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Purpose & Methodology

Purpose

The Linn County Early Childhood Needs Assessment will provide an overview of the condition of families, with a focus on prenatal through age five. The Community Plan will identify the populations most at-risk and the strategies that can impact outcomes for children under age six and their families.

According to the Harvard Center on the Developing Child, early experiences shape developing brain architecture which provides the foundation for future learning, behavior, and health. Research indicates that 85% of brain development occurs before age five. Positively influencing a child’s development during these formative years has a life-long impact. However, only 14% of money for public education is invested into these early years.

Not every child receives the same opportunities for a healthy beginning. Limited parenting skills, the stress of single-parent household or financial instability may impact a parent’s ability to focus on a child’s development. By age two, low income children are already behind their peers in listening, counting, and other skills essential to literacy. This will impact the child’s ability to enter kindergarten on level with their peers and kindergarten can be a predictor for life-long reading achievement. In fact, 88% of children having difficulty learning to read in kindergarten will still have trouble in third grade.

Access to assistance and supports in the form of quality child care, healthy learning environments, skill building, and financial assistance helps to level the field. Dr. James Heckman, a Nobel laureate in economics, has stated that early childhood development directly influences economic, health, and social outcomes for individuals and society. One study showed that every dollar invested in a high-quality early childhood program yielded a $13 return on investment in individual and societal benefits.

Use of the Assessment & Plan

The Assessment and Plan are organized around the core early childhood services of Early Care, Health, and Family Support. Each section begins with a snapshot of core service data in Linn County and a summary of strengths and challenges. The team identified a community priority, strategies, and preliminary action steps at the end of each section to guide community conversation. No one resource in our community can address all of these issues. The assessment and plan are provided for all stakeholders to use and help identify which priority they can impact.

Methodology

Needs Assessment: Staff from Linn County Early Childhood Iowa (ECI) and United Way of East Central Iowa (UWECI) combined their resources to complete a comprehensive early childhood needs assessment.
and community plan. The assessment was completed by utilizing more than 90 unique sources, including national, state, and local data sources. The team identified demographic and indicator data and reviewed numerous early childhood assessments as well as complementary social and economic profiles of Linn County.

**Partners:** This research was complemented by 13 focus groups conducted by Linn County ECI in 2017-19. Input was gained from expert panel presentations from 17 entities, which are listed in the Appendix. To capture additional local input the team developed two surveys: one for parents and one for child care providers. Each survey was made available electronically and open to responses for 4 weeks. The Parent Survey was translated into French, Swahili, and Spanish. *(Survey results in Appendix.)*

An equity lens is essential. Our review of the data includes a focus on identification of groups of people and/or particular geographies that are at risk for poor outcomes. The assessment will highlight areas where stakeholders may have greater impact on outcomes for children under age six and their families.

**Fiscal Assessment:** Assessments from prior years were reviewed by ECI and UWECI and updated to create a new format to capture local, state, and federal resources. Linn County ECI provided insight on which programs still existed, were still relevant, and which new programs needed to be included.

UWECI then requested information regarding funding and the number of clients served from community partners which included government agencies at the county and state level as well as local nonprofit groups. The assessment outline was paired with a message explaining the importance of obtaining this information and gratitude for their assistance.

Information for some programs is only available at the regional level. The numbers are provided on an aggregate basis and those programs are noted with superscripts 1-4 on the fiscal assessment. For a majority of programs, the most recent data available is from fiscal year 2018. This is the basis for our reporting, however fiscal year 2019 data was used in the few instances where it was provided.

**Community Plan:** The Assessment identified early childhood strengths and challenges in Linn County. This allowed the Linn County ECI and UWECI team to develop the Community Plan which identified a community priority per core service of Early Care, Health and Family Support.

Through a collaborative process the team and Linn County ECI Board also identified strategies to impact the priorities and recommended a preliminary list of action steps. The action steps are not exhaustive but allow for the immediate capture of ideas raised at our collaborative sessions and perhaps spark ideas for stakeholders on actions they can take.

The Linn County ECI Board and United Way of East Central Iowa use the data to prepare strategic plans to guide their funding and advocacy focus. The Linn County community is likewise invited to view the Assessment and Community Plan to identify their role and collaborate with us on solutions.

*Presented by Chris Kivett-Berry, Linn County Early Childhood Iowa, and Leslie Wright and Ryan Schweitzer, United Way of East Central Iowa. Adopted by the Linn County Early Childhood Iowa Board on 10.22.19.*
Introduction to Linn County

GEOGRAPHIC
Linn County is located in East Central Iowa and is principally bordered by Benton, Jones, and Johnson counties but it does touch parts of Buchanan, Cedar, and Delaware counties. Incorporated cities are Alburnett, Bertram, Cedar Rapids, Center Point, Central City, Coggon, Ely, Fairfax, Hiawatha, Lisbon, Marion, Mount Vernon, Palo, Prairieburg, Robins, Springville, Walker, and Walford (which is also partially in Benton County). Cedar Rapids is the most populated city with over 130,000 residents and Prairieburg is the least populated city with under 200 residents.

- 81% percent of Linn County residents live in the Cedar Rapids, Marion, Robins, Hiawatha metro area.

Within Linn County, conditions vary within towns and neighborhoods. UWECI prepared profiles of key communities and neighborhoods within Linn County. The data indicates the more urban neighborhoods such as Taylor, the southwest side of Cedar Rapids, and Oakhill Jackson show greater vulnerability based on socioeconomic status, household composition, language, housing, and transportation. Some small rural communities also demonstrate vulnerability, such as Bertram, which is often compounded by the limited availability of services and supports.

POPULATION

Demographics

<table>
<thead>
<tr>
<th></th>
<th>Linn County 2010</th>
<th>Linn County 2017</th>
<th>Iowa 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population</td>
<td>211,226¹</td>
<td>220,008²</td>
<td>3,118,102²</td>
</tr>
<tr>
<td>Non-White population</td>
<td>19,342¹</td>
<td>24,542²</td>
<td>293,905²</td>
</tr>
<tr>
<td>Children &lt; age 6</td>
<td>17,071³, 8%</td>
<td>16,910³, 8%</td>
<td>237,176³</td>
</tr>
</tbody>
</table>

2. U.S. Census Bureau. American Community Survey 5-Year Estimate, (2017) Table DP05

Linn County is the second most populous county in Iowa after Polk and followed by Scott and Johnson counties. Linn County is growing faster than the state and all neighboring counties with the exception of Johnson. Data indicates that future growth will come from two distinctly different population groups: white residents over 60 and the non-white residents under age 18.

Diversity
The Demographic Statistical Atlas of the United States estimates that in the state of Iowa, while 94% of the population over 55 is white, more than 22% of the population under age five is non-white. This shift will continue into the future and is already reflected in the demographics of our more urban school districts.

- From 2013 to 2017 the Black population ages 0-18 grew by 11% while the white population in the same age group declined by just over 3%.
- Linn County has a growing population from the Congo whose primary language is Swahili.
In 2012 the Child and Family Policy Center published a baseline report as part of their statewide Early Childhood Needs Assessment. This assessment for Linn County confirms two critical population trends identified in that report:

1. Iowa is becoming more diverse.
2. Iowa children are the leading edge of that trend.

**Economics**

The National Center for Children in Poverty reported that the level of income families typically require to make ends meet is nearly twice the federal poverty thresholds. Overall, Linn County has shown good growth in median household income and a reduction in the percentage of households under 250% of poverty. However, significant disparities in income growth persist for Black and female headed households. Median incomes for these households are below $40,000, while median incomes for white and married households are above $60,000.

- U.S. Census data estimate 3,411 children under the age of six live in households with income less than 145% of poverty in Linn County. This is approximately 20% of children in that age range.
- 77% of Linn County families with children under age six have all/only parent in the work force.

Seventy four percent (74%) of households own their own home in Linn County. The percentage of non-white households that own their own home is less than 30% which may be a reflection of household type and income disparities. Those who rent tend to be non-white, younger, and lower income. Renting may add to a household’s vulnerability particularly when children are present.

**Families**

There are 47,807 families in Linn County with own children under age 18. Almost one third (32%) of those families have at least one child under the age of six. To drill down further, one quarter (25%) of families with a child under age six are headed by a single parent, which is comparable to state data. (See table below). Of those families, 35% are led by a single male and 65% are led by a single female. Research suggests that the majority (70%) of single female headed households are financially unstable.

### Family Well Being

<table>
<thead>
<tr>
<th></th>
<th>Linn County 2010</th>
<th>Linn County 2017</th>
<th>Iowa 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Economy</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Median household income $^1$</td>
<td>$53,674</td>
<td>$62,702</td>
<td>$56,570</td>
</tr>
<tr>
<td>Families below poverty level with child &lt; age 5 $^1$</td>
<td>14%</td>
<td>10%</td>
<td>14%</td>
</tr>
<tr>
<td><strong>School Success</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th graders proficient in reading $^2$</td>
<td>81%</td>
<td>75%</td>
<td>75.3%</td>
</tr>
<tr>
<td>High school graduation $^2$</td>
<td>89%</td>
<td>89%</td>
<td>91%</td>
</tr>
<tr>
<td><strong>Secure Families</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single parent families with child &lt; age 6 $^4$</td>
<td>27%</td>
<td>25%</td>
<td>26%</td>
</tr>
<tr>
<td>Births to unmarried teens $^2$</td>
<td>6%</td>
<td>3%</td>
<td>4%</td>
</tr>
<tr>
<td><strong>Healthy Children</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Births $^3$</td>
<td>2,761</td>
<td>2,796</td>
<td>38,408</td>
</tr>
<tr>
<td>Infant mortality (per 1000) $^2$</td>
<td>2.5</td>
<td>4.3</td>
<td>5.3</td>
</tr>
<tr>
<td><strong>Public Supports</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>K-12 students eligible for free or reduced lunch $^2$</td>
<td>30%</td>
<td>35%</td>
<td>41%</td>
</tr>
<tr>
<td>Children without Health Insurance $^2$</td>
<td>3%</td>
<td>3%</td>
<td>3%</td>
</tr>
</tbody>
</table>

The United Ways of Iowa ALICE Report focuses on households that are Asset-Limited Income-Constrained Employed. These households earn more than the federal poverty level but struggle to afford basic necessities. The 2018 ALICE Report found that 37% of households in the state are struggling and that housing affordability is poor.12

- In Linn County, 20% of households are not able to meet a household survival budget with another 10% living below the federal poverty line.

Refugees
Imigration to Iowa includes refugee resettlement. Iowa was the first state to welcome Southeast Asian refugees after the Vietnam War. More recent refugees have arrived from Bhutan, Burma/Myanmar, the Democratic Republic of Congo, Somalia, and Syria, along with smaller populations from Afghanistan, Eritrea, Iraq, and Sudan. Refugees have been resettled primarily in Polk and Linn County. Because refugees, on average, spend three years away from home before arriving in Iowa, they have few resources beyond what is offered through federal grants and volunteer agencies. They also face language and cultural barriers to employment.13

SYSTEMS
Edication
Eastern Iowa and Linn County are home to generally well-educated residents. Forty nine percent (49%) of Linn County residents have an associate’s degree or higher. This rate is better than the state of Iowa but lower than Johnson County. There is great variation in this rate based on race and ethnicity.

There are 11 public school districts in Linn County. Cedar Rapids Community School District is the second largest in Iowa. The high school graduation rate for Linn County is 89% which is lower than the state (91%) and varies by district and student demographics. A lower percentage of children are assessed ready for kindergarten in Linn County than the state rate, though, the rate has improved since 2010.

Early Edcation: The July 2019 Child Care Resource and Referral report shows 13,216 listed child care spaces in Linn County provided by a mix of Child Development Homes, Child Care Homes, Preschools, and Centers. The majority (86%) of these spaces are in Center based programs. The remaining 14% are in registered Child Development and Child Care Homes.14 Public schools in Linn County are the largest providers of the Iowa Voluntary Preschool Program for four-year olds. All Linn County school districts offer this free part-day preschool service.

Kindergarten: In 2018-19, there were 2,897 kindergarteners in Linn County. The four metro school districts served 84% of these children.15

Elementary and Secondary Edcation: Fourth grade reading proficiency is an important predictor of success in school, including high school graduation. In 2017 the 11 public school districts reported proficiency rates that ranged from a high of 93% in Mount Vernon to a low of 64% in North Linn. Cedar Rapids served the largest number of fourth graders and reported a proficiency rate of 67%. Proficiency rates were lower for children of low socio-economic status and African-American students.16

Private Schools in Linn County: There are 23 private schools in Linn County serving over 4,000 students.17
Health and Human Services
The county is a regional hub for services – particularly safety net and health related services. Linn County is often described as a resource rich, highly collaborative region in the state. The 2019 County Health Rankings lists Linn County 48th out of 99 in Iowa for health outcomes, 9th for clinical care, and 53rd for social and economic factors that impact health.18

- Linn County ranks ahead of Polk County and behind Johnson County in each of those categories.
Fiscal Assessment Analysis

To provide an overview of the funding partners in the community a fiscal assessment was completed and the raw data can be found in a table in the Fiscal Assessment Appendix. Nineteen unique funders supporting health, education, and family support services were identified of which 18 provided the requested data. Although the majority (78%) have funds targeted to families with children under age six, the community benefits from other funds that can serve families with children up to age 18. A majority of the funders listed in the assessment were able to provide Linn County specific data but four did serve neighboring counties and are noted accordingly.

How much was allocated?
The current estimated total annual amount of funding allocated to programs impacting families in our area was $28 million (M).

What are the sources of funding?
Federal and state funding is critical to the success of almost every program reviewed. An illustration of the available funds can be seen in the chart below.

![Percentage of funds by Source](chart.png)

The slight majority of money ($9.8M) allocated was a combination of federal and state funding, most of which was allocated to Child Care Assistance. UWECl and gap funding for Lead Screens (CLPPP) utilize local donations or county tax dollars respectively and are not illustrated in the amounts above.

