



	High inte	rest	Moderate	einterest	Low in	terest	No int	erest
Child Welfare (Protective & Preventive Services)	53.85%	21	41.03%	16	2.58%	1	0.00%	0
Community and Family Services/Resources	42.50%	17	47.50%	19	2.50%	1	2.50%	1
Parent/Family Engagement	50.00%	20	42.50%	17	7.50%	3	0.00%	0
Children with disabilities	35.90%	14	51.28%	20	10.26%	4	0.00%	0
Children with families experiencing homelessness	46.15%	18	35.90%	14	10.26%	4	0.00%	0
Children with families impacted by substance abuse disorders	78.05%	32	21.95%	9	0.00%	0	0.00%	0
Children with behavioral challenges or mental health concerns	77.50%	31	22.50%	9	0.00%	0	0.00%	0
Families experiencing mental health challenges	67.50%	27	32.50%	13	0.00%	0	0.00%	0
Health related (please list specifics in comment box below)	37.84%	14	24.32%	9	27.03%	10	2.70%	1
Early language and literacy	35.90%	14	41.03%	16	17.95%	7	0.00%	0
Economic mobility assistance	32.50%	13	42.50%	17	15.00%	6	2.50%	1
Workforce development	32.50%	13	32.50%	13	22.50%	9	5.00%	2
Children in foster care	47.50%	19	35.00%	14	15.00%	6	0.00%	0

Findings:

- 1. Families facing issues with substance use disorders was identified as having the highest interest for Grantees. The respondents were clear that this is an emerging issue of families that is clearly impacting the families they serve. They would want to see higher collaboration opportunities to build capacity in this area.
- 2. Mental health challenges for families, behavioral health challenges for children with disabilities (noted as a moderate interest area), and specific needs of children in foster care were also lifted up as areas of high interest by Grantee respondents. These priority need areas provide an opportunity for development of statewide education resources, information and referral services, and related supports to assist Grantee organization to meet the holistic needs of enrolled families.
- 3. Qualitative data collected as part of this question identified specific collaboration needs in the areas of testing for lead in children, expanding the knowledge of health care providers in understanding the Head Start health requirements, addressing the changing perception of school readiness by school districts, identification and understanding of domestic violence in families, and training in recognizing drug use in homes. These qualitative listed data points provide a snapshot of the many needs Grantee programs face when working with families and a believe that expanded training, resource and referral sources, and other opportunities to expand skills would be valued by grantees.

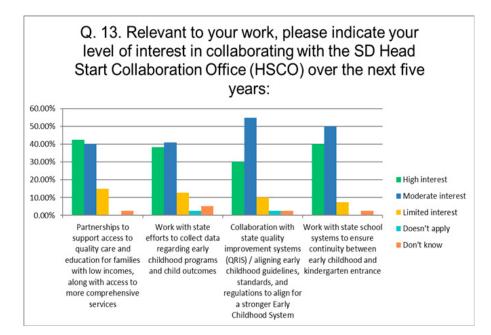
<u>Q. 12.</u> Based on your insights on the HSCO priority "data," what data would be useful to you? Grantee respondents did not respond extensively to the question posed on describing useful data, with only nine total responses (15.5%) provided in the raw data. The limited responses were sufficiently diverse to defy easy aggregation, with the possible exception of access to more disaggregated data (e.g., by county, school, etc.) to allow grantees to gain additional insight into their own programs' demographics and longitudinal success.

COMMITMENT TO COLLABORATE

Grantee respondents were clear that they want to collaborate with the SD HSCO over the next five years and that they see the office having high value to provide information, coordination, educational opportunities for staff, and promotion of their programs statewide. The following question yielded data findings of interest in the following areas:

Q. 13. Relevant to your work, please indicate your level of interest in collaborating with the SD Head Start Collaboration Office (HSCO) over the next five years:





Findings:

- 1. All areas of assistance were identified as highly desirable by Grantee respondents in meeting current and emerging concerns in programs. Collaboration in housing access and meeting the needs of children experiencing homelessness ranked highest, followed closely by coordination with child welfare, and family services. All areas of collaboration would be encouraged based on survey findings.
- 2. Qualitative data collected regarding this question indicates a need for specific collaboration in the area of school readiness, transition to school, and connection to kindergarten teachers to fully understand how to best prepare children to enter school ready to learn. This data point provides a clear indication that Grantee respondents see this issue also as important to building overall quality outcomes for enrolled children.

