



Center for Transforming Lives Child Development Programs: Child Outcomes Report for the 2017-2018 Academic Year

Organizational Overview

For more than 100 years, the Center for Transforming Lives (CTL) has given women and their families the tools they need to move out of poverty and into independence. Founded in 1907 as the YWCA® of Fort Worth and Tarrant County, early programs included housing, an employment bureau, and child care for working mothers beginning in the 1930s. In 2015, the organization changed its name to the Center for Transforming Lives to more clearly articulate its longstanding mission. Today, we help women, children, and families on the path out of poverty and into self-sufficiency by providing safe and affordable independent housing, early childhood education, and financial empowerment services, including one-on-one financial coaching, matched savings, and job training and placement. With its two-generation approach, the organization is uniquely positioned to meet the intensive and complex needs of women and children in poverty.

Child Development Program Overview

The primary goal of CTL's Child Development Program is to increase the school readiness of young children. The first 5 years of a child's life marks a critical period of brain development. Beginning at birth, a child's brain takes in an abundance of information and immediately begins using it to develop the cognitive, physical, linguistic, and social-emotional abilities she will need to grow and thrive throughout her lifetime. Young children need nurturing, low-stress environments filled with language, learning, physical activity, and positive social interactions. Parents and families are the first source for children to receive the care they need. However, with approximately 70% of children under the age of 6 in Tarrant County living in single parent or dual-earner households¹, our community also needs child care environments to be strong sources of support in order for parents to work and children to succeed. Moreover, providing high quality, affordable child care and

¹ U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

early childhood education for impoverished children and their families makes good economic sense².

CTL has an 87-year history of fostering healthy growth and development for children ages 6 weeks to 5 years through positive relationship-building, literacy-rich early education, and daily access to healthy foods and physical activity. Recognizing the transformational impact that high-quality child care has in the lives of impoverished children³, our Child Development Programs are designed for children in working poor and homeless families. Because cost is a significant barrier, private and public child-care subsidies cover full tuition for homeless children and partial tuition for low-income children based on ability to pay.

Our three centers, located in downtown Fort Worth, the high-poverty community of Polytechnic Heights in southeast Fort Worth, and in central Arlington on the campus of the University of Texas at Arlington, have a combined daily capacity to serve 239 children from infancy through pre-kindergarten. In the August 1, 2017-May 31, 2018 academic school year, CTL provided early education and care for 311 children.

In March 2015, CTL was selected to receive a federal Early Head Start-Child Care Partnership (EHS-CCP) grant, which funds services for 72 homeless and low-income children ages 0-36 months and their families, including pediatric health, mental health, nutrition supports, and intensive case management provided by 3 full-time Family Advocates (i.e., family service workers). Furthermore, we are able to offer parent education, family engagement activities, and resource referrals to help parents promote their children's healthy development and literacy outside of the classroom. This past year, 100% of the Early Head Start (EHS) children were from low-income families, including 46% who were homeless.

In 2017, CTL was awarded an expansion grant to expand the EHS-CCP grant, serving children and families in three additional locations. As a result, CTL is now partnering with Allstars Learning Center in Arlington and Fort Worth as well as Wee Can Academy. This expands our capacity by an additional 72 children.

² Bartik, T. J. (2006). "Taking Preschool Education Seriously as an Economic Development Program: Effects on Jobs and Earnings of State Residents Compared to Traditional Economic Development Programs." Report prepared for the Committee for Economic Development. <http://research.upjohn.org/reports/40>

³ Li, W., Farkas, G., Duncan, G. J., Burchinal, M. R., & Vandell, D. L. (2013). Timing of high-quality child care and cognitive, language, and preacademic development. *Developmental Psychology*, 49(8), 1440-1451

Program Goals and Strategies

Our Child Development Programs serve a dual purpose. First, our award-winning, evidence-based early childhood education curriculum and dedicated teachers help children develop the social-emotional, cognitive, physical, and language skills they need for school readiness. Research shows that 85% of a child's brain is developed within the first 3 years of life⁴. For children experiencing poverty and homelessness, a lack of consistent, focused care and engagement in early learning activities can delay development, putting them years behind their more economically advantaged peers even before the first day of kindergarten⁵.

