

The Well-Being of Infants and Toddlers in the Adirondacks



THE ADIRONDACK REGION has a compelling interest in the development of its youngest citizens. Infants and toddlers represent the future of the Adirondacks and research and practice shows a strong link between healthy development during the early years of childhood and success later in life.

Recognizing the importance of the first few years of life led to the establishment of the Adirondack Birth to Three Alliance. The Birth to Three Alliance (1) is working to bring the resources of all programs and services for young children and their families together in helping to fulfill the promise of today's children to become healthy, thriving and contributing members of the Adirondack community. The Alliance does this work by focusing on three goal areas: Healthy Children, Strong Families, and High-Quality Early Learning. In each focus area, the Alliance has developed a strategic plan for strengthening and expanding services to meet the needs of young children and their families. Yes, there are already an array of supports and services available, but:

- Do they reach into every pocket of the region?
- Do they have the resources they need to effectively meet the sometimes multiple needs of children and families?
- Can we better connect these supports and services so that they serve children and families as effectively and as efficiently as possible?

This is the work of the Adirondack Birth to Three Alliance.

But how do we know if we have been successful? What is the status of infants and toddlers and their families now and how will we know if child well-being is improved through the efforts of the Birth to Three Alliance in the future?

This report has been written to establish the baseline needed to answer those questions. It provides regional and county data on each of the three focus areas. The data includes both population data, such as the number of children birth to three in the region and number and percent of children living in poverty, and program data, such as the number of children enrolled in early childhood education programs. Because we are establishing a baseline, the report uses primarily 2015 data, which is the year the Alliance was established. Where available and meaningful, it includes comparisons to data for the state as a whole (labeled New York State) and the area of the state outside New York City (labeled Rest of State). There has been no attempt to be exhaustive, there is far more data that could be reported. Instead efforts have been made to identify the key indicators of child and family well-being that the Alliance would hope to positively influence. Also provided are a few demographic indicators, such as the number of children in poverty, that help to show the complexity of the problems we are trying to address. This is done with full awareness that many of these indicators are not likely to change over a short time period. Building an effective and efficient system of services and showing the impact of that system on the lives of children and families will take time.

Section I: Background

BT3's region, which includes Clinton, Essex, and Franklin counties, is home to 173,097 people. Of those, approximately 5,000 (4,967 or 2/8%) are under 3 years of age. On average, 1,500 are born each year in the three counties. Residents in the region are predominately white (88.3%). In addition, 4 percent of residents are Black, 3 percent are Hispanic, 2 percent are Native American, and 2 percent are other (mostly Asian). Approximately, 6,978 children birth to 17 years of age live in poverty. The percentage of children 17 years of age and younger living in poverty in the North Country is slightly higher than the rest of state (22.9% vs 22.3%) and significantly higher than the counties in the state outside of New York City (17.3%). In addition, the region suffers from relatively lower wages than the rest of the state resulting in the median household income ranging from 11 to 19 percent lower than the statewide median income and lags behind the rest of the United States (Clinton \$49,930, Essex \$52,788, Franklin \$47,923, New York State \$59,269, and the area of state outside of New York City \$53,889).

Our kids

1,500 babies born per year
5,000 between 0-3
7,000 between 0-17 living in poverty

Percent of children 17 years of age and younger living in poverty

North Country: 22.9%
New York State: 22.3%
New York City: 29%

Throughout this report, the reader will find instances where infants and toddlers in the North Country fare better than their peers in the rest of the state. For example, young children in the North Country are more likely to receive their recommended child well-being visits with their pediatrician. Unfortunately, North Country children are also more likely to be a subject of an abuse and neglect petition and are also more likely than their peers living in areas of the state outside of New York City to be living in poverty. If we want all

Adirondack children to be successful in school and life, it is imperative that we build off the strengths of the region, while addressing the weaknesses.

Section II: Healthy Children

The foundation for a healthy childhood begins during and even before pregnancy. A woman's preconception health plays an important role in determining the pregnancy outcome for herself and her baby. After delivery, new parents need to continue to practice healthy behaviors for themselves and their children. Preventive measures such as immunizations, developmental screenings, and well-child visits with their pediatrician are efforts used to promote the overall well being of children. By and large, children in the North Country fare better than their peers in other areas of state in terms of indicators of health and well-being.

