

CITY OF LONG BEACH

R-21

DEPARTMENT OF HEALTH AND HUMAN SERVICES

2525 GRAND AVENUE • LONG BEACH, CALIFORNIA 90815 • (562) 570-4000 • FAX: (562) 570-4049

October 2, 2018

HONORABLE MAYOR AND CITY COUNCIL City of Long Beach California

RECOMMENDATION:

Receive and file the Citywide Strategic Plan on Early Childhood Education from the Health and Human Services Department. (Citywide)

DISCUSSION

In 2016, the City of Long Beach established the Early Childhood Education Program (ECEP), which was housed within the Health and Human Services Department (Health Department). The ECEP works to organize and support existing Citywide efforts to address and improve the City's capacity for early child care and education, and is staffed by a part-time coordinator, which is structurally funded through the General Fund. Additionally, the Health Department has leveraged staff who are covered by other funding sources to provide expertise across other social and health determinants of success in early childhood.

During the first few years of life, 700 new neural connections form every second, laying the foundation for future learning, behavior, and development. Experiences in the early years are critical in predicting life-long success, where children who have secure attachments, language-rich exposure, and safe, healthy homes are more likely to have lifelong success. Investments in early childhood education (ECE) help reduce the achievement gap, reduce the need for special education, increase the likelihood of healthier lifestyles, lower the crime rate, and reduce overall costs to society. In fact, every dollar invested in high-quality early childhood education produces a 7-10 percent return on the investment.

In 2017, the Health Department set out to develop a new five-year Citywide Strategic Plan for Early Childhood Education, to include young children living in all parts of Long Beach. The Health Department engaged the Long Beach Unified School District (LBUSD), the Long Beach Early Childhood Education Committee (LBECE Committee), City Council members, parents, ECE professionals, community partners, and young children through 22 focus groups and 19 key informant interviews to develop the goals, objectives, and actionable activities in this plan. The Long Beach Early Childhood Education Strategic Plan (Plan) highlights the work that is occurring now in Long Beach, identifies the needs that exist, and pursues focused interventions to close the gaps. This Plan utilizes an interdisciplinary, cross sector approach to ensure that young children in Long Beach are healthy, safe, and have equitable access to early educational opportunities. The Plan identifies seven goal areas and aligns 87 strategies that focus on the current strengths of the community, consider the whole child, and ensure that all children and their families receive the respect and opportunities they need to succeed. The seven goal areas are:

- 1. Support and Build Strong Resilient Families;
- 2. Increase Access and Affordability of Infant Through Pre-K Early Care and Education Services;
- 3. Support the Development of a Stronger Early Childhood Workforce;
- 4. Improve Quality Programs and Services for Birth to Age 8;
- 5. Ensure Children in Long Beach Live, Learn, and Play in Safe, Healthy and Accessible Environments;
- 6. Promote Partnerships to Address Access to Quality Basic Needs and Services; and,
- 7. Strengthen Alignment of Existing Governance Structure and Early Childhood Support Systems.

The Plan provides a cohesive strategy for the City's early childhood efforts, which include collaboration across departments, LBUSD, the LBECE Committee, and other ECE programs that work with young children and families throughout Long Beach. The Plan serves as a visionary document and does not yet include any direct funding. The Plan will be used to guide the work of the ECEP, establish an ECE Plan Oversight Committee to ensure community and parents work together to achieve the Plan's objectives, and to seek funding to implement the strategies. The creation of this Plan was partially funded through a Pacific Gateway Workforce Innovation Network (PGWIN) grant, received from U.S. Department of Labor.

This matter was reviewed by Deputy City Attorney Linda T. Vu on September 7, 2018 and by Revenue Management Officer Geraldine Alejo on September 10, 2018.

TIMING CONSIDERATIONS

The Plan is intended to be an ongoing effort over the next five years with the understanding that the Plan will be regularly evaluated and communicated over that timeframe.

FISCAL IMPACT

The total cost to develop the Plan was \$108,345, of which \$57,000 was funded by the PGWIN grant for the consultant hired to develop the Plan, and by \$51,345 in-kind services (focus groups, translation and various expertise services, and printing costs) from the Health Department. There is no fiscal or local job impact associated with this recommendation. The Plan is a visionary document with no direct funding to implement the recommended strategies. The work done throughout the Plan process will become the basis for future grant funding requests as the City seeks grants for these and other citywide priorities.

HONORABLE MAYOR AND CITY COUNCIL October 2, 2018 Page 3

SUGGESTED ACTION:

Approve recommendation.

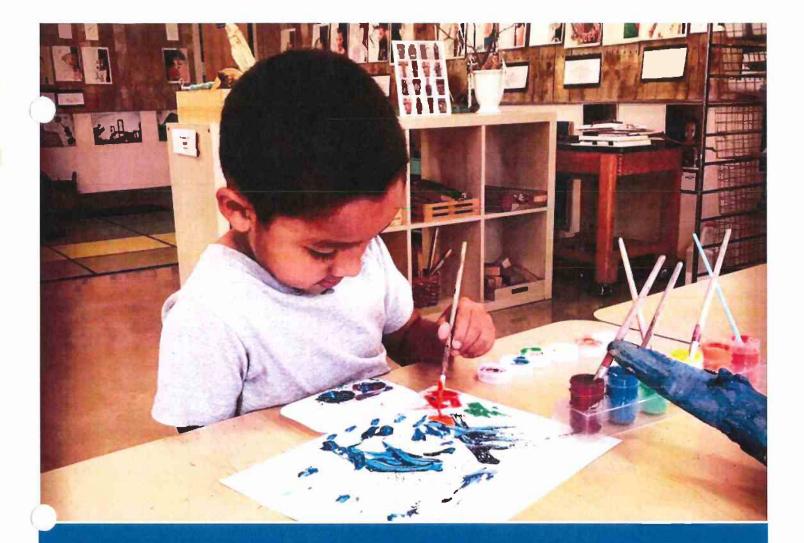
Respectfully submitted,

KELLY COLOPY DIRECTOR HEALTH AND HUMAN SERVICES

APPROVED:

PATRICK H. WEST CITY MANAGER

Attachment: Strategic Plan on Early Childhood Education



City of Long Beach, California Early Childhood Education Strategic Plan

July 2018





TABLE OF CONTENTS

| Statements of Support |
|------------------------|
| Acknowledgements |
| Introduction7 |
| Guiding Principles |
| Strategic Goals |
| Goal 1: Families16 |
| Goal 2: Access |
| Goal 3: Workforce27 |
| Goal 4: Quality31 |
| Goal 5: Environment |
| Goal 6: Partnerships40 |
| Goal 7: Systems44 |
| Appendices |
| Appendixi |
| Appendix Bxi |
| Appendix Cxix |
| Appendix Dxxxvii |
| Appendix Exxxi |
| Appendix Fxxxiv |

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MAYOR ROBERT GARCIA CITY OF LONG BEACH

A Letter from The Mayor

As an educator, I believe there is no better investment in a child's future than an investment in early childhood. New brain research demonstrates that experiences during the first five years of life have the greatest impact on an individual's development than any other period in their lifetime. Research shows that children who have safe and reliable housing, consistent and comprehensive medical care, healthy nourishment, safe neighborhoods and places to play, loving and educated parents, and participate in high-quality early childhood education are more likely to graduate high school, less likely to be incarcerated, and more likely to be employed. When considering where we allocate resources, investing in children is an obvious choice.

As a City, it is critical that we support our youngest residents and their families in order to make a meaningful and transformative impact on children and our entire community. This Long Beach Early Childhood Education Plan outlines the City's long-term vision for prioritizing early learning opportunities and committing to a citywide collaborative systems approach to address the identified needs of young children in Long Beach. This Plan draws on the knowledge and passion of a diverse collaboration of partners who work with all families in Long Beach, regardless of their race, faith, neighborhood, income, learning abilities, preferred language, and family makeup. We will continue to support these partners—including teachers, caregivers, health and mental health professionals, business leaders, and philanthropic organizations—so that both City and community agencies can meet the ever-changing needs of our families and ensure that children, parents, and caregivers have the tools and resources they need to best support the healthy and safe development of their children.

It takes a collective effort to achieve transformative change for children, their families, and the community. We have witnessed the success of the collective efforts of the Long Beach College Promise. More students are graduating from high school and continuing their education at both Long Beach City College and Long Beach State University. This Plan will expand our educational and social commitments to our youngest residents, their families, and the professionals who support them, so that all children will enter school ready to learn and be positioned for life-long success.

Sincerely,

Mayor Robert Garcia City of Long Beach

562.570.6801 | mayor@longbeach.gov | @LongBeachMayor 333 West Ocean Blvd., Long Beach, California 90802



CITY OF LONG BEACH

DEPARTMENT OF HEALTH AND HUMAN SERVICES

2525 GRAND AVENUE . LONG BEACH, CALIFORNIA 90815 . (562) 570-4000 . FAX: (562) 570-4049

Dear Residents and Community Partners:

I am pleased to present the Long Beach Early Childhood Education Strategic Plan (Plan). This city-wide Plan is focused on bringing both awareness to the importance of the early years in life and on improving access to early childhood education opportunities for all children in Long Beach. More importantly, it is a blueprint for collective action, one that compels each of us, individually and as organizations, to dedicate our best thinking, energy and commitment to making significant improvements for our children. At the core, this Plan uplifts the voices of the parents, children, and professionals who support families and speaks to the types of programming and supports that our community has asked for.

Research has shown that children and their families thrive when they receive support during pregnancy and through the first five years of their child's life. We know that an investment in early education opportunities is an important upstream prevention strategy. Early childhood education has been shown to put children on a path of success that follows them into adulthood. Children who are provided early education opportunities are more likely to read at grade level in third grade, graduate from high school, avoid involvement in the criminal justice system, and have a higher earning potential.

The Department of Health and Human Services (DHHS) is dedicated in providing a range of equity focused prevention and intervention programming to children and families throughout our city. This work is not accomplished alone. Many agencies in Long Beach are also dedicated to the work of uplifting children and their families to promote future lifelong success. It is imperative to move Long Beach in a direction of best practices and collective engagement to best support the children and families in our city. This plan identifies the essential core strategies to do this. I urge our partners and community to join the DHHS and the Long Beach Early Childhood Education Committee in prioritizing and supporting investment in the early years of life for the children in Long Beach.

Sincerely,

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Kelly Colopy Director of Health and Human Services

LONG BEACH UNIFIED SCHOOL DISTRICT

SERVING LONG BEACH, LAKEWOOD, SIGNAL HILL AND AVALON

> OFFICE OF THE SUPERINTENDENT 1515 HUGHES WAY LONG BEACH, CALIFORNIA 90810-1839 (562) 997-8242 • FAX (562) 997-8280

June 2018

Dear Friends,

The Long Beach Unified School District strongly supports the goals of the Long Beach City-Wide Early Childhood Education Strategic Plan. In fact, our school system has made great progress toward these goals in recent years, with the help and collaboration of many partnering agencies. In this publication, you will learn about some of the important work that has taken place so far. You'll also see areas where we plan to intensify our focus so that we can continue to provide the very best opportunities to our youngest and sometimes most vulnerable populations.

In our school system, we consider early childhood education to be among the highest priority work that we do. We know from experience that the sooner we can bring children into a high quality learning environment, the more likely they are to succeed in their later years of schooling and in life.

I commend the City of Long Beach for making early childhood education a city-wide priority. I also deeply appreciate the time and effort of the diverse group of constituents whose viewpoints informed this comprehensive plan, including and especially parents and preschool-aged children themselves.

As a lifelong resident of this city, and as a product of our local school and university systems, I can attest that we in Long Beach are rightfully proud of all that our city, schools, communitybased organizations and business partners have accomplished on behalf of our youngest children. We also know that continued progress is essential in an increasingly complex and competitive global economy, and that we must uphold the moral imperative of providing a top-notch education to all children regardless of the challenges that they and their families face.

This plan is a big step toward making full equity and access to early childhood programs a reality. I look forward to seeing significant and lasting results as the plan moves forward.

Sincerely,

Mintopla Steinhauser

Christopher J. Steinhauser Superintendent of Schools



Offen Will Be Healthy, Este and Education Serving Children 0 - 5

June 2018

Dear Partners, Families, and Community,

On behalf of the Long Beach Early Childhood Education Committee, we are pleased to submit this letter of support for the Long Beach Early Childhood Education Strategic Plan (Plan).

The Long Beach Early Childhood Education Committee (LBECE) is a broad based coalition representing over 30 agencies comprised of: educators, advocates, parents, special education, health and mental health professionals who all provide services for young children zero to five. LBECE is proud to be a partner in this Plan and find it reflective of the needs of young children and families in our community and our broader vision that all children grow up healthy, safe, and educated.

The challenges and inequities our youngest constituents face are plentiful; this plan highlights our communities commitment to mitigating these inequities by creating a strong cross sector, system of support for children and families. We commend our partners: the City of Long Beach, the Department of Health and Human Services, Long Beach Unified School District, and the many community members, parents, and elected officials who participated in the development of the Plan. We applaud the outreach conducted throughout the Plan's development as we found it extensive and inclusive. We commend both the process utilized and the product created. The plan makes a bold but necessary statement recognizing the vital role early childhood experiences have on the future of our community. The Plan builds upon a number of previous investments throughout our city and is comprehensive, well thought out, and inclusive of goals and strategies that promote a promising future for ALL of our community's youngest constituents and their families.

LBECE believes this Plan will serve as a foundation and creates a road map to: guide future early childhood investments, rally our community around young children and families, and drive an efficient use of resources. We are excited to assist in seeing the Plan to fruition and look forward to ensuring all children in our community are healthy, safe, and educated.

With much appreciation and excitement,

What wy fasters

Whitney Leathers Co-Chair, LBECE Executive Director, Long Beach Day Nursery

Julie Turvey Co-Chair, LBECE Community Services Administrator, ChildNet Youth and Family Services

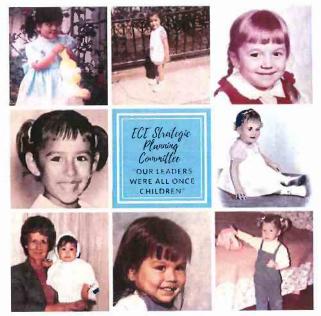
ACKNOWLEDGEMENTS

A strong collaboration of inter-disciplinary professionals across multiple organizations, parents and young children in Long Beach have made the development of this actionable city-wide Early Childhood Education Strategic Plan possible. The City of Long Beach Department of Health & Human Services (DHHS) would like to thank the hundreds of parents, young children, community members, and stakeholders from community organizations, educators, and elected officials, who contributed their ideas to this plan. This work would not have been possible without the dedication of DHHS staff: Alejandra Albarran Moses, Christina Boatwright, Tiffany Cantrell-Warren, and Nancy Riano.

The Strategic Plan Steering Committee's subject matter expertise, review, and reflection, ensured the buy-in of many stakeholders to the actions proposed in this plan. We would like to thank the Strategic Plan Steering Committee members: Cynthia Young and Miriam Garcia from Long Beach Unified School District, and Co-Chairs of the Long Beach Early Childhood Education Committee Whitney Leathers (Long Beach Day Nursery) and Julie Turvey (ChildNet), and DHHS staff.

We would also like to thank Karissa Selvester (Mayors Fund for Education), Sarah Soriano (Young Horizons), and Marley Williams (DHHS) for their further review. This plan included significant qualitative data collection, which was made possible by a team of DHHS employees trained in authentic community engagement and facilitation, who conducted focus groups and engaged residents in meaningful conversations: Katie Balderas, Marley Williams, Stacey Christensen, Teresa Gomez, Viki Gutierrez, Ana Lopez, Morgan Venter, and the DHHS early childhood team.

Qualitative data was documented utilizing D5 Research Systems.



This workforce product was funded by a grant awarded by the U.S. Department of Labor's Employment and Training Administration. The product was created by the recipient and does not necessarily reflect the official position of the U.S. Department of Labor. The Department of Labor makes no guarantees, warranties, or assurances of any kind, express or implied, with respect to such information, including any information on linked sites and including, but not limited to, accuracy of the information or its completeness, timeliness, usefulness, adequacy, continued availability, or ownership. This product is copyrighted by the institution that created it.

INTRODUCTION

Why it Matters

The science is clear: high quality early childhood experiences matter for all children. During the first few years of life, 700 new neural connections are formed every second - laying the foundation for all future learning, behavior and development.¹ Experiences in the early years are critical in predicting life-long success, where children who have secure attachments, language-rich exposure, and safe, healthy homes are more likely to have long term success.

Investments in early childhood education (ECE) help reduce the achievement gap, reduce the need for special education, increase the likelihood of healthier lifestyles, lower the crime rate, and reduce overall costs to society.² In fact, every dollar invested

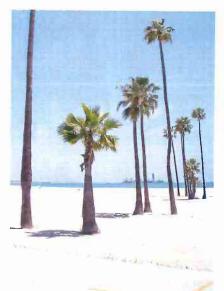
The first 5 years have so much to do with how the next 80 turn out.