The data indicates that the Department of Human Services provided the most funding of any source. At 60% of all funds allocated, DHS provided $16.7M. The Department of Education (DE) provided one quarter (25%) of funds at $6.9M and the Department of Public Health provided 7% of funds at $1.9M. Five percent (5%) is from the Linn County ECI Board that allocates funds from both DHS and DE while 3% is from local sources which is principally United Way of ECI.
How are the funds utilized?
Along with a slightly higher dollar amount, state funding was allocated to a greater number of programs (60%) than federal funding (40%).

Over 83% ($23M) of total funds was allocated to programs that support early care and education. This far surpasses funds allocated to programs supporting the other two core services. Child and maternal health received almost $2.2M (8%) while the family support core service received almost $1.9M (7%). UWECI contributed over $750,000 to programs within all three core services but data was not disaggregated and in the chart below those funds are considered as “Support multiple services”.

While early care and education services received the most funding, it does not fund a corresponding higher number of programs. The next chart depicts a more even distribution of programs supporting each of the three core services.

Of the 23 types of programs in the fiscal assessment, 43% provide early care and education services. About one third (29%) provide child and maternal health services. Almost one quarter (24%) of all programs are categorized as family support services. UWECI funds are not disaggregated and are labeled in the chart as “Supports multiple services”.

Collaboration: Today’s funding climate requires a collaborative approach for series delivery. Multiple programs in Linn County must braid and blend funding to meet the needs of families. A common example is the creativity needed to provide full-day, full-year early education for children whose parents work or attend school.
Programs braid together the part day (2-4 hours/day) funding of Statewide Voluntary preschool, Shared Visions or Head Start with Linn County ECI, Community Services Block Grant (CSBG), DHS wraparound or private funds in order to have a classroom available for up to 10 hours per day and non-school days.

Other partnerships are evident in child health services. In FY 19, ECI-funded child health programs received $112,871 in Medicaid which pays for direct child health and dental screens. Agencies then utilize their Maternal Child Health funds, CSBG, and Linn County ECI funds to ensure that families receive care coordination services, which are not (typically) eligible for Medicaid.

The 1st Five program is a recipient of funds from Iowa Department of Public Health but the amount does not allow them to serve the total number of families requesting service. Gap funding is provided by the Linn County ECI Board to address the need.

In their role as local funders, UWECI and Linn County ECI each support programs that positively impact the lives of children ages birth through five in Linn County. Through regular communication and participation on joint planning bodies they ensure services are connected but not duplicative. UWECI and Linn County ECI understand efficiency and its importance for helping the greatest number of families.

A new and promising focus of collaboration for community partners is My Care Community. This effort is described more in the Child & Maternal Health section of the report. In summary, it offers better communication and care coordination for families. This will provide improved data tracking in the future which will support better outcomes for families and help maximize efficiency of investments.
CORE SERVICE: CHILD & MATERNAL HEALTH

“Health Equity is the attainment of the highest possible level of health for all people. It means achieving the environmental, social, economic, and other conditions in which all people have the opportunity to attain their highest possible level of health. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequities, historical and contemporary injustices, and the elimination of health and health care disparities.”

The 2019 Healthiest Communities Rankings from U.S. News & World Report show how U.S. counties and county equivalents perform in 81 metrics across 10 health-related categories. Out of a possible 3,000 counties, the top 500 are ranked from 1 (most healthy) to 500 (least healthy).

- Linn County is ranked #410/500 counties.
- Only 52 counties in Iowa made the top 500. Of those, Linn County held the 6th lowest rank. Bremer County was the top-ranking county in Iowa and #6 overall in the country.

<table>
<thead>
<tr>
<th>Linn County Overall Score</th>
<th>Iowa Overall Score</th>
<th>Avg Urban County Overall Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>64.5/100</td>
<td>65/100</td>
<td>58.3/100</td>
</tr>
</tbody>
</table>

Per the report, the bottom three health categories in Linn County include:
- **Food and Nutrition** - access to healthy foods & prevalence of disease linked to poor nutrition.
- **Equity** - income, education, health and social equality.
- **Environment** - air and water quality, access to parks and natural amenities, and environmental risks.

Physical Health

The health and well-being of mothers, infants, and children can serve as a proxy for the health of the community. For this report three key health outcomes are reviewed.

**Prenatal Care**
- 82% of Linn County mothers receive prenatal care in the first trimester, which is lower than the 2010 figure of 89%. This percentage is higher than Iowa (80%) and the United States (77%).
- Risk Factors: Lower educational attainment, teen mother, Hispanic ethnicity, American Indian or Black race, and lack of access to health care (e.g. insurance, transportation, sick leave).

**Low Birth Weight**
- 7% of Linn County infants were born with low birth weight which is slightly higher than the 3 year average from 2009-2012. This is the same percentage as Iowa and lower than the United States (8%).
- Risk Factors: Low educational attainment and low income, young, or Black mothers.

**Teen Births**
- 15.7 births/1,000 females, ages 15-19, is an increase from the previous year at 12.4. The teen birth rate increased in both Linn County and Iowa during 2016 but is far lower than the peak of 21.2 births/1,000 females in 2012.
- Risk Factors: Socially disadvantaged youth of any race or ethnicity.
Oral Health
Tooth decay is the most common chronic disease among children in the United States. The Centers for Disease Control and Prevention reports that more than 40% of children have decay by the time they reach kindergarten.

- 21% of Iowa Medicaid-enrolled children, ages 0-2, saw a dentist. The first dental visit is recommended by a child’s first birthday.22
- 2% of Linn County children, ages 0-5, have untreated tooth decay. The Iowa average is 9%.23
- Linn County has five pediatric dental offices which are all located in the Cedar Rapids metro area.

Mental Health
Maternal Mental Health
- Almost 41% of single mothers in Linn County report experiencing 25-30 days of poor mental health in a given month; compared to 13% of single fathers and less than 4% of dual parent households.24
- 19% of adults report having depression in 2018 as compared to 18% in 2017. This is below the peak of 22% in 2014.25
- A 2013 survey showed the state’s psychiatrists are clustered in the most populated parts of Iowa, with almost two-thirds practicing in Polk, Johnson, and Linn counties.26

Infant and Early Childhood Mental Health
- About 1 in 11 infants will experience their mother’s major depression within the first year of life.27
- 73% of mothers agree that pediatricians should play a major role in helping with the emotional development of their child.28

Child & Maternal Health Strengths
Most children have health care insurance
- 2% of children in Linn County, under the age of 19, are uninsured. This rate is better than the state and nation.29
- Enrollment in Medicaid for Linn County children has increased 418% since 2014.30
- 72% of workers have employer provided insurance in Linn County.

Access to a network of child and maternal health care providers
Linn County is a hub for health care services in eastern Iowa.
- **Health Clinics & Medical Providers:** Low-income families are served by two free clinics, a federally qualified health center, Linn County Public Health, Family & Community Health Alliance sites, and WIC clinics.
  - Linn County is ranked 9th in Iowa for access to Clinical Care.18

- **Hospitals:** There are two Top 100 Hospitals in Cedar Rapids that deliver the majority of Linn County babies (Mercy Medical Center and UnityPoint Health-St. Luke’s Hospital).
  - Approximately 73-78% of births in the last six years occurred at UnityPoint Health-St. Luke’s Hospital.

- **Eastern Iowa Health Center (EIHC):** This Federally Qualified Health Center provides health care on a sliding fee scale. EIHC screens their patients for mental health concerns and social needs. They also employ medical social workers who assist with care coordination and non-medical referrals.
  - EIHC estimates that they provide prenatal services to approximately 90% of Medicaid eligible women in Linn County.
- **Lions Club**: Trained volunteers provide free vision screens conducted in larger settings (e.g. classrooms and large child care centers). Smaller settings rely on Linn County ECI funded services through the Family & Community Health Alliance (see below). Effective with the 2015/16 school year, Iowa law requires all students entering kindergarten and third grade have a vision screening.

- **Maternal & Child Health (MCH) Title V Services**: In Linn County, the grantee is Hawkeye Area Community Action Program (HACAP) and is administered by the Family & Community Health Alliance (FCHA). This funding is braided with several additional local and state resources to provide the following services:
  - Child hearing, vision, and developmental screens at preschools, child care centers, and EIHC in partnership with Grant Wood Area Education Agency
  - WIC (see below)
  - Developmental screens and care coordination provided by 1st Five, a healthy mental development partnership
  - Dental coordination from I-Smile
  - Maternal health assessments
  - School based dental sealants
  - Hawk-I low or no-cost health insurance
  - Well child screening clinics for ages 0-21

- **Women, Infants and Children (WIC) Clinics**: These clinics serve low income women (185% of FPL) with children under the age of five. A large portion of WIC clients are single parent households. WIC clinics are federally funded and offer well child screening, maternal health, hearing, vision, and dental screenings along with nutritional counseling. WIC clients also receive access to additional healthy food assistance benefits. Linn County ECI supports dental screens and sealant programs at the WIC clinics.
  - Linn County has three WIC clinics.
  - Hispanic outreach clinics are offered offsite at Ladd Library and the Urban WIC clinic. Refugee outreach clinics are offered offsite at St. Mark's United Methodist and Urban WIC clinic.

Conversations with WIC staff indicate that the WIC enrollment numbers are declining. This may be, in part, due to the state terminating clients who have not shown up to receive benefits in the past three months. Also, before 2016, Medicaid eligibility was higher, allowing more pregnant moms and babies on Medicaid, thus making WIC caseload higher because all Medicaid clients are eligible for WIC.

- **Childhood Health initiative(s)**: One that is targeting local early care providers is 5-2-1-0 Healthy Choices Count. A statewide public-private partnership to promote healthy eating and active living for children and families. Linn County has a newly formed 5-2-1-0 task force to increase the number of child care providers joining as registered sites.

**Access to dental services**
The Eastern Iowa Dental Center opened a dental center that serves all adults with a focus on Medicaid families. The St. Luke’s Dr. Rhys B. Jones Dental Health Center serves low-income children and disabled persons. HACAP’s Family & Community Health Alliance (FCHA) partners with the Dental Center to offer dental screenings to children in the Cedar Rapids School District preschool and alternate kindergarten. At this time, no other school district in Linn County has a similar partnership.
Linn County has an I-Smile coordinator, housed within the FCHA, focused on outreach and dentist recruitment. I-Smile does not provide direct dental services. In Linn County, the I-Smile coordinator also schedules two of the hygienists at the St. Luke’s Dental Center which indicates an integration of services.

HACAP's FCHA, with funding from Linn County ECI, contracts with St. Luke’s Dental Center to provide dental screens, education, fluoride varnish, and care coordination at all WIC clinics. They also host Hispanic and refugee outreach dental clinics monthly.

Linn County ECI partners with St. Luke’s Dental Center, I-Smile, and the FCHA to provide pre-K dental screens at community health events, qualifying preschools, and various child care provider sites.

- 70% of native English speakers reported completing a child dental screen in the past 12 months.32

**Awareness of the social determinants of health**

Social determinants are the conditions in which people are born, grow, live, work, and age. They are responsible for most health inequities and are comprised of complex factors that impact health such as education level, gender, housing, social norms, and neighborhood environment.33

The Linn County Health Department identified key areas that contribute to social determinants of health and aligned their community goals to address them.34

- Increase access to affordable and safe housing.
- Increase access to health care and resources for vulnerable populations.
- Decrease number of children with Adverse Childhood Experiences (ACEs).

In Linn County, the 1st Five program helps primary care providers identify children and families who could benefit from early intervention. Caregiver depression, family stress, and behavioral concerns are some of the issues that trigger a physician referral to 1st Five. From there, families are connected with local resources in order to support the whole family. The program is funded by the Iowa Department of Public Health and Linn County ECI.

- Linn County Public Health Community Improvement Plan selected mental health as a top priority.35

**Care coordination models are in place**

The Institute of Medicine identifies care coordination as one of 20 national priorities for action because they have the potential to improve both efficiency and quality.36

My Care Community: This partnership, among more than 20 local health care providers, social service agencies, and county departments, was developed to streamline patient access to services in an effort to address the “whole person”. Under this system, Cedar Rapids hospitals and patients have a direct referral path to multiple services including mental health and transportation.37

Partners utilize a cloud based system (TAVConnect) that provides common assessments, improved data collection, and simplified intake processes across agencies. Coordinated intake can help address:

- Unstable or poor-quality housing.
- Lack of access to healthy food or reliable transportation.
- Financial instability that impacts ability to pay for services and prescriptions.

The Maternal and Child Health grantee, HACAP Family & Community Health Alliance, maintains strong connections with a wide network of partners in order to effectively braid services and funds. Chief among their partners are Linn County Public Health via joint committee meetings, Eastern Iowa Health Center, I-
Smile Dental Coordinator, St. Luke’s Dental Center, Lions Club for Vision screens, 1st Five, Grant Wood AEA, Linn County ECI, Head Start, Early Head Start, and WIC clinics.

Linn County ECI supports "whole family care" by ensuring its bid documents prioritize funding for programs that incentivize or directly support families to schedule and attend doctor and dental appointments.

- 99% of Linn County ECI Parent Survey respondents stated they had taken their child for a well-child exam and 70% had taken their child for a dental exam.

Greater emphasis on developmental surveillance at a child’s medical home
Research indicates that primary care providers using observation alone to detect child developmental delays only identifies 30% of concerns. In Linn County, the major child health providers require their physicians to use the Ages & Stages Questionnaire, for ages 0-2, at the well child check. They appear to be switching to the Survey of Well-Being of Young Children (SWYC) developmental surveillance tool which is free and compatible with EPIC database.