SPECIFIC PROFESSIONAL DEVELOPMENT NEEDS NOTED BY GRANTEES

Head Start Grantee respondents were asked to provide a qualitative written reply to the question below. Approximately 70% of respondents chose to provide a narrative account:

Q. 14. Please describe what would be the most helpful in enhancing professional development within your agency in the next five years.

Findings:

- 1. Addressing issues of mental health for families is the most-often cited professional development need. Head Start Grantee respondents overwhelmingly identified this concern. Closely linked to this issue is the need for better understanding of how to discern and address suspected substance use disorders.
- 2. Understanding how to best support children with challenging behaviors. Grantee respondents were clear that this is a critical and growing issue for their programs.
- 3. Combined professional development that couples Head Start Grantees with public school teachers, preschool teachers, and child care providers. Grantee respondents believe that training that brings these groups together would strengthen the ability of all to make sure that children come to school with social, academic, and executive function skills to be successful as they move into public settings.
- 4. A structured time for information sharing and collaboration with each other. Grantee respondents believe that increased opportunity for networking, information sharing, and brainstorming together would greatly enhance capacity to deliver services more effectively in their own programs.



Q. 15. Meeting Standards Alignment/QRIS Priorities of SD HSCO

Grantee respondents did not respond extensively to the question posed on meeting Standards Alignment/QRIS, with only eight total responses (13.7%) provided in the raw data. The limited responses indicated the following findings:

Findings:

- 1. Engage Head Start Grantees at all levels when working on this priority. Grantee respondents believe this alignment work is important. They would wish to be actively a part with ongoing engagement and transparency of planning and implementation of any defined actions.
- 2. Share findings. Grantee respondents who replied to this qualitative question are clear that they would want the outcomes to be shared and data found to be communicated to them to allow them to work more effectively with enrolled children.
- 3. As this effort progresses, promote high standards and assure that policy makers and the public have clear understanding of the importance of early educational services. Grantee respondents feel strongly that their standards are strong and should be a critical benchmark for setting the bar for standards development in South Dakota.

Q. 16. Describing Challenges in School Transitions

Grantee respondents did not respond extensively to the question posed on describing challenges in school transitions, with only 11 total responses (18.9%) provided in the raw data. The limited responses indicated the following findings:

Findings:

- 1. Grantees responding to this question believe that lack of communication between Head Start and kindergarten programs is a key challenge.
- 2. There is a perception of a lack of understanding by schools about the similarities and differences between Head Start and kindergarten curricula, leading to a misperception of in what ways Head Start students arrive in kindergarten ready to learn.
- 3. Respondents also noted the need for better communication between Head Start and schools with particular emphasis on developmental expectations and behavioral norms.

ADDRESSING SPECIFIC PRIORITY ISSUES IN SOUTH DAKOTA

Head Start Grantee respondents were asked three specific questions related to areas of keen interest already identified by the SD HSCO. These areas continue to be evolving and it is perceived that work already begun must continue for the state. The quantitative questions and qualitative data findings will be treated as a whole for analysis.

Q. 17. What are the highest areas of priority you would like to see the South Dakota Head Start Collaboration Office (HSCO) concentrate on in the area of Child Welfare (Protective and Preventive Services) across the state over the next five years?

	Highpriorit	y attention	Moderate price	rity attention	Low priorit	y attention	Not ap	priority	Don't	know
Head Start grantees receive assistance to improve local coordinatic	35.90%	14	46.15%	18	12.82%	5	0.00%	0	5.13%	2
Facilitate linkages between other family service programs and home	25.64%	10	56.41%	22	12.82%	5	2.56%	1	2.56%	1
Enhance partnerships that support coordination among Head Start	30.77%	12	33.33%	13	20.51%	8	5.13%	2	10.26%	4
Increase coordination among Head Start agencies and available ser	38.46%	15	41.03%	16	12.82%	5	0.00%	0	7.69%	3

Q. 18. What are the highest areas of priority you would like to see the South Dakota Head Start Collaboration Office (HSCO) concentrate on in the area of homelessness over the next five years?