The rate of women obtaining early prenatal care is higher in Clinton County (87.7%) than any other county in the state. Unfortunately, the rate by which women receive early prenatal care in Essex (73.7%) and Franklin (70%) counties are at or below the statewide average (73.7%) and the area of the state outside of New York City (75.7%). Obtaining prenatal care as early in the pregnancy as possible is critical to the child's development. Crucial development occurs very early in pregnancy and the earlier prenatal care the greater the benefit it provides. *Data Source: New York State Kids Well-Being Indicator Project (KWIC) www.nyskwic.org.*

Percent of women receiving early prenatal care

Clinton County: 87.7%
Essex County: 73.7%
Franklin County: 70%
North Country: 79.3%
New York State: 73.7%

The North Country is fortunate that nearly 97 percent of its children under 19 years of age have health insurance. This is important because health insurance coverage has been found to be positively associated with children's use of health services. Compared to uninsured peers, children who have health insurance coverage are more likely to have

a regular source of medical care, receive health care when they need it, and have fewer unmet health care needs. (Lewitt, Bennett, and Behrman 2003). *Data Source: New York State Prevention Agenda Data Dashboard https://www.health.ny.gov/prevention/prevention_agenda/2013-2017*.

Given the high rates of health insurance coverage, it follows that North Country children birth to 15 months also have high rates of receiving their recommended number of well-child visits. Nearly 90% of North Country children receive their recommended number of well-child visits as compared to 80.2 percent statewide. Receipt of well-child visits helps to ensure that children who have physical or mental disabilities or other childhood health conditions are identified as early as possible. *Data Source: New York State Prevention Agenda Data Dashboard https://www.health.ny.gov/prevention/prevention_agenda/2013-2017*

Percent of children under 19 with health insurance

Clinton County: 97.1%
Essex County: 96.7%
Franklin County: 96.1%
New York State: 97.4%

Percent of children 0-3 in the Early Intervention Program

Clinton County: 4.9%
Essex County: 3.8%
Franklin County: 3.1%
New York State: 4%

The percentage of North Country children served by Early Intervention Programs are in line with the state percentage and much higher than the national percentage (2.8%). This indicates that the North Country is doing a good job of identifying and referring children with developmental delays and disabilities. Rates have been steady over the last five years varying less than 1 percent from the current rate in each county. *Data Source: NYS Department of Health Early Intervention Program https://www.health.ny.gov/statistics/community/infants_children/early_intervention/local_program_performance/*

North Country children are on par with their peers in other areas of the state in receiving the recommended immunizations between 19 and 35 months of age. The immunization rate for each county in 2015 represents a significant, gradual increase over the rate of immunization in 2009. Receiving the recommended series of immunizations is important because vaccines protect children and adults from illness and death by once common diseases such as polio, measles, and diphtheria. *Data Source: New York State Prevention Agenda Data Dashboard https://www.health.ny.gov/prevention/prevention_agenda/2013-2017*

Percent of children with complete immunization series

Clinton County: 74.2%
Essex County: 68.6%
Franklin County: 71.7%
New York State: 71.8%

Percent of obese children 2-4 years old, in WIC

Clinton County: 14.5%
Essex County: 15.4%
Franklin County: 13.4%
North Country: 14.5%
New York State: 13.6%

The percentage of obese (95th percentile or higher) North Country children (aged 2-4 years) participating in the Women Infant and Child Nutrition Program is higher than the statewide average. Approximately 14.5 percent of North Country children ages 2-4 are obese as compared to 13.6 percent of children in the rest of the state. This is important because being overweight or at-risk of being overweight as a child can pose long lasting negative health effects. *Data Source: New York State Department of Health, Community Health Indicator reports <https://www.health.ny.gov/statistics/chac/general/g72.htm>*

What is BT3 doing to Improve Child Health Care?

The importance of healthy development to the future success of children ages zero to five cannot be understated. Developmental screenings have been recognized as one of the most effective methods available to identify developmental delays and behavioral dysfunctions which, when followed by appropriate interventions, greatly improves school readiness and future success in young children. Yet developmental screenings are not routinely provided and there are multiple barriers to linking children and families to needed programs, services and other resources. For that reason, the Adirondack Birth to Three Alliance is looking to replicate Help Me Grow across the region.

Help Me Grow is a proven systemic approach that leverages existing resources to identify developmentally vulnerable children and link families to community-based services, while empowering all families to support their children's healthy development. These resources can include health and human services, education programs, social services, early care and learning providers, and resource and referral systems such as 2-1-1. Rather than a freestanding program, Help Me Grow provides a cross-systems framework that identifies and maximizes existing programs, funding, and data systems to improve resource allocation and create community connections in a family-centered service delivery system. This helps parents access the supports and services they need and improves developmental outcomes.