- Bill Gates, Co-chair of the Bill and Melinda Gates Foundation

in high-quality early childhood education produces a 7-10 percent return on the investment.³

Where it Matters

The City of Long Beach, California is in Los Angeles County. Population data from the most recent U.S. Census shows that 462,257 people live in Long Beach, making it the seventh most populous city in California and the thirty-sixth most populous city in the United States.⁴



Within this footprint of the city, the US Census bureau estimates there are 32,474 children under the age of five,⁵ making up 7% of the city's total population. In addition, data from the County of Los Angeles estimated there were 19,306 infants and toddlers and 20,258 preschoolers living in Long Beach.⁶

Long Beach is known for its diverse population, ranking 10th across the nation in overall diversity, including economic and racial diversity.⁷ Over 40% of the Long Beach population identifies as Latino/Hispanic, 29% identify as White, 13% identify as African American and over 12% identify as Asian. Approximately 26% of Long Beach residents are immigrants.8 The Long Beach Asian population is especially diverse and includes the largest Cambodian population living outside of Cambodia.9

Diversity in Long Beach expands to household composition, 13.9% of households are headed by a single parent,10 and over 66% of

Center on the Developing Child (2009). Five Numbers to Remember About Early Childhood Development (Brief). Retrieved from www.developingchild.harvard.edu

² Heckman, J. J., Moon, S. H., Pinto, R., Savelyev, P. A. & Yavitz, A. (2010). The rate of return to the HighScope Perry Preschool program. Journal of Public Economics, Elsevier, 94 (1-2), 114-128. doi: 10.1016/j.jpubeco.2019.11.001

³ Heckman, J. J., Moon, S. H., Pinto, R., Savelyev, P. A. & Yavitz, A. (2010). The rate of return to the HighScope Perry Preschool program. Journal of Public Economics, Elsevier, 94 (1-2), 114-128. doi: 10.1016/j.jpubeco.2019.11.001 US Census Quick Facts (2018, June 27). Retrieved from https://www.census.gov/quickfacts/fact/table/longbeachcitycalifornia/PST045216

 ⁴ US Census Quick Facts (2018, June 27). Kerrieved from https://www.census.gov/quickracts/ractivable/iongpeachcitycaiiionnia/PS1040210
 ⁵ United States Census Bureau. (2010). 2010 Census American Fact Finder. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk
 ⁶ County of Los Angeles, Child Care Planning Committee. (2016, January 12). Capacity and Demand. Retrieved from PDF Source from Long Beach Early Childhood Education Committee.
 ⁷ McCann, A. (2018, May 3). 2018's Most diverse cities in the U.S. WalletHub. Retrieved from https://wallethub.com/edu/most-diverse-cities/12690/
 ⁸ Anadem Community Structure (2012) 2018). Retrieved from https://wallethub.com/edu/most-diverse-cities/12690/ ^a American Community Survey. (2012-2016). Retrieved from https://www.census.gov/programs-surveys/acs/ ^g Khmer Girls in Action. (2011, November). Step into Long beach: Exposing how Cambodia American youth are under resourced, over policed and fighting back for their wellness. Retrieved

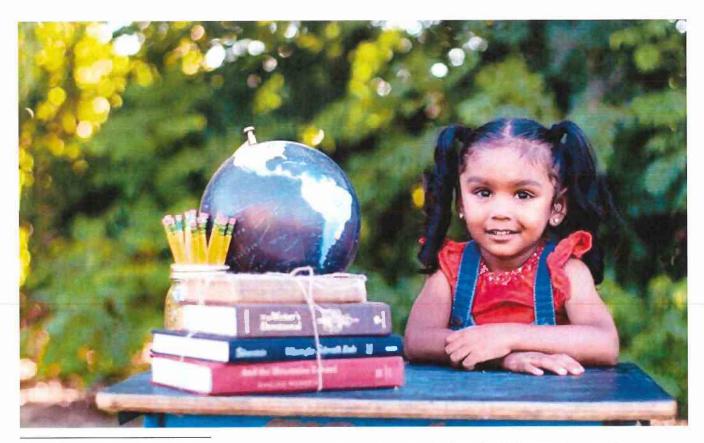
form http://www.datacenter.org/wp-content/uploads/KGA_Full-Report.pdf ¹⁰Livewell Long Beach. (2018, June 27). Retrieved from www.livewelllongbeach.org

households include children under the age of 18. The average household size in Long Beach is 2.78 people, while the average family size is 3.52.¹¹ Long Beach was also named the 5th most LGBTQ+friendly city in the nation.¹²

The City of Long Beach offers beautiful beaches, unique neighborhoods, rich cultural diversity and history. Eighty-one percent of residents live within a 10-minute walk to a park¹³ and 10% of the City area is designated parkland.¹⁴ However, Long Beach's green space varies greatly by zip code. The 90813 zip code (central Long Beach) has 0.70 acres or parkland per 1,000 people, while 90808 (east Long Beach) has 28.49 acres per 1,000 people.

In addition, the City of Long Beach was a recipient of the 2017 National Medal for Museum and Library Service, the nation's highest honor given to museums and libraries for service to the community.¹⁵ According to a report by McKinsey & Company, Long Beach Unified School District (LBUSD) is also one of the world's top 20 school systems — and one of the top three in the U.S. — in terms of sustained and significant improvements.¹⁶

Throughout this plan, the "City of Long Beach" refers to the municipal government administration, whereas the "city" or "Long Beach" refers to the place and residents living within the city limits.



¹¹ United States Census Bureau. (2010). 2010 Census American Fact Finder. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk ¹² Long Beach Post. (2014). Retrieved from https://lbpost.com/lgbtq/long-beach-named-5th-most-lgbt-friendly-city-in-the-nation/

¹³ Edwards, A. (2017). Long Beach one of the best US cities for access to local parks. *Press-Telegram*. Retrieved from https://www.presstelegram.com/2017/05/24/long-beach-one-of-thebest-us-cities-for-access-to-local-parks/.

best-us-cities-for-access-to-local-parks/. ¹⁴ The Trust for Public Land. (2017). Park Score 2017. Retrieved from http://parkscore.tpl.org/city-php?city=Long%20Beach#sm.0000hxe43bxsqcq5wzi2elt9btviu ¹⁵ City of Long Roope Record Control (2017). http://www.longheach.gov/tress-releases/long-beach.gov/tress-releases/

¹⁵ City of Long Beach Press Release. (2017). http://www.longbeach.gov/press-releases/long-beach-public-library is-a-2017-recipient-of--national-medal-for-museum-and-library-service/ ¹⁶ Long Beach Unified School District. (n.d.). Retrieved on June 18, 2018 from http://www.lbusd.k12.ca.us/District/accolades.cfm

What's early childhood like in the city of Long Beach?

Poverty rate for children 18 and younger:



zip code 90808



zip code 90803

A few miles away in zip code **908\3**, the percent of children under 18 living in poverty increases to:



23%

leaving **\6,\64** eligible children unserved In Long Beach, there are

90%

of a child's brain has formed by age 5



of children live in house-holds with Supplemental Security Income (SSI), cash public assistance income, or Food Stamps/ SNAP benefits



of children eligible for publicly funded EC services*

16,164

*Eligibility refers to children who meet state and federal enrollment requirements for childcare subsidies

Average annual child care costs:

children

\$8,0

7\$13,000

for **family** child care

for **center** Ichild care

9 | Page

Our vision for children in Long Beach

High school graduation rates reach

Free infant-toddler child care for Long Beach

MOST

СП

INCLUSIVE

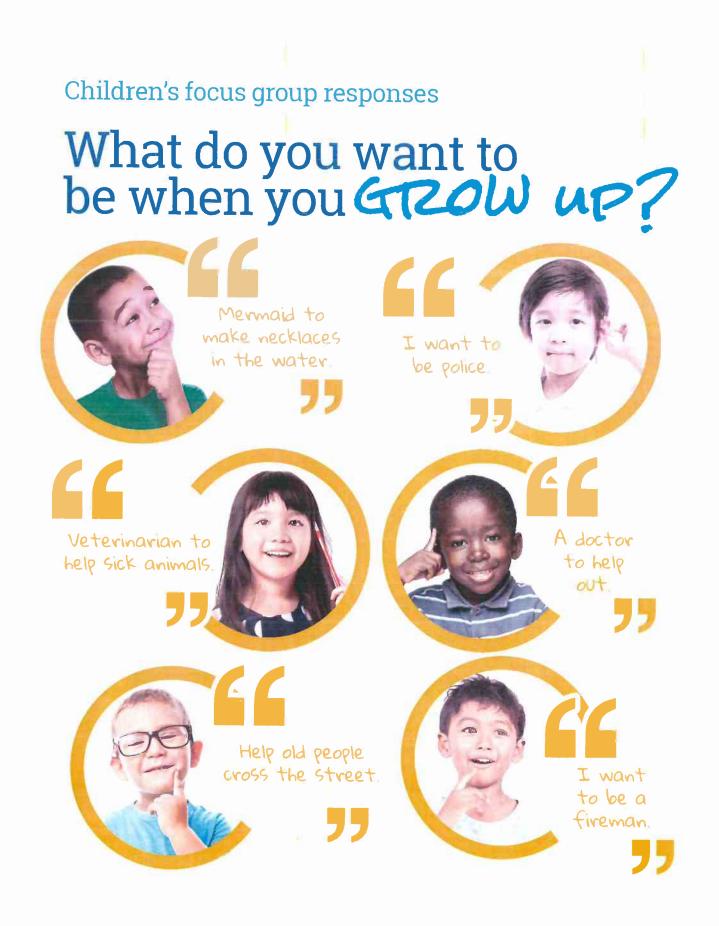


State of the art adaptive play space opens in Long Beach

Long Beach named:

BEST PLACE FOR FAMILIES

This Visioning Exercise asked Long Beach Parents and ECE Partners to envision newspaper headlines in the year 2025, if the ECE Plan is successful



What We Did

In early 2018, consultants and members of the City of Long Beach's Department of Health and Human Services (DHHS) facilitated 22 focus groups, and 11 interviews with stakeholders across Long Beach. Stakeholders included: children ages 3 to 5, parents (e.g., parents of children with special needs, Spanish and Khmer speaking parents, African American parents, parents of preschoolers, parents who identified as members of the LGBTQ+ community, fathers, foster parents, and parents living in Central/West, North and East Long Beach), early childhood education providers (e.g., directors of ECE programs, ECE teachers, special education teachers, home-based child care providers, and Long Beach Unified School District administrators), community partners (e.g., library representatives, police officers, pediatricians, nurses, and County Department of Child & Family Services representatives), and Elected Officials.

Focus groups involving adults asked them questions regarding the needs of children ages 0-5, their families, information about the professionals who provide services and resources to families in Long Beach. (Please see **Appendix A** to review the list of questions asked and demographic information of the focus group parent participants.) Key informant interviews and focus groups were documented in a qualitative database, and key themes were tagged across each interview and focus group. Focus groups and interviews were analyzed using key themes. Results of the key themes that were found in the interviews and focus groups are presented in total and by respondent category in **Appendix B**.

For the first time, the City of Long Beach engaged young children ages 3 to 5 in the development of this plan. DHHS's Early Childhood Education Program (DHHS' ECEP) staff and members of the LBECE Committee conducted three focus groups at early childhood education settings, one of which included children with special needs. (Please see **Appendix B** for the findings of the children's focus groups.)

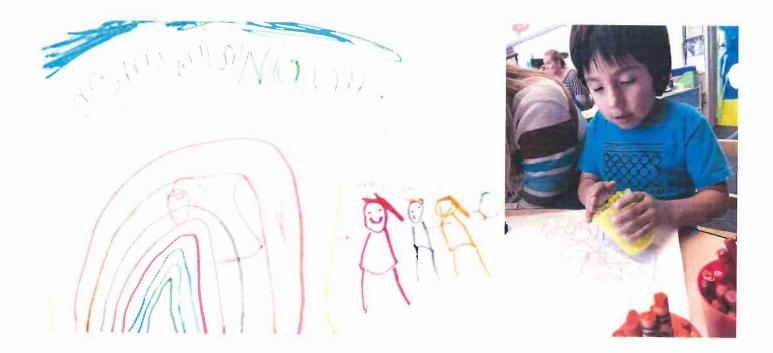
This plan represents the findings, recommendations, and visioning of these groups. This feedback is reflected in each **Goal Section** under **What We Learned**; more detailed information can be found in the Appendices.

What We Learned

Common themes that emerged from the focus groups and key informant interviews indicate that:

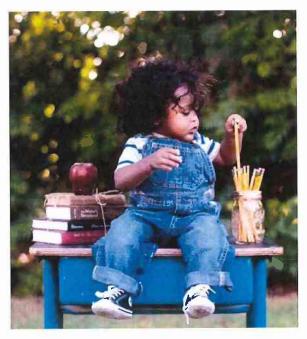
- Parents want more information and resources focused on supporting the growth and development of their children
- Parents need more resources and support in finding high-quality child care
- Families seek opportunities for social connection with other families; especially for first time parents, fathers, and parents of children with special needs
- Long Beach has many opportunities for families, but accessing these programs or resources can be difficult, creating a barrier to participation
- To increase the quality of services delivered to young children, ongoing professional development for early childhood professionals is needed
- The cost of early child care and education is a barrier to accessing early childhood education
- Stakeholders had diverse opinions about the value of literacy or social emotional development as indicators of a child's readiness for kindergarten
- Long Beach has great public spaces, such as libraries and parks, but accessibility for all children, whether by ability and/or geography, is limited

- It was noted that safety hinders the ability for full engagement in many community spaces across Long Beach
- Some Long Beach parents and community organizations discussed the importance of inclusive programs and educational environments that promote freedom of expression of gender or identity, and provide safe spaces for children regardless of ability or religion
- It was mentioned by many parents, professionals and partners that housing stability and affordability is an important factor in preparing children for lifelong success
- Long Beach should consider that any location can incorporate learning opportunities; most young children reported that they liked to learn at school or the library, but some children also noted religious institutions, the beach, and parks were where learning occurs
- Programming for early childhood should include physical activity; young children overwhelmingly found that being physically active helped them learn
- Among many topics, the young children interviewed said they liked to learn about animals, transportation vehicles, and nature



Guiding Principles

- All children and their families deserve respect and opportunities to succeed, regardless of any demographic, geographic, sociolinguistic, immigration status, family composition, gender expression or economic factors
- An understanding, appreciation, and humility of the history, traditions, and languages of diverse cultures is essential in respectfully and meaningfully engaging families in their children's growth and learning
- This Plan acknowledges that parents, children, and the community bring **strengths** that must be galvanized and supported
- Public institutions bear the responsibility for examining equitable access to resources and services as well as how families' knowledge/skills in navigating systems can contribute to disparities in outcomes



- An effective city-wide plan should **support the "whole" child**, considering all aspects of development as well as considering the child within the context of their family and their community
- This Plan should focus on **funding outcomes**, **not outputs**. All programs should be funded based on the results they deliver for those they serve, not based on "output measures" (e.g., the number of children or families served)
- This Plan relies on **shared ownership of outcomes and clarity of roles**. Delivery of high quality early childhood services, as described in this Plan, relies on cross-sector coordination and collaboration
- Safety and health, the most basic needs for all children, should be woven throughout all
 activities and policies that support this Plan. In this context, safety refers to being free of
 abuse, neglect or violence in the home or in the community, also free from injury or illness
 as a result of environmental and physical/biological factors

EARLY CHILDHOOD STRATEGIC PLAN GOALS

How We Get There

The following goals for the Long Beach City-Wide Early Childhood Education Strategic Plan emerged from the analysis of the gaps between the stakeholders' vision for Long Beach and what is currently being offered. In the following section, each goal will be further described with focused objectives, timelines, and activities for achieving the goal. The Long Beach Unified School District has developed an Early Learning Initiative (ELI) that will address the needs of children and their families in early education. **Goals or objectives that are similar between this plan and the ELI are denoted by an** *. For more information on the ELI and other similar initiatives occurring in the City, please see **Appendix C**.

GOAL 1: Support and build strong and resilient families

GOAL 2: Increase access and affordability of infant through pre-k early care and education services

GOAL 3: Support the development of a stronger early childhood workforce

GOAL 4: Improve quality of birth through age 8 programs and services

GOAL 5: Ensure children in Long Beach live, learn and play in safe, healthy and accessible environments

GOAL 6: Promote partnerships to address access to quality basic needs and services

GOAL 7: Strengthen alignment of existing birth through age 8 governance structure and early childhood support systems

Strategic, measurable, achievable, and realistic objectives are imbedded under each goal. Objectives alone are not time-bound. Instead, activities have been organized according to how quickly they can be accomplished and are listed as **On-going**, **Short-term**, **Mid-term**, **and Long-term**, as described and color-coded below:

| Ongoing | Ongoing Activities include current activities already being conducted across the City. These activities will continue at some level throughout the life of the Plan. Activities may shift as priorities or funding shifts, but activities to support the foundational need addressed in the goals are critical to the long-term success of the Plan. |
|------------|---|
| Short-term | Short-term Activities include activities that are not yet created but may be implemented within a year. Short-term activities can be reinstated over time or can become on-going, as needed to achieve listed Goals. |
| Mid-term | Mid-term Activities will begin once initial activities have been launched, or, after necessary system, workforce, training, or infrastructure needs to sustain the mid-term activity have been addressed. These will likely require one to two years to organize all parties or to secure the funds. |
| Long-term | Long-term Activities require planning, systems work, intensive training, infrastructure support or dedicated resources to achieve. These activities may also have fiscal impacts or require investments to bring to scale. These will require three or more years to launch. |

GOAL 1:

Families

Support and build strong and resilient families

Background:

Families play a critical role in their children's life. Familial impact, specifically maternal health and practices during wellness pregnancy, impacts a child before taking their first breath. To truly support children, research shows that parents also need to be supported. When parents feel, supported and encouraged, we know that they and their children are more likely to thrive. Having support from family, friends, and peers, as well as access to

Research shows that children in low-income households hear 30 million fewer words than their more affluent peers by the time they reach Kindergarten.

- Adapted from Hart, B. & Risley, T. R. (2013). The Early Catastrophe: The 30 Million Word Gap by Age 3.

supportive professionals and community resources, helps to create a more resilient family. This need is additionally important for first time parents and members of historically underserved populations (i.e. communities of color, families who have immigrated to the US, families who have members with special needs, and parents who identify as members of the LGBTQ+ community).

For young children, it is not possible to support intellectual growth without also considering the children's health and mental health. Effective services directed to children at this age should be comprehensive and address the needs of parents, as well as children. Research shows that "The Five Protective Factors" are characteristics that have been shown to make positive outcomes



more likely for young children and their families. (For more information on the Five Protective Factors, please see **Appendix E**.) Knowledge about parenting and child development helps parents and caregivers support their child's growth and learning, building stronger family ties and healthier family relationships, especially as children's learning and developmental needs change over time. Providing families with information and support that they need builds confidence and skills for the future.

A healthy parent–child relationship is essential for children's development and the proximity and responsiveness of a parent or caregiver shapes their later development. Research consistently shows¹⁷ that when parents engage with

17 Harvard Center on the Developing Child (N.D.) Brain Architecture. Retrieved on July 10, 2018 from https://developingchild.harvard.edu/science/key-concepts/brain-architecture/

their children through positive everyday interactions (e.g., play, reading, singing, cooking, etc.) their children's brains make connections that will last a lifetime and better prepare them to succeed in school and life.

We also know that individuals residing in high poverty communities face many levels of stress daily. A groundbreaking national public health study, the CDC-Kaiser Adverse Childhood Experiences Study (ACEs),¹⁸ found that trauma in childhood is associated with chronic diseases, depression and other mental illness in adulthood. For more information on ACEs (please see **Appendix E**).

What We Know:

The median income in Long Beach is \$55,151¹⁹ and the poverty rate is 22.9%.²⁰ Across the 11 zip codes in Long Beach, the disparity in poverty rates varies greatly. In zip codes 90808 and 90803, the poverty rate for children 18 years of age and younger was 3.6% and 5.7% respectively. A few miles away in zip code 90813, the percent of children under the age of 18 living in poverty increases to 46.1%.²¹ Twenty-seven percent of Long Beach's children under the age of 5 are living in poverty, 91% of whom are children of color. These economic disparities are compounded by the continued rise in the cost of living. The average cost to purchase a home in Long Beach is \$448,800, an increase of over \$40,000 in one year, and median rent across Long Beach is \$1,150. African American households had the lowest homeownership rates at 25%, while 55% of White households owned their homes.

In 2017, Long Beach recorded 119 families experiencing homelessness, which included 242 children under the age of 18.²² Additionally, many children in Long Beach live in multigenerational homes. This is important to remember, as many families are caring for young children and older relatives living in the same home.