	Highpriority	attention	Moderate price	rity attention	Low priorit	y attention	Not ap	riority	Don't kno	w
Improve coordination between Head Start agencies and state and ic	10.81%	4	48.65%	18	10.81%	4	2,70%	1	27.03%	10
Promote partnerships that support Head Start agencies in addressir	33.33%	13	51.28%	20	5.13%	2	0.00%	0	10.26%	4
Enable partnerships between Head Start agencies, Housing and Ur	13.16%	5	60.53%	23	10.53%	4	0.00%	0	15.79%	6
Assist Head Start state-based T/TA providers to coordinate the nee	2564%	10	48.72%	19	15.38%	6	0.00%	0	10.26%	4



Q. 19. What are the key barriers for families to successfully enroll in Head Start/Early Head Start services?

	High fa	actor	Moderat	e factor	Limited	factor	Not a factor		
Staffing changes that hinder full enrolment	13.51%	5	16.22%	6	32.43%	12	32.43%	12	
Limited pool of eligible families and children in service area	39.47%	15	42.11%	16	15.79%	6	2.63%	1	
Too few eligible families apply	31.58%	12	34.21%	13	23.68%	9	7.89%	3	
Lack ability to serve families who are ineligible (primarily 130-200%	58.97%	23	23.08%	9	10.26%	4	5.13%	2	

Findings:

- 1. Housing and homelessness issues, strengthening collaboration between Head Start Grantee programs, facilitating linkages between Head Start programs and other programs serving children and families, and improving Head Start Grantee coordination with child welfare all rank very high. Grantee respondents believe that all areas of child welfare and protective services coordination is a high need that will only increase over the next five years.
- 2. Staffing challenges are clearly identified as the highest barrier to full enrollment, followed by the limited pool of families who can meet eligibility standards. This could present an area of opportunity through expanded awareness regarding the availability of services and promotion that families seek out and enroll. The Grantee respondents also report that increased coordination with service providers serving the same families in other areas, with education information, could act as a promoter for service utilization and access.



HEAD START STAKEHOLDER SURVEY

Findings

In providing the outcomes of the survey process, the researchers are presenting data collected specifically by "Stakeholder" respondents in this section. It is important to note that a second, companion, survey was provided to a broad respondent group of "Head Start Grantees". As a note to the reader, the broad "Head Start Grantee" group findings was reported in the previous section and reflects a very similar findings as is seen in data specifically derived from the "Stakeholder" respondents below.

The source materials for this document, provided to the South Dakota Head Start Collaboration Office, include the

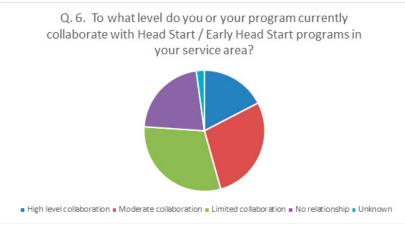


raw data for each of the survey questions from both surveys, except for questions that would reveal the name and/or specific agency and/or specific location of any respondent. This was done in accordance with the promise that the identity all survey respondents would remain anonymous and only aggregated and non-attributable responses would be reported.

The stakeholder respondent group indicated moderate to limited collaboration with local Head Start grantees and the SDHSCO. The following two questions were provided to stakeholders and the data regarding collaboration levels is noted.

CURRENT COLLABORATION

The following two charts describe the self-reported degrees of collaboration between stakeholder respondents' organizations and Head Start.







Questions 8 and 9 of the stakeholder survey solicited written answers describing current stakeholder collaboration with grantee programs (question 8) and the SD Head Start Collaboration Office (question 9).