These efforts are augmented by the outreach provided to physicians’ offices by the Linn County 1st Five program. 1st Five is a public-private partnership bridging primary care and public health services in Iowa. The 1st Five model supports health providers with early detection of social-emotional and developmental delays and family risk-related factors in children, ages 0-5, and coordinates referrals, interventions, and follow-up. 1st Five has been identified as a promising practice by the National Association of Maternal and Child Health Programs.

<table>
<thead>
<tr>
<th>Child &amp; Maternal Health Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disparities in health care outcomes</td>
</tr>
<tr>
<td>Geography: The majority of health care services are located in the Cedar Rapids metro area which reduces access for rural families. It is important to note that even for families that live in Cedar Rapids, transportation is a reported barrier to accessing needed resources.</td>
</tr>
<tr>
<td>Prenatal: Income, age, and race are contributors to accessing prenatal care in the first trimester.</td>
</tr>
<tr>
<td>- 72% of Iowa Medicaid eligible women initiated prenatal care; compared to 82% of non-Medicaid eligible women.</td>
</tr>
<tr>
<td>- In Linn County, women under age 20 (69%) and African-American women (57%) have the lowest rate of prenatal care in the first trimester.</td>
</tr>
<tr>
<td>- Black women deliver low birth weight babies at almost twice the rate of white women.</td>
</tr>
<tr>
<td>Mental Health: Low-income women are twice as likely to experience some form of depression in their lifetime.</td>
</tr>
<tr>
<td>Obesity: Almost one third of kindergarteners in the Cedar Rapids Community School District are overweight or obese. Of those, 20% live in neighborhoods with the highest percentage of households receiving food assistance.</td>
</tr>
<tr>
<td>Health Insurance: Fifty-six percent (56%) of Medicaid-reimbursed deliveries are to women with a high school education or less. Medicaid pays for a higher percentage of deliveries to Black and Hispanic women than Caucasian women.</td>
</tr>
<tr>
<td>Access &amp; Awareness: Health care and family support providers routinely report difficulty in getting parents to attend their health appointments. The Linn County ECI (2018) Parent Survey illustrates the disparities in barriers. When asked to select the primary barrier to obtaining health care for their child:</td>
</tr>
</tbody>
</table>
• Limited English Proficiency respondents selected: Transportation (50%), Health Insurance (25%), Don't Know Why It is Needed (25%).
• Native English respondents selected: No Barrier (68%), Transportation (17%).

Resources to serve limited English proficiency (LEP) families are needed
A 2018 survey of LEP families connected to Linn County ECI illustrates the range of services needed.
• The most beneficial services are: Translators/Interpreters, Food/Rent Assistance, Health Insurance.

Increased education on the importance of preventive, early screens is needed.
• Thirty three percent (33%) of LEP parents report their child had a dental screen in past 12 months compared to 70% of Native English speakers.44

Eastern Iowa Health Center serves 30-40% of the LEP families in Linn County.45 Interpreter and document translator services are needed most frequently for Swahili, French, and Kirundi speaking clients. Providers report it can take 2-3 times longer to provide the needed service due to language and cultural differences.

Few Dentists accept Medicaid clients
Dental visits are not yet routine for Medicaid-enrolled children in Iowa, ages 0-3.46 A primary reason is the shortage of dentists that accept pregnant women and children with Medicaid as new patients.

The Medicaid reimbursement rate is much lower than the cost of dental services. Lower income families rarely have dental insurance and those with publicly funded coverage are unable to find a dentist that will accept it. In 2014, dental coverage for those on Medicaid and CHIP became available through the Iowa Dental Wellness Plan.
• Only 42% of Iowa general-practice dentists report accepting the Dental Wellness Plan.47
• Doctors and dentists often drop and/or do not accept Medicaid clients that miss an appointment.

Compounding the issue is a limited awareness of the need for oral health services for children, age 0-2, within the general population and in particular limited English proficiency families.

Limited options for free pre-k hearing screens
Grant Wood Area Education Agency provides free hearing screens to children under age six enrolled in Alternative Kindergarten (AK), Kindergarten, or if the child has an IEP. Families with children that are pre-k or do not have an IEP can only access free screens funded by Linn County ECI and conducted by Family & Community Health Alliance’s contracted screeners. Medicaid only pays for a re-check.

Food insecurity remains a concern
Food insecurity refers to lack of access to enough food or uncertain availability of nutritionally adequate food. As noted by the US News & World report earlier, Linn County’s weakest health category score is Food and Nutrition. This is further illustrated by Feeding America’s Map the Meal Gap reports.
• In 2015, 15% of Linn County children were food insecure. This percentage stayed relatively stagnant through 2017. This translates to 7,790 children (under age 18) living in households experiencing food insecurity.
• Over half (54%) of those children are deemed “Income-Eligible for nutrition programs” meaning their household income is at or below 185% of Federal Poverty.48

Families with food insecurity can apply for SNAP benefits, formerly known as food stamps.
• In Linn County one in two SNAP users are single mother households and three in four are families of color.49
Comprehensive mental health system is needed

- **Mothers:** Poor maternal mental health may be a precursor to child abuse and neglect.\(^{50}\)
  - Low income mothers are twice as likely to experience some form of depression in their lifetime.
  - PRAMS 2015 shows 14% of Iowa women reported being diagnosed with postpartum depression.
  - 20% of single mothers report 25-30 poor mental health days (within the last 30) compared to 6% of mothers in two parent households.\(^{42}\)

An Eastern Iowa Health Center (EIHC) 2018 Survey revealed 526 women who identified mental health concerns. The majority of these women were pregnant or parenting.

- 79% screened for moderate to severe depression also had anxiety.
- 57% screened for moderate to severe post-partum depression also had anxiety.

There are options for post-partum depression screenings at WIC, EIHC with Home Visit nurses and in-home family support programs. The challenge is finding services once a mom with depression is identified. One program, Reaching Families, was identified as a free local service for parents whose mental health is a barrier to effectively parenting their children.\(^{51}\)

- **Children:** Mental health problems can occur at any age and can include conditions such as anxiety and depression. Often, mental health problems in children lead to challenges with behavior and attention.
  - Nationally, children are expelled from state-funded preschool programs at more than three times the rates of children in elementary and secondary school.\(^{52}\)
Child & Maternal Health Community Plan

Families in Linn County have an array of child and maternal health resources but face challenges with awareness, access, and disparate health outcomes. The Linn County Early Childhood Iowa Board and United Way of East Central Iowa offer the following Child & Maternal Health Community Priority, Strategies and preliminary action steps.

**Community Priority: Increase Awareness of and Access to Child & Maternal Health Resources for At-Risk Families.**

**Focus:** Cohorts with disparate health outcomes: low-income, single parent households, teen parent, families with limited English proficiency, lower educational attainment, and African American mothers.

**Strategies**

**Promote the importance of preventative early child health screens**
- Execute a public awareness campaign that includes a focus on limited English proficiency families.
- Promote use of technology that provides free, high quality, and on-demand health information. Text4baby is a text message service for pregnant women and families with infants under age one.
- Create an inventory of local early childhood health screening services and include in the Linn County Resource Guide sheets, 2-1-1, and My Care Community.

**Ensure accessible and culturally responsive child and maternal health services**
- Identify transportation solutions.
- Enhance access to translators and interpreters and understanding of cultural norms.
- Sponsor annual community screening events at times and locations convenient for at-risk families, including those outside of Cedar Rapids.

**Increase access to oral health services for children under age three**
- Execute a public awareness campaign that includes a focus on limited English proficiency families.
- Encourage pediatricians to adopt a fluoride program in their office. Children under the age of three are more apt to routinely see physicians than dentists. Expand *Cavity Free Iowa* into Linn County.
- Apply for grants from the Delta Dental Iowa foundation.
- Incentivize dentists to serve pregnant women and young children that are on Medicaid.

**Support early identification of maternal mental health and child behavioral concerns**
- Create an inventory of local maternal health screening services and support services to include in the Linn County Resource Guide sheets, 2-1-1, and My Care Community.
- Encourage screens for maternal depression and anxiety in a variety of relevant settings not limited to physician appointments.
- Support the Linn County Mental Health Action Team efforts to reach the goal of improved mental health through increased community awareness and equal access to mental health, substance abuse, and prevention services.

**Promote comprehensive care coordination models**
- Champion involvement in the My Care Community initiative.
- Support evidence based family support services that address the social determinants of health.
- Promote WIC participation in order to simultaneously address food insecurity and access to child and maternal health and dental screens.
# Child & Maternal Health Community Plan Indicator Data

Community indicators are “measurements that provide information about past and current trends and assist planners and community leaders in making decisions that affect future outcomes”.\textsuperscript{54} They provide insight into the overall direction of a community: whether it is improving, declining, or staying the same.

The data below was selected to provide specific measures on strengths or challenges noted in the Needs Assessment. Linn County ECI and United Way of ECI will collaborate to update these indicators annually to assess the effectiveness of the Community Plan to address the identified Community Priority.

<table>
<thead>
<tr>
<th>Linn County</th>
<th>2015 unless noted</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Disparities</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Low birthweight babies by Race/ Ethnicity\textsuperscript{1}</td>
<td>Overall 6%</td>
<td>Black: 10% Hispanic: 6% White: 6%</td>
<td>Black: 10% Hispanic: 6% White: 7%</td>
<td>Not yet available</td>
<td>Flat</td>
</tr>
<tr>
<td><strong>Nutrition and Care Coordination</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% children &lt; age 5 participate in WIC\textsuperscript{3}</td>
<td>2003 Iowa 28% 25%</td>
<td>Iowa 26% 27%</td>
<td>Iowa 27% 29%</td>
<td>Iowa 26% 28%</td>
<td>Appears random but is linked to economy</td>
</tr>
<tr>
<td><strong>Dental Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of Medicaid-enrolled children &lt; age 3 that received any dental service\textsuperscript{4}</td>
<td>Iowa 35% 56%</td>
<td>Iowa 34% 52%</td>
<td>Iowa 35% 54%</td>
<td>Iowa 36% 53%</td>
<td>Much higher than state</td>
</tr>
<tr>
<td><strong>Mental Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># Poor mental health days in past month (avg)\textsuperscript{2}</td>
<td>Iowa 3.3 3.3</td>
<td>Iowa 3.3 3.4</td>
<td>Not yet available</td>
<td>Not yet available</td>
<td>Trend to watch</td>
</tr>
</tbody>
</table>

CORE SERVICE: EARLY CARE & EDUCATION

Early education and child care are inseparable because a child’s brain development continues 24/7 regardless of the setting. Some children spend only part of their day in preschool or child care but for the majority it is a full-day and full-year experience. Consequently children may spend more hours in early care environments then they spend attending grades K-12.55

Iowa is currently tied for first place (with Minnesota and Nebraska) in the nation for the percentage of families with children under age six with both or the only parent in the household employed. Iowa reports 75% while in Linn County the percentage was 77% in 2018.56 High quality child care provides two generations of benefits- it allows families to enter or remain in the work force and children to gain foundational skills to succeed in school and life.

Child Care: Iowa has three types of child care; licensed centers, registered child development home providers and child care home providers that are not registered. Licensed Centers – facility that typically cares for dozens of children. There are about 1,500 in Iowa and they are licensed by the Iowa Department of Human Services. Child Development Homes - About 2,800 people provide regulated child care in their homes. Those serving more than five children are required to register. Child Care Homes - People who provide child care in their own homes and who care for five or fewer children are not required to be registered but have the option to do so.

Options for care also include bringing someone into your home (e.g. nanny) and use of family, friend, and neighbor care which is a common practice.

<table>
<thead>
<tr>
<th>Linn County City- Zip Code</th>
<th>Total # of Providers</th>
<th>Linn County population &lt; 5 yrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alburnett-52202</td>
<td>1</td>
<td>22</td>
</tr>
<tr>
<td>Center Point-52213</td>
<td>4</td>
<td>279</td>
</tr>
<tr>
<td>Central City, Waubeek-52214</td>
<td>3</td>
<td>238</td>
</tr>
<tr>
<td>Ely-52227</td>
<td>1</td>
<td>168</td>
</tr>
<tr>
<td>Hiawatha-52233</td>
<td>12</td>
<td>539</td>
</tr>
<tr>
<td>Lisbon, Sutliff-52253</td>
<td>3</td>
<td>189</td>
</tr>
<tr>
<td>Marion, Midway-52302</td>
<td>43</td>
<td>2158</td>
</tr>
<tr>
<td>Lisbon, Mount Vernon-52314</td>
<td>4</td>
<td>422</td>
</tr>
<tr>
<td>Shellsburg, Covington ,Palo-52324</td>
<td>2</td>
<td>126</td>
</tr>
<tr>
<td>Robins-52328</td>
<td>2</td>
<td>62</td>
</tr>
<tr>
<td>Viola, Whittier, Springville-52336</td>
<td>1</td>
<td>79</td>
</tr>
<tr>
<td>#/% outside Cedar Rapids</td>
<td>75 or 29%</td>
<td>4,114 or 31%</td>
</tr>
<tr>
<td>Cedar Rapids-52401</td>
<td>10</td>
<td>94</td>
</tr>
<tr>
<td>Cedar Rapids-52402</td>
<td>57</td>
<td>2926</td>
</tr>
<tr>
<td>Cedar Rapids-52403</td>
<td>21</td>
<td>1219</td>
</tr>
<tr>
<td>Cedar Rapids-52404</td>
<td>62</td>
<td>2985</td>
</tr>
<tr>
<td>Cedar Rapids-52405</td>
<td>35</td>
<td>1753</td>
</tr>
<tr>
<td>Cedar Rapids, Robins-52411</td>
<td>3</td>
<td>227</td>
</tr>
<tr>
<td>#/% in Cedar Rapids</td>
<td>188 or 71%</td>
<td>9,204 or 69%</td>
</tr>
<tr>
<td>Total</td>
<td>263</td>
<td>13,407</td>
</tr>
</tbody>
</table>

Source: Iowa Dept of Human Services, Child Care Client Portal. Child Care Families: Provider Search 2018
The table indicates that regulated child care options are primarily (71%) located in Cedar Rapids. In Cedar Rapids the highest number of providers are in the 52404 zip code and the fewest are in 52411. The data indicates that the majority (69%) of children under age five live in Cedar Rapids. Maps depicting the location of child care providers in Cedar Rapids metro and in Linn County are included in the Appendix.