Section III: Strong Families

Families and the role that parents play in a child's early life are the foremost influential factors on development. Thus, the presence of strong families that provide consistent and supportive relationship is vital to the healthy development of children. By a number of indicators, North Country children and families do less well economically than children and families in most other areas of the state outside of New York City. Economic stress is well known to greatly impact the ability of parents to address other issues in their lives including providing the care and attention that children need.

The percentage of children living in poverty in the North Country is slightly higher than the rest of the state (22.9% vs 22.3%) and significantly higher than the counties in the state outside of New York City (17.3%). Just more than a quarter of children residing in Franklin County (26.2%) reside in poverty. To live in poverty is to not have enough income to meet basic needs such as food, shelter, and clothing. A family's income can impact children's physical, health, cognitive abilities, school achievement, and behavioral and emotional outcomes.

(Engle, Black, 2008) *Data Source: New York State Kids Well-Being Indicator Project (KWIC) www.nyskwic.org*

Percent of children birth to 17 years living at or below federal poverty level

Clinton County: 22.3%
Essex County: 19.3%
Franklin County: 26.2%
New York State: 17.3%

Percent of children under 6 years old in deep poverty (at or below 50% of federal poverty level)

Clinton County: 16%
Essex County: 12%
Franklin County: 16%
North Country average: 15%
New York State: 11%

In New York State, both Clinton and Franklin counties rank 5th in having the highest percentage of children under age 6 living at or below 50% of the federal poverty level. In both Clinton (732 children) and Franklin (487 children) counties, 16 percent of all children under age 6 live in deep poverty. In Essex County, 236 or 12 percent of children live in deep poverty. This compares to 11% for the state as a whole (1,373,248 children).

Children in the North Country are more likely to be receiving Supplemental Nutrition Assistance Program Benefits (formerly referred to as Food Stamps) than children in other areas of the state outside of New York City 22.2% vs. 20.4%. The Supplemental Nutrition Assistance Program (SNAP), formerly the Food Stamp Program, is a federally-funded entitlement program designed to increase the food purchasing power of low-income households to a level that allows these households to purchase a low cost, but nutritionally adequate diet. This is important because the number and percent of children receiving food stamps measures the extent to which children live in families that require governmental assistance to purchase a minimally adequate diet. *Data Source: New York State Kids Well-Being Indicator Project (KWIC) www.nyskwic.org*

Percent of children, youth receiving SNAP benefits

Clinton County: 23.3%
Essex County: 16.7%
Franklin County: 24.2%
New York State: 25.8%
North Country 22.2%
Rest of State 20.4%

Percent of children living in households experiencing food insecurity

Clinton County: 21.9%
Essex County: 20.2%
Franklin County: 24.7%
New York State: 19.4%

Children in Clinton, Essex, and Franklin counties are more likely to experience food insecurity than children in the state as a whole. Over 20 percent of children living in Clinton (21.9%), Essex (20.2%) and Franklin (24.7%) counties experience food insecurity vs. 19.4 percent statewide. What is more, a significant percentage of children who are food insecure live in families whose income (185% of poverty or above) make them likely ineligible for federal nutrition assistance: 30% in Clinton, 32% in Essex, and 12% in Franklin). Household food

security is defined as having access at all times to enough nutritious food for an active and healthy life, whereas, insecurity results whenever access to adequate foods is uncertain. Household food insecurity is a concern because of its association with adverse health and developmental outcomes for children. The inability to access enough food can also lead to emotional and psychological stress and negatively affect the overall sense of well-being that exists within a household. *Data Source: Feeding America <http://map.feedingamerica.org/county/2015/overall/new-york>*

Far more children in the North Country are involved in indicated cases of child abuse and maltreatment than their peers in many other areas of the state. The rate per 1,000 of unique children involved in an indicated report (meaning that at least one allegation was substantiated) is much higher for the North Country (29.8), than statewide (13.8), and the area of the state outside New York City (16.0). What is more, while the rate for New York State and the Rest of the State is on a downward trend, the rate for the North Country has increased since 2010. For New York State, that rate of children involved in an indicated case of child abuse and neglect has decreased from 18.6 in 2010 to 13.8 in 2015. During the same period the rate for the rest of the state decreased from 17.2 in 2010 to 16.0 in 2015, while the rate for the North Country increased from 23.6 in 2010 to 29.8 in 2015. The rate per 1000 cases increased in each of the three counties during this time period. The highest rates were found in Franklin County where the rate rose from 31.7 per 1,000 children to 41.9. During that period the rate in Clinton County rose 23.3 to 25.7, while the rate in Essex County rose from 13.8 to 21.1.