Findings:

- 1. Stakeholder respondents know about Head Start programs and have some engagement with them. The most common identifier was "limited engagement" at both the Grantee level and the SD HSCO level.
- 2. Stakeholder respondents most-often cited collaboration is the delivery of staff development training and inviting Head Start grantees to attend in their area or statewide. The training topics offered were widely diverse, from education programs that invite staff, specific offerings for parents (e.g. effective parenting classes), safety, trauma, etc.
- **3.** Making referrals to Head Start is a common engagement activity by stakeholders. Stakeholder respondents cite that many of the people they serve are highly likely to be eligible for Head Start services and they want to offer this resource to families.
- 4. Stakeholder respondents overwhelmingly report that they want to be more engaged with Head Start Grantee program and the SD HSCO. Respondents believe that Head Start is important to families they serve and want to be more actively engaged. They want to know how to be more involved.
- 5. Stakeholder respondents specifically would like to have access to information and activities of Head Start, both at the local grantee level and the state office level so that they may widely disperse this information to people they serve and with whom they coordinate in other ways. There is a strong positive sentiment among stakeholder respondents that they would be active players in promoting activities, opportunities, access, and supports for Head Start programs.
- 6. The qualitative data found in the raw data appendices to this document offers a wide array of ways stakeholder respondents would want to collaborate. Dental care initiatives, school transition, wellness services, services for families of children with disabilities (parent resources and support), promotion through public television, nutrition, family literacy, and provider self-care provide a limited example of desired collaboration and coordination desired.

LEVERAGING EFFORTS THAT SUPPORT YOUNG CHILDREN AND THEIR FAMILIES

Stakeholder respondents were asked to provide specific interest in varied areas of collaboration and coordination. Findings are based on analysis of the combined high interest/moderate interest responses in contrast to the limited interest responses. The following quantitative question was posed:



Q. 10. Relevant to your work, please indicate your level of interest in coordinating/collaborating to leverage efforts supporting young children and their families.

	High Inten	ost	Moderate	interest	Limited	interest	Doesn't	apply	Don't k	NON
Child Welfare (Protection & Preventative Services)	34.09%	15	25.00%	11	11.36%	5	22.73%	10	6.82%	
Community and Family Services/Resources	47.73%	21	40.91%	18	4.55%	2	6.82%	3	0.00%	
Parent/Family Engagement	50.00%	22	40.91%	18	2.27%	1	6.82%	3	0.00%	
Children with disabilities	32.56%	14	41.86%	18	11.63%	5	9.30%	4	4.65%	
Children and families experiencing homelessness	31.82%	14	34.09%	15	20.45%	9	9.09%	4	4.55%	
Children with families impacted by substance abuse disorders	31.82%	14	40.91%	18	11.36%	5	9.09%	4	6.82%	
Children with behavioral challenges or mental health concerns	38.64%	17	36.36%	16	6.82%	3	11.36%	5	6.82%	
Families experiencing mental health challenges	29.55%	13	45.45%	20	4.55%	2	13.64%	6	6.82%	
Health related (please list specifics in comment box below)	19.05%	8	35.71%	15	26.19%	11	11.90%	5	7.14%	
Early language and literacy	47.73%	21	34.09%	15	11.36%	5	6.82%	3	0.00%	
Economic mobility assistance	15.91%	7	40.91%	18	18.18%	8	22.73%	10	2.27%	
Workforce development	29.55%	13	38.64%	17	18.18%	8	11.36%	5	2.27%	

Findings:

- 1. Parent and family engagement, coordinating community and family resources, and early language and literacy ranked as high areas of interest for Stakeholder respondents desire to collaborate. Stakeholders were strong in their support for coordinating with Head Start to build resiliency in families through a wide variety of efforts.
- 2. Coordinating and addressing the needs of children with disabilities, families in need of mental health services, and families with members experiencing substance use disorders ranked high as areas for collaboration. The theme of helping families with unique family, parental, or family systems challenges ranked high in analysis of the data.

SPECIFIC COLLABORATION AT THE SD HSCO LEVEL

Stakeholders were asked to provide their highest priorities in collaborating with the SD HSCO specifically. The following question and data set were derived:

Q. 11. Relevant to your work, please indicate the level of interest in collaborating with the SD Head Start Collaboration Office (HSCO) regarding the following areas over the next five years.