Child Care Resource and Referral reported 13,216 total spaces (serving children birth-age 12) in Linn County (July 2019). Eighty-six percent (86%) of spaces are in DHS licensed centers or preschools. The remaining 14% are in registered Child Development and Child Care Homes.

**Crisis Child Care:** Defined as short-term care services provided in a temporary absence of the regular care giver, often for children who are in danger of abuse or neglect or a primary caregiver medical emergency. Such care is usually provided outside the family home, such as a child care home or center.

- Linn County has no official Crisis Child Care providers. The ARC East Central Iowa provides temporary respite care for children and adults with intellectual or developmental disability.

**Preschool (Public Funds):** Iowa has two state-funded preschool programs: Shared Visions and the Statewide Voluntary Preschool Program (SVPP). Federally-funded preschool is also available in Linn County via Early Head Start and Head Start. Only 35 Iowa counties have both Head Start and Shared Visions.

- 70% of kindergarten students, in all Linn County public school districts, had parents report they attended preschool at any time in the prior 12 months.57

- **Shared Visions Preschool Program:** Since 1989 the state-funded Shared Visions program has provided no-cost part-day preschool to at-risk 3-5 year olds through competitive grants to public schools, licensed non-profit child care centers, other public non-profit agencies, and Head Start. The primary risk factor is income eligibility as families must fall at or below the 130% of federal poverty level. Shared Visions classrooms are required to meet NAEYC standards. Funding for Shared Visions was reduced in FY 18 and 19 resulting in fewer children served statewide.

  - In 2018, ten (10) preschool sites enrolled 210 Shared Vision-funded children in Linn County (2018), which is 13 less than the prior school year.
  - The FY 20 grantee total is $822,623, which is the same as in FY 16. All of the Shared Visions sites are in Cedar Rapids. Five are in Cedar Rapids school buildings, one at College Community school building, two at Head Start, one at Linn County Child Development Center, and one is faith-based.58

- **Statewide Voluntary Preschool (SVPP):** In 2007, Iowa began the part-day school year Statewide Voluntary Preschool Program and all 4 year-olds in the state are eligible to attend at no cost. SVPP must operate at least 10 hours per week and programs may collaborate with Head Start, other preschools, or other child care sites to provide the program and/or add on to make it a full-day service. The statewide funded enrollment count in 2017-18 was 24,610 and 2018-19 was 25,002. Iowa ranks 7th of 50 states for access of 4 year olds to preschool.59

  - All of the Linn County public school districts provide SVPP.
  - A data request to the Iowa Department of Education provided total funded enrollment for school year 2018-19 for six of the school districts (Cedar Rapids, College, Linn County-Mar, Marion, Mount Vernon and Springville).60 The 2018-19 total of 1,405 enrolled four year olds is 16% more than 2016-17 school year.

- **Early Head Start/Head Start:** The federal government is the largest funder of early care and education programs nationwide. Early Head Start is for infants and toddlers from at-risk families and nationwide
it reaches 7% of eligible children. Head Start serves children three to five years, from at-risk families, and reaches 31% of eligible children nationwide. In Linn County:

- Twenty-four (24) Early Head Start slots are home-based, in which families receive a weekly home visit and two monthly socializations.
- Fifty-six (56) Early Head Start slots are center-based of which only eight are infant slots. All of these slots are full-day/full-year due to braiding of various public funds including wraparound grants from Linn County ECI and Department of Human Services (DHS).
- 327 Head Start slots are center-based. Sixty three percent (63%) of slots are full day/full year due to braiding of public funds including wraparound grants from Linn County ECI and Iowa DHS.

Affordability: Child care costs are one of the most significant expenses in a family's budget, largely because child care and early education is a labor-intensive industry, requiring a low student-to-teacher ratio. For families earning less than 200% of poverty, child care costs can become a burden often greater than the cost of food or housing. Some private providers offer a sliding fee scale based on income and others accept the Child Care Assistance Subsidy from Iowa DHS. The Federal Health and Human Service Office's standard for affordable child care is not more than 10% of a family's income.61

- The ALICE Report states that the average household in Iowa, with 1 infant and 1 preschooler spends almost 22% of their annual income in 2016 on child care.

Child Care Assistance (CCA) is a subsidy available to the children of income-eligible parents who are absent for a portion of the day due to employment or participation in academic or vocational training or Promise Jobs activities. Assistance may also be available for a limited period of time to the children of a parent looking for employment. Eligible parents have a gross monthly income below 145% of the federal poverty level or below 200% if they have a child with a special need.

Wraparound Child Care provides care for children before or after the part-day preschool hours funded by Early/Head Start, Shared Visions, Statewide Voluntary Preschool, etc. These additional hours are better for working families and are paid for out-of-pocket by the parent or through a grant.

- Linn County Early Childhood Iowa and the Iowa Department of Human Services provide grant funds for wraparound hours of care.

<table>
<thead>
<tr>
<th>Early Care &amp; Education Strengths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increasing number of children participating in preschool</td>
</tr>
</tbody>
</table>
Linn County data indicates a slight increase in children enrolled in a preschool setting since 2000.

- 3% increase in children, ages 3-4, enrolled in some form of preschool from 2000-2017. In Linn County, this percentage of 52% is higher than the state (48%).62 Although the data trended upward for many years, local and statewide, there has been a leveling off from its peak in 2015.
- 9% increase, from 2016, in the number of children enrolled in the Cedar Rapids School District's free Statewide Voluntary Preschool.

Growing awareness of child care as an essential work support
The need for affordable and available child care is being promoted in several public policy agendas including: Iowa Women’s Foundation, Child and Family Policy Center, Early Childhood Iowa, United Ways of Iowa and the Cedar Rapids Metro Economic Alliance.

- Linn County ECI, Cedar Rapids Metro Economic Alliance, and the Iowa Women’s Foundation hosted two community Child Care Solutions forums in August 2019. Over 70 participants identified solutions and defined their next steps to address the local child care issue.
To assist with the child care needs of working families 67% of Early Head Start/Head Start slots are full-day full-year due to braided funding with Linn County ECI, SVPP, DHS, Shared Visions, and United Way of ECI.

**Earn an Education Degree or Early Childhood AA in Cedar Rapids**
Kirkwood Community College offers an Early Childhood Education Associate of Applied Science diploma and an Early Childhood Para educator certificate. Mount Mercy University offers an Education major and graduates may select licensure and specific endorsements authorizing them to teach in a range of programs from preschool to secondary school.

**Cross sector collaborations to promote kindergarten readiness**
In 2018, the Reading Into Success coalition surveyed 64 metro Cedar Rapids kindergarten teachers to better understand the skills needed for a successful start in school. Respondents came to consensus around ten skills and behaviors that include personal care and a heavy emphasis on social-emotional skills such as self-regulation, interpersonal skills and managing transitions. Schools, human service agencies, libraries, and other partners are planning year round activities to support families with school readiness.

- **Ready 10!** Materials are currently available to all early childhood partners in Linn County, including brochures, posters, and locally written & illustrated books demonstrating skills for newborns, infants, toddlers, and preschoolers.

**Increase in Iowa Quality Rating System (QRS) enrollment**
Iowa has a voluntary rating system for child care programs and preschools called the Quality Rating System (QRS). Child Care Resource & Referral data indicates a 4% increase in enrollment of Linn County homes and centers enrolled in QRS from 2016-2019. Although trending upward the rate is still just 19%, which is lower than statewide enrollment rate of 25%.

- 51% of Linn County ECI Child Care Provider survey (2018) respondents are enrolled in Iowa QRS and 23% requested support to enroll in or move up in the Iowa QRS system.
- Linn County has a Child Care Nurse Consultant (CCNC) that is able to assist providers to complete required sections of the QRS. The one CCNC serves four counties.
- Linn County has the Paces to Quality program that provides technical assistance, equipment grants, peer mentoring, and trainings to homes and centers. They work closely with Child Care & Referral Consultants to support providers with their QRS enrollment.

**Access to specialized supports to serve children with behavioral or health concerns**
As noted in the Health section children in the United States are expelled from state-funded preschool programs at more than three times the rates of children in elementary and secondary school. The report stated that the likelihood of expulsion is cut in half when teachers have access to behavioral consultants. Child care providers can access on-site technical assistance at no or low cost from programs funded by Linn County Early Childhood Iowa.

- CART: Provides intensive on-site support to child care providers to increase their expertise in serving children with behavioral issues in order to reduce expulsions from appropriate child care.
- Child Care Nurse Consultant: Provides on-site assistance to child care home and center providers regarding health and safety. They also include special health needs care plans, infection control, injury prevention, health and safety assessments and trainings.
- An annual "Mind of a Child" summit, held in Cedar Rapids by Paces to Quality, focuses on infant/child mental health topics and attendees earn required DHS training hours.
New incentive for providers accepting Child Care Assistance & enrolled in QRS

The Iowa DHS Child Care Assistance (CCA) program helps to pay the cost of child care for low income parents, who are looking for work, employed or attending school to pursue vocational or educational training. Child care providers are now eligible for a higher Child Care Assistance (CCA) reimbursement rate if they are registered or licensed and participate in the Iowa Quality Rating System.

- The highest reimbursement is for providers that achieve Level 5 on the QRS. Reaching this level can add almost $4-$5 in reimbursement (based on age served) per half-day.

Efforts to develop refugee child care businesses

Catherine McAuley Center officials were recently awarded a $159,196 federal grant from the U.S. Office of Refugee Resettlement to help local refugees who have lived in the United States for five years or less get a family child care businesses started. In Linn and Johnson counties, the Catherine McAuley Center’s program is projected to create 28 new child care spaces in its first year and 144 spaces by its third year.

Early Care & Education Challenges

Reduction in availability of child care

In 2016, the Iowa Women’s Foundation conducted eighteen focus groups in Iowa. Participants named affordable, flexible quality child care as a top issue critical to the well-being of women and children. 63

- The number of child care providers in Linn County listed with DHS declined by 207 or 43% from 2013-2019, according to data from Child Care Resource & Referral. This is a comparable decline to the overall rate in Iowa (-44%). 64
- More than half (57%) of Linn County ECI Child Care Provider survey respondents stated difficulty “Hiring/Keeping Qualified Staff” and 32% stated “Difficulty Staying in Business/Breaking Even”.

Because 85% of brain development occurs in the first three years of life access to quality infant and toddler environments is critical. Infant care in Iowa requires a staff intensive ratio of 1:4 which makes this type of care more expensive.

- The highest percentage of requests to the Child Care Resource & Referral office is from parents seeking infant care.
- Only 64% of Linn County providers report that they accept infants.

According to the Center for American Progress several parts of Linn County are child care deserts. These are locations where the number of licensed providers are not adequate for the number of children living in a census tract. Specifically, a community with more than 50 children and with more than 3 children per child care slot. 65

- Seven Linn County cities are classified as a child care desert- Coggon, Ely, Fairfax, Palo, Springville, Walker, and Walford.
- Kofoid’s analysis of child care availability, affordability, and convenience found that there were few Linn County census tracts that offered reasonable options. 66
- 26% of Linn County census tracts have one child care spot for every four children under age five.

Limited child care options for families working 2nd/3rd shift or weekends

When Linn County ECI Parent survey respondents were asked about their child care, 35% of those with unmet needs indicated Evening and Weekend Care. Families who seek care in order to work evenings or weekends have limited options in Linn County:

- No DHS licensed centers or registered child development homes provide evening or weekend care.
- 36 unregistered child care homes provide evening care, 12% of listed child care businesses.
- 19 unregistered child care homes provide weekend care, 6% of listed child care businesses.
Results from the Linn County ECI Child Care Provider survey indicate that increasing the options for non-traditional care will take creative solutions:

- Over half (55%) report that "No Incentive" would get them to provide non-traditional hours of care. The majority of respondents (61%) were child care centers.

Unregulated care environments
Family, Friend and Neighbor (FFN) Child Care is a primary provider of child care in our community. Families with low incomes and non-traditional work schedules are most likely to use this type of care. While it is difficult to estimate the number of children served in this way, a 2008 report published by the National Center for Children in Poverty stated that 33-53% of children under age five were cared for in this way. FFN child care is the most common form of non-parental child care in the United States. Because this care is unregulated it is difficult to assess the quality of these early learning environments.

- 37% percent of native English speaking respondents to the Linn County ECI parent survey reported their children remain in home for child care provided by them or others. The percentage jumps to 67% for limited English proficiency households.

Limited number of quality rated providers
Linn County ECI Parent survey respondents selected “Increase in Quality of Care” as their second highest community need for young children. Iowa’s current voluntary child care Quality Rating System (QRS) program will evolve into a Quality Rating & Improvement System (QRIS) in the future. The last time the QRS was modified, there was some drop off of participants, but it did rebound. The current scale for the rating system is 1(entry)-5(highest).

- 27% of DHS licensed centers and 0% of DE preschools in Linn County are currently enrolled in QRS.
- 14% of DHS registered child development homes in Linn County are currently enrolled in QRS.
- 8% of child care providers listed with DHS have a QRS rating level 3-5. Their total capacity is 1,678 slots. Only three child care centers and one child development home are QRS level 5.

Other measures of quality standards are Head Start Performance Standards and National Accreditation (NAEYC for centers and NAFCC for homes.) ChildNet is a series of 25 hours of voluntary training for registered Child Development Homes.

- 13% of Linn County centers are NAEYC and 3% of child development homes are NAFCC.
- 15% of registered child development homes in Linn County are ChildNet certified.