Children and youth in indicated cases of child abuse and maltreatment (rate per 1,000 children)

Clinton County: 25.7
Essex County: 21.1
Franklin County: 41.9
New York State: 13.8

While the North Country rates do not compare favorably to the state and the area of the state outside of New York City, the rates are in line with other rural counties in the state (see http://www.nyskwic.org/get_data/indicator_profile.cfm?subIndicatorID=107). Research has shown that persistent stress resulting from child maltreatment for young children can disrupt early brain development and impair development of the nervous and immune response systems. *Data Source: New York State Kids Well-Being Indicator Project (KWIC) www.nyskwic.org*

Percent of families who receive a nurse home visit prior to and after their child is born

Clinton County: 396, or 58% of all births

Essex County: 78, or 21% of all births

Franklin County: 102, or 25% of all births

Approximately 45 percent of all parents in the North Country are visited prior to and or after their child is born. Anyone who has had a child knows that there are times when you have doubts and questions. The North Country is fortunate that each county has public health nurses who visit pregnant women and families with newborn children to answer questions and make sure families are aware of and connected to the community resources they need. This is an important service because knowing that skilled nurses are available to answer questions when a problem arises helps a new parent feel confident and supported. Unfortunately, due

to declining state and federal funding, county nurse home visiting programs only serve a small proportion (45%) of pregnant women and families with newborns. *Data sources: For Clinton County program data from the Healthy Families New York and Clinton County Health Department, for Essex County Early Head Start and the Essex County Health Department, for Franklin County and the NYS Department of Health Vital Statistics https://www.health.ny.gov/statistics/vital_statistics/*

Of the approximately 5000 children birth to three years of age living in the North Country, 1,110 of them are living in poverty (22.2%).

Of these, only 224 are receiving comprehensive home visiting services. While there is no silver bullet for ending childhood

poverty, or the negative health, educational, and child welfare impacts it can have, evidence-based comprehensive home visiting programs for vulnerable pregnant women and families with newborn children comes close. Comprehensive home visiting

refers to a constellation of supports that serve to strengthen vulnerable families with young children by meeting with families in their homes and directly providing or connecting

them with a range of other community resources, depending on each family's unique needs. This is important because comprehensive home visiting services has proven benefits for all members of participating families, including improved birth outcomes for newborns; increased high school graduation rates for children; increased workforce participation and lower rates of welfare dependency of parents; and reduced instances of child maltreatment in families. Home visiting is effective because it builds on each family's strengths, and addresses each family's weaknesses either directly or by connecting the family to other community resources. *Data Sources: For Clinton County program data from the Healthy Families New York, for Essex County program data from Early Head Start, for Franklin County program data from Catholic Charities and poverty data from New York State Kids Well-Being Indicator Project (KWIC) www.nyskwic.org*

While Family Resource Centers exist in 3 communities across the region (Plattsburgh, Malone, and Tupper Lake), there are large numbers of families that do not have access to the valuable support that Family Resource Centers provide. As a result, of 14,234 families with children under the age of 18 in the North Country, only 695 families (5%) have benefitted from their services. A Family Resource Center is a warm and welcoming place in the community where any family member can go and connect with other families as a regular part of day-to-day life. There are no eligibility requirements but a range of family supports are generally offered: evidenced-based parent education classes, child development activities, parent-to-parent support groups, health information, and referrals to other community resources. Family Resource Centers are unique in their approach to working with families: they build families' strengths and capacities, serve as a hub for the community, work for positive social change, and offer help without stigma. Family resource centers are especially valuable in rural areas where there are few opportunities for networking, and social isolation of parents with young children can become a serious problem. *Data Sources: Program data from the Child Care Council of the North Country and census data from <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?ftp=table>*

Number of vulnerable families receiving comprehensive home visiting services

Clinton County: 101 families

Essex County: 72 families

Franklin County: 51 families

Number of families participating in family resource center activities

Clinton County: 553 families

Essex County: 0 families

Franklin County: 142 families

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In the North Country , 259 families out of 14,234 households with children received parenting education in 2015 (2%) . Children do not come with an owner’s manual and the knowledge and skills needed to raise healthy, happy children are not something that everyone is born with nor are they handed to parents before they leave the hospital with their new child. Evidenced-based parenting education support families by helping them master the skills needed to raise healthy and happy children and help ensure children function well at home and at school. This is important because parents who feel confident in addressing the needs of their children will stress less and are more able to keep their children healthy, safe, and ready to start school with the cognitive, social, and emotional skills needed to learn. *Data Sources: Program data from the Child Care Council of the North Country and census data from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?_afpt=table*

Number of families participating in parenting education

Clinton County: 79 families
Essex County: 78 families
Franklin County: 102 families

What the Adirondack Birth to Three Alliance is doing to strengthen family