	High in	terest	Moderate	e interest	Limited	interest	Doesn	t apply	Don't	know
Partnerships to support access to quality care and education for fan	50.00%	22	31.82%	14	11.36%	5	6.82%	3	0.00%	0
Work with state efforts to collect data regarding early childhood proc	38.64%	17	38.64%	17	13.64%	6	6.82%	3	2.27%	1
Support the expansion and access of high quality, workforce and ca	38.64%	17	27.27%	12	22.73%	10	9.09%	4	2.27%	1
Collaboration with aligning early childhood guidelines, standards, an	34.09%	15	50.00%	22	9.09%	4	6.82%	3	0.00%	0
Work with state school systems to ensure continuity between early (45.45%	20	25.00%		22.73%	10	6.82%	3	0.00%	0

Findings:

- 1. Advancing the access to quality early childhood education in South Dakota for families with low incomes was the top interest by stakeholders in supporting collaboration efforts. Stakeholder respondents were very clear that South Dakota is best served by getting young children access to high quality early learning experiences. They were not clear how this could be achieved in qualitative replies, yet offered high praise for this effort in the state.
- 2. Working with the South Dakota Department of Education and school systems to ensure continuity between early childhood education and kindergarten entrance is high in the eyes of stakeholders. There is a strong belief among respondents that coordinated efforts are needed to assure children enter school ready to learn and the best way to do that is to get them the early childhood experiences that help them be successful. It was also noted that helping parents and families as systems is critical to achievement in education.
- **3. Data is important.** Stakeholder respondents believe the state needs high quality data about how investments in family resources and early childhood educational readiness impact the long-term health and success of children. They would want to see more high quality data gathering, analysis, and sharing broadly in the state.
- 4. Building a quality workforce is important. Stakeholder respondents were clear in their responses that, in order to have high quality educational and family development programs, we must have a quality workforce. They presented strong commitment to supporting this effort.



COMMUNICATING ACROSS PROGRAMS TO LEVERAGE IMPACT

Stakeholders were asked to provide specific information on how the SD HSCO could best engage ongoing communication through the following question:

Q. 12. Please express your thoughts about the best ways the SD HSCO could engage in ongoing communication with other programs to leverage shared impact affecting the needs of young children (birth through age 5) and their families who are low income over the next five years.

Answer Choices	Responses					
Newsletters	7.69%	3				
Engagement on councils, boards, initiatives	35.90%	14				
Shared collective data on issues of current Head Start/Early Hearly Head Start/Early Head Start/Early Head Start/Early Head S	33.33%	13				
Other communication/data sharing	23.08%	9				

Findings:

1. Sharing people, collecting data collaboratively, and sharing data are critical to success, according to stakeholder respondents. There was little qualitative data to support how this could be achieved; yet, respondents spoke with a strong voice to say that these elements would act as a multiplier effect to gain strong outcomes.

THE ROLE OF "SOUTH DAKOTA STEP AHEAD" AS A RESOURCE

Approximately 60% of the stakeholder respondents provided insight on their familiarity with the South Dakota Step Ahead website and its use as a resource. The majority of individuals who responded indicated they had no or limited awareness of the resource. Those who replied that they knew about and used the resource indicated that it is a high-quality resource they appreciate. The clear indication from the responses is that high level promotion of the site is needed in order to assess its content usefulness to a broad stakeholder audience.



CONCLUSION

The survey results indicate that, while there is some collaboration and sharing of resources and information, much more could be done to bring Head Start Grantees and stakeholders together to address the current and emerging needs of South Dakota children and families served by Head Start and Early Head Start.

South Dakota is unique in its very rural geography and low population density (10.7 people per square mile in 2020) throughout the state. This reality has created a very strong commitment to cross-collaboration among entities that serve young children and families. Head Start is well regarded as a critical infrastructure support for children and families across South Dakota by the broad array of individuals and group whose missions focus is similar.



There is a sincere commitment to collaborate bolstered by a clear understanding that more resources can be made available if entities work together.

A promising trend revealed in the survey data is that stakeholders often go to significant lengths to invite Head Start staff and leaders to participate in professional development and training activities hosted by the stakeholders' agencies. It would seem to be beneficial to have the SD HSCO both: 1) encourage Head Start professionals to take enhanced advantage of stakeholder opportunities; and 2) facilitate reciprocal opportunities for stakeholders to participate in similar Head Start activities.