To help close the gap, CTL's three Child Development Centers offer nurturing care, positive relationships, and literacy-rich learning environments for impoverished children as young as 6 weeks old through pre-kindergarten graduation. All classrooms are child-centered, with plenty of one-on-one attention and support given to each child; frequent group activities to strengthen social skills and build community; books, toys, and other learning materials organized on small-scale shelving for children's easy access to ignite a love of learning; and daily, healthy meals (breakfast, lunch, and an afternoon snack) and outdoor time to fuel children's physical growth and development.

CTL's teachers structure classroom daily lesson plans using the e-based Frog Street curriculum (Infant, Toddler, and Pre-K) – designed to provide intentional learning opportunities on a developmentally appropriate continuum. Lessons are individualized using this curriculum to address any specific strengths or weaknesses observed in a child's abilities or skills.

Second, as part of our dual-generation approach to poverty reduction, our Child Development Programs are offered year-round, Monday through Friday, from 6:30am to 6:00pm to give parents the time and support they need to find and maintain work or further their education to strengthen their families' financial stability and well-being.

In addition to Child Development, our integrated services, which include Housing and Financial Empowerment are designed to help the whole family become sustainably independent. All parents and guardians have access to free one-on-one financial coaching to begin developing the skills they need to become financially stable and improve the family's economic well-being. In addition, we also offer Rapid Re-Housing, which is designed to quickly move families out of emergency shelters and into their own homes, providing safety and stability.

Program leadership is provided by the Director of Child and Family Services, with day-to-day management at each site provided by three Center Directors. Across the centers' 19 classrooms, 49 teachers guide, teach, feed, nurture, and care for the children and commit themselves to the children's healthy development. Through partnership with the Arlington Independent School District, two pre-Kindergarten classrooms for 3- and for 4-year-olds at our Arlington Child Development Center are led by a full-time teacher certified by the Texas Education Agency. Our

⁴ Lally, J. (2013). *For Our Babies: Ending the Invisible Neglect of America's Infants*. Teachers College Press

⁵ Hart, B., & Risley, T. R. (1995). *Meaningful differences in the everyday experience of young American children*. Baltimore, MD: Paul H. Brookes Publishing Company

partnerships with Allstars Arlington and Fort Worth, as well as Wee Can Academy add an additional 8 classrooms and 18 teachers.

Evaluation

CTL uses Teaching Strategies GOLD® – an evidence-based, online assessment system for measuring children's learning and developmental progress. It has the capacity to measure progress and early childhood outcomes for children from 6 weeks to 6 years of age. Specifically, it is able to assess the following developmental domains:

- Social-Emotional
- Physical Development
- Language
- Cognitive Development
- Literacy
- Mathematics

The assessments are based on teachers' daily observations of each child's knowledge and capabilities, and feedback from parents' observations of their children's skills and abilities. Teachers then identify individualized goals and strategies to help each child reach milestones, and provide specific data, tools, and resources to their families to work collectively toward the child's school readiness.

CTL also tracks and analyzes children's attendance. Regular attendance is necessary to receive the full benefits of early childhood education and is a major indicator of children's future success at school⁶. CTL's desired measurable outcome is a monthly average daily attendance rate of 85% or higher, which aligns with EHS guidelines and expectations. The data is also used by our Family Advocates to identify and engage families who need individualized support to overcome obstacles to maintaining regular attendance.

Family Advocates also use CTL's Transforming Lives Scale with EHS-CCP families⁷ to help identify the specific barriers they face to achieving self-sufficiency and develop action plans with measurable steps to remove the obstacles and achieve targeted outcomes.

Methodology

The evaluation process of the children and families in the CTL's Child Development Centers includes three main components: 1) Teaching Strategies GOLD®, 2) attendance, and 3) the Transforming Lives Scale.