Nearly two-thirds of California's adults have experienced at least one type of major childhood trauma, such as physical, verbal or sexual abuse, or live with a family member who abuses alcohol or is depressed.²³ One in six Californians (16.7%) has experienced four or more Adverse Childhood Events (ACEs). While ACEs may represent the most significant safety or risk factors, understanding the impact that community safety has on a young child's developing brain is important.

In 2017, there were just over 8,000 births in Long Beach, 13% of babies born were African American.²⁴ Research shows that African American babies have a higher chance of being born prematurely or underweight; African American women are at greater risk for pregnancy related deaths and complications than White women (at a 2-3x higher rate).²⁵ In addition, African American babies succumb to Sudden Infant Death Syndrome (SIDS) at a much higher rate than other ethnic groups; African American babies are 3 times as likely to succumb to SIDS compared to Asian or Latino babies and African American babies are 2.5 times more likely to succumb to SIDS compared to White babies.²⁶

In California, 4.8% of children ages 3-5 were served by Individuals with Disabilities Education Act (IDEA) for a diagnosed disability in 2011-2012; compared to 6% nationally.²⁷ According to the California

https://acestoohigh.com/2014/11/05/most-californians-have-experienced-childhood-trauma-early-adversity-a-direct-link-to-adult-onset-of-chronic-disease-depression-violence/ ²⁴ Long Beach Department of Health and Human Services (n.d.). Retrieved on July 1, 2018 from City of Long Beach Vital Records ²⁵ Tucker, M.J., Berg, C.J. Callenghan, W.M., & Hsia, J. (2007). The Black-White dispatibility in preparencycleted montality from 5 conditions: Difference in previous and non-²⁵ Tucker, M.J., Berg, C.J. Callenghan, W.M., & Hsia, J. (2007). The Black-White dispatibility in preparencycleted montality from 5 conditions: Difference in previous and non-²⁶ Tucker, M.J., Berg, C.J. Callenghan, W.M., & Hsia, J. (2007). The Black-White dispatibility in preparencycleted montality from 5 conditions: Difference in previous and non-²⁶ Tucker, M.J., Berg, C.J. Callenghan, W.M., & Hsia, J. (2007). The Black-White dispatibility in preparency label.

²⁵ Tucker, M.J., Berg, C.J. Callenghan, W.M., & Hsia, J. (2007). The Black-White disparity in pregnancy-related mortality from 5 conditions: Difference in prevalence and case-fatality rates.
 American Journal of Public Health, 97 (2), 247-251. doi: 10.2105/AJPH.2005.072975
 ²⁶ Centers for Disease Control and Prevention. (2016). Retrieved on July 12, 2018 from https://www.cdc.gov/sids/data.htm.

¹⁸ Center for Disease Control and Prevention. (n.d.). Retrieved on July 2, 2018 from https://www.cdc.gov/violenceprevention/acestudy/index.html ¹⁹ United Disease Control and Prevention. (n.d.). Retrieved on July 2, 2018 from https://www.cdc.gov/violenceprevention/acestudy/index.html

 ¹⁹ United States Census Bureau. (2010). 2010 Census American Fact Finder. Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk
 ²⁰ Live Well Long Beach. (n.d.). Children Living Below Poverty Level. Retrieved on July 2, 2018 from

http://www.livewelllongbeach.org/index.php?module=indicators&controller=index&action=view&indicatorId=189&localeId=6315

²¹ Roosevelt, M. (2017). New study shows start difference in child poverty among Long Beach's regions. *Press-Telegram*. Retrieved from https://www.presstelegram.com/2017/02/23/new-study-shows-stark-difference-in-child-poverty-among-long-beachs-regions/.

 ²²Long Beach Continuum of Care, Household with Children (Ages 0 - 17) (n.d). Report. Retrieved on December 22, 2017 from Long Beach Homeless Management Information System
 ²³ Stevens, J. E. (2014, November 5). Most Californians have experienced childhood trauma; Early adversity a direct link to adult onset chonic disease, depression, violence.

²⁷ US Department of Education. (2012). Data Display: California. Retrieved from https://www2.ed.gov/fund/data/report/idea/partbspap/2013/ca-acc-stateprofile-11-12.pdf

Department of Developmental Services, 1,773 children, birth to age three who were participating in the early intervention program, typically known as Early Start, within the local regional boundaries that include Long Beach. 28 Parents may choose an Early Start program through their local school district or through the local regional center, but not both.

During the 2017-2018 school year, LBUSD assessed and offered services to 695 preschoolers, ages 3-5. It is estimated that LBUSD received over 40 referrals monthly for preschoolers, whom were eligible for an Individualized Education Plan (IEP) while its Early Start program receives about 150 referrals annually.²⁹ The number of children for whom an IEP was created during the preschool years has risen by nearly 100 in the past year, while overall school enrollment rate has consistently decreased over the years. This suggests a significant increase in the percent of children entering LBUSD with special needs.

What We Learned:

The most prevalent concern discussed by respondents in both the interviews and focus groups was the availability and accessibility of current resources throughout Long Beach. Nearly all participants noted that to best support young children, the City of Long Beach must be willing to think about supporting families in all areas of their lives. If parents have basic needs that are not met, they are less likely to be concerned with the education and development of their children and more concerned with survival.

Throughout the interviews, the following two statements were discussed frequently: the need to better advertise to parents what resources exist in Long Beach, and the need to provide opportunities to increase social connectedness between parents and their peers. While these concerns were consistent across interviews and focus groups, there were distinct concerns addressed by each group as outlined below:



Parents

- Parents wanted more support and social service options, including medical and mental health services on site at child care programs
- In general, parents need more resources and supports in parenting, including information on child care opportunities and activities city-wide
- Parents noted the need for informal support systems to connect parents and foster their sense • of social connectedness to their community
- Parents reported that resources are available in Long Beach, but many times parents are unable to access the resources due to the geographic location, times the resources are available, or the requirements needed for participation

Providers

- Providers described a need for enhanced developmental screenings and faster referral services for children with developmental delays
- Providers reported a shortage of mental health supports for children and families across the city

²⁸ California Department of Developmental Services. (2018, June 11). Monthly consumer caseload report. Regional center Caseloads by consumer status through May 2018. Retrieved from https://www.dds.ca.gov/FactsStats/docs/May18Caseload.pdf
²⁹ Long Beach Unified School District. (n.d.). Special education annual data comparison report. Retrieved on January 5, 2018 from Long Beach Unified School District.

- Providers reported the need for more parenting supports during the earliest developmental years as being more important to a child's kindergarten readiness than any other factor
- Providers noted the importance of teaching parents about school readiness and developmental milestones
- Providers acknowledged that supporting families means helping them to meet their basic needs

Community Partners

- Community Partners identified the need for more mental health supports for children and families across the city
- Community Partners felt that more is needed to help parents understand child development and education, which could be accomplished through parent workshops
- Community Partners valued services that foster resiliency for families and children who are most vulnerable
- Earlier identification and intervention for children with developmental disabilities was important to many Community Partners

How We Get There:

Objective 1.1 100% of infants and 100% of pregnant women will have a medical home Timelines and Activities:

- **Ongoing:** DHHS' Black Infant Program (BIH) will continue to provide prenatal and postnatal classes to women who identify as African American or Black.
- **Short-term:** DHHS will assist pregnant mothers, families, and children by connecting those individuals without health services to a medical and dental home.

Objective 1.2 Increase access to and the use of mental health services for children and parents who have a need for or could benefit from accessing mental health support Timelines and Activities:

- **Ongoing:** Continue the Safe Long Beach's Safe Families Workgroup, which brings together various agencies in the city to strengthen families through systems and resource alignment.
- **Ongoing:** Current state and federally funded ECE providers will provide referrals to parents based on need and begin to collect and track the number of referrals to establish a baseline.
- Short-term: All non-state and federally funded ECE providers will assist families in identifying their needs and provide resources and referrals, such as connecting families to social services, and assisting parents in accessing and utilizing community resources.
- Short-term: DHHS will reach all medical providers under the Comprehensive Perinatal Services Program (CPSP) and Child Health & Disability Prevention (CHDP) program to educate and encourage the use of standardized and routinized maternal and child depression assessments, as well as other mental health and wellness assessments, to be applied during routine clinical exams.
- Short-term: DHHS will work with Safe Families workgroup to develop an awareness campaign that will reduce stigma around accessing mental health services and promote the importance of early interventions and support with young children.

Long-term: Create a support system of Mental Health providers who specialize in early childhood and maternal populations who can provide assessment, training and consultation in a variety of settings, including child care centers, and home-based care. Future investments in the City's Plan could support (a) the development of a cadre of credentialed Mental Health Specialists, (b) use of professional development modules on early social-emotional development, and (c) expand access to evidence-based programs specializing in the treatment of perinatal mental health issues experienced by mothers and other mental health issues experienced by primary caregivers with very young children.

Objective 1.3 Increase use of multiple developmental screenings before the age of three **Timelines and Activities:**

- Ongoing: The LBECE Committee and DHHS will continue to support local agencies who provide free developmental screenings at public events.
- Short-term: The LBECE Committee will work with local agencies to conduct Child Find (developmental screenings) at local parks, in collaboration with local child care programs, and at other events such as the Early Learning Festivals, Beach Streets, and resource fairs which are frequented by families with young children.
- Mid-term: DHHS will become an affiliate of the Help Me Grow Initiative taking place throughout Los Angeles County to support trainings and developmental screenings conducted at local pediatrician's offices. (For more information on this program, please see Appendix **E**.)
- Mid-term: The LBECE Committee will coordinate services with local Regional Center to aid early learning programs in making referrals for developmental screenings and services, and if approved, support interventions at care environments.
- Long-term: Work with Comprehensive Perinatal Services Program (CPSP) providers and Child Health & Disability Prevention (CHDP) providers and ECE providers who have infant and toddler care to coordinate the developmental screenings of all children.

Objective 1.4 Increase parents' and families' understanding of child development **Timelines and Activities:**

- Ongoing: The LBECE Committee will continue to host City-wide Early Learning Festivals and Kindergarten Festivals, which provide parents with information on how to support their children's early math, literacy, and social-emotional development at home.
- Ongoing: DHHS to continue supporting the Long Beach Home Visitation Collaborative (HVC). Annually, the HVC provides four trainings for the Home Visitor staff of the programs represented by HVC.
- Ongoing: Hosted by the Mayor's Fund for Education, Ready Rosie, will continue to provide parents quick, accessible videos via text messages and emails, to demonstrate developmentally appropriate activities to engage with young children in everyday settings.
- (For more information on this program, please see Appendix E.)

- **Short-term:** DHHS' ECEP and the LBECE Committee will create a messaging campaign to raise the awareness of parents and caregivers about their important role as teachers and models for their children.
- Mid-term: Expand Ready Rosie to additional early childhood providers and early childhood related resource providers
- Mid-term: LBECE Committee will coordinate existing parent and family workshops on child development, from prenatal through kindergarten entrance.
- Long-term: Implement a Universal Home Visitation System



Home visiting programs visit less than 3% of families in California.

-Los Angeles County Perinatal Early Childhood Home Visitation Consortium, (July 2017).

Objective 1.5 Increase parents' knowledge of and referrals to appropriate resources Timelines and Activities:

- **Short-term:** DHHS' ECEP and the LBECE Committee will create a shared training and resources calendar for parent training and parent leadership education opportunities.
- Mid-term: Pediatric medical partners, can offer training, support, and technical assistance to local child care programs to help ensure that children are up-to-date on physical and dental exams, and receive any follow-up treatment needed for identified or suspected health issues.
- Mid-term: Launch and promote the use of One Degree, an online resource platform. (For more information on this program, please see **Appendix E**.)
- Long-term: Create a "New Baby Kit" to be given out at pediatrician's offices to all new parents at their baby's first well check visit. These kits could also be made available at all Long Beach Women Infants & Children (WIC nutrition assistance) sites and at DHHS main location, where parents can pick up their child's birth certificate.

GOAL 2:

Access

Increase Access to and Affordability of Early Education and Care Services

Background:

Investments in early childhood yield high returns. Economists have shown that every dollar spent on highearly childhood quality, programs, yields a 13% return on that investment (returns between \$4 and \$9 for every dollar invested early ìn learning programs for lowchildren).³⁰ Three income rigorous preschool outcomes studies. which followed preschool children from enrollment into adulthood, participants showed that increased benefited from

"Whether one thinks it is the moral thing to do or whether it is the role of government, it makes economic sense to invest in increasing productivity; to spend less early on to prevent much greater costs later."

- Heckman, J.J. (2011). The economics of inequality: The value of early childhood education. *American Educator*, 35(1), 39-41.

earnings, while the public saw returns in the form of reduced special education enrollment, welfare usage, crime costs, and increased tax revenues from program participants later in life.³¹

It is also important to note that benefits can accrue not only to the individuals who directly participated in preschool programs, but also to society (e.g., lower crime rates, higher income tax revenues). When both costs and benefits are quantified, researchers can produce an estimate of a program's benefits relative to its costs.

However, not all benefits can be translated into dollar values. Two such benefits are an "improved labor market performance for the parents of participating children, as well as stronger national economic competitiveness because of improvements in educational attainment of the future workforce."³² Local increased economic competitiveness is also a benefit as are reduced

unemployment expenses and a potential reduction in health care costs. These assets build a business case for why Long Beach business owners. Citv Officials, and the community should be focused on raising awareness, support, and investments in early education.



³⁰ National Conference on State Legislature. (n.d.). Retrieved on June 21, 2018 from http://www.ncsl.org/research/human-services/new-research-early-education-as-economicinvestme.aspx
³¹ National Conference on State Legislatur.e (n.d.). Retrieved on June 21, 2018 from http://www.ncsl.org/research/human-services/new-research-early-education-as-economic-

³¹ National Conference on State Legislature (n.a.). Retrieved on June 21, 2016 from http://www.incst.org/researchmanian-services/new-rese

^{*} Karoly, L.A., Kilburn, M.R., & Cannol www.rand.org/publications/MG/MG341

Access to affordable, high-quality child care not only allows parents to be more productive employees, but it also enhances their parenting focus and ability to attend to and provide for their families. However, working parents of young children birth to age 5 often struggle with the cost of child care. A new poll conducted by NPR that surveyed parents in the U.S. with children in child care, found that "nearly a third of parents (31 percent) who pay fees for child care say the cost has caused a financial problem for their household. Approximately three-quarters of those parents (71 percent) say it has caused a 'very' or 'somewhat' serious problem."33

What We Know:

In the state of California, 505,000 infants and toddlers are eligible for publicly-funded early learning programs; however, only 14% are enrolled.³⁴ In 2016, Long Beach, had 21,172 children under the age of 5 (10,242 ages 0-2, 10,930 ages 3-5) who live in working families with income at or below 70% of the state median income and qualify for subsidized early care and education. Twenty-three percent (5,008, where only 842 were under the age of three) of eligible children received services. Leaving 16,164 children who are eligible for services such as Head Start, that are not enrolled in those early childhood programs.

In Long Beach, there is a short fall of child care spaces for infants, toddlers, and preschoolers in both home-based care (HBC) and center-based (Center) programs. Current spaces for children under age three only meet 13% of the need, leaving a gap of 77% for children under three.

| Age Group | Population | Likely to Use Licensed Care | | Licensed Capacity | | Surplus/Shortfall | |
|----------------------|------------|--------------------------------|--------|-------------------|--------|-------------------|--------|
| | | HBC | Center | HBC | Center | HBC | Center |
| Infants and Toddlers | 19,306 | 3,055 | 3,792 | 1,392 | 2,001 | -1,663 | -1,791 |
| Preschoolers | 20,058 | 1,607 | 6,835 | 1,392 | 4,005 | -215 | -2,830 |
| School Age Children | 44,358 | 960 | 4,798 | 1,392 | 2,001 | 432 | -2,797 |

The shortfall extends to spaces for school age children in child care centers, though there is a surplus of spaces for school age children in home-based care, as shown in the table above. ³⁵ Many families also choose familial care (3.6% of children were in grandparent care in 2014) because of cultural preferences, as well as cost and availability.

The following table details child care costs by provider type, both across the state of California as well as in Los Angeles County.

Child Care Enrollment by Provider Type

| | State of | California | Los Angeles County | | |
|-------------------|----------|-------------|--------------------|-------------|--|
| Type of Facility | Infant | Preschooler | Infant | Preschooler | |
| Child Care Center | \$13,327 | \$9,106 | \$14,309 | \$10,303 | |
| Home-Based Care | \$8,462 | \$7,850 | \$9,186 | \$8,579 | |

³³ NPR, the Robert Wood Johnson Foundation, and Harvard T.H. Chan School of Public Health. (2016, October). Child Care and Health in America. Retrieved from

https://www.hsph.harvard.edu/news/press-releases/poll-more-than-four-in-ten-working-adults-think-their-work-impacts-their-health/ ³⁴ Children Now. (2018). *California Children's Report Card*. Retrieved from https://www.childrennow.org/files/7715/1613/3234/Children Now_2018_Report_Card.pdf

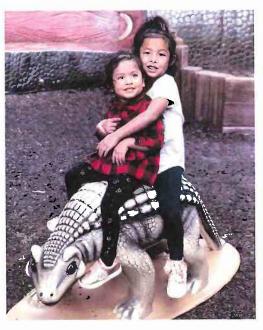
³⁵ County of Los Angeles, Child Care Planning Committee. (2016, January 12). Capacity and Demand. Retrieved from PDF Source from Long Beach Early Childhood Education Committee.

What We Learned:

The importance of safe, affordable, high quality child care, that is accessible for all children, was supported by all respondents. The cost of early childhood education and care was a consistent concern from a diverse population of respondents. There is a need for more subsidies for those in the lowest of income populations as well as those who do not quality for subsidies but whose income cannot cover the cost of care.

Parents

- Parents noted that finding the right experiences and opportunities for their children was difficult and noted a desire to have access to an online portal where they could find a child care directory and accompanying description of provided services
- Many parents expressed a belief that child care costs too much and some would like to see universal preschool offered across Long Beach that is free of charge for all families
- Parents wished they had known about the amount of preparation and expense child care would require before having children
- Some parents noted that infant-stage resources, even beyond care, and programs are difficult to find



Providers

- Providers would like to see programs for children and families fully funded so more families can be served, and programs can more fully achieve their goals
- Some providers identified barriers (e.g., transportation, language, abilities) that exist for parents and children to access all the supports and activities available across Long Beach
- Providers would like to see more opportunities for inclusion for all children in both formal and informal settings in Long Beach

Community Partners

- Community Partners would like to see increased access and inclusion in programs and services for the many diverse groups of families that make up the city
- Community Partners would like to see more help for parents learning how to navigate existing programs and services
- Some Community Partners shared that the Regional Center should be expanded to reach more families. Additionally, some Elected Officials emphasized that the Regional Center should make relevant programs and resources available and free to families of all income levels
- Community Partners felt the City could expand existing programs that are successful in accomplishing their mission, such as various library services and the Ready Rosie program, to provide greater access to all families

- Elected Officials expressed that they wanted to see Long Beach grow into a City where there are many accessible opportunities for all children to grow and succeed in life, regardless of income and neighborhood
- Elected Officials also thought it was important for the City to provide more comprehensive services for all young children

How We Get There:

Objective 2.1 Expand access for infant/toddler and preschool-aged early care and education options

Timelines and Activities:

- Ongoing: The LBECE Committee will continue to advocate legislatively for more funding for infant and toddler care.
- Ongoing: The LBECE Committee will continue to host а yearly Preschool Fair where parents can learn about opportunities in the community and make informed decisions about their children's care and education.