Language barriers
The Cedar Rapids Community School District English Language Learner program serves over 800 students in grades K-12 from more than 45 countries. These students speak over 60 different languages. Although a comparable data point for the early care system is not available this data illustrates the diversity in the community. Support services for child care providers to adequately serve non-English speaking families is limited.

- Limited-English proficiency parents reported in a 2018 Linn County ECI survey that 67% care for their children in their home and their top child care priority is “Bilingual Staff” and “Safe, Friendly Environment”.

Quality child care costs more than college tuition
According to the Economic Policy Institute, Iowa is one of 33 states where the average cost of child care exceeds in-state college tuition.
Based on the median price of child care in Linn County a family would need to earn $72,000 to afford the cost of two children in care. The median HH income in Linn County is $62,702.

According to the analysis completed by Kofoed the greatest cost burdened neighborhoods are in southwest Cedar Rapids and Fairfax.

65% of Linn County ECI Parent survey respondents state that “Affordable Child Care” is their greatest need.

National average cost of high-quality infant care is over $11,300 annually. However the average annual child care subsidy payment for infant care is only $6,800.71

Early Head Start, Head Start, Statewide Voluntary Preschool, and Shared Visions are provided without a fee to families but are part day (2-4 hours per day). Extended-day care (e.g. 10 hr/day), to match the needs of working families is supported by braiding Linn County ECI, DHS, and other public funds but is most often paid out of pocket by families.

- HACAP estimates that it would cost over $500,000 annually in staffing costs to expand all Head Start slots. This does not include the cost of supplies and curriculum.

Decline in Child Care Assistance subsidy participation

There has been a reduction in the percentage of child care businesses that enroll children that receive DHS Child Care Assistance (CCA). A key barrier is that CCA rates are below market rate so it is not economically feasible for many providers to accept.

- In the Linn County ECI Parent survey, 37% of respondents report the most beneficial support they receive is the Child Care Assistance subsidy.
- In 2019, 69% of Linn County child care providers report that they accept children who have the CCA. This is the lowest rate in seven years.72

CCA rates increased for 2019 but are still below the average child care costs. The following reimbursement rates apply for five full days of infant and toddler care:

- $81.90 = unregistered child care home reimbursement
- $150.00 = child development home with a QRS rating of 5 reimbursement
- $219.00 = child care center with a QRS rating of 5 reimbursement

Growing disparities in who is ready for kindergarten

Disparities in kindergarten readiness for low-income and underserved populations often continue into areas such as reading proficiency, graduation rates, and post-secondary education. In 2017-18, there were 2,840 kindergarteners in Linn County public schools that received an early literacy screen called the FAST assessment.73

- 62% of Linn County children met early literacy readiness benchmark.
For the four metro school districts, which enroll 87% of all kindergarteners in the county, the rate dropped to 58%.

Cedar Rapids school district serves 44% of Linn County kindergarteners and reported the lowest readiness percentage at 46%.

In 2018-19, there were 2,897 kindergarteners screened on the FAST assessment.

- 60% of Linn County children met readiness benchmarks.
- For the four metro school districts the rate was steady at 59%.
- Cedar Rapids School District reported the lowest readiness percentage at 47%.

**Limited access to professional development for child care providers**

Required trainings for registered and licensed child care providers primarily occur on weekends and evenings or the provider must obtain substitutes or close so they can attend a day-time training. At a local child care provider forum in August 14, 2019 a concern was raised that most trainings occur in Cedar Rapids which adds to the cost and time commitment for providers not in the metro area.

The Linn County ECI Child Care Provider survey respondents state their top three child care professional development needs are:

- Child Behavior Issues
- Increased Understanding of Diverse Populations
- Health, Safety, and Nutrition

**Early care is not treated as a valued profession**

Increasingly, the ability to recruit and retain child care providers is an issue. Child care positions pay less than the statewide median wage and rarely provide benefits such as health care and paid time off. Research indicates the education level of the early care and education workforce is a critical factor influencing children’s early learning successes. Anecdotal information suggests that as a child care provider’s education level rises (e.g. AA, BA) they depart child care to work in the school district with better pay and benefits.

The 2016 *Working in Early Care and Education in Iowa*, Iowa AEYC report highlighted the following issues:

- Assistant teachers in early care and education programs earn $8.00-$9.94 per hour and Lead teachers earn $9.00-$12.00 per hour.
- Only 6% of early care and education programs in Iowa provide full health insurance coverage to fulltime employees.
- 27% annual staff turnover means child care is a high turnover occupation.
- Only 23% of Directors have an Early Childhood Education BA degree.
- 48% of Assistant teachers and 36% of Teachers have a high school diploma or less.
Early Care & Education Community Plan

Linn County has an array of early care resources but families and employers face challenges with adequate access to quality, flexible, and affordable early care options. The Linn County Early Childhood Iowa Board and United Way of East Central Iowa offer the following Early Care & Education Community Priority, Strategies and preliminary action steps.

Community Priority: Increase Awareness of and Access to Affordable, Available, Quality Early Care & Education Resources.

Focus: Cohorts with disparate outcomes: working parents, low-income, single parent, families with limited English proficiency, lower educational attainment, teen parent, and African American mothers.

Strategies

Increase community awareness of child care impact on workforce development and family success.

- Educate multiple sectors of the community on the issues. Promote the Iowa Women’s Foundation efforts to identify Community Child Care Solutions through public-private partnerships and grants.
- Create a local leadership structure. Mobilize business, economic development, school district and higher education administrators, civic groups, and community leaders to become involved in the solutions. Engage parents and providers in the solutions.
- Build political will. Unite with other early childhood stakeholders and policy makers (Iowa AEYC, United Ways of Iowa, Child and Family Policy Center, League of Women Voters, Iowa Policy Project, etc.) to promote a unified legislative policy agenda to address quality, availability and cost of early care and education.

Recruit new child care entrepreneurs and support existing quality child care professionals.

- Assist Immigrants and Refugees with child care start-up and long term supports.
- Provide TEACH scholarships for advanced educational attainment and WAGE$ stipends for providers staying in the child care profession (www.iowaaeyc.org).
- Provide free, accessible training for child care providers.
- Ensure economic development offers the same supports to those opening a child care business as they do those opening any business.
- Increase focus on unmet needs of infant and 2nd and 3rd shift care or 24/7 care.
- Child care is a multi-generational effort. It provides our community with enhanced child development and workforce as well as building a future worker and higher parental earning.

Increase the number of child care providers enrolled in continuous quality improvement initiatives.

- Provide Iowa Quality Rating System (QRS) participation supports and incentives.
- Promote use of Child Care Nurse Consultant for health and safety improvements and to complete required components of the QRS.
- Host community recognition events for providers that attain an identified quality standard.

Identify additional sources of revenue to support local early care and education initiatives.

- Identify public-private partnerships. Research the St. Paul MN 3K project which provides high quality early learning to all 3-4 year olds so that children are ready for kindergarten, family success, and can be used as an economic development tool.
- Investigate viability of an early childhood coalition of local funders.
- Procure donations, corporate sponsorship of fundraising events, apply for grants, and link providers to business sponsors.
- Investigate social impact bonds.
**Promote kindergarten readiness efforts to enhance school achievement.**
- Engage the community in the importance of quality early childhood development for all children and help to identify what quality is.
- Integrate use of Ready 10 tools by parents, community and early childhood service providers.
- Increase trauma-informed environments and resources to improve outcomes for children and families.
- Support accessible and affordable trainings for parents and providers on a range of professional development topics including early literacy skills, children behavioral concerns, and Adverse Childhood Experiences.
- Expand community-wide awareness and use of identified high-quality interactive parent education/child development web-based supports such as Text4baby ([www.text4baby](http://www.text4baby)) and Vroom Brain Building moments ([www.vroom.org](http://www.vroom.org)).
- Ensure limited-English proficiency families have access to high quality early care and education services.

**Assist child care providers to serve more children from at-risk families.**
- Empower parents to identify, demand, and pay for high-quality care.
- Identify public-private partnerships to fund additional free or low cost full-day/full-year quality child care and before/after school care. Provide child care scholarships and employer funded supports to assist parents with their child care costs.
- Advocate to increase the Child Care Assistance reimbursement rate to the current market rate.
- Provide incentives to increase child care provider participation in Child Care Assistance subsidy and the Iowa QRS at levels 2-5.
- Reduce barriers such as transportation, interpreter/translator, and non-traditional hours of care.
- Ensure child care is culturally competent and can serve limited-English proficiency families.
- Provide Crisis Child Care. Apply to the Iowa Child Abuse Prevention Program for a Crisis Child Care grant. The next grant cycle is winter 2019-2020.
- Ensure providers have access to specialized supports to serve children with behavioral or health concerns.
### Early Care & Education Community Plan Indicator Data

Community indicators are "measurements that provide information about past and current trends and assist planners and community leaders in making decisions that affect future outcomes". They provide insight into the overall direction of a community: whether it is improving, declining, or staying the same.

The data below was selected to provide specific measures on strengths or challenges noted in the Needs Assessment. Linn County ECI and United Way of ECI will collaborate to update these Indicators annually to assess the effectiveness of the Community Plan to address the identified Community Priority.

<table>
<thead>
<tr>
<th>Linn County</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Access</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of Children ages 3-4 in any type of preschool&lt;sup&gt;1&lt;/sup&gt;</td>
<td>Iowa: 48%</td>
<td>Iowa: 48%</td>
<td>Iowa: 48%</td>
<td>Not yet available</td>
<td>Negative</td>
</tr>
<tr>
<td><strong>Quality</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of Kindergarteners meet FAST Assessment Benchmark&lt;sup&gt;2&lt;/sup&gt; (Early Literacy)</td>
<td>Iowa 56%</td>
<td>Iowa 54%</td>
<td>Iowa 52%</td>
<td>Iowa 68%</td>
<td>Negative</td>
</tr>
<tr>
<td><strong>Access</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of Early Care programs listed with CCR&amp;R&lt;sup&gt;3&lt;/sup&gt;</td>
<td>386</td>
<td>362</td>
<td>320</td>
<td>293</td>
<td>Negative</td>
</tr>
<tr>
<td># of Evening Child Care providers&lt;sup&gt;4&lt;/sup&gt;</td>
<td>28 homes</td>
<td>34 homes</td>
<td>36 homes</td>
<td></td>
<td>Positive</td>
</tr>
<tr>
<td># of Weekend Child Care providers&lt;sup&gt;4&lt;/sup&gt;</td>
<td>18 homes</td>
<td>16 homes</td>
<td>19 homes</td>
<td></td>
<td>Positive</td>
</tr>
<tr>
<td><strong>Quality</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% of DE Preschools, DHS Centers, Registered Child Development Homes participate in Iowa Quality Rating System&lt;sup&gt;3&lt;/sup&gt;</td>
<td>Iowa: 23%</td>
<td>Iowa: 24%</td>
<td>Iowa: 25%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. [https://datacenter.kidscount.org](https://datacenter.kidscount.org).
2. Iowa Dept of Education via ECI State website.
3. Linn County Data Sheets iowaccrr.org/data.
4. CCR&R Data Inquiry Results.
CORE SERVICE: FAMILY SUPPORT & STABILITY

Parental education level, mental health, and social connectedness can be powerful predictors of the future outcomes for their children. Children raised by parents with less than a high school diploma are more likely to live in poverty as adults and less likely to be successful in school. Parents who experience trauma, without healing interventions, may pass on the impact of that trauma to their children. Family supports during the first five years of life are critical to children’s future well-being.

Types of Family Support

There are more than 650 family support and parent education professionals that serve over 12,000 families across Iowa. Current information on providers is at the Iowa Family Support Network website.

In-home visitation programs share information and advocate for families. Family support programs often provide skills related to parenting, developing problem solving techniques, family finances, employment, and strengthening family relationships. These programs typically take place within the family’s own home for comfort and ease. The Iowa Family Support Network website lists six in-home providers in Linn County.

- FaDSS at Four Oaks, Early Head Start In-Home at HACAP, Family Support at Horizons, Nurturing Parent Program at Linn County, FOCUS at St. Paul’s Methodist Church, and several services at YPN including Parents As Teachers.

Group-based parent education programs are designed to provide support and education in a multi-session group setting with trained facilitator(s). Such programs help parents gain knowledge and understanding of age appropriate behavior and child developmental milestones. These organized meetings provide peer support and help parents enhance their children’s health and development through an evidence based curriculum. The Iowa Family Support Network website lists four (child & family) providers in Linn County.

- Family & Educator Partnership for Special Needs at Grant Wood AEA, Parent Education Consortium at ISU Extension, TIES at UnityPoint Health, and group services including specialized services for Hispanic and African families at YPN.

State and Federal Resources

Early ACCESS is an early intervention system of services that helps infants and toddlers with or at-risk for developmental delays or disabilities. Early ACCESS works with families to identify child and family needs, coordinate services, and discover what works best for each child. Across the United States 5% of children ages 0-3 are served by Early ACCESS.

- Grant Wood Area Education Agency, in Cedar Rapids, is the referral/intake hub for Linn County.

Early Head Start Home Program (EHS) is a locally operated, federally funded home program for income eligible (≤ 100% FPL) pregnant women and children ages 0-3. It provides individualized child development and parent education services through an appropriate mix of home visits and family or center based care.

- Hawkeye Area Community Action Program (HACAP) is the local provider of EHS.

Family Development & Self Sufficiency (FaDSS) is a supportive service administered by the Iowa Department of Human Rights to assist Family Investment Program (FIP) families with significant or multiple barriers reach self-sufficiency. FIP provides time-limited cash assistance to families. The foundation of FaDSS is regular home visits with families, using a strength-based approach.

- The local FaDSS grantee is Four Oaks, Inc.
Low-Income Home Energy Assistance (LIHEAP) is a federally-funded program designed to assist low income families meet the cost of home heating by providing a one-time payment designated for the heating utility. Homeowners and renters that meet federal poverty guidelines are eligible.
- Hawkeye Area Community Action Program (HACAP) is the local place to apply for this assistance.