Teaching Strategies GOLD® measures children ages 0-5 years across 36 objectives organized into six domains: 1) social-emotional development, 2) physical development, 3) language

⁶ Romero, M., & Lee, Y. (2007). *A National Portrait of Chronic Absenteeism in the Early Grades*. New York, NY: The National Center for Children in Poverty

⁷ EHS-CCP students and families are the most vulnerable in our population. Therefore, the Transforming Lives Scale is only used with them.

development, 4) cognitive development, 5) literacy, and 6) mathematics. Each domain has several objectives. For example, the domain social-emotional development has the objective, “regulates own emotions and behaviors.”

Children are observed in the context of their everyday experiences and teachers document how these observations relate to objectives.

Teachers review the data on a regular basis to track learning progression, prevent gaps, and respond to developmental and learning delays as early as possible. New students are assessed after they have been in the program for 10 days and progress checkpoints occur every 4 months. Program leadership reviews and analyzes all aggregated data at four checkpoints during the year (August/October/January/May) and work with teachers to adjust the curriculum based on the needs of the students.

Furthermore, as part of the evaluation of our two-generation approach, CTL uses the Transforming Lives Scale – an instrument designed to measure family’s progress on their journey from poverty to independence. This scale is completed with families who have children enrolled in our EHS-CCP program. A Family Advocate works with each family to complete the scale, which measures 15 domains: transportation, access to child care, housing wage, education, grit/self-efficacy, assets, income, employment, mental health, physical health, legal, life skills, substance abuse, safe relationships, and natural supports. Family Advocates complete the initial scale with the family approximately 1 week after program admission. The scale is then completed every 4 months until program completion or exit.

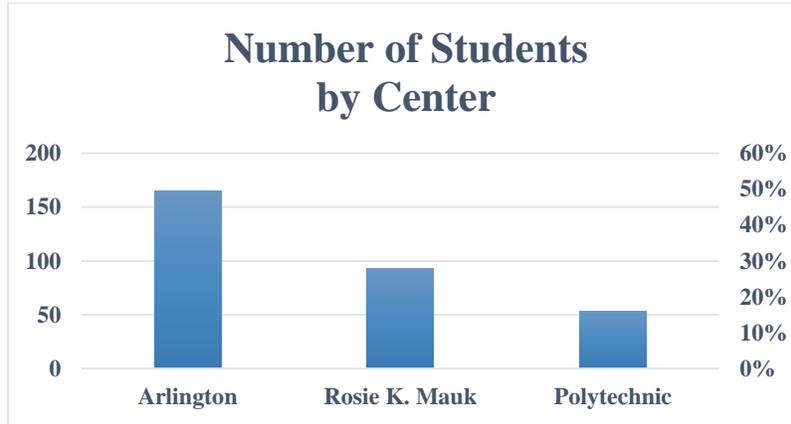
The GOLD® assessment was administered to all children enrolled during the 2017-2018 school year (August 1, 2017- May 31, 2018). As the GOLD® assessment is used to indicate which children are on-level for their age/grade, only children with complete assessments in the Spring of 2018 were included in the results reported today.

Additional data (including average attendance, length of stay, and Transforming Lives Scale results) is analyzed for children who were continuously enrolled for a minimum of a 6 month period.