"Early experience determines whether a child's developing brain architecture provides a strong or weak foundation for all future learning, behavior, and health."

- A Science-Based Framework for Early Childhood Policy, Harvard Center on the Developing Child

- Short-term: DHHS will conduct community mapping that identifies early childhood care and resources in Long Beach. The mapping process should include identifying areas where demand for child care is greater than the supply.
- Mid-term: The LBECE Committee will conduct a survey to identify which local programs have capacity to expand services and what resources or supports they would need to expand services.
- Mid-term: DHHS will work with local ECE programs to ensure children experiencing homelessness have access to high quality child care services.
- **Mid-term:** Investigate various models of existing "universal" or free preschool programs to support the development of the most effective solution for Long Beach.
- Mid-term: Create an intergenerational system of care that provides opportunities for adults who express a desire, beyond the age of retirement, to participate in and support early learning environments, while providing care for children.
- Long-term: Create a Centralized Enrollment Center (CEC) which tracks open child care enrollments at local centers, serving as a local point of contact for parents where families can view a provider's profile and find a child care program that matches their child and family's needs.
- Long-term: Increase infant and toddler care spots. Currently, programs in Long Beach only have licensed care capacity to serve 13% of infants and toddlers.

Objective 2.2 Expand supplemental early learning opportunities

Timelines and Activities:

- **Ongoing**: DHHS' ECEP will continue the City of Long Beach's Celebration of the Young Child and the Week of the Young Child to highlight local resources and opportunities for young children and their families.
- **Ongoing:** Long Beach Public Library will continue to provide early learning activities such as 1000 books before kindergarten and providing reading opportunities to WIC.
- **Ongoing:** South Bay Center for Counseling Preschool Without Walls program will continue to operate early learning programming through the Long Beach Public Library.
- Short-term: DHHS to expand the "Little by Little" program to other WIC sites in Long Beach. (For more information on this program, please see **Appendix E**.)
- Short-term: DHHS to work with City departments to install "Little Library" repositories at local parks and at City locations that are farthest from library access.
- Short-term: DHHS to coordinate with Long Beach Transit to ensure that there are bus routes that will provide access to all major parks and City spaces.
- Short-term: DHHS' ECEP to work with the Parks, Recreation and Marine (PRM) Department to develop early childhood friendly and welcoming programs and spaces that are placed throughout the City.
- Mid-term: Create a "Learning Where You Go" campaign, in which local spaces, such as grocery stores and restaurants, provide opportunities where parents can engage in communication and learning with their children.

"Inequality in early childhood experiences and learning produces inequality in ability, achievement, health, and adult success."

- Heckman, J.J. (2011). The economics of inequality: The value of early childhood education. American Educator, 35 (1),31-47.

GOAL 3:

Workforce

Support the development of a stronger early childhood focused workforce

Background:

For many children, the first time they are in the care of an adult other than a family member is the moment they start their early learning experience. ECE professionals are critical because they must strive to create warm. responsive environments while building children's cognitive, linguistic, social and emotional skills. They must know how to use research-based best practices while creating a stimulating, high-quality environment that creates a space for children to grow and develop. They must know how to encourage and engage parents and caregivers, while remaining responsive to the diversity of families whose children are in their care.



Research demonstrates that teachers

who received intensive coaching and/ or consultation in addition to professional development show greater increases in their own quality of interactions with children and classroom environments than teachers who only receive professional development.³⁶ As the skill sets, knowledge and experience of the ECE professionals increases, so does the quality of the program where they work.

Requirements for the field range from 2 -24 educational units in early childhood education or child development and 0-1,050 hours in the field, with additional experience and learning requirements based on the teaching level one hopes to pursue (see table below). Furthermore, brain science, pedagogical best practices, and laws are constantly changing in the field of early childhood and it is imperative that ECE professionals learn and grow as well. ECE professionals report the cost of professional development, either workshops or further education, as a barrier to pursuing more training. Many ECE educators earn minimum wage, and wages for home-based providers are frequently lower than minimum wage. Since the cost of further professional development is typically high, approximately \$500 for an average professional conference, it is often not feasible for ECE professionals to pursue further education that would expand their expertise.

Ratios and a limited number of qualified professionals are also barriers to providing care for the number of children who need it.

³⁶ Howes, C., Hamre, B.K., & Pinata, R. C. (2012). Effective Early Childhood Professional Development. Brookes Publishing: Baltimore, MD.

| Training and Educational Requirements for Child Care Providers | | | | | | |
|--|---|--|--|--|--|--|
| Permit Title | Educational Requirements | Experience Requirement | | | | |
| Assistant Teacher | 6 units of Early Childhood Education (ECE) or Child Development (CD) | None | | | | |
| Associate Teacher | 12 units ECE/CD including core courses | 50 Days of 3+ hours/day within 2 years | | | | |
| Teacher | 24 units ECE/CD including core courses <i>plus</i> 16 General Education (GE) units | 175 Days of 3+ hours/day within 4 years | | | | |
| Master Teacher | 24 units ECE/CD including core courses <i>plus</i> 16 General Education (GE) units; <i>plus</i> 6 specialized units; <i>plus</i> 2 adult supervision units | 350 Days of 3+ hours/day within 2 years | | | | |

What We Know:

Long Beach has an ECE professional workforce of approximately 1,073; of this number, slightly more than 400 are home-based providers.

In California, the median hourly wage for child care providers is \$13.30 ³⁷ or \$27,670 annually. In Los Angeles County, the median hourly wage for early care and education professionals is \$14.65, or \$30,472 annually. In comparison, Long Beach K-12 teachers' base rate for a teacher with bachelor's degree is \$57,697, including a benefits package, something that is not always possible in early childhood settings.³⁸

Professional development (e.g., trainings or additional higher educational courses for providers) is a focus in the early childhood field as providers strive to improve the quality of child care. According to a recent study, child care workers in Los Angeles County cited the lack of funds and time as the top two reasons providers were unable to access professional development.³⁹

Nationally, African American children are suspended and expelled from schools, even preschools, at a rate that is 48% higher than their peers.⁴⁰ In particular, African American male preschoolers receive more than 3 out of 4 suspensions from preschool per year. Research has found that is often because of an educator's implicit bias, at all levels, against African American males, where educators look for "acting out" behaviors among boys and specifically African Americans over their peers. 41 Training on implicit bias, and cultural competency could help our educators understand this perspective and change their practices to become less biased and more equitable for all children.

What We Learned:

Access to professionals who know, not only about development but also about the community, is an important asset for families. Respondents believed that having highly trained early childhood education professionals, both home-based and center-based, is key for the effectiveness of a high-quality program.

38 Long Beach Unified School District (2018, June). Retrieved from http://www.lbschools.net/Asset/Files/HRS/2017%20Credentialed%20Treacher(1).pdf

³⁹ Los Angeles County Child Care Planning Committee 2017 Needs Assessment. (2017). The State of Early Education and Care in Los Angele County. Retrieved as PDF from Long Beach ⁴⁰ US Department of Education Office for Civil Rights. (2014, March). Issue brief No2

https://medicine.yale.edu/childstudy/news/article.aspx?id=13500

³⁷ Bureau of Labor Statistics (2018, June 21). Retrieved from https://www.bls.gov/oes/current/oes399011.htm

⁴¹ Hathaway, B. (2016). Implicit bias may help explain high preschool expulsion rates for black children. Yale Child Study Center. Retrieved on July 3, 2018 from

Many professionals in this field do not make a living wage, which many respondents cite as an ongoing issue that needs a resolution.

Parents

- Parents believed that early childhood teachers should make a higher wage
- Parents identified the need for child care providers to have access to high quality training and professional development opportunities
- Many parents wanted to see more training for early childhood professionals on topics that contribute to raising program quality as well as meeting the needs of diverse children and families

Providers

- Providers cited the need for staff training and workforce development to adequately meet the learning and developmental needs of the children they serve
- Providers felt that training on trauma-informed approaches to service delivery is needed for early childhood educators and non-ECE professionals supporting families

Community Partners

• Elected officials were in favor of increasing educator professionalization and pay, and recognized that improving both factors was important to improving the current overall ECE system

How We Get There:

Objective 3.1 Build awareness of the value of the early childhood education workforce Timelines and Activities:

- Short-term: DHHS' ECEP and the LBECE Committee will create a "Get to know the Expert" social media campaign that highlights the knowledge and skills Long Beach's ECE professionals bring to the field.
- Short-term: LBECE Committee to expand awareness of ECE professional value through adoption of national events such as teacher appreciation days, etc.
- Mid-term: Explore an "Early Childhood Champion" event.
- Long-term: The LBECE Committee will continue to advocate and educate policy makers for higher wages for both home-based and center-based ECE professionals.



Objective 3.2 Increase the professionalization of the early childhood workforce by providing consistent professional development opportunities to ECE Professionals* Timelines and Activities:

- **Ongoing:** The LBECE Committee will continue to facilitate professional development workshops that are tailored to the specific needs of local early childhood professionals and highlight current best practices in the field, including trainings on trauma-informed care.
- **Ongoing:** The LBECE Committee will continue to support the annual Early Childhood Education Symposium, which provides professional development to regional early childhood education professionals.
- **Ongoing:** City of Long Beach, DHHS, and the LBECE Committee will continue to support ongoing opportunities for internships in ECE spaces.
- Short-term: The LBECE Committee and City of Long Beach will conduct a Needs Assessment of the early childhood education (ECE) workforce to identify professional development needs.
- Mid-term: Collaborate with existing partners that support training and professional development for the ECE workforce.
- Long-term: Explore existing models and establish a program that invests in the workforce by offering stipends or scholarships to ECE professionals to pursue higher education or training.

"Underdeveloped human potential burdens our economy and leaves us with a workforce that is less than it could be."

– Heckman, J.J. (2011). The economics of inequality: The value of early childhood education. *American Educator*, 35(1), 39-41.

• Long-term: Create a braided system of funding to increase professional development opportunities.



* The Long Beach Unified School District has developed an Early Learning Initiative (ELI) that will address the needs of children and their families in early education. Goals or objectives that are similar between this plan and the ELI are denoted by an *.

GOAL 4:

Quality

Improve Quality for Birth through age 8 Programs and Services

Background:

Research consistently demonstrates the long-term benefits that are experienced by children who have participated in а high-guality preschool program. Quality child care has been shown to be especially critical for children from low-income communities. The positive impacts go well beyond academic performance and extend to children's economic and social well-being. Children who attend a

"One of the BEST investments we can make in a child's life is HIGH QUALITY early education"

 Barack Obama, 44th President of the United State of America

high-quality preschool graduate high school at a higher rate, earn more money over their lifetime, have fewer run-ins with the law, and lead healthier lives than their peers, from similar backgrounds, who did not attend a high-quality preschool.⁴²

A high-quality program is possible no matter the setting, home-based or center-based. High quality programs are both responsive to the children they serve and create a safe environment that is appropriate for children. Quality of care is important for cognitive, linguistic and social-emotional development. Providing high quality care starts with a strong workforce (see Goal 3), but also means having the necessary resources available in the early learning environment that foster children's curiosity and learning.

The National Association for the Education of Young Children (NAEYC) notes 10 basic standards of an early learning environment, including: fostering positive relationships, providing appropriate curriculum, employing strong

teaching practices, conducting realistic assessments of child progress, promoting healthy practices, developing staff competencies and development. promoting positive engagement with families, building community relationships, creating safe physical environments, and having strong leadership and management. Each standard has various subcategories used to assess the quality of an early learning environment.



42 National Conference on State Legislatur.e (n.d.). Retrieved on June 21, 2018 from http://www.ncsl.org/research/human-services/new-research-early-education-as-economic-investme.aspx

What We Know:

The State of California has created a system of rating the quality of early childhood care and education programs (Quality Rating and Improvement System, QRIS). The goal is to assess, improve and communicate the quality of early care and education settings. The QRIS includes: the lead teacher's qualifications, other teacher qualifications, Classroom Assessment Scoring System (CLASS) used to measure teacher-child interactions, and Early Childhood Environmental Rating Scale-Revised/Family Child Care Rating Scale-Revised (ECERS-R/FCCERS-R) used to assess the early childhood environment.

As of June 30, 2018, 4% (252) of home-based and 18% (619) of center-based programs in Los Angeles County were rated in the Quality Rating Improvement System (QRIS), leaving many programs in Los Angeles County and the City of Long Beach unrated. Of the programs rated, 59% were rated in the top Tiers of 3, 4, or 5, suggesting higher quality of care. Less than 1% of programs were rated in lower Tier 1.⁴³ While ratings of care were generally high across Los Angeles County, programs in Best Start Communities, including much of central Long Beach, were rated lower than programs in higher income communities, and many programs have yet to participate.

What We Learned:

Across respondents, there were two distinct approaches to early childhood education that were noted. The first was literacy oriented, which was tied to the belief that an academic focus in early childhood settings best prepares children for kindergarten. The other approach was based in the research that a "whole" child model that encourages social-emotional development of young children will best prepare them for success.

Parents

- Parents wanted state-funded access and state regulation in the child care field
- Most parents also saw value in promoting accessibility for all Long Beach children to quality preschool
- Some parents felt LBUSD schools should adopt a "wholechild" model focused on all aspects of a child's development
- Parents wanted the City to create and support "play-based" child development centers, including a focus on socialemotional skill development
- Some parents expressed a desire to see more diversity in the services and approaches offered in existing early childhood settings, from more bilingual and Science, Technology, Engineering, and Math (STEM) programs, to programs that were more supportive of all ability levels



⁴³ Los Angeles County Child Care Planning Committee 2017 Needs Assessment. (2017). The State of Early Education and Care in Los Angele County. Retrieved from http://www.first5la.org/index.php?r=site/article&id=3845

- Parents had shared views on what they see as important components of the classroom environment for young children:
 - Lower staff-to-child ratios
 - Safety and security for their children
 - Variety of activities for children
 - Teachers as partners
- Creating a space that is inclusive of all children, regardless of their family structure, gender identity, ability level, racial or ethnic identity, was noted as important and addressed by various respondents. These respondents additionally noted that the discrimination they faced due to a lack of inclusion led to further isolation and less engagement in early childhood spaces



Providers

- Ready Rosie (see **Appendix D** for more information) was mentioned as an example of innovative programming currently being implemented in the City that could be expanded or taken more fully to scale throughout Long Beach by more providers
- Using a "whole child" approach to early childhood education and care was noted as a priority by providers

Community Partners

- Creating spaces that are more inclusive of all children, regardless of their family structure, gender identity, ability level, racial, or ethnic identity, was noted by many community partners as a top priority
- Promotion of quality programs and educational resources for educators was described as an important need for the community by most elected officials
- Elected officials noted that manageable teacher to student ratios were important to the success of ECE and noted that the City should leverage additional resources from the state and county for the City to support ECE programs, ranging from funding to technical support programs

How We Get There:

Objective 4.1 Increase the number of early childhood education programs participating in a quality rating improvement system* Timelines and Activities:

 Ongoing: The LBECE Committee will grow its membership, by advertising the benefits of membership to early childhood providers, especially home-based providers. Membership could include access to a collaboration platform (such as a social media page or other shared platform for resource and knowledge sharing), being listed on the City's website as an "Early Childhood Champion", or another distinction.

"Too many of today's early childhood programs continue to be of moderate or poor quality."

-Kagan, S.L. & Kauerz, K.

- Mid-term: DHHS' ECEP will create a snapshot or summary of local standards of quality, which align with QRIS and/or NAEYC Standards. These standards will provide a snapshot of quality indicators that are valued locally and be communicated to providers, parents, and the community.
- Long-term*: Promote the use of the DRDP, a single child development assessment, across child care programs and provide training on the use of the assessment and how to use the data for program planning.
- Long-term: Advocate for the use of a population-based measurement tool, which provides data on social determinants of health and can provide developmental assessments of children and a contextual understanding of the communities in which our children live.
- Long-term: The LBECE Committee will offer quality enhancement grants.
- Long-term*: The LBECE Committee will advocate for all programs in Long Beach to participate in Quality Rating & Improvement System (QRIS) and create a platform to post or bring attention to programs that participate.



GOAL 5:

Environment

Ensure children in Long Beach live. learn, and play in safe, healthy, and accessible environments

Background:

An individual's environment includes both the people who make up a community, as well as the physical attributes of that community. Statistics have consistently pointed to better health rates in communities that have access to fresh fruits and vegetables. accessible green spaces and parks, low occurrences of people experiencing homelessness, low drug use, and low crime rates.



A food oasis refers to communities that offer fresh fruits and vegetables, in abundance, that are easily accessible to residents. Food deserts are communities with little access to fresh fruits and vegetables and a high number of fast food restaurants. Given that people are likely to eat what is nearby, those who reside in a food oasis are more likely to engage in healthy eating practices, including the consumption of a well-balanced meal, while those in food deserts are more likely to consume high sodium, high fat meals. A poor diet increases one's risk of obesity and cardiovascular problems and is associated with a higher mortality rate. 44

Similarly, having access to green space is critical for overall physical fitness and mental wellness. A lack of green space not only limits the opportunity to be physically active, which increases risk of chronic diseases, but it also impacts air quality due to the need for more transportation to and from services. Poor air quality has a greater impact on transit-dependent populations who walk, bike and get their exercise outdoors.

Research shows that when children are exposed to violence or have been victims of child abuse, they are more likely to abuse their own children and/or partners.45 This phenomenon is referred to as the intergenerational transmission of violence, where the same harmful patterns and behaviors of abuse get passed down from generation to generation.⁴⁶ Additionally, many studies have found that when children are abused, neglected, and/or watch their parent/guardian endure or inflict physical abuse; they are more likely to commit violent acts later in life. For instance, evidence shows that 97% of incarcerated males have been victims of a form of child abuse.47

⁴⁴ The Global BMI Mortality Collaboration (2016, July). Body-mass index and all-cause mortality: Individual-participant-data meta-analysis of 239 prospective studies in four continent. Lancet, 388, 776-786. doi: https://doi.org/10.1016/S0140-6736(16)30175-1

Centers for Disease Control and Prevention. (2013). Adverse childhood experiences study. Retrieved from http://www.cdc.gov/ace/findings.htm 6 General of Disease Control and Prevention. (2013). Adverse childhood experiences study. Retrieved from http://www.cdc.gov/ace/findings.htm 6 Junger, M., Greene, J., Schipper, R., Hesper, F., & Estourgie, V. (2013). Parental criminality, family violence and intergenerational transmission of crime within a birth cohort. European journal on criminal policy and research, 19 (2), 117-133. 47 Zastrow. C. & Kirch Abmore K. (2000). Uniter the transmission of crime within a birth cohort. European 67 Zastrow.

Zastrow, C., & Kirst-Ashman, K. (2008). Understanding human behavior and the social environment. (8th ed.). Belmont: Brooks/Cole.

What We Know:

There are many great qualities and benefits associated with living in Long Beach, yet disparities in access to healthy food, air quality, criminal activity, health, and life expectancy exist between communities living within Long Beach.

In 2010, DHHS assessed eight low-income neighborhoods (as part of the Communities of Excellence in Nutrition, Physical Activity and Obesity Prevention CX3 assessment) for environmental factors that support healthy lifestyles, such as: walkability, park access, school environments, transit systems, outdoor media, and healthy food access. The findings showed that CX3 neighborhoods, primarily in zip codes 90813 and 90806, have above-average liquor sale violations and residents pay 10% more than the county-wide average to purchase fruits and vegetables. These communities are also experiencing high rates of poverty.

Long Beach's park space varies greatly by zip code. The 90810 zip code (West Long Beach) has the lowest number of acres per 1,000 residents, while 90808 (East Long Beach) has highest number of acres per 1,000 residents⁴⁸. A lack of green space not only limits a person's opportunity to be physically active, which also increases their risk of chronic diseases, but also quality. These same impacts air neighborhoods with the least access to park space are also exposed to poor air quality because of their proximity to freeways and the two largest Ports on the West Coast. Poor air quality disproportionately affects transitdependent populations, as well as youth of color that are disproportionately living in

| A | Available Park Space by Zip Code (2016) | | | | | |
|---------------------|---|------------------------------|---------------------------------|--|--|--|
| Zip Code Population | | Total Park Space in Acres | Acres per 1,000 Residents | | | |
| 90802 | 40,444 | 237.8 | 5.880 | | | |
| 90803 | 32,134 | 653.6 | 20.340 | | | |
| 90804 | 41,355 | 235.6 | 5.700 | | | |
| 90805 | 97,182 | 116.0 | 1.194 | | | |
| 90806 | 42,918 | 118.2 | 2.754 | | | |
| 90807 | 33,693 | 56.9 | 1.689 | | | |
| 90808 | 39,191 | 1,114.0 | 28.425 | | | |
| 90810 | 37,958 | 27.0 | .711 | | | |
| 90813 | 61,871 | 43.4 | .701 | | | |
| 90814 | 19,029 | 19.7 | 1.035 | | | |
| 90815 | 40,393 | 56.3 | 1.394 | | | |

high-pollution areas. For example, in North, West, Central, and Southwest Long Beach hospitalization rates for asthma are more than triple those of the rest of the City.49

Communities of color in Long Beach experience worse health outcomes than the City's White residents. For example, African-American residents were hospitalized for asthma at 8.5 times the rate of White residents and Asian/Pacific Islander residents were hospitalized for asthma at 3.4 times the rate of White residents.50

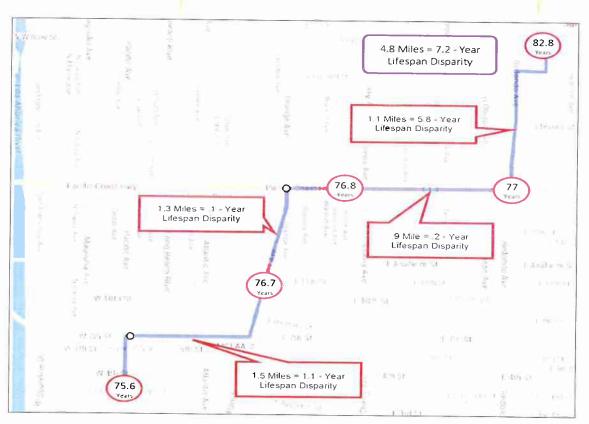
An analysis of crime across the City reveals that 36.3% of all Long Beach homicides in 2016 occurred within the Washington Neighborhood in the 90813 zip code.⁵¹ In fact, the homicide rate in the Central Long Beach area, more specifically the Washington Neighborhood (19.7 homicides per 100,000 residents) was more than 2.5 times higher than the rate of the entire City and four times higher than the overall homicide rate in California.⁵² Long Beach had the third highest overall rate of juvenile arrests in LA County in 2015. A five-year analysis of Long Beach juvenile arrest data reveals that the Washington

⁴⁸ Long Beach Parks, Recreation and Marine (2016, September 16). City of Long Beach Parks and Park Acreage

⁴⁹ Equity Analysis of the Land Use Element of the General Plan. (2017, November 28). Refrieved from http://www.longbeachize.com/wp-content/uploads/2018/03/Exhibit-D-health-memo.pdf
⁵⁰ Office of Statewide Health Planning and Development (OSHPD) 2016 Patient Discharge Database. Refrieved from https://oshpd.ca.gov/

 ⁵¹ Long Beach Police Department. (2017). Annual Report 2017. Retrieved from http://www.longbeach.gov/globalassets/police/media-library/documents/crime-info/statistics/rd_year-2017
 ⁵² California Department of Justice. Bureau of Criminal Information and Analysis. Retrieved from https://openjustice.doj.ca.gov/resources/publications.

Neighborhood had the highest youth citation and arrest rate in the City, disproportionately impacting youth of color (based on demographic data). From 2016 to 2017, overall crime rates dropped 3.6% in Long Beach, including a 33% drop in homicides and 10% drop in residential robbery. However, the aggravated assault rate increased by 10.9%.⁵³



Neighborhoods facing less access to healthy and fresh foods, greater health concerns, limited safe park access, and high levels of poverty are those neighborhoods associated with the lowest life expectancy, whereas residents who reside in communities without these challenges are living much longer. The average life expectancy of residents in Central Long Beach is 75.2 years of age, whereas the life expectancy of residents in East Long Beach is, on average, 82.6 years of age. It should be noted that there is only a five-mile distance between these two areas of Long Beach.⁵⁴

What We Learned:

Community environments were noted in a variety of contexts. First, community safety was consistently a concern across all respondent types. Safety, according to the respondents, included spaces that were free of crime, drugs and violence, and homes that were free of toxins, neglect, and domestic violence. Safety also included spaces that were free from bullying and ridicule, spaces that were created specifically with users in mind, and spaces where respondents not only had the ability to be present but were explicitly invited (especially for families of children with special needs and LGBTQ+ families). Safe environments also included accessible green space that was clean with intentional design features for all ability levels. It was clear that all respondents understood that to address developmental and educational

⁵³ Long Beach Police Department. (2017). Annual Report 2017. Retrieved from http://www.longbeach.gov/globalassets/police/media-library/documents/crime-info/statistics/rd_year-2017
⁵⁴ Equity Analysis of the Land Use Element of the General Plan (2017, November 28). Retrieved from http://www.longbeachize.com/wp-content/uploads/2018/03/Exhibit-D-health-memo.pdf

needs of children, children must feel safe. While each group noted slightly different aspects of their community environment that impacts them most, they all noted that there was room for change.

Parents

- The second most mentioned concern for parents was the need for safe space in which to raise their children
- Parents of children with special needs added that having spaces that have been created for children of all ability levels is key to their engagement in City spaces
- Many parents noted that the City has park space, but high-quality park space is limited to select neighborhoods and is hard to access

Providers

- Providers mentioned the need for safer communities and safer play spaces
- Providers noted that access, partially due to transportation, was a barrier to utilizing services that were more available in some parts of the city than others

Community Partners

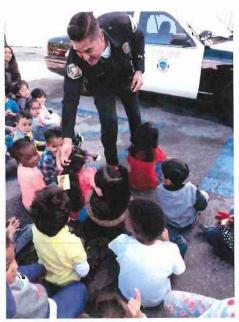
- Safety was a recurring theme with elected officials
- Park space in general is seen to be a current asset in Long Beach, although not all parks are accessible for all children

How We Get There:

Objective 5.1 Facilitate opportunities for young children and their families to engage with trauma-informed service professionals in their communities

Timelines and Activities:

- Short-term: DHHS' ECEP will develop opportunities for young children to engage with first responders and other City personnel to build positive relationships with public safety figures.
- Mid-term: DHHS will support the local implementation of trauma-informed and resilience-building practices across ECE providers, City departments, and community partners.
- Long-term: Advocate for the adoption of a community policing and trauma-informed model by the Long Beach Police Department. (For more information on community policing, please see **Appendix E**.)



Objective 5.2 Increase inclusive, safe and accessible infrastructures within parks in communities with low park acreage

Timelines and Activities:

- Short-term: City of Long Beach will partner with local United Way agencies to bring the "Born Learning" campaign signage to parks. (For additional information on this campaign, please see Appendix E.)
- Long-term: Provide both early childhood appropriate equipment and adaptive equipment that are ADA compliant within parks. This may be accomplished by adding park features for young children that include enclosed play areas, wheelchair accessible playground equipment, slides that are lower to the ground, child-adult swings, and shade.
- Long-term: The LBECE Committee and City departments, will collaborate to secure and braid funding to update all existing park space to be made accessible for children of all ability levels.

GOAL 6:

Partnerships

Support partnerships designed to increase integration between systems and provide families with appropriate and timely services

Background:

While it is believed that one person can change the life of a child, it is also known that it takes a village to help that child reach their full potential. Traditionally, supports for early childhood have operated in individual silos; where families engage in basic care of children, schools provide education, pediatricians handle medical needs and Cities create spaces and laws for people to live by. But research demonstrates, that change can only be possible when the approach to change is holistic, far reaching and engages all levels of one's ecosystem to create a collective impact.

True collaboration takes place when service providers, at all levels of one's ecosystem, are (1) aware of the other services available to families and, (2)in constant communication about their services. Because no one service provider can do everything needed to successfully support parents and their children, providers must work to link



services in a way that yields the best outcomes for children and their families. To achieve results that impact children and families in Long Beach, it is necessary to reach integration of cross-sector services and supports, ensuring that families have timely access to services that meet their needs. This moves away from a system-centered approach and moves towards a client-centered approach to delivering services.

Change is possible when City systems think about innovative ways to provide services to all families. This means City systems should experience the system through the client's eyes in order to design approaches that are centered around the client. Having community members invited to the table, including parents, practitioners, pediatricians, City representatives, and so many more, will lead to true interdisciplinary work that yields appropriate services and interventions on demand.

What We Know:

Many organizations and systems within Long Beach acknowledge the importance of collaboration and participate on one or more of the 30 known coalitions that meet regularly that focus on young children and their families. These groups include professionals from a variety of sectors: mental health and health professionals, developmental specialists, educators, police, elected official representatives, and parents. Although there are nuanced differences between the coalitions, there is synergy among these groups who

are all working to elevate children and families in Long Beach. Many of these collaboratives are working to identify solutions that work to leverage similarly focused activities and interventions, to best align efforts and reduce duplicative activities.

| | Long Beach Colla | boratives Supporting EC Issues |
|----------------|--|--|
| | Focus Issue/ Population | # of Collaboratives/ Coalitions Addressing Issue |
| | Ages 0-8 | 8 |
| | Families | 12 |
| | Education | 3175 |
| a total | Health | 6 |
| and the second | Violence Prevention | 6 |
| | Resiliency | 8 |
| | Note: This list is not See Appendix F fo | ^t exhaustive and is updated often. r a current list. |

What We Learned:

While collaboration and systems alignment were not at the top of the overall focus across respondents, ECE Providers note that it is essential to the overall work of supporting the whole child, given that no one program can do everything needed to meet all the needs of families and their young children.

Nearly all participants noted that to best support young children, the City must be willing to support families in all areas of their lives. If parents have basic needs that are unmet, they are less likely to be concerned with education and development and more concerned about survival. Many respondents noted that families can be most supported when there is cross-sector collaboration and programs move out of their historically established silos, and when professionals are easily accessible to connect families to services.

Parents

• Parents reported that the ECE system of supports and services should be expanded to reduce or eliminate waitlists for services

Providers

- Some providers need more funding to provide basic supportive services to children and families who are most vulnerable
- Most providers saw the shortage of affordable housing as having a significant impact on young children and their families
- Many noted that while the City has some collaboration between partners, the collaborations need to be expanded to include more partners
- Some providers shared that collaboration exists in Long Beach to support children and families, but some reported "siloed" services that would benefit from cross-sector collaboration

Community Partners

- Community partners envision more funding and expanded services to include holistic supports for children and families
- Most Community Partners see opportunity for stronger coordination and collaboration across the programs and systems that support children and families

Elected Officials

- Elected officials noted that it is important for children with special needs to access the current services that exist and believe more support is needed to create additional resources that are tailored to the needs of the individual
- Officials further noted a focus on expanding affordable and accessible housing as an important part of increasing family stability in the city



How We Get There:

Objective 6.1 Increase collaborations between ECE programs and community partners working with young children and families Timelines and Activities:

- Short-term: DHHS' ECEP and the LBECE Committee will coordinate on-going training opportunities with local subject matter experts to offer mental health and behavioral supports to child care programs and families.
- Short-term: The LBECE Committee will provide training opportunities to community partners that are not traditionally in the ECE field, to enhance their understanding of early learning and child development.
- Mid-term: Facilitate and strengthen partnerships between mental health professionals who specialize in early childhood and the LBECE Committee to provide consultation and any identified resources.

Objective 6.2 Create more opportunities for parents to participate as partners in settings where decisions about young children and families are made Timelines and Activities:

- Ongoing: The LBECE Committee and DHHS' ECEP will continue to host Parent Leadership Academies (PLAy) with cohorts of parents of young children. (For more information on PLAy, please see Appendix E.
- Short-term: The LBECE Committee and DHHS' ECEP will advocate for all existing groups focused on families and early childhood to include parents in the work and decision making.
- Short-term: The LBECE Committee will encourage parents to participate in events and fammer held to be the second sec



forums held to better inform programs and facilitate engagement.

Objective 6.3 Achieve seamless access and transition from programs and services to kindergarten*

Timelines and Activities:

- **Ongoing:** The LBECE Committee, in collaboration with the LBUSD, will continue to host Kindergarten Festivals.
- **Short-term:** The LBECE Committee will encourage ECE providers, both home- and centerbased, to provide DRDP data to LBUSD during the summer prior to the child entering kindergarten.
- Mid-term: ECE partners will support parent transition from early childhood education to kindergarten by providing informational resources.



GOAL 7:

Systems

Strengthen alignment of the existing birth through age 8 governance structure and support system of early childhood

Background:

Never before has the national focus on investments in early care and education been as high as in recent years. Identified as a non-partisan issue that many successful political campaigns are built on, communities can come together around improving the services, systems, and funding that support early childhood.

As mentioned in the previous sections, it is understood that many issues that create challenges for families are complex and often the result of broad, overarching "We cannot solve challenges of our time unless we solve them together."

- Barack Obama, 44th President of the United State of America

policies, such as, affordable housing policies, paid family leave for parents (of biological and adopted children), and transition support from preschool to kindergarten, to name a few. To elicit change in policies or complex social issues, it is important to address the systems from which the issues originate. In many instances, shifts in policies and social issues come out of collective impact approaches. The Collective Impact framework advocates for a common agenda:

"The Collective Impact approach is premised on the belief that no single policy, government department, organization or program can tackle or solve the increasingly complex social problems we face as a society. The approach calls for multiple 'organizations' or entities from different sectors to abandon their own agenda in 'favor' of a common agenda, shared measurement and alignment of effort."⁵⁵

What We Know:

For the past four years, the City of Long Beach DHHS has advocated for a Collective Impact approach, in which all providers gather around a common goal of placing the client front and center in programming and interventions. When partners collaborate around the individual, family, or client who they are all trying to serve, a collective impact design of the system naturally follows. Funding silos and organizational silos do not matter to the individual client being served, and silos create barriers to improvement in the client's situation or outcomes.

An example of a successful Collective Impact approach can be found in the "All In Campaign". In 2015, the City of Long Beach embarked on a campaign to reduce chronic absenteeism and truancy at three middle schools and one

⁵⁵ The Collective Impact Framework (n.d.). Retrieved on July 2, 2018 from http://www.collaborationforimpact.com/collective-impact/

elementary school. Both context (parents) and content (professionals) experts agree that chronically absent students face many barriers and identifying and addressing those barriers and the reasons behind them is not easily accomplished. Understanding this, the City's Safe Long Beach (violence prevention) team worked in partnership with LBUSD's Office of Student Support and the Long Beach Prosecutor's Office to develop the "All In Campaign", which identified policies and advocated for systems change with the client front and center in the design to provide the best programming and intervention for the individual students experiencing chronic absenteeism and their families. This campaign led to changes in policies and procedures that address how truant students are transitioned back into the classroom, which led to significant gains in attendance. Through the collaboration, dedication and innovative problem



solving of the All In Campaign, chronic absenteeism was reduced by an average of 20% across all four schools in the course of two years. The youth, now engaging in their learning, rather than being away from school, are able to make educational gains that will set them on a life path of success.

Eliciting change at the systems level can be challenging and daunting; however, when systems effectively change their focus to the client – the children and families they serve – rather than designing for the organizations, staff, and funding silos, real change can occur. A Collective Impact approach facilitates systems change to improve operations and impact, to support and elevate the families and communities the system is now properly designed to serve.

What We Learned:

Feedback from all interviews included possible changes from programs solely providing direct services, such as care for children, to also include more inclusive, indirect services for families, such as affordable, safe housing and accessible, safe parks. Much of the feedback, provided from each of our informant types, requires support from all levels of one's ecosystem. While it was noted that families love their children and want the best for their children, structural challenges that are out of their control, such as cost of living or limited accessible resources, make it hard for them to meet their needs and the needs of their children.

Parents

• Parents arrived at the conclusion that creating consolidated and coordinated systems of support and services, for ages prenatal through 12th grade, would provide families with timely and appropriate support

Providers

- Many providers cited lack of coordination as a primary barrier to increased collaboration
- Providers also noted that Long Beach needs one shared messaging campaign to the community about early childhood education and care
- Some providers mentioned that having baseline community level data as well as formal ways to share data would allow for enhanced programming and increased quality of care

Community Partners

• Some community partners noted that there are already great K-12 and higher education opportunities in the city and feel that there should be the same opportunities for children from birth through age five

Elected Officials

• Elected officials find that a strong and engaged civic community currently exists in Long Beach and that this community serves as a stable foundation for promoting and advancing ECE programs

How we get there:

Objective 7 1 Regularly monitor Plan Objectives to ensure accountability

Timelines and Activities:

- Short-term: DHHS will establish a city-wide ECE Strategic Plan oversight committee to ensure attainment of this Plan's Objectives.
- Short-term: DHHS and ECE partners will create a First Year, Second Year, and Fifth Year Project Work Plan outlining all project activities, outcomes to monitor, performance indicators, and data collection measures. This will ensure sustainability and hold the City and partners accountable.