Maternal, Infant and Early Childhood Home Visiting Program (MIECHV) is a federal grant designed to improve coordination of family support services for designated at-risk communities.
- Linn County is not currently designated as an at-risk community and does not receive MIECHV funds.

Parentivity.org is an interactive online “Virtual Home Visiting System” for the Iowa Department of Public Health (IDPH) to expand the reach of its maternal health and family care home visitation services. It serves as a “virtual mentor” and provides parents with an online library of resources, targeted to their specific needs, including access to experts and to parents with similar concerns.

Shared Visions Parent Support is the Iowa Department of Education’s in-home service to income eligible (<125% FPL) parents of at-risk children age 0-5 with priority to children age 0-3.
- Currently there are no Shared Vision Parent Support grantees in Linn County.

Supplemental Nutrition Assistance Program (SNAP) is a federal program that supplements the food budgets of income eligible families so they can purchase healthy foods. SNAP benefits can be used to purchase food at grocery stores, convenience stores, and some farmers' markets and co-op food programs.
- SNAP applications are available online or at the local DHS Office in Cedar Rapids.

Poverty
In 2019, the federal poverty income threshold (100% FPL) for a family of four is $25,750. The National Center for Children in Poverty reported that the level of income families typically require to make ends meet is nearly twice the federal poverty thresholds.
- Almost 10% of Linn County families below the poverty level have a child under age 5.
- 20,300 people in Linn County have their income below the poverty level.

The five year (2013-2017) chart above indicates the highest number of Linn County children in poverty are those ages 6-11 years (2,094) followed closely by children under age 6 (1,920).
WIC Client Survey Results (October 2017-June 2018)

WIC clinic clients regularly complete a brief social needs survey. *(Full WIC Survey results in Appendix.)* The highest needs reported in the past 12 months are:

- **Income** does not quite cover living costs (28%-47% of respondents)
- **Food** would run out before I have the money to buy more (21%-32%)
- **Child care** is not available and makes it hard to work or go to school (10%-15%)
- **Transportation** is not readily available so work and health appointments are often missed (6%-9%)
- **Health care costs** are too high so did not go to doctor/dentist (4%-10%)

Respondents to a Linn County Early Childhood Iowa survey (2018) indicated comparable concerns. The following are services they find to be of most benefit to their family:

- **Food or Rent** Assistance (51%)  
  *(Limited English proficiency respondents marked this at 60%.*
- **Child Care** subsidy/Assistance (37%)
- Parent Class/Group (31%)  
  *(Limited English proficiency respondents marked this at 40%.*
- **Health Care/Insurance**  
  *(Limited English proficiency respondents marked this at 50%.*


ALICE places a spotlight on a large population of residents who work at low-paying jobs, have little or no savings, and are one emergency away from falling into poverty. Over 450,000 Iowa households (37%) struggle to afford basic household expenses.

In Linn County the ALICE report highlights the following:

- 10% of households are below the Federal Poverty Level but an additional 20% of households fall below the ALICE Threshold (and are unable to meet a basic household survival budget).
- Approximately 6,700 households with children fall below the ALICE Threshold.
- The household survival budget for a four-person family is $59,556.
- Hourly wage to meet this budget is nearly $29/hour full time. The majority (66%) of Iowa jobs pay less than $20/hour (more than half of those pay less than $15 per hour).
- Child care represents a family’s greatest expense. $1,112/month for one infant and one preschooler in licensed and accredited child care is 22% of the monthly household survival budget.

### Family Support & Stability Strengths

The Family support workforce

A 2017 Iowa Family Support Workforce Study indicates that providers are well-educated with more than 75% having a bachelor’s degree or higher.80 Turnover appears to be relatively low and over 70% state that a desire to help is their top motivator for employment in the field.

Whole family approach

There are local programs equipped to support the whole family with a range of risk factors such as mental health, lack of parenting skills, poverty, under or unemployment, and unstable housing. Initiatives include but are not limited to the following:

- Total Child 2.0 at Four Oaks, the Opportunity Center at Ladd Library, and Horizons’ Credit Counseling/In-Home Visit/Meals/Transportation hub.

Two-generation approaches focus on creating opportunities for and addressing the needs of both children and the adults in their lives. The importance of two-generation impact is supported in initiatives such as:

- KPACE and GAP at Kirkwood College and spark*5 at United Way of East Central Iowa.
Evidence based and promising practice services
Iowa created a quality improvement process called the Iowa Family Support Credential. To achieve credentialing, programs utilize the Iowa Family Support Technical Assistance Network coordinated by Lutheran Services in Iowa in partnership with Early Childhood Iowa, and the Iowa Department of Public Health. Technical assistance and guidance are provided at no cost to assist in-home and group-based family support programs to earn the Credential.

- Linn County Early Childhood Iowa requires 100% of family support programs to earn the Credential or be externally designated as Evidence Based or Promising Practice.

Free specialized supports for child behavior issues
Teaching Interventions to Empower & Strengthen families (TIES) is based on Tennessee’s Regional Intervention Program (RIP) which began in 1969. It is an intensive group-based education program for parents/caregivers experiencing behavioral difficulties with a child age 18 months-five years. Parents receive coaching and mentoring by trained TIES staff and then implement those new skills in a classroom with children, TIES professionals and other families that completed the program. There is no cost to families other than the commitment to help train new families that enroll.

- TIES is the only RIP replication site in Iowa and was brought to the community by Linn County Early Childhood Iowa.

Data helps us identify vulnerable neighborhoods
The impacts of neighborhood disparities persist throughout life and are strongest for young children and late adolescence. Neighborhoods with higher numbers of single-parent families, higher percentages of rental apartments, and lower educational levels have resulted in disparate outcomes for residents. The Center for Disease Control uses Census data to determine the social vulnerability index (SVI) of every census tract and ranks them on 15 factors, including poverty, lack of vehicle access, and crowded housing. A 2014 comparison of Linn County neighborhoods illustrates the neighborhoods in Cedar Rapids, and one non-metro, which have the highest SVI.

<table>
<thead>
<tr>
<th>Neighborhood</th>
<th>Number of Children Under 5 Years Old</th>
<th>Social Vulnerability Index (SVI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oakhill Jackson</td>
<td>109</td>
<td>98%</td>
</tr>
<tr>
<td>Westdale Area</td>
<td>555</td>
<td>93%</td>
</tr>
<tr>
<td>Taylor</td>
<td>264</td>
<td>87%</td>
</tr>
<tr>
<td>Kirkwood/Lincoln Way*</td>
<td>407</td>
<td>81%</td>
</tr>
<tr>
<td>Northwest Area</td>
<td>67</td>
<td>81%</td>
</tr>
<tr>
<td>Southwest Area</td>
<td>255</td>
<td>80%</td>
</tr>
<tr>
<td>Marion census tract 3</td>
<td>326</td>
<td>77%</td>
</tr>
<tr>
<td>Bertram (non-metro)*</td>
<td>217</td>
<td>79%</td>
</tr>
</tbody>
</table>

* A youth residential treatment facility is located in this census tract.

These neighborhoods represent approximately 13% of Linn County children under the age of 5.

Access to a network of child and family support services
Linn County Community Services annually reviews and updates twenty-two (22) Resource Guide Sheets depicting local services such as food, legal assistance, transportation, child care, and basic needs. These sheets are regularly referenced and distributed to families in multiple social service agencies. The sheets can be found at [https://www.linncounty.org/130/Community-Resources](https://www.linncounty.org/130/Community-Resources). The community also has access to 2-1-1, a free 24/7 resource helpline available by phone, text, web, or app.
The following offices of key social service agencies are available in Cedar Rapids: DHS, Section 8 Rental Assistance, General Assistance, Veterans Affairs, CAP agency, Iowa Legal Aid, IowaWORKS, Promise Jobs, the East Central Mental Health Region, Waypoint Women’s Shelter, and Willis Dady Emergency Shelter. These are complemented by multiple charitable or non-profit outlets for free food, clothing, furniture, and temporary housing or emergency shelter.

Linn County supports the Community Partnerships for Protecting Children (CPPC) initiative. It is not a program but rather an approach that engages communities and citizens, in partnership with agencies, to protect children from maltreatment. The CPPC effort is currently housed in Linn County Community Services.

United Way of East Central Iowa (UWECI) organizes and implements Volunteer Income Tax Assistance (VITA) which assists low-resource residents with completion of their IRS returns in order to maximize their refund, at no cost. In tax year 2018 they helped families’ complete 2,239 tax returns resulting in $3.8M in refunds.

The Iowa Family Support Network website lists ten providers of in-home or group-based parent supports. These programs offer long term or short term services, different curriculums and some focus on particular age group or language needs of the client. Waiting lists are common and the programs have a collaborative history of making referrals between agencies as needed.

Linn County Continuum of Care Planning & Policy Council, established in 2000, is a voluntary planning and advisory group that works to prevent and eliminate homelessness. Its mission is to organize and maintain a strategic network of community interests that will identify and coordinate housing and services to meet the specific needs of homeless people or those at risk of becoming homeless. The coalition has a Coordinated Intake program to help find open shelter beds or affordable housing in the community and a Rapid Re-Housing service to help families find permanent housing.

The Safe, Equitable, Thriving Taskforce (SET) is a cross-sector team that assesses educational pathways, housing, and youth engagement strategies to address disparities for children of color in Cedar Rapids. The SET fund was established in 2018 and local initiatives can request grant funds from the Greater Cedar Rapids Community Foundation.

Double Up Food Bucks makes it easier for low-income Iowans to eat fresh fruits and vegetables while supporting family farmers and growing local economies. It matches the SNAP card benefit, dollar for dollar, on fresh fruits and vegetables bought at participating locations.

- Four locations in the Cedar Rapids Metro Area currently participate in this program.

ACEs resilience efforts
In 2013, UWECI launched the Community Resilience Coalition (CRC) to help break the cycle of Adverse Childhood Experiences. The CRC creates opportunities to learn, identify trauma informed resources, and develop goals to lessen or prevent ACEs. This collaborative group has representatives from multiple sectors including mental and behavioral health and early childhood and school district representatives.

The community has trainers that regularly present on ACE Interface, Lemonade for Life, Trauma Informed Care (101 & 201) and Mental Health First Aid. Often the trainings are available at low or no cost due to partnerships with funders such as Linn County Decat and United Way of ECI.
Family Support & Stability Challenges

Disparities in family outcomes or indicators

- **Geography:** The majority of social services are located in the Cedar Rapids Metro Area which reduces access for rural families. It is important to note that even for families that live in Cedar Rapids, transportation is a reported barrier to accessing needed resources.

- **Neighborhoods:** Dr. Robert Sampson states that neighborhood differences have lasting impacts on "crime, poverty, child health, civic engagement, teen births, altruism, and immigration." The cyclic nature of neighborhood poverty, where poor neighborhoods with few assets lead to fewer opportunities for its residents, must be interrupted for our citizens to thrive. The SVI data can help focus efforts on the most vulnerable neighborhoods in Linn County.

- **Race/Ethnicity:** Of the households below the living wage threshold established by the ALICE Iowa report, 62% are Black, 23% are White, 12% are Asian, and 3% Other.
  - A point in time analysis indicated only one of every 24 Linn County residents is Black, yet one of every three Linn County Jail inmates is Black.
  - Although African Americans made up 7% of the child population in Linn County, they represent 19% of abuse victims.
  - Income poverty is 3.3 times higher for households of color.
  - The unemployment rate overall is 1.2 times higher for individuals of color and in some neighborhoods is 2-3 times higher.
  - Renters face more challenges in availability of healthy and affordable housing as well as the threat of eviction. Over 70% of Black households rent versus own in Linn County.

- **Family Type:** Single parent families, with children under age five, make up a significant percentage of families living in poverty.

<table>
<thead>
<tr>
<th>Percent Below Poverty by Family Type in Linn County</th>
</tr>
</thead>
<tbody>
<tr>
<td>6% Total Families</td>
</tr>
<tr>
<td>11% Married Couple with child &lt; 5</td>
</tr>
<tr>
<td>41% Single Parent with child &lt; 5</td>
</tr>
</tbody>
</table>


Lack of diversity in family support workforce

In-home and group based family support workers continue to differ demographically from their consumers who are more diverse in terms of racial, ethnic background, family size, and structure. The workforce is overwhelmingly female (99%), Caucasian (96%), non-Hispanic (96%), and married.

Housing instability

The 2018 Maxfield Comprehensive Housing Needs Analysis identified a number of challenges facing low-income households, most especially renters in Cedar Rapids. There are more than 1,100 families on the Section 8 waitlist. The study recommends the development of an additional 425 subsidized rental units by 2023. The result of unstable housing is often eviction.

- In 2016, there were 1,612 evictions in Linn County (more than 4 households per day). This does not account for evictions that occur outside of the court system. Some research suggests that for every formal eviction there are 10 informal evictions.
A Continuum of Care point-in-time survey conducted on February 6, 2019 found a total of 242 individuals, of which 46 (19%) were children/youth, were served at local emergency shelters, transitional housing or found living on the street.

Nearly one in three renters in Linn County are housing cost burdened, meaning they pay more than 30% of their monthly income on housing.90

Child maltreatment rates increase
The total number of confirmed Linn County abuse cases of children under age six increased by 102 cases from 2015-2018. Of all Linn County child abuse cases (age 0-17 years) the majority (52%) continues to be children under age five. This is a smaller percentage than in 2017 but exceeds the state average of 47%.91

- Fifty-six percent (56%) of abuse cases are classified as “denial of critical care” which is defined as failure to provide adequate supervision, shelter, health care, emotional care, food clothing, or other care necessary for child's health and welfare.
- Within the category of denial of critical care, research indicates that 89% of the cases are “failure to provide supervision of a child”. A distant second is “adequate shelter” (5%) and third is “health” (4%).92
- The top reasons for a case to be marked as “failure to provide supervision” include “unsafe circumstance” and “caregiver present but unable to provide supervision due to substance abuse”.

The Iowa Child Maltreatment Prevention Needs Assessment, conducted in 2017, found a correlation between abuse and neglect with numerous risk factors such as teen births, poverty, low-birthweight births, domestic violence, high ACE scores, and mental illness. The report recommends reducing maltreatment by addressing those risk factors previously mentioned.93

ACEs
Research on Adverse Childhood Experiences (ACEs) states when a child experiences consistent trauma; including situations of abuse, neglect, witnessing violence, or general maltreatment, the brain adapts to these situations by elevating stress hormones. Long term, stress hormones can alter parts of the brain tied to emotional regulation, visual and spatial memory, language and math proficiency, and other important abilities.94

The 2016 Iowa ACEs report - Beyond ACEs: Building Hope & Resiliency in Iowa shows that most Iowa adults have experienced childhood trauma.95

- 12% of adults in Linn County report four or more ACES (2012-2014).
- Clients at Eastern Iowa Health Center, ASAC and other local agencies report three or more ACEs on average.
- 7% of women reported some type of intimate partner violence in the 2015 PRAMs survey.

The Cliff Effect
The Cliff Effect is a barrier that occurs where a person headed toward economic stability earns a minor wage increase triggering the loss of benefits that helped them to work or be in school. The loss of benefits can include child care, utility assistance, rent or food assistance, and the Earned Income Tax credit. This is a significant issue for low-income families because the amount gained in earnings is typically not enough to cover the amount lost in benefits. Research indicates the Cliff Effect is a disincentive to work.96
Unable to meet basic needs
Family stability and self-sufficiency are inextricably linked to the development of children, including their brain development, school success, and health. For families below the ALICE threshold, it is a challenge to maintain stable housing, food, and transportation leaving less time for family enrichment.

A review of reports from entities such as WIC, Prevent Child Abuse Iowa, UWECI Condition Reports, ALICE, Linn County ECI and Iowa Women’s Foundation repeatedly document that families top requests are:

- Assistance with food, housing, transportation and child care expenses.
- “Knowing Where to Go/How to Connect with Local Resources” was noted by limited-English proficiency respondents.

Diapers: The monthly cost of diapers is estimated to be between $70 and $125 per month per child. This adds up to over $1,000 per year, not including wipes and formula. Diapers and wipes are not eligible to be purchased with SNAP or WIC benefits and most low-income families do not receive cash assistance to cover these costs. Families even report missing work because they do not have enough diapers to take to child care.

- The local diaper bank operated by YPN distributed over 81,000 diapers between July-Dec 2018.

Car Seats: The Linn County Safe Kids Coalition works to reduce preventable childhood injuries and deaths. One area of focus is motor vehicle safety. The coalition works with local agencies to provide high needs families with free or low cost child safety seats and car seat installation instructions. The cost of a child safety seat is between $50-75 and multiple seats and options are needed to accommodate the different ages of children.

- Linn County has seen any increased need for free and low cost seats in the past few years, in part due to overall economic conditions and an increase of refugee families.
Family Support & Stability Community Plan

Linn County is home to several resources but families face challenges with basic needs, access to the resources, and institutional barriers to economic stability. The Linn County Early Childhood Iowa Board and United Way of East Central Iowa offer the following Family Support Community Priority, Strategies and preliminary action steps.


Focus: Cohorts with disparate outcomes: teen parents, families in poverty/ALICE threshold, parents of low-birthweight babies, single parent households, living in the presence of domestic violence, high ACE scores, mental illness, and families with limited English proficiency.

Strategies

Invest in two generation/whole family approaches

Two-generation approaches focus on creating opportunities for and addressing needs of children and their parents together to help break the cycle of poverty. Successful two-generation programs address four components in a family’s life: Education, Economic Supports, Social Capital, and Health & Well-being.99

- Education links high quality early care for children and skilled training for parents to further their economic potential.
- Economic Supports ensure families have access to basic needs and supports to build stability.
- Social Capital helps families build connections to grow their protective network. This could include peer to peer support, mentors, and career coaches who build parents’ strengths and resilience.100
- Health and Well-being focuses on access to care and responses to ACEs and toxic stress.101

Promote a unified policy agenda to address factors impacting family stability

- Build political will. Convene stakeholders at state and local levels (United Ways of Iowa, Child and Family Policy Center, Iowa Policy Project, Early Childhood Iowa, Iowa Business Council, Economic Alliance etc.) to collaborate and mobilize efforts to address family stability.
- Identify policy changes to address Cliff Effect, Child Care Assistance gaps, and state minimum wage.
- Promote tax policies and initiatives, such as the earned income tax credit (EITC) and child tax credit that support working families and promote efforts and incentives to strengthen the ability of parents to contribute to economic well-being.102

Support quality programs and a diverse family support workforce

- Promote and invest in evidence based support programs that can either be in-home or group-based.
- Monitor the implementation of DHS Family First federal legislation and its intended funding focus on evidence based in-home supports.
- Promote workforce diversity in regard to race, ethnicity, language, and family structure. MIECHV has pilot projects, for recruitment of refugees to the family support workforce in Johnson, Marshall, and Polk counties. Encourage an appropriately compensated and degreed family support work force.

Reduce child maltreatment by targeting the risk factors most closely correlated with abuse and neglect.103

- Risk Factors: teen births, poverty, low-birthweight births, domestic violence, high ACE scores, and mental illness.
- Establish concrete supports that meet at-risk families’ basic needs such as housing, food, clothing, child care, and health care.
- Support community collaborations that provide pathways to educational attainment, higher paying jobs, access to critical work supports, and basic needs for at-risk families.
Personal interaction with their family and friends was identified by at-risk children and parents as their primary source of support. Family support programs should routinely include these informal supports into their services. 

**Promote care coordination efforts**
- Promote the “no wrong door” model and champion family support provider involvement in the My Care Community initiative.
- Promote Community Partnerships for Protecting Children (CPPC) efforts to ensure families and stakeholders from all sectors are engaged in the planning and implementation of prevention services in their communities. Support CPPC’s application to the Iowa Child Abuse Prevention Program. The next grant cycle is winter 2019-2020.
- Encourage cross-sector coordination that addresses basic needs for all clientele regardless of presenting issue.

**Promote accessible and culturally responsive resources**
- Increase use of technology that provides free, high quality, and on-demand family support resources. Parentivity, Vroom, and 2-1-1 are examples of text based supports.
- Identify local family support services, include them in the Linn County Resource Guides, and promote how community can access the Guides. Ensure Resource Guides are readily available to the refugee community and are available in at least Swahili among other languages. Promote use of 2-1-1 by phone, text, web or app.
- Enhance access to translators, interpreters, language specific resource and increase the diversity of the family support workforce.

**Increase awareness of trauma informed care and resiliency practices**
- Educate all sectors of the community, not just service providers, on the impact of ACEs and how we can break the cycle of toxic stress for our community.
- Train professionals, in a variety of settings, to recognize ACEs and provide appropriate trauma informed care. Embed protective factors that help reduce adversity and build resilience.
- Facilitate knowledge on nurturing parenting and child development through high quality parenting classes and support groups. Increase social connections for both parents and children.
**Family Support & Stability Community Indicator Data**

Community indicators are "measurements that provide information about past and current trends and assist planners and community leaders in making decisions that affect future outcomes". They provide insight into the overall direction of a community on key data points.

The data below was selected to provide specific measures on strengths or challenges noted in the Needs Assessment. Linn County ECI and United Way of ECI will collaborate to update these Indicators annually to assess the effectiveness of the Community Plan to address the identified Community Priority.

<table>
<thead>
<tr>
<th>Linn County</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Child Safety</strong></td>
<td>Iowa: 49%</td>
<td>Iowa: 51%</td>
<td>Iowa: 47%</td>
<td>Iowa: 47%</td>
<td>Negative</td>
</tr>
<tr>
<td>Confirmed or founded child abuse cases of children (0-5) and as % of all cases¹</td>
<td>291 57%</td>
<td>317 58%</td>
<td>372 54%</td>
<td>393 52%</td>
<td></td>
</tr>
<tr>
<td><strong>Family Stability</strong></td>
<td>Iowa: 4%</td>
<td>Iowa: 3%</td>
<td>Iowa: 3%</td>
<td>Not yet available</td>
<td>Negative</td>
</tr>
<tr>
<td>Households with youth (0-17) and no worker in past 12 months²</td>
<td>555 2%</td>
<td>600 2%</td>
<td>636 2%</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Basic Needs</strong></td>
<td>Iowa: 20%</td>
<td>Iowa: 20%</td>
<td>Iowa: 19%</td>
<td>Not yet available</td>
<td>Negative</td>
</tr>
<tr>
<td>Households with youth (0-17) that receive SNAP benefit³</td>
<td>5,193 19%</td>
<td>5,262 19%</td>
<td>5,350 19%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Appendix

### Partners

The following entities participated in the needs assessment planning process.

<table>
<thead>
<tr>
<th>Association for Education of Young Children, Cedar Rapids</th>
<th>Child Care Resource &amp; Referral, Region 5</th>
<th>Cedar Rapids Metro Economic Alliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Iowa Community Health Center</td>
<td>Family &amp; Community Health Alliance, HACAP</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; Five, HACAP</td>
</tr>
<tr>
<td>Early/Head Start, HACAP</td>
<td>Janet Horras, State Visitation Office</td>
<td>Horizons- A Family Service Alliance</td>
</tr>
<tr>
<td>Iowa State University Extension-Family Specialist and PEC</td>
<td>Iowa Women’s Foundation forum participants, Cedar Rapids</td>
<td>Linn County CPPC/Decat</td>
</tr>
<tr>
<td>Linn County Family Transformational Services</td>
<td>Linn County Public Health</td>
<td>Paces to Quality, HACAP</td>
</tr>
<tr>
<td>Resource Center, UnityPoint Health-St. Luke’s Hospital</td>
<td>Young Parents Network</td>
<td></td>
</tr>
</tbody>
</table>

### Child Care Provider Survey- 2018  N = 70

**Respondent Profile**

- Center: 61%
- Home Based: 39%
- 99% are DHS licensed or registered

- 6% serve 1-5 children
- 37% serve 6-25 children
- 12% serve 26-35 children
- 45% serve more than 45 children

All age groups of children served were evenly represented: newborn, toddler, over age 5

- 83% accept DHS Child Care Assistance (CCA)
- 67% currently have children enrolled that are on CCA

- 36% had no Wait List
- 49% had 1-20 children on Wait List
- 15% had over 21 children on Wait List

**Zip Codes locations primarily represented**

- 52404 (29%); 52402 (21%); 52302 (14%)

**Top 5 Early Childhood Services used**

- Child Care Resource & Referral (90%)
- Child and Adult Care Food Program (69%)
- PACES (60%)
- Grant Wood AEA (53%)
- CART (34%)

**Top Professional Development/Training Needs**

- Child Behavior Issues (70%)
- Child Development & Learning Plans (41%)
- Health, Safety & Nutrition (30%)
- Understanding Diverse Populations/Cultures (26%)

**Quality Supports**
- 51% of respondents are enrolled in Iowa Quality Rating System
- 25% request assistance with degree or CDA
- 23% request support to enroll or move up the Iowa Quality Rating System

**Non-Traditional Child Care Hours**
- 13% provide Evening Care
- 21% provide Special Needs services
- 9% provide Weekend Care
- 7% provide Crisis/drop-in Care
- 45% Do not provide any non-traditional care (weekend, evening, crisis, sick care)
- 55% Report that no incentive would get them to provide non-traditional care
  - With incentives: 36% would provide crisis care; 25% evening care; 16% weekend care

**Top 3 Challenges to providing Child Care Services**
- Hiring/Keeping Qualified Staff (57%)
- Issues with Client Behaviors (50%)
- Staying in Business/Breaking Even (32%)

---

**Parent Survey- 2018**

<table>
<thead>
<tr>
<th>Native-English speaking</th>
<th>N=183</th>
</tr>
</thead>
</table>

**Respondent Profile**
- 34% Single Headed Household, comparable to county average
- 80% White; 12% Black; 7% 2 or more races 6% Hispanic
- 46% HH income < $30,000
- 69% had 1-2 children
- 25% had 3 or more children
- 16% were pregnant
- Majority had children ages birth to age 2 (60%) closely followed by 3-yr (55%)

**Zip Codes primarily represented:**
- 52402 (28%); 52404 (20%); 52302 (16%)

**Majority had Medicaid (60%) or Private/Employer Insurance (38%).** **Almost all respondents had taken child for a Well Child Exam/physical (99.4%), and 70% had taken child for a dental exam**

**Top four most Beneficial services**
- Food or Rent Assistance (51%)
- Child care subsidy/assistance (37%)
- Parent class/group (31%)
- Health care/Insurance (26%)

**Top Health Barriers (for child)**
- Other: No health barriers (68%)
- No transportation (17%)
- Special needs & Don’t know where to go (7% each)

**Child Care Usage**
- 37% of respondent’s children remain in home for child care
- 32% Child Care Center; 29% Preschool; 25% Family Friend; 17% Child Care Home

**Child Care Needed**
- 51% None
- 18% Evening Care
- 25% Daytime 6 am 6pm
- 13% Weekend Care
Child Care Priorities
- Safe & Friendly Environment (83%)
- Cost (57%)
- Location (49%)

Child Care Issues
- 30% changed work schedule due to child care issues in the last 2 months
- More than half stay home from work or take child to family member/friend if primary care provider is not available

Linn County 3 greatest needs for children 0-5 years old
- Affordable Child Care (65%)
- Increase in Quality Child Care (34%)
- Evening & Weekend Care (32%)
- *Close 4th: meet basic household needs (food, housing, jobs) (28%)

**Limited English Proficiency Parent Survey- 2018  N = 11**

**Respondent Profile**
36% Single Headed Household, higher than county average
0% White; 22% Black (no other race option was marked); 78% Hispanic
71% HH income < $30,000

60% had children between the ages of birth-2 years old
55% had 1-2 children
27% had 3 or more children
18% were pregnant
Majority had children ages birth to 2 year (60%); then 3-5 year olds (30%)

Zip Codes primarily represented
- 52404 (37%); tied for 52402 & 52233 (25%)

Majority (82%) had Medicaid, 100% had taken child for a Well Child Exam/physical, and only 33% had taken child for a dental exam.

**Top four most Beneficial services**
- The #1 slot was tied between: Translator and Food/Rent Assistance (60%)
- Health Care/Insurance (50%)
- Parenting Class and/or Group (40%)

**Top Heath Barriers (for child):**
50% No transportation
25% Tie: No Health Insurance & Don't know why it is needed

**Child Care Usage**
67% of respondent’s children remain in home for child care
22% Child Care Center, 11% preschool

**Child Care Needed**
89% of respondents do not need additional child care for their children; 11% Daytime
Child Care Priorities
- Tied between: Bilingual Staff and Safe Friendly Environment (86%)
- Cost (43%)
- Tied: Location and No Wait List (28%)

Child Care Issues
0% changed work schedule due to child care issues in the last 2 months

Linn County 3 greatest needs for children 0-5 years old
- Tied between: Affordable Child Care and Increase Quality Child Care 75%
- More Child Care Providers/Slots 50%
- Tied between: Evening/Weekend Care and Knowing Where to Go/How to Connect with Local Resources 37%

WIC Client Survey Results (October 2017-June 2018)

<table>
<thead>
<tr>
<th></th>
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<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Within the past 12 months, have you worried your food would run out before you had the money to buy more?</td>
<td>31.9%</td>
<td>28.8%</td>
<td>26.2%</td>
<td>25.4%</td>
<td>23.9%</td>
<td>23.4%</td>
<td>25.0%</td>
<td>21.9%</td>
<td>20.5%</td>
</tr>
<tr>
<td>2. Are you worried that in the next 2 months, you may not have stable housing?</td>
<td>5.1%</td>
<td>6.7%</td>
<td>4.8%</td>
<td>7.2%</td>
<td>3.6%</td>
<td>4.2%</td>
<td>6.9%</td>
<td>5.0%</td>
<td>2.8%</td>
</tr>
<tr>
<td>3. In the last 12 months, has your utility company shut off your services for not paying your bills?</td>
<td>8.3%</td>
<td>8.5%</td>
<td>7.0%</td>
<td>6.1%</td>
<td>5.0%</td>
<td>6.3%</td>
<td>5.3%</td>
<td>5.2%</td>
<td>6.1%</td>
</tr>
<tr>
<td>4. Do problems getting child care make it difficult for you to work or study? (leave blank if you do not have children)</td>
<td>12.9%</td>
<td>11.2%</td>
<td>12.8%</td>
<td>14.7%</td>
<td>11.2%</td>
<td>12.8%</td>
<td>13.8%</td>
<td>12.0%</td>
<td>9.6%</td>
</tr>
<tr>
<td>5. Sometimes people find that their income does not quite cover their living costs. In the last 12 months has that happened to you?</td>
<td>47.2%</td>
<td>39.2%</td>
<td>32.1%</td>
<td>33.4%</td>
<td>30.1%</td>
<td>32.6%</td>
<td>31.2%</td>
<td>28.9%</td>
<td>28.2%</td>
</tr>
<tr>
<td>6. In the last 12 months, have you ever had to go without health care or not go to your job or school because you didn’t have a way to get there?</td>
<td>9.2%</td>
<td>8.5%</td>
<td>6.4%</td>
<td>8.0%</td>
<td>7.2%</td>
<td>6.6%</td>
<td>7.1%</td>
<td>5.9%</td>
<td>6.1%</td>
</tr>
<tr>
<td>7. Are you afraid you might be hurt in your apartment building or house?</td>
<td>2.4%</td>
<td>1.0%</td>
<td>0.4%</td>
<td>0.6%</td>
<td>1.0%</td>
<td>0.7%</td>
<td>1.0%</td>
<td>0.4%</td>
<td>0.7%</td>
</tr>
<tr>
<td>8. In the last 12 months, have you or a family member needed to see a doctor, dentist, mental health provider, or behavioral health provider but could not because of cost?</td>
<td>9.5%</td>
<td>9.3%</td>
<td>8.0%</td>
<td>8.9%</td>
<td>6.9%</td>
<td>7.8%</td>
<td>9.5%</td>
<td>7.6%</td>
<td>3.7%</td>
</tr>
<tr>
<td>9. If you checked YES to any boxes above, would you like to receive assistance with any of these needs?</td>
<td>23.8%</td>
<td>21.5%</td>
<td>20.9%</td>
<td>24.5%</td>
<td>19.1%</td>
<td>19.1%</td>
<td>23.3%</td>
<td>20.2%</td>
<td>14.8%</td>
</tr>
<tr>
<td>10. Are any of your needs urgent? For example: I don’t have food tonight, I don’t have a place to sleep tonight.</td>
<td>3.2%</td>
<td>3.8%</td>
<td>2.5%</td>
<td>2.2%</td>
<td>1.9%</td>
<td>1.6%</td>
<td>2.8%</td>
<td>2.2%</td>
<td>1.7%</td>
</tr>
</tbody>
</table>
## Fiscal Assessment Matrix

**Linn County Early Childhood Iowa Fiscal Assessment Data 2019**

<table>
<thead>
<tr>
<th>Program</th>
<th>Core</th>
<th>Funding Type</th>
<th>Funding Source</th>
<th>Est Funding</th>
<th>Age</th>
<th>Est. Number Served</th>
<th>FY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 1st Five*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$306,649</td>
<td>0-5</td>
<td>262</td>
</tr>
<tr>
<td>2 Child Care Assistance (CCA)</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$8,692,850</td>
<td>0-13</td>
<td>18</td>
</tr>
<tr>
<td>3 Child Care Block Grant (CSBG)</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$811,924</td>
<td>0-5</td>
<td>88</td>
</tr>
<tr>
<td>N/A Child Care Resource &amp; Referral (CCR&amp;R)</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>4 Decategorization/CPPC</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$780,070</td>
<td>0-18</td>
<td>1,121 youth &amp; 687 families</td>
</tr>
<tr>
<td>5 Early ACCESS Part B</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$116,000</td>
<td>3-5</td>
<td>686</td>
</tr>
<tr>
<td>Early ACCESS Part C</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$424,878</td>
<td>245</td>
<td>18</td>
</tr>
<tr>
<td>6 Early Head Start*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$671,293</td>
<td>0-3</td>
<td>87</td>
</tr>
<tr>
<td>7 Head Start*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$5,157,803</td>
<td>0-5</td>
<td>800</td>
</tr>
<tr>
<td>8 FaDSS</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$343,980</td>
<td>0-18</td>
<td>222</td>
</tr>
<tr>
<td>9 I-Smile*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$70,832</td>
<td>0-5</td>
<td>1,475 children &amp; pregnant women</td>
</tr>
<tr>
<td>10 Lead (CLPPP)</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$19,147</td>
<td>0-6</td>
<td>4,878</td>
</tr>
<tr>
<td>Lead (CLPPP) gap funding via taxes</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$99,000</td>
<td>0-5</td>
<td>4,878</td>
</tr>
<tr>
<td>11 Linn County Early Childhood Iowa*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$147,011</td>
<td>3-5</td>
<td>3,651 children &amp; pregnant women</td>
</tr>
<tr>
<td></td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$633,132</td>
<td>0-5</td>
<td>107 children &amp; 160 childcare providers</td>
</tr>
<tr>
<td></td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$698,057</td>
<td>0-5</td>
<td>451 families</td>
</tr>
<tr>
<td></td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$64,577</td>
<td>0-5</td>
<td>0 (Admin)</td>
</tr>
<tr>
<td>N/A MIECHV</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$0</td>
<td>0</td>
<td>N/A</td>
</tr>
<tr>
<td>12 Prevent Child Abuse (ICAPP/CBCAP)</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$46,980</td>
<td>0-18</td>
<td>195</td>
</tr>
<tr>
<td>Was not awarded funds in FY 19</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$0</td>
<td>0-18</td>
<td>195</td>
</tr>
<tr>
<td>13 Shared Visions Parent Support Grantees</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$0</td>
<td>0-18</td>
<td>195</td>
</tr>
<tr>
<td>Shared Visions Preschool Grantees*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$1,239,077</td>
<td>0-3</td>
<td>210</td>
</tr>
<tr>
<td>14 Statewide Voluntary Preschool*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$5,160,176</td>
<td>0-3</td>
<td>1,412</td>
</tr>
<tr>
<td>15 Title V Maternal Child Health Grantee (HACAP Child &amp; Maternal Health)*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$538,917</td>
<td>0-3</td>
<td>1,412</td>
</tr>
<tr>
<td>16 United Way of East Central Iowa (UWECI)*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$751,618</td>
<td>0-5</td>
<td>3,792</td>
</tr>
<tr>
<td>17 Women, Infants, and Children (WIC)*</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$982,002</td>
<td>0-5</td>
<td>7,679 children &amp; pregnant women</td>
</tr>
<tr>
<td>18 Wraparound Grants</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>$264,000</td>
<td>0-5</td>
<td>88</td>
</tr>
</tbody>
</table>

**Total** $28,020,463

**Notes**

1. Also provides service to Iowa City and Dubuque
2. Also provides service to Benton and Jones County
3. Also provides service to Benton and Dubuque
4. Also provides service to Benton, Cedar, Iowa, and Jones County
5. Entity stated they could not provide requested information
6. Funding is not available in Linn County
7. The ECI Board shares this intent and works collaboratively with this partner
Child Care Provider Maps - Linn County
The map depicts location of child care sites in Linn County by type.
Child Care Provider Maps - Cedar Rapids Metro Area
The map depicts location of child care sites in Cedar Rapids Metro Area by type.
Contact Information

**Linn County Early Childhood Iowa**
Linn County Community Services  
1240 26th Avenue Court SW  
Cedar Rapids, Iowa 52404  
319-892-5721  
[https://www.linncounty.org/981/Early-Childhood-Iowa](https://www.linncounty.org/981/Early-Childhood-Iowa)

**United Way of East Central Iowa**
317 7th Avenue SE, Suite 401  
Cedar Rapids, Iowa 52401  
319-398-5372  
[https://www.uweci.org](https://www.uweci.org)
Reference Endnotes

1 https://developingchild.harvard.edu/science/key-concepts/
2 Campaign for Grade Level Reading
4 https://heckmanequation.org/resource/13-roi-toolbox/
5 www.linncounty.org
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7 Woods and Poole
11 U.S. Census Bureau. American Community Survey 5-Year Estimate (2017), Table B09002
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16 Iowa Department of Education
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19 https://idph.iowa.gov/Health-Equity
21 The Health of Linn County: A county-wide assessment of health status & risks, Jan 2018
22 Inside I-Smile 2018 Annual Report, Iowa Dept of Public Health
23 SEAL CARes Year End Report, FFY 2016
24 Iowa Behavioral Risk Factor Surveillance Survey (BRFSS) 2016
26 Cedar Rapids Gazette, June 14, 2015
27 Association of Maternal & Child Health Program Innovation Station, 12.20.16
28 Zero To Three.org/resources/2114 public perception of baby brain development, 2017
30 DHS; US Census Bureau, 2011-2015 American Community Survey 5 year estimate and LSA Document)
31 https://idph.iowa.gov/5210
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33 https://www.who.int/favicon.ico
34 Linn County Community Health Improvement Plan 2017
35 2019-2021 Linn County, IA Community Health Improvement Plan
37 http://linncounty.org/1281/My-Care-Community
38 Association of Maternal & Child Health Program Innovation Station, 12.20.16.
39 http://idph.iowa.gov/1stfive
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43 Linn County 2018 ECI Parent Survey
44 Linn County ECI Futures Committee 1.25.18 Forum minutes
45 Inside I-Smile, 2018 Annual Report
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47 www.map.feedingamerica.org/county
50 9.21.18 Linn County ECI Child Health Committee focus group
53 https://en.wikipedia.org/wiki/Community_indicators
55 https://iowaccrr.org/data/ Data Sheet by County
56 Iowa Dept of Education, Bureau of Information and Analysis Services Student Reporting in Iowa, Fall 2019 Merged Report
59 Dept of Ed Data Request provided by Kimberly.villotti@iowa.gov
60 https://www.epi.org/publication/child-care-affordability/
61 https://datacenter.kidscount.org/ 2018
63 https://iowaccrr.org/data/ Child Care Desert Data by City in Iowa
64 https://iowaccrr.org/data/ Data Sheet by County
65 Kofoed, Adam. Linn County, Iowa Daycare Trends. University of Iowa, 2018, Linn County, Iowa Daycare Trends
67 July 2019 dhs.iowa.gov/iqrs
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71 https://iowaccrr.org/data/ County specific data by year
72 Iowa Dept of Education, Student Reporting in Iowa, SRI, Fall 2019, via State ECI Office
73 http://www.nccp.org/publications/pub_786.html
74 https://iowaccrr.org/data/ Child Care Desert Data by City in Iowa
75 https://iowaccrr.org/data/ Data Sheet by County
78 Bipartisan Policy Center PowerPoint 8.29.19 www.bipartisanpolicy.org
79 https://iowaccrr.org/data/ County specific data by year
80 Iowa Dept of Education, Student Reporting in Iowa, SRI, Fall 2019, via State ECI Office
81 http://www.nccp.org/publications/pub_786.html
83 https://svi.cdc.gov/factsheet.html
84 https://www.linncounty.org/1098/Core-Services
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