Results

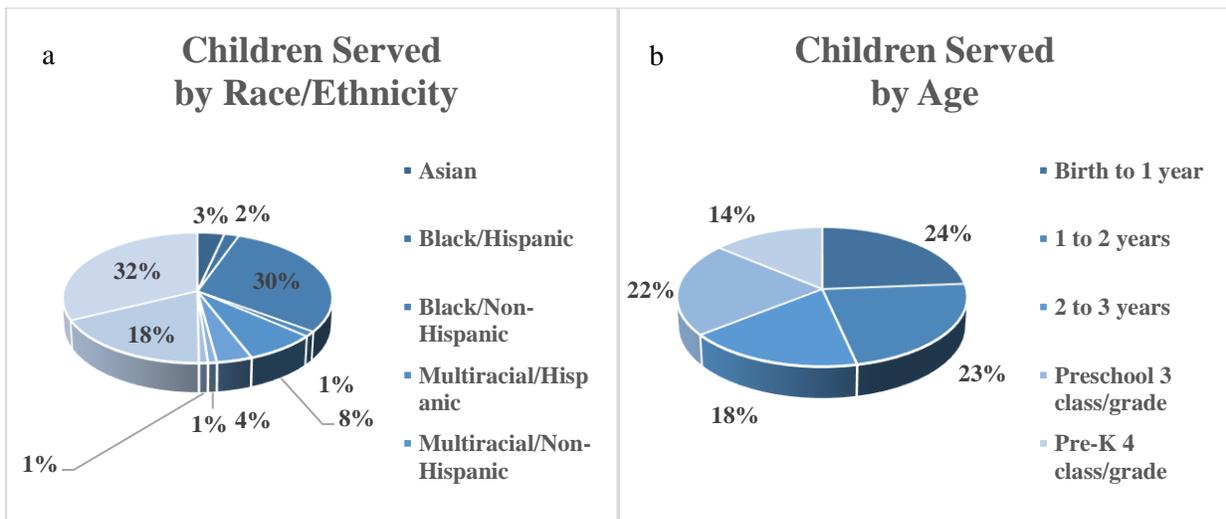
The total number of children served across all three centers⁸ from August to May of the 2017-2018 school year was 311 children (Figure 1).

Figure 1



Approximately half of the students were white, with a quarter of all students being of Hispanic ethnicity (Figure 1a). The percentage of children in each age group was fairly evenly distributed with slightly fewer older children and slight more young children, which is to be expected (Figure 1b).

Figure 2



To determine if the students were properly prepared, the percentages of students meeting or exceeding expectations on the Teaching Strategies GOLD® assessments were calculated. Overall, the vast majority, 90% or more, of the students *met* or *exceeded* goals on the Teaching

⁸ As they are new partners, Allstars Arlington, Allstars Fort Worth, and Wee Can Academy were not included in this year’s calculations, but will be included in the 2018-2019 outcomes.

Strategies GOLD® assessments in five out of the six categories (see Table 1 for detailed results). For example, as of May 31, 2018 (the date of the final checkpoint for the 2017-2018 academic year), of children age 0-1, 92% met or exceeded the widely held expectations for the physical development domain and 94% met or exceeded the widely held expectation for the language development domain.

Table 1

Percentage of all children who met or exceeded the widely held expectations in Teaching Strategies GOLD® at the end-of-year checkpoint, by domain and age group (N≈204)						
	<i>Social-emotional</i>	<i>Physical</i>	<i>Language</i>	<i>Cognitive</i>	<i>Literacy</i>	<i>Mathematics</i>
0-1 year	94%	92%	94%	94%	100%	100%
1-2 years	100%	75%	84%	100%	98%	98%
2-3 years	95%	95%	89%	97%	95%	92%
PreK 3	84%	84%	84%	86%	88%	86%
PreK 4	94%	97%	100%	97%	100%	100%
All Ages	93%	88%	90%	95%	96%	95%

Children Enrolled in Our Early Head Start-Child Care Partnership Program

Children ages 0-3 enrolled in our EHS-CCP program represent the most vulnerable population our child development centers serve. Table 2 below provides the developmental and learning outcomes of our children in our EHS-CCP classes. Notably, literacy was one of the domains in which the highest percentages of children in EHS-CCP classes *met* or *exceeded* widely held expectations at each of the three centers.

Table 2

Percentage of children in our EHS-CCP program who met or exceeded the widely held expectations in Teaching Strategies GOLD® at the end-of-year checkpoint, by domain and center (N≈56)						
	<i>Social-emotional</i>	<i>Physical</i>	<i>Language</i>	<i>Cognitive</i>	<i>Literacy</i>	<i>Mathematics</i>
ARL	100%	100%	93%	100%	100%	100%
RKM	97%	100%	93%	97%	100%	90%
POLY	75%	58%	67%	75%	75%	75%
All Centers	93%	91%	88%	93%	95%	89%

Kindergarten Readiness of “Graduating” Children

Teaching Strategies GOLD® is used to measure the school readiness of children who were age-eligible to graduate from our centers into kindergarten. One-hundred percent of age-eligible children *met* or *exceeded* the school readiness standard in four out of the six domains, with 95% or more *meeting* or *exceeding* the goal in the other two domains (Table 3).