Objective 7.2 Generate awareness among the community, decision-makers, funders, and elected officials, of the importance of ECE*

Timelines and Activities:

- **Ongoing:** DHHS will continue to support initiatives that bring together local early childhood and cross-sector partners, such as Long Beach's All Children Thrive Initiative (ACT) and the Long Beach Trauma Informed Taskforce (Taskforce).
- Short-term: The LBECE Committee and the City of Long Beach will create reoccurring monthly social media messages highlighting different areas of early childhood education.
- Short-term: The Strategic Plan Oversight Committee will present at the City of Long Beach's Youth and Family Commission on an annual basis on the progress for the identified benchmarks.
- Short-term: The Strategic Plan Oversight Committee and DHHS' ECEP will distribute an annual update to Long Beach City Manager and City Council.
- Mid-term: The LBECE Committee will develop a communications kit or a presentation to communicate with local business and policy leaders, at meetings such as City Council, local Chamber of Commerce, and Long Beach Rotary Club about the importance of the early childhood education and care profession, and to advocate for support and resources.
- Mid-term: The DHHS' ECEP, the LBECE Committee and other partners will create a communication plan with messaging about early childhood health, safety and education. Messaging would go on various advertisement spaces such as restaurant placemats/restroom banners, social media, and newspapers.

Objective 7.3 Establish a system of data sharing and collection across programs to improve informed service delivery

Timelines and Activities:

- Long-term: Include a question that captures a child's early learning placement on LBUSD's Kindergarten enrollment application to assist in tracking child success from the early learning setting through graduation. Allow early learning programs to access this longitudinal data to improve their practices and kindergarten readiness programs.
- Long-term: Create a Memorandum of Understanding (MOU) among the LBECE Committee partners (including LBUSD and City of Long Beach), to ensure collaboration, data sharing, reduction in duplicative efforts and in turn increased access.

Objective 7.4 Build a strong, cohesive sustainable support infrastructure for early childhood Timelines and Activities:

- Mid-term: The LBECE Committee will identify and advocate for a dedicated revenue stream, such as an Early Childhood Fund that could be supported by a local tax measure (i.e. tobacco, cannabis or soda tax).
- Long-term: Support and expand local community resource centers that offer families a onestop-shop for information, referral, resources, activities, parent education classes, parent and child play activities.



Appendix A: Focus Group and Key Informant Questions and Information

Each of the stakeholder groups were asked questions that pertained to children ages 0-5, their families, the professionals who provide services with an early childhood focus and resources that support families in the City of Long Beach.

Interview Respondent Types

Kids

Kids refers to children, ages 3-5, who currently participate in an early learning environment, such as preschool, within the City of Long Beach. To learn what is important to children in Long Beach, we went straight to the source!

Parents

Parents refers to adult guardians or care providers responsible for the child, (including biological parents, foster parents, or grandparents). PCG and City of Long Beach DHHS's staff held various focus groups with parents throughout the City, representing many different parents, such as: parents with children enrolled in child care centers in different areas of the city, Fathers, parents who identify as LGBTQ+, parents who have immigrated to the US, parents of children with disabilities, parents involved with the Department of Children and Family Services, and several others as noted in the methodology section of this report.

Providers

Providers are representatives of the community who themselves or their organizations provide direct early childhood educational services to young children. A number of provider organizations specifically supporting young children and their families across the City were included in the qualitative data gathering. Groups who participated include: center-based and home-based child care providers, special education teachers, Long Beach Unified School District Administration and Board, and other child care providers.

Community Child Partners

Community partners are community members who themselves or their organizations provide supports and services to young children and their families that are not directly educationally oriented but are important for children's overall success. Including community partner perspectives in the listening sessions was an important part of gaining a well-rounded perspective of the important support and service needs for children across Long Beach. Community partners who were interviewed included the City of Long Beach DHHS Homeless Support Services, Housing Authority, Fatherhood Program and Nurse Family Partnership, Police Department, Public Libraries, the Los Angeles County Department of Children and Family Services, and The Children's Clinic.

i | Page

Elected Officials

Elected officials are members of the City of Long Beach's City Council who were elected to their position from the community residents. PCG and City of Long Beach DHHS's staff interviewed various elected and government officials at the municipal level in Long Beach to further understand the current policymaker perspective of ECE and how it could be further expanded in the City.

Focus Group and Key Informant Questions

| Торіс | Parents (PAR) | Providers (ECE) | Community Child Resources (CP) Community Partner | Council Members/Elected Officials (ELE) | Kids |
|----------------------------|---|---|---|---|--|
| Future State- Visioning | In your ideal world, what would the headlines say about early childhood education for young children in the City of Long Beach in 2025? | In your ideal world, what would the headlines say about early childhood education for young children in the City of Long Beach in 2025? | In your ideal world, what would the headlines say about early childhood education for young children in the City of Long Beach in 2025? | In your ideal world, what would the headlines say about early childhood education for young children in the City of Long Beach in 2025? | What do you want to be when you grow up? |
| Programs and Resources | What influenced your decision to enroll your child in preschool or childcare (early learning)? How did you pick your preschool/ childcare/ program? | How do you reach parents about your services? | How do you support parents in finding a preschool? | How do you support constituents in accessing resources like preschools in your community? | |
| Programs and Resources | What is your role in preparing children for school? | What is your role in preparing children for school? | What is your role in preparing children for school? | What is your role in preparing children for school? | What do you like to learn? What do you want to learn? |

| Programs and Resources | When your children were young, what supports did you find helpful? What supports could you not find? | If money were not an issue, what would your community provide for children and families? What supports do you need to be successful? | If money were not an issue, what would your community provide for children and families? What supports do you need to be successful? | If money were not an issue, what would your community provide for children and families? What supports do you need to be successful? | Where do you go to learn? Who teaches you things? Who helps you learn? |
|---------------------------|---|---|--|---|---|
| Programs and Resources | Where do you get your information on education and health (i.e. TV, SM, School, Friends, fam, Library) | | | Where would you direct parents/providers to find resources on education and health? Where do you find resources to educate yourself on the topics of education and health? | How can we help people in our community? |
| Programs and Resources | What are your strengths as a parent? What are the strengths of the parents you know? | What are the strengths of the families you serve? | What are the strengths of the families you serve? | To ensure that every child can succeed, we must address the needs of the whole child, including physical health, stable housing, and sense of well-being, as well as cognitive and social emotional development and skills. Given this info, what are key priorities that as a city, we must | What community helpers help you? If you needed help, who would you ask? |

iii | Page

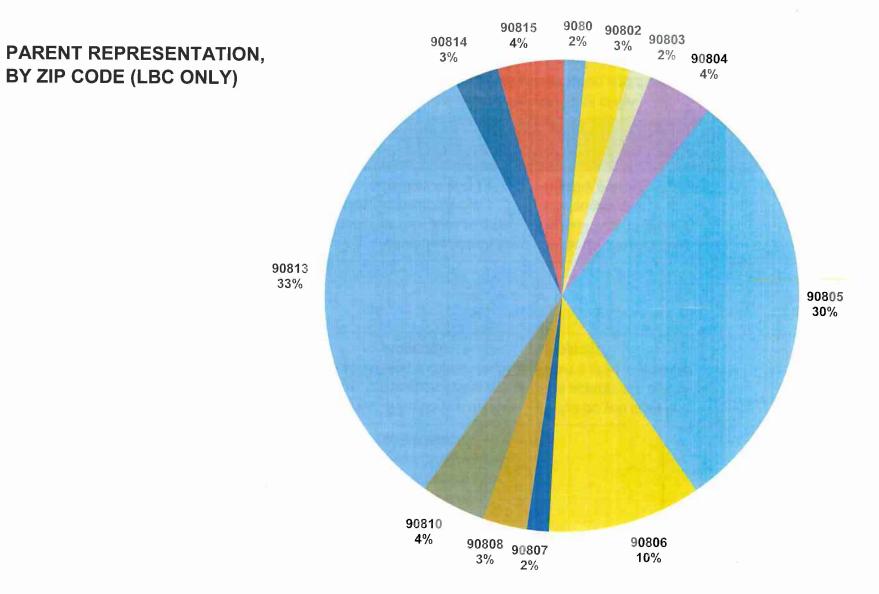
| • | | | | address for our 0-5 population and their families? | |
|---------------------------|--|--|--|--|---|
| Programs and Resources | What are the challenges you are faced with? | What are the specific needs of the 0-5 age children coming into your agency? | What are the specific needs of the 0-5 age children coming into your agency? | | How can we help people in our community? |
| Programs and Resources | What are your primary concerns/needs/want s regarding your child's well-being? | What have parents communicated to you as their primary concerns/needs/want s regarding their children's well- being? | What have parents communicated to you as their primary concerns/needs/wants regarding their children's well-being? | What have your constituents communicated to your office as their primary concerns/needs/wants regarding their children's well-being? | What helps you learn? |
| Programs and Resources | How can you be more supported to help the families you serve? | How can you be more supported to help the families you serve? | How can you be more supported to help the families you serve? | How can you be more supported to help the families you serve? | What community helpers help you? If you needed help, who would you ask? |
| Programs and Resources | What does LB do well for children and families? (<i>This</i> <i>includes city of LB</i> <i>and the community.</i> <i>Anything the</i> <i>interviewer thinks is</i> <i>LB</i>) | What does LB do well for children and families? (<i>This</i> <i>includes city of LB</i> <i>and the community.</i> <i>Anything the</i> <i>interviewer thinks is</i> <i>LB</i>) | What does LB do well for children and families? (<i>This</i> <i>includes city of LB and</i> <i>the community.</i> <i>Anything the</i> <i>interviewer thinks is</i> <i>LB</i>) | What does LB do well for children and families? (<i>This</i> <i>includes city of LB and</i> <i>the community.</i> <i>Anything the</i> <i>interviewer thinks is</i> <i>LB</i>) | Where are the places you go in our community? Where is your favorite place to go in our community? Why do you like to go |

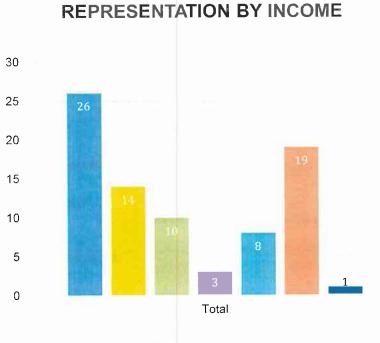
| | | | | | there? What do you do there? |
|--------------------------------|---|---|--|--|--|
| Programs and Resources | What gaps exist for children in Long Beach? In what ways could we close those gaps? (If they answer, "more funding," then ask "what would you do with that funding?") | What gaps exist for children in Long Beach? In what ways could we close those gaps? (If they answer, "more funding," then ask "what would you do with that funding?") | What gaps exist for children in Long Beach? In what ways could we close those gaps? (If they answer, "more funding," then ask "what would you do with that funding?") | What gaps exist for children in Long Beach? In what ways could we close those gaps? (If they answer, "more funding," then ask "what would you do with that funding?") | How can we help people in our community? |
| Indicators of Child Success | | Describe high quality early childhood education | Describe high quality early childhood education. | | Let's talk about going to school! What do you do at school? What is your favorite thing to do at school? |
| Indicators of Child Success | How do you know when children (your child) is succeeding at the program? | | | | What do you learn at school? |
| Indicators of Child Success | What challenges & strengths do preschools have in providing quality care? | What challenges & strengths do preschools have in providing quality care? | What challenges & strengths do preschools have in providing quality care? | What challenges & strengths do preschools have in providing quality care? | |
| Indicators of Child Success | | What are strengths & challenges with your | | | |

•

| | | workforce (possible workforce)? | | | |
|--------------------------------|--|--|---|---|--|
| Indicators of Child Success | What does it look like when a child is ready for kindergarten? | What does it look like when a child is ready for kindergarten? | What does it look like when a child is ready for kindergarten? | What does it look like when a child is ready for kindergarten? | |
| Indicators of Child Success | | What are your top 3 key priorities that need to be addressed as a service provider to ensure our students transition [to kindergarten] successfully? | | | |
| Child Development | What do you wish you knew, on the first day of preschool/kindergart en? | What do you wish the community understood about Early Childhood Education? | What do you wish the community understood about Early Childhood? | What is your message to the community for young children and their families? What do you take a stand for? | |
| Child Development | As a parent, what is your role in your child's early development? <i>F/U</i> <i>What educational</i> <i>things did you do</i> <i>with your child ages</i> <i>0-5?</i> | What is the role of parents in their child's early education? | | | Who teaches you things? Who helps you learn? |

| Children with Special Needs | | previous answers, ask | needs were not mention , <i>Now think about our co</i> ecial needs. What do you | nversation and think | |
|-----------------------------------|--|---|---|--|----|
| Total Questions | 18 | 20 | 17 | 15 | 12 |
| Child Development | What do children need in their lives to grow into successful, healthy adults? | What do children need in their lives to grow into successful, healthy adults? | What do children need in their lives to grow into successful, healthy adults? | What do children need in their lives to grow into successful, healthy adults? | |
| Child Development | What would you have done differently (in raising your child)? | | | | |
| Child Development | | What do you think is the appropriate age to start a child in an ECE program? | What do you think is the appropriate age to start a child in an ECE program? | What do you think is the appropriate age to start a child in an ECE program? | |
| Child Development | | How does your agency collaborate with other child serving agencies beyond ECE? <i>F/U What are the</i> <i>barriers to</i> <i>collaboration?</i> <i>F/U What are your</i> <i>ideas for increased</i> <i>collaboration?</i> | How does your agency collaborate with other child serving agencies beyond ECE? <i>F/U What are the</i> <i>barriers to</i> <i>collaboration?</i> <i>F/U What are your</i> <i>ideas for increased</i> <i>collaboration?</i> | 5 | |

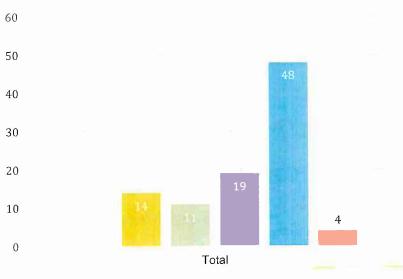




PARENT

- Count of Less than \$25,000
 Count of \$35,000 to \$49,999
 Count of \$75,000 to \$99,999
 Count of Did not answer
- Count of \$25,000 to \$34,999
 Count of \$50,000 to \$74,000
- Count of \$100,000 or more

PARENT REPRESENTATION BY RACE



- Count of American Indian or Alaskan Native
- Count of Asian
- Count of Black or African American
- Count of White
- Count of Hispanic
- Count of Native Hawaiian or Other Pacific Islander

Appendix B: Key Themes and Findings

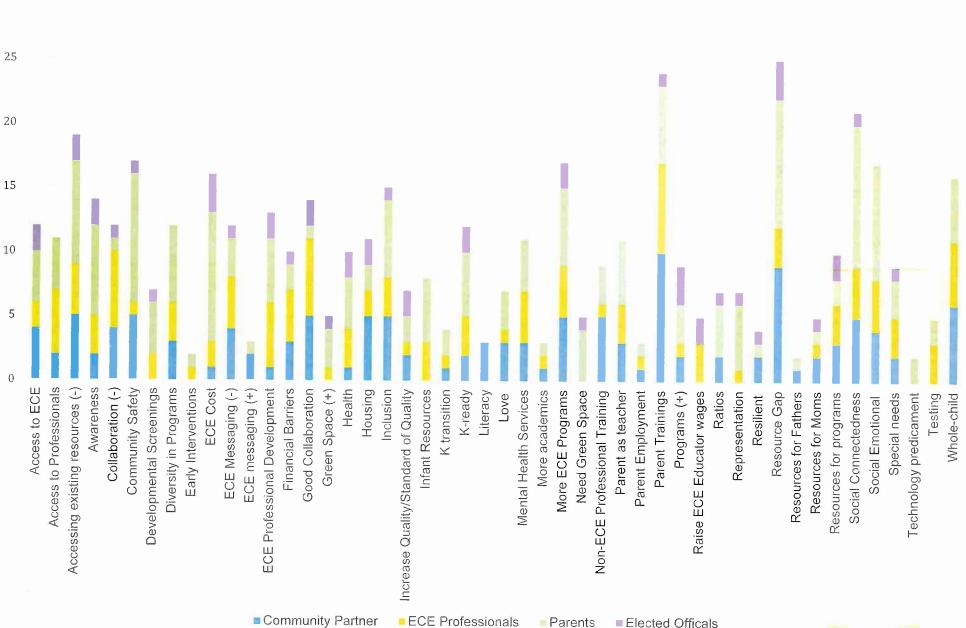
During the review process, various themes appeared across the various focus groups and key informant interviews. City of Long Beach, DHHS staff pulled out the following tags, or "themes" that helped influenced the development of this Strategic Plan.

| Tag Name | Definition | Total Times Mentioned |
|-----------------------------------|---|--------------------------|
| Resource Gap | Any gap in resources or services throughout the city | 25 |
| Parent Trainings | A need to support educating parents on the following topics: child developmental milestones, importance of early academic experiences, awareness for early preparation for ECE etc. | 24 |
| Social Connectedness | Parents' and children's access to other parents/family/friends/ neighbors for support in times of need, and to share childcare responsibilities | 21 |
| Accessing Existing Resources - | Difficulty accessing existing programs due to transportation, location, hours of operation, etc. | 19 |
| Community Safety | Perception of unsafe environments in the community (outside of the home), such as Parks, Childcare Facilities, Schools. | 17 |
| More ECE Programming | More ECE programming for families, such more parent-child classes through Parks and Recreation | 17 |
| Social Emotional | EA quality ECE program is one that focuses on the social and emotional development of a child | 17 |
| ECE Cost | Acknowledgement of the high cost of childcare | 16 |
| Whole-Child | Programs should adopt a "whole child" approach to ECE; where academics, social- emotional and all the social determinants of health are addressed. (trauma informed care lens is used) | 16 |
| Inclusion | Desire for ECE programs and City programs to offer inclusive programming or equipment (i.e. parks with equipment developed for children with disabilities), where all children regardless of identity or abilities are welcomed and provided opportunities. | 15 |
| Awareness | Desire for the community to have awareness of various issues (diversity, LGBTQ+ | 14 |

| Good Collaboration | ECE professionals and partners are currently collaborating in effective ways. | 14 |
|-------------------------------------|--|-----------|
| ECE Professional Development | Training for ECE Professionals; advance the professionalization of the workforce | 13 |
| Access to ECE | Statement that not everyone has access to ECE settings; the State/Feds should provide more funding to increase ECE seats (creation of Universal Preschool) | 12 |
| Collaboration (-) | A need to better understand the services that others offer and how to connect families/children | 12 |
| Diversity in Programs | Programs should have more diverse programming, such as primary languages spoken, length of days, STEM focused, mixed age | 12 |
| ECE Messaging (-) | The need for a develop a unified campaign to highlight what Long Beach believes is important in Early Childhood Care and Development | 12 |
| Kindergarten Ready | Kindergarten readiness is a primary indicator of childhood success and should be the primary goal of an ECE program | 12 |
| Access to Professionals | Parents' desire for access to professionals to be able to answer questions, provide support, guidance | 11 |
| Housing | Limited affordable housing and accessing housing is difficult | 11 |
| Mental Health Services | The identification that mental health support is needed for children to thrive | 11 |
| Parent as Teacher | The notion that parents are their children's first teacher | 11 |
| Financial Barriers | Broad financial barriers for all basic needs | 10 |
| Health | A need to address children's and families basic health | 10 |
| Resources for Programs | A statement that ECE programs need more resources (such as funding, supplies, possibility of trainings) | 10 |
| Non-ECE Professional Training | Professional development for non-ECE professionals on ECE related topics, or how to best support young children or their families. | 9 |
| | | |

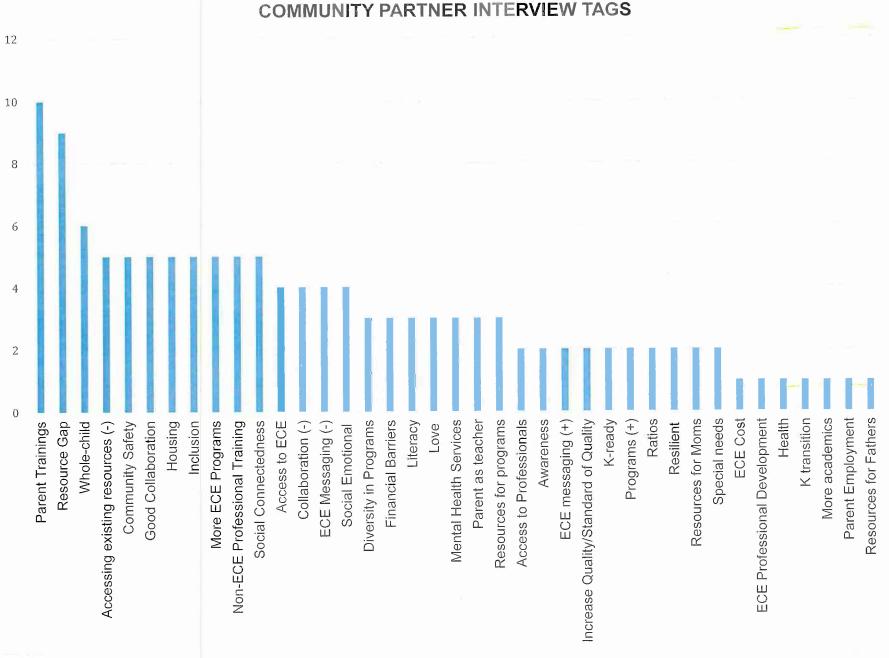
| Programs (+) | Currently programs are offering quality programming | | 9 | |
|--|---|---|---|--|
| Special Needs | Children with special needs require additional resources than what currently exists | 1 | 9 | |
| Infant Resources | Need more child care options for children during the infant/toddler stage | - | 8 | |
| Developmental Screenings | The need for more regular developmental assessments and tracking for special needs | | 7 | |
| Increase Quality/Standard of Quality | A need for quality care and services for children and a way to standardize what "quality" means. | | 7 | |
| Love | This is a strength-base statement, of professionals, about how much parents love their children and are committed to do anything for them | - | 7 | |
| Ratios | Lower staff to child ratios are important | - | 7 | |
| Representation | A want for all identities to have some representation in programming, advertising, etc. (mommy and me vs parent and me) | 7 | 7 | |
| Park Space (+) | Long Beach currently has great green space options | ţ | 5 | |
| Need Park Space (-) | Struggle for access to green space or notice of limited green space in specific areas | Į | 5 | |
| Raise ECE Educator Wages | Increase in pay for ECE Professionals | ę | 5 | |
| Resources for Mothers | Need more resources for new or soon-to-be mothers (i.e. prenatal care, pregnancy, breastfeeding, postpartum depression) | Ę | 5 | |
| Testing | There is too much emphasis on testing | Ę | 5 | |
| Kindergarten Transition | Need more support for services to transition into kindergarten | 4 | 4 | |
| Resilient | In the face of challenges, the community is resilient | 4 | 1 | |
| ECE Messaging (+) | Long Beach excels in messaging of ECE opportunities and programs | 3 | 3 | |
| Literacy | Early literacy should be a major emphasis for Long Beach | 3 | 3 | |
| | | | | |

| Want more academics in ECE settings | 3 |
|---|--|
| Parents need employment and support finding employment | 3 |
| Services for children with special needs | 2 |
| Need more resources for dads | 2 |
| Technology use is a concern but important in future success | 2 |
| | Parents need employment and support finding employment Services for children with special needs Need more resources for dads |

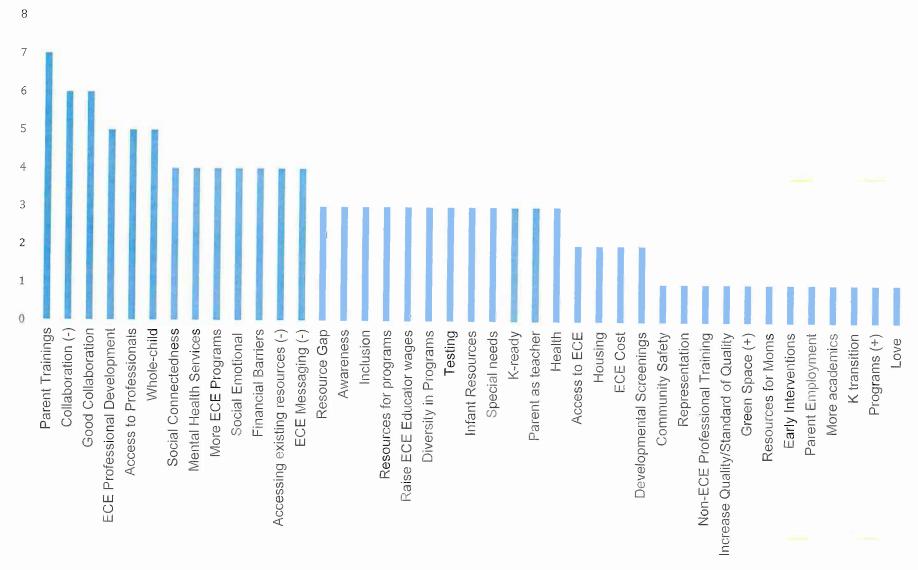


INTERVIEW TAGS BY SECTOR

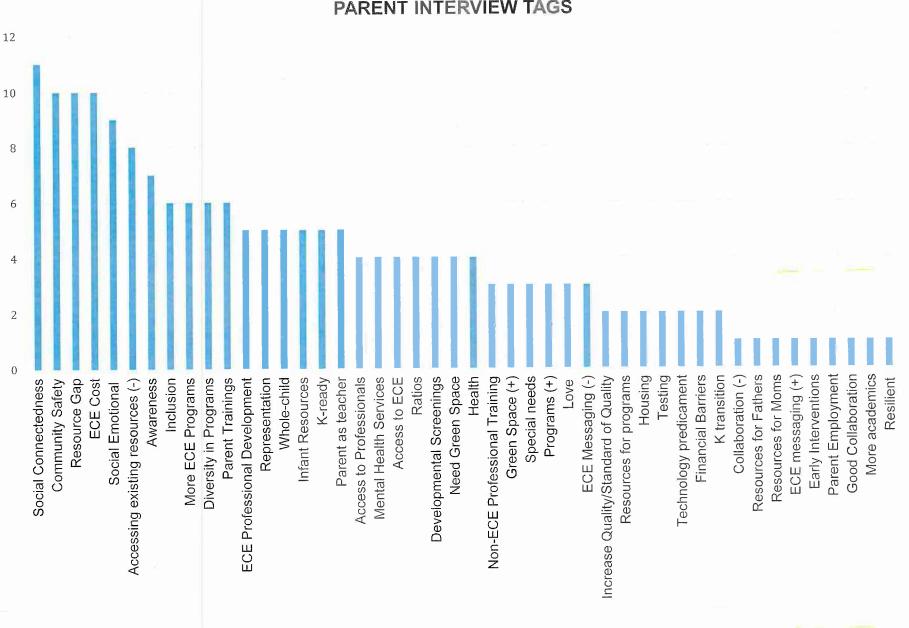
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COMMUNITY PARTNER INTERVIEW TAGS



ECE PROFESSIONAL INTERVIEW TAGS



PARENT INTERVIEW TAGS

Children's Focus Group Responses



Question: "What do you like to learn about?"



Appendix C: LBUSD Early Learning Initiative and Other Similar Initiatives

The Long Beach Unified School District (LBUSD) Early Learning Initiative (ELI) is designed to provide a more comprehensive, coordinated and responsive early learning system that serves and supports children from birth to age eight. The LBUSD Early Learning Initiative main focus is to improve educational outcomes and learning in the earliest years through children's physical and motor development, social and emotional development, language, and cognitive development. In addition to these domains, LBUSD also recognizes three supporting conditions in establishing early learning for school and life success: children's participation in high quality preschool programs, socialization by parents (as first teachers), and receipt of adequate nutrition and health care. The LBUSD Early Learning Initiative offers a powerful investment in young children's lives that improves and builds the capacity of the school district to provide program effectiveness and accountability to its earliest learners, so that all children, including those with high needs, are on track for graduating from high school and are college and career ready.⁵⁶

There are also various City of Long Beach lead initiatives that have overlap with many of the goals, objectives and action steps listed in this Strategic Plan. Below identifies where there is synergy between this Plan and other initiatives.

| ECE Strategic Plan | LBUSD'S Earl Learning Initiative (ELI | Keeper Local | Safe Long Beach Plan (SAFE) | City of Long Beach, Department of Health and Human Services' Programming (DHHS) |
|--|---|---|---|--|
| Objective 1.1 100% of infants and 100% of pregnant women will have a medical home | | Milestone 1, Solution: Long Beach Home Visitation Collaborative | | BIH and NFP: 100% of pregnant women and mothers enrolled in case management have a medical home. CHDP: 100% of newborns known to MCO will be added to existing Medi-Cal cases and children identified without coverage are provided with enrollment and renewal assistance; MCO: 2.1. By June 30, 2018, completed applications for a minimum of 600 clients for Medi-Cal, MC-Targeted Low- Income Children's Program, Kaiser Child Health Plan, Medi-Cal Access Program, and Covered CA. |
| Objective 1.2 Increase use of mental health services for | | | Safe Families (SF) 2.1: Increase use of maternal | BIH Goal 1.9.2 All participants receive case management, including regular PHQ-9 screenings. CPSP: Promote the use of regular PHQ-9 screenings among CPSP providers. |

GOAL 1: Families Support and build strong and resilient families

56 LBUSD Early Learning Initiative, 2017

| children and parents | | depression screenings outside of the hospital | |
|--|--|--|--|
| Objective 1.3 Increase use of developmental screenings before the age of three | Milestone 1, Solution: Long Beach Home Visitation Collaborative | | |
| Objective 1.4 Improve parents' and families' understanding of child development | Milestone 1, Solution: Long Beach Home Visitation Collaborative | Safe Schools(SS) 1.1: Increase parent education and parent involvement in schools | BIH 5.3 Elevate community awareness of African-American birth outcomes; BIH 4.4 All BIH participants will report an increase in parenting skills and bonding with their infants and other family members; ECEP: Host a Celebration of the Young Child and Week of the Young Child events; WIC Little By Little: Increase literacy rates in children under 5 years of age in coordination with the City of Long Beach Library Services. |
| Objective 1.5 Increase parents' knowledge of and referrals to appropriate resources | Milestone 1: Enter School Ready to Learn Children should have a healthy start and enter school ready – cognitively, physically, socially and emotionally | SF: All Safe Families workgroup agencies upload and maintain organizationa l information onto the One Degree Website | CLPPP: From July 1, 2017 to June 30, 2018, conduct outreach and educate parents/families, child care givers, ECE staff, and schools, about childhood lead poisoning at 10 health fairs, 5 Long Beach WIC sites, 50 Daycare providers, 20 Head Start sites, and paint stores. MCAH 6.4.4 All case managed families are provided a safe sleep environment for their infant, receive a free crib (if needed), to reduce SIDS; ECEP: Host a Celebration of the Young Child and Week of the Young Child events. HEAL 17: By March 31, 2019, train Hamilton and Grant Elementary School parents and community members to keep their neighborhood clean by utilizing the Go Long Beach mobile app and similar resources. |

| ECE Strategic Plan | ELI | МВК | SAFE | DHHS |
|---|--|--|------|---|
| Objective 2.1 Expand access for infant/toddler and preschool-aged early care and education options | | Milestone 1, Solution: Universal Preschool | | |
| Objective 2.2 Establish universal preschool with a mixed delivery system | | Milestone 1, Solution: Universal Preschool | | ECEP: Close gaps in ECE for all children in Long Beach |
| Objective 2.3 Launch more early childhood education opportunities throughout the city | 1. To increase the number of early learning programs, for children ages birth to age 8, throughout the district. | Milestone 1: Enter School Ready to Learn Children should have a healthy start and enter school ready – cognitively, physically, socially and emotionally | | ECEP: Close gaps in ECE for all children in Long Beach HALB: By September 30, 2019, conduct nutrition education events for at least 300 SNAP-Ed eligible families to increase consumption of healthy foods. Events with young children include developmentally- appropriate learning opportunities and sampling of fresh fruits and vegetables. |

GOAL 2: Access Increase access and affordability of infant through pre-k early care and education services

GOAL 3: Workforce Support the development of a stronger early childhood workforce

| ECE Strategic Plan | ELI | МВК | SAFE | DHHS |
|--|--|-----|------|---|
| Objective 3.1 Generate awareness of the needs and challenges faced in supporting young children and families | | | | ECEP: Develop and host 5-session Parent Leadership Academy with at least 20 parents graduating. |
| Objective 3.2 Increase the professionalization of the early childhood workforce by providing consistent professional development opportunities to ECE Professionals* | Overarching ELI Objective 3: To increase support and professional learning and development for teachers and instructional leaders on early intervening, differentiated instruction, and inclusion. | | | ECEP: Support sustainable professional development for ECE community to increase knowledge around current best practices |
| Objective 3.3 Create a workforce system that provides resources, supports, expectations, & core competencies to ECE professionals, so that they can prepare children for kindergarten | Goal 4: Teachers and instructional leaders will receive evidence-based professional learning and development opportunities to expand their knowledge, skills, and dispositions about early learning, school readiness, and academic achievement. | | | |

GOAL 4: Quality Improve quality of birth through age 8 programs and services

| ECE Strategic Plan | ELI | МВК | SAFE | DHHS |
|--|--|-----|------|------|
| Objective 4.1 Develop a simple, easily understood and easily communicated city-wide standard of quality | Strategy 1.4: Use Desired Results Developmental Profile (DRDP) teacher summaries to track learners' progress and to determine instructional effectiveness. | | | |
| Objective 4.2 Promote high quality programs providing high quality care | | | | |

GOAL 5: Environment Support Opportunities for safe, healthy and accessible environments

| ECE Strategic Plan | ELI | МВК | SAFE | DHHS |
|--|-----|--|---|--|
| Objective 5.1: Facilitate opportunities for young children and their families to engage with trauma- informed service professionals in their communities | | Milestone 6: Safe from violence and provided second chances | SS 2.2: Increase community perception of safety around schools; Safe Communities (SC) Goal 3: Strengthen community and law enforcement relations through increased mutual communication and understanding | ECEP: All children live in physically and mentally healthy homes free of violence and abuse; Best Start: Develop and produce 3 training videos for LBPD and host 4 provider trainings about child abuse and neglect. |
| Objective 5.2 Increase inclusive, safe and accessible spaces within parks in communities with low park acreage | | | SC 1.2: Activate 14th Street Park as a safe place for family and community engagement; SC 1.3: Integrate revitalization efforts into the neighborhood public safety efforts | HEAL 15: By March 31, 2019, activate and/or physically improve the Houghton Park benches and/or similar areas of concern at the park. HEAL 12: By March 31, 2019, 2 monthly Crop Swaps in the HEAL Zone will be maintained; HEAL 16: By March 31, 2019, install permanent fitness loop in the Hamilton Neighborhood. |

GOAL 6: Partnerships Promote partnerships to address access to quality basic needs services

| ECE Strategic Plan | ELI | МВК | SAFE | DHHS |
|---|---|-----|---|--|
| Objective 6.1 Increase formal collaborations between ECE programs and Community Partners working with young children and families | | | SF: Host convening of collaborative networks to integrate into the Safe Families Collaborative | ECEP: Be a leader in establishing Long Beach as a Family Friendly City by 2020. Provide staff support to the LBECE Committee. Unite community partners and stakeholders in supporting our youngest citizens. WIC: Work closely with community partners to promote WIC Program benefits, conduct quarterly outreach activities to increase participant enrollments |
| Objective 6.2 Create more opportunities for parents to participate as partners in settings where decisions about young children and families are made | Goal 3: All families will experience meaningful opportunities to participate and be engaged in their children's educational process. | | SF 2.2: Increase parent empowerment through leadership/capacity building trainings and opportunities; Develop targeted outreach to increase parent engagement in collaboratives, with a focus on father engagement; SS 1.1: Increase parent education and parent involvement in schools | |
| Objective 6.3 Achieve seamless access and transition from programs and services to next tier services* | Goal 2: All children and their families will experience seamless transitions from the early learning continuum to elementary school. | | | |

GOAL 7: Systems Strengthen alignment of existing birth through age 8 governance structure and early childhood support systems

| ECE Strategic Plan | ELI | МВК | SAFE | DHHS |
|--|--|-----|---|------|
| Objective 7.1 Generate awareness among the community, decision- makers, funders, and elected officials, of the importance of ECE | | | | |
| Objective 7.2 Ensure collaboration and data sharing across programs to mprove service delivery | Strategy 1.1: To develop data collection mechanisms that are accurate and useful in identifying the needs, challenges and desired outcomes to reduce special education referrals and track progress toward decreasing suspension, expulsion, and absenteeism rates for early learners. | | SF Goal 1: Increase professional and organizational capacity building through network integration. | |
| Objective 7.3 Build a strong, cohesive early childhood system that s sustainable and supports positive outcomes for all children and families | Strategy 1.1: To develop data collection mechanisms that are accurate and useful in identifying the needs, challenges and desired outcomes to reduce special education referrals and track progress toward decreasing suspension, expulsion, and absenteeism rates for early learners. | | SF Goal 1: Increase professional and organizational capacity building through network integration. | |

Objective 7.4 Regularly monitor plan objectives and activities to ensure accountability

DHHS Program Acronyms

| Acronym | Reference | | |
|---------|---|--|--|
| BIH | Black Infant Health | | |
| CHDP | Child Health and Disability Program | | |
| CLPPP | Childhood Lead Poisoning Prevention Program | | |
| CPSP | Comprehensive Perinatal Services Program | | |
| ECEP | Early Childhood Education Program | | |
| HALB | Healthy Active Long Beach | | |
| HEAL | Healthy Eating Active Living Zone | | |
| MCAH | Maternal Child Adolescent Health | | |
| МСО | Medi-Cal Outreach | | |
| WIC | Women Infant Children | | |



Appendix D: Terms and Definitions

Below, we have identified key terms used throughout this report and provided clear definitions:

ACE: Adverse Childhood Experiences (See Appendix E for more information)

City vs. city: Throughout this plan, the "City of Long Beach" refers to the municipal government administration, whereas the "city" or "Long Beach" refers to the place and residents living within the city limits.

Community Partners: Various agencies (non-profit, educational institutions, local and county government, medical providers, etc.) that come together to work collaboratively on local activities that aligns with their agency's mission and goals. These relationships may be formal (i.e. may have executed Memorandums of Understanding) or informal (ie. attendance at workgroup meetings).

Community Policing: "Community policing emphasizes working with neighborhood residents to coproduce public safety. Law enforcement agencies should, therefore, work with community residents to identify problems and collaborate on implementing solutions that produce meaningful results for the community. Specifically, law enforcement agencies should develop and adopt policies and strategies that reinforce the importance of community engagement in managing public safety. Communities should support a culture and practice of policing that reflects the values of protection and promotion of the dignity of all— especially the most vulnerable, such as children and youth most at risk for crime or violence. Law enforcement agencies should avoid using law enforcement tactics that unnecessarily stigmatize youth and marginalize their participation in schools (where law enforcement officers should have limited involvement in discipline) and communities. In addition, communities need to affirm and recognize the voices of youth in community decision making, facilitate youth participation in research and problem solving, and develop and fund youth leadership training and life skills through positive youth/police collaboration and interactions." ⁵⁷

DHHS: City of Long Beach's Department of Health and Human Services. Long Beach is one of only three city-run health departments in California, allowing for better engagement with its people, neighborhoods, businesses and community partners, and a greater understanding of the city's strengths and needs. With 300 employees located in nine sites throughout the City, the Health Department operates with a \$117 million annual budget, 99% of which comes from Federal, State, County and private funds. This local focus allows the Health Department to coordinate resources from all sources to best meet the needs of the City. ⁵⁸

DHHS' ECEP: The City of Long Beach's Early Childhood Education Program, housed in the Department of Health and Human Services, was established in late 2016 to support early childhood programming in the City, and to support the work of the LBECE Committee.

⁵⁷ President's Taskforce on 21st Century Policing (2015). *Final report on the president's taskforce on 21st century policing*. Washington, DC: Office of Community Oriented Policing Services. ⁵⁸ Long Beach Department of Health and Human services (n.d.). Retrieved on July 2, 2018 from http://www.longbeach.gov/health/

Diverse: Groups comprised of differing ethnicities, race, abilities, gender identification, socio-economic groups, or communities.

DRDP: The Desired Results Developmental Profile; "The DRDP assessment instruments are designed for teachers to observe, document, and reflect on the learning, development, and progress of children, birth through 12 years of age, who are enrolled in early care and education programs and before-and after-school programs. The assessment results are intended to be used by the teacher to plan curriculum for individual children and groups of children and to guide continuous program improvement."⁵⁹

ECE: Early childhood education; this refers enrichment and learning opportunities both formal or informal, home-based or center-based for children 0-8 years old.

ECE Providers: The professionals who work with children in formal (center-based or home-based) ECE locations.

ELI: LBUSD Early Learning Initiative (See Appendix C for more information)

Equity: Equity is when all people are able to achieve their full potential in life, regardless of race, ethnicity or the community in which they live.

FQHC: Federally Qualified Health Center

Inclusion. Spaces where programming or equipment (i.e. parks with equipment developed for children with disabilities, promotional material includes images that reflect the diverse community), where all children and families regardless of identity, abilities or socio-economic status are welcomed and provided opportunities.

Khmer: The Mon-Khmer language of the Khmer people that is the official language of Cambodia.⁶⁰

LBECE Committee: The Long Beach Early Childhood Committee; Established in 2003, the LBECE Committee is partnership comprised of educators, advocates, and caregivers of children who work together to promote high quality early care and education in our community. Members represent local nonprofit organizations, child development centers, preschools, family child care providers, the education community (including the Long Beach Unified School District, Long Beach City College, and California State University, Long Beach), the Long Beach Public Library, philanthropic organizations, faith-based organizations, and the City. This collaborative works to further the early

⁵⁹ Center for Children and Families (n.d.). Retrieved on July 2, 2018 from https://www.desiredresults.us/about-us

⁵⁰ Merriam-Webster Dictionary (n.d.). Retrieved July 2, 2018 from https://www.merriam-webster.com/dictionary/Khmer

care and education of all children in Long Beach by enhancing the quality of services, building capacity to meet the needs of families, and expanding the base of available resources.⁶¹ For more information on the LBECE Committee, please visit: <u>www.lbece.org</u>.

Learning Community: A space where professionals from various sectors come together for continual professional development and staying up to date on best practices.

LGBTQ+: LGBTQ+ is an acronym for Lesbian, Gay, Bisexual, Trans, Queer/Questioning, and others. It refers to a population of people united by having gender identities or sexual orientations that differ from the heterosexual and cisgender majority.⁶²

Medical Home: The term "Medical home" was introduced in 1967. The term includes a partnership approach with families to provide primary health care that is accessible, family-centered coordinated, comprehensive, continuous, compassionate, and culturally effective. The use of the term and major tenets were agreed upon by the American Academy of Family Physicians, the American Academy of Pediatrics, the American College of Physicians, and the American Osteopathic Association.⁶³

NAEYC: National Association for the Education of Young Children

QRIS: Quality Rating and Improvement Strategy; "A QRIS is a systemic approach to assess, improve, and communicate the level of quality in early and school-age care and education programs. Similar to rating systems for restaurants and hotels, QRIS award quality ratings to early and school-age care and education programs that meet a set of defined program standards. By participating in their State's QRIS, early and school-age care providers embark on a path of continuous quality improvement. Even providers that have met the standards of the lowest QRIS levels have achieved a level of quality that is beyond the minimum requirements to operate."⁶⁴

Ready Rosie: "The Ready Rosie program provides a self-directed, digital platform for parents/families to access activities, best practices, and curated content to help engage their children in developmentally-appropriate learning. The program helps: Facilitate and amplify engagement between schools and families; Provide a mechanism by which to empower families to help children build foundational skills so that they are kindergarten-ready, whether or not they are enrolled in preschool."⁶⁵ In 2017, The Mayor's Fund for Education was awarded a grant that supported a pilot of Ready Rosie which granted access to over 2,000 families to the digital platform.

Social & Emotional Development. Social-emotional development includes the child's experience, expression, and management of emotions and the ability to establish positive and rewarding relationships with others.⁶⁶

⁶¹ Long Beach Early Childhood Education Committee. (n.d.). Retrieved on July 2, 2018 from www.lbece.org

⁶² Social Justice and Advocacy (n.d.). Retrieved on July 2, 2018 from https://sja.sdes.ucf.edu/docs/LGBTQ-Terminology.pdf

⁶³ Bruner (May, 2012). Medical homes and young children: State policy opportunities to improve children's healthy development as part of early-childhood systems building

⁶⁴ QRIS Resource Guide (n.d.), Retrieved on July 7, 2018 from https://qrisguide.acf.hhs.gov/index.cfm?do=qrisabout

⁶⁵ http://mayorsfundfored.org/readyrosie/

⁶⁶ Cohen, J., and others. (200)5. Helping young children succeed: Strategies to promote early childhood social and emotional development. Washington, DC; National Conference of State Legislatures and Zero to Three.

http://www.buildinitiative.org/WhatsNew/ViewArticle/tabid/96/ArticleId/396/Helping-Young-Children-Succeed-Strategies-to-Promote-Early-Childhood-Social-and-Emotional-Developmen.aspx

Social Determinants of Health: "Healthy People 2020⁶⁷ defines social determinants of health as conditions in the environments in which people live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Conditions (e.g., social, economic, and physical) in these various environments and settings (e.g., school, church, workplace, and neighborhood) have been referred to as "place." In addition to the more material attributes of "place," the patterns of social engagement and sense of security and well-being are also affected by where people live. *Healthy People 2020* developed a "place-based" organizing framework, reflecting five key areas of SDOH: Economic Stability; Education; Social and Community Context; Health and Health Care; and Neighborhood and Built Environment. Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins." ⁶⁸

Stakeholder: One who is involved in or affected by a course of action. 69

Whole-Child: ECE programming that provides academic enrichment, as well as social-emotional education, and where the social determinants of health are also addressed.

⁶⁷ Office of Disease Prevention and Health Protection (n.d.). Retrieved on July 2, 2018 from https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health

68 Center for Disease Control and Prevention. (n,d.). Retrieved on July 2, 2018 from https://www.cdc.gov/socialdeterminants/faqs/index.htm

59 Merriam Webster Dictionary (n.d.). Retrieved on July 2, 2018 from https://www.merriam-webster.com/dictionary/stakeholder

Appendix E: Additional Information on Models or Programs Introduced in This Plan

Adverse Childhood Experiences

"Adverse childhood experiences (ACEs) are stressful or traumatic events, including abuse and neglect. They may also include household dysfunction such as witnessing domestic violence or growing up with family members who have substance use disorders. ACEs are strongly related to the development and prevalence of a wide range of health problems throughout a person's lifespan, including those associated with substance misuse.

ACEs include:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Physical neglect
- Emotional neglect
- Intimate partner violence
- Mother treated violently
- Substance misuse within household
- Household mental illness
- Parental separation or divorce
- Incarcerated household member"⁷⁰

Toxic levels of stress hormones can cause a child to develop a low threshold for stress, becoming overly reactive to adverse experiences throughout life. They can suppress the body's immune response and leave the child vulnerable to a variety of infections and chronic health problems. They can also damage an area of the brain responsible for learning and memory, leading to learning deficits that can continue into adulthood. For more information on ACEs, please visit: https://www.samhsa.gov/capt/tools-learning-resources/aces-substance-abuse-behavioral-health

Born Learning Campaign

Born Learning equips communities with educational material on child development and materials for an awareness campaign. Resources for families and caregivers provide easy to understand and use information and activities to promote early development, while public awareness tools and templates support outreach to opinion leaders and policymakers. "While there is an abundance of child development information available, it can overwhelm parents, caregivers and community leaders. In response, United Way Worldwide and the Ad Council launched the Born Learning campaign" ⁷¹ which puts easy-to-understand, research-driven resources into the hands of families, caregivers, community leaders and policymakers. For more information, please visit: https://www.bornlearning.org/

⁷⁰ Substance Abuse and Mental health Services Administration (2018, June 28). Retrieved from https://www.samhsa.gov/capt/tools-learning-resources/aces-substance-abuse-behavioral-health ⁷¹ United Way (n.d.). Retrieved on July 2, 2018 from http://www.bornlearning.org/about-us

Five Protective Factors

"What is the Protective Factors Framework? Protective factors are characteristics or strengths of individuals, families, communities or societies that act to mitigate risks and promote positive well-being and healthy development. Most often, we see them as attributes that help families to successfully navigate difficult situations. A protective factors framework is an organized set of strengths-based ideas that are used to guide programs, services, supports and interventions aimed at preventing child maltreatment and promoting healthy outcomes. The Strengthening Families Protective Factors Framework from the Center for the Study of Social Policy distills extensive research in child and family development into a core set of five protective factors that everyone can understand and recognize in their own lives." ⁷² The Five Protective Factors include: social emotional competence of children, knowledge of parenting and child development, social connections, parental resilience and, concrete support in times of need. ⁷³ For more information, visit www.strengtheningfamilies.net.

Help Me Grow Affiliate

Help Me Grow offers cross-sector services and supports to help ensure that children and families have access to appropriate services that meet their needs. Through a collective impact approach that is supported by a national Affiliate Network, Help Me Grow assists affiliates in advancing an extensive and systemic approach to early childhood service delivery. Help Me Grow seeks to make a more efficient use of the affiliate areas existing resources, enhancing relationships across organizations, departments, and programs and coordinating both federal and state agencies across the local early childhood system. "The National Center offers technical assistance to map out the existing landscape of early childhood services, partners, opportunities, initiatives, and funding mechanisms in order to leverage favorable circumstances as well as to anticipate and potentially circumvent challenges to efficacious cross-sector system building." ⁷⁴ For more information, please visit: https://helpmegrownational.org/affiliates/

PLAy: Parent Leadership Academy

PLAy is a 6-week leadership academy held in partnership between DHHS' ECEP and the LBECE Committee. Parents learn about resources in the community available to them and their children. Parents have the chance to network with other parents who are also working to make changes in the community for their children. Participating parents, as a team, engage in small projects that they can complete with the support of the PLAy staff. PLAy provides ongoing opportunities for parent to engage in leadership roles.

Little By Little

Little by Little is an early literacy program offered through WIC sites with the goal that children will be better prepared to enter kindergarten and increase parent engagement in their child's education. Little by Little is currently being offered at one Long Beach WIC location, at St. Mary's WIC location. For more information: <u>http://www.lblreaders.org/default.aspx</u>

⁷⁴ Center for the Study of Social Policy (n.d.). Retrieved on July 2, 2018 from https://www.cssp.org/young-children-their-families/strengtheningfamilies/about/protective-factors-framework

⁷² Center for the Study of Social Policy (n.d.). Retrieved on July 2, 2018 from https://www.cssp.org/young-children-their-families/strengtheningfamilies/about

⁷³Center for the Study of Social Policy (n.d.). Retrieved on July 2, 2018 from https://www.cssp.org/young-children-their-families/strengtheningfamilies/about/protective-factors-framework
⁷⁴Center for the Study of Social Policy (n.d.). Retrieved on July 2, 2018 from https://www.cssp.org/young-children-their-families/strengtheningfamilies/about/protective-factors-framework

My Teaching Partner and Classroom Assessment Scoring System

My Teaching Partner provides classroom supports that provide not only professional development, but also specific, targeted feedback to child care and pre-school teachers. This feedback will support the development of strong language and communication skills from birth, by improving the language development and behavioral interaction skills of early educators.

Using the Classroom Assessment Scoring System (CLASS), an evidence-based measure of the quality of behavioral interactions among the teachers and students, the City can assist teachers in identifying specific behaviors to adapt or improve in classroom interactions that are known to impact children's learning.

CLASS pre- and post-assessments of teachers and assistants. These assessments will measure practices in the following CLASS dimensions:

- Sensitivity
- Regard for student perspectives
- Positive social-emotional climate
- Behavior management

Studies of professional development interventions that provided significant coaching components with the goal of "grafting" evidencebased practices into existing teaching practices showed significant impacts on quality enhancement. ⁷⁵

One Degree

One Degree is an online platform that allow people to search for resources based on topic area, eligibility, geographic location, and preferred language. To ensure a robust resource bank, it is essential that all of the agencies who provide services in Long Beach upload and maintain their listing on One Degree. Printed resource guides are a temporary solution to a larger issue of real time access to resources in the city. An online resource platform allows for providers and community residents to find resources specific to their individual needs that are current and updated far more often than printed resource guides. For more information, please visit https://www.1degree.org/la

Ready Rosie

An online platform that provides accessible videos via text messages and emails, to demonstrate developmentally appropriate activities to engage with young children in everyday settings. The goals are to 1) Build capacity and confidence in families through Modeled Moment Videos and Family Workshops, 2) Provide teachers with ready-made communication tools and online or live professional learning, and 3) connect child outcomes to family engagement through meaningful data tracking. Ready Rosie is currently available in Long Beach through local libraries, LBUSD Child Development Centers, and a select number of Private Center-based early learning locations. For more information, please visit: https://www.readyrosie.com

⁷⁵ Landry, S.H., Anthony J.L., Swank, P.R., & Monseque-Bailey, P. (2009). Effectiveness of Comprehensive Professional Development for Teachers of At-Risk Pre-schoolers. Journal of Educational Psychology, 101, 448-465.

Appendix F: List of Known Collaboratives and Their Focus Area

Below is a list of the known coalitions, collaborations and workgroups that have a focus in Long Beach.

| Name of Coalition, Collaborative or Workgroup | Туре | Focus Area |
|--|-------------|--|
| All Children Thrive | Initiative | Families & Children 0-5 |
| Best Start Central Long Beach | Partnership | Families & Children 0-5, Child Abuse Prevention & Parent Resiliency |
| Breastfeeding Collaborative | Network | Families & Children 0-5 |
| Cambodian Advocacy Coalition | Network | Community |
| Campaign for Grade Level Reading | Workgroup | Families, Education & Children 0-8 |
| Coalition for a Healthy North Long Beach | Workgroup | Families & Health |
| End Abuse Long Beach | Network | Professional Development, Mental Health, & Violence Prevention |
| Father Friendly Initiative | Initiative | Families, Children 0-5, Fathers |
| Help Me Grow (First 5LA) | Initiative | Families & Children 0-5 |
| Home Visitation Collaborative | Workgroup | Professional Development, Families, Children 0-5, Child Abuse Prevention, & Parent Resiliency |
| Human Relations Commission | Commission | Violence Prevention & Resiliency |
| Human Trafficking Taskforce | Workgroup | Violence Prevention & Resiliency |
| Interfaith Council | Network | Faith Community |
| Long Beach Alliance Food and Fitness | Workgroup | Families & Health |
| Long Beach Alliance for Children with Asthma | Network | Families & Health |
| Long Beach Child Abuse Neglect Network | Workgroup | Child Abuse Prevention, Professional Development, Families, Children 0-5 & Parent resiliency |

| Long Beach Commission on You | uth and Families | Commission | |
|---|------------------|------------|--|
| | | Commission | Families & Health |
| Long Beach Early Childhood Ed Committee | lucation | Workgroup | Professional Development, Families, Children 0-5, Education & Parent resiliency |
| Long Beach Ministers' Alliance | | Network | Faith Community |
| Long Beach Residents Empowe | ered (LIBRE) | Network | Community |
| Long Beach Trauma Informed T | askforce | Workgroup | Violence Prevention & Resiliency |
| Memorial Medical Center Comm Oversight Committee | nunity Benefits | Workgroup | Health |
| Safe Long Beach (Violence prev subgroups: Safe Communities, s and Safe Schools) | | Workgroup | Families, Children 0-5, Mental Health & Violence Prevention, Community |
| St. Mary Medical Center Commo Advisory Committee | unity Benefits | Workgroup | Health |
| Viva Homeschool Co-Op | | Network | Education |
| Women's Advisory Group- LBPI | D | Network | Violence Prevention & Resiliency |
| Youth Services Network | | Workgroup | Transitional Aged Youth |



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Photography by (not in order of appearance) Amanda Proudfit, Brenda Muñoz, Catherine Desmond Photography, Carina Montes, City of Long Beach Staff, Little Models LA, and Shannon Pace. All children featured in this Plan are children who live, learn, or play in Long Beach. Cover: Anthony Lozano, a student at a local ECE Center in Long Beach



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