Table 3

Children who were age appropriate for kindergarten (PreK 4/5) who met or exceeded the GOLD® school readiness standard at the end-of-year checkpoint, by domain (N=21)					
<i>Social-emotional</i>	<i>Physical</i>	<i>Language</i>	<i>Cognitive</i>	<i>Literacy</i>	<i>Mathematics</i>
95%	96%	100%	100%	100%	100%

Attendance

Regarding program attendance, children in at the Arlington Child Development Center met or exceeded the desired 85% average daily attendance goal in 7 out of the 10 months between August 2017 and May 2018. The Polytechnic Child Development Center and Rosie K. Mauk Child Development Center met or exceeded the attendance goal for 2 and 3 of the 10 months, respectively⁹.

Length of Stay

Recognizing the importance of children receiving continuous high-quality early childhood education and care over time, CTL’s goal is that more than 50% of all children in our child development centers will achieve a length of stay (i.e., enrollment) of 6 months or more. Each of our three centers exceeded the length of stay goal (Table 4). Across all centers, more than 80% of children in the EHS- CCP program and overall were consistently enrolled for at least 6 months.

Table 4

Number and percentage of children who were continuously enrolled 6 months or more, by center				
	<i>Arlington</i>	<i>Rosie K. Mauk</i>	<i>Polytechnic</i>	<i>Total</i>
EHS-CCP	30 (81%)	28 (85%)	37 (79%)	95 (81%)
All	125 (76%)	72 (77%)	40 (75%)	237 (76%)

Families of Children Enrolled in Our Early Head Start-Child Care Partnership Program

Knowing that there is no effective educational solution for children in poverty that does not include solutions for parents and families, CTL intentionally increased its depth of family services and advocacy in the 2017-2018 academic year and measured the impact of our efforts using our Transforming Lives Scale. For the families of children in our EHS-CCP program, the improvement reported for the various domains included the following:

- In our Arlington Center, 62% of families in the analyses reported improvement in the natural supports domain; 52% of families reported improvement in the employment

⁹ Note that December and March tend to be lower attendance months due to winter holidays and Spring Break.

stability domain; and 48% of families reported improvement in the physical health domain.

- In our Rosie K. Mauk Center in downtown Fort Worth, 52% of families reported improvement in the housing wage domain; 52% of families reported improvement in the assets domain; and 38% of families reported improvement in the employment stability domain.
- In our Polytechnic Center in southeast Fort Worth, 63% of families reported improvement in the child care domain; 56% reported improvement in the physical health domain; and 52% report improvement in the transportation domain and in the grit domain.

Furthermore, familial stability is indicated when children have a medical home, a primary care physician or medical group to which the child is assigned. Nearly all of the children in the EHS-CCP program were enrolled in a medical home, with 97% in the Arlington Center, 94% in the Rosie K. Mauk Center, and 96% in the Polytechnic Center.

Recommendations and Actions Based on Findings

Success in early literacy is indicative of later literacy achievement. What children learn early in their education makes success possible throughout their school career¹⁰. An abundance of research suggests that young children who perform well in assessments of literacy, language, and social-emotional development continue to do well into high school. The Texas School Ready! Project emphasizes developmentally appropriate assessments and on-going child progress monitoring in these domains and has found that thousands of disadvantaged children across the state have demonstrated substantial strides toward the goal of school readiness¹¹. We are delighted to see consistently high percentages of children in our centers *meeting* or *exceeding* these goals year-after-year.

In order to further improve instruction and outcomes, we have identified three areas of focus for the 2018-2019 academic year.

Firstly, we are focused on improving attendance. Regular attendance is necessary to receive the full benefits of early childhood education and is a major indicator of a child's future success in school¹². Our goal is a monthly average daily attendance rate of 85% or higher. We will work diligently to improve this outcome for the 2018-2019 school year. Understanding that December and March are both low attendance months due to the holiday season and Spring Break, our goal is to achieve an 85% attendance rate for the remaining months. While the Arlington Center came very close to achieving this goal, the Polytechnic and Rosie K. Mauk Centers have more work to do.

Family Advocates will continue to work with our EHS-CCP families to ensure that their attendance improves. Two primary obstacles that we have observed are lack of reliable transportation and a view of the CDCs by some parents as more child care than child development/education. To address the lack of reliable transportation at the Polytechnic and Rosie K. Mauk Centers, we will continue to provide transportation from the shelters for any students residing there. Additionally, we have budgeted to provide funding for public transportation to those families who struggle to afford it.

Moreover, some of our parents appear to view the program as child care, rather than the high-quality early education that it is. This results in these parents bringing the child less regularly. Family Advocates, center staff, and the Policy Council will continue to work with families to explain to them the importance of regular attendance in helping their child succeed.

¹⁰ Melhuish, E.C., Phan, M. B., Sylva, K., Sammons, P., Siraj-Blatchford, I., & Taggart, B. (2008). Effects of the home learning environment and preschool center experience upon literacy and numeracy development in early primary school. *Journal of Social Issues, 64*, 95-114

¹¹ Early, D. M., Maxwell, K. L., Burchinal, M., Bender, R. H., Ebanks, C., ... Zill, N. (2007). Teachers' education, classroom quality, and young children's academic skills: Results from seven studies of preschool programs. *Child Development, 78*(2), 558-580

¹² Bakken, L., Brown, N., & Downing, B. (2017). Early childhood education: The long-term benefits. *Journal of Research in Childhood Education, 31*(2), 255-269

In addition to the short-term strategies mentioned above, part of our long-term solution will involve surveying the parents to get a more complete picture than unstructured interactions can provide. We anticipate some differences between the centers. For example, while the City of Fort Worth has a bus system, the City of Arlington does not.

Next, the results of the GOLD® assessment indicate that nearly all of the EHS-CCP students at the Arlington and Rosie K. Mauk Centers are learning the grade-level material that will make them successful as they move forward. We will strive to continue this success. While the vast majority of the students at the Polytechnic Center are also *meeting* or *exceeding* these same goals (75% for most dimensions), there is room for improvement to ensure that all of our children have the best opportunity to succeed when they leave us.

As such, we have recently added a new position to our team, an Education Coordinator/Coach. This individual is regularly on-site to mentor and assist the teachers in best practices for the GOLD® assessment and the data that it provides about each child's individual strengths and weaknesses. They will be providing detailed training to ensure that all teachers are comfortable and accurate when assessing the students and when using their data to identify areas for additional instruction. Additionally, after the initial training, a national GOLD® trainer will be on-site to delve further into the capabilities of this system.

Finally, recent partnerships with Allstars Arlington and Fort Worth as well as Wee Can Academy, have offered a tremendous opportunity to expand the number of children that we are able to impact. These also offer the opportunity to share with our partners the lessons that we have learned over the years and ensure that our community is full of wonderful child education options. To that end, we have worked closely with all of our partners from the start to provide regular mentoring from classroom setup and management to budgeting and maintenance. As partners, we also include them on many of the trainings that we offer to CTL staff, including the GOLD® training mentioned above.

In sum, in the 2017-2018 school year, CTL has had a positive impact on the lives of over 300 children with its Child Development Program. As a result of our programs, nearly all of these children are physically, emotionally, and cognitively prepared for what lies ahead. Over the coming year, with our new partnerships and our ever-present drive to improve the quality of care that we deliver to our students, CTL expects to serve nearly 400 children with even more outstanding programming. This is expected to lead to higher scores and, more importantly, even more children who are adequately prepared for Kindergarten...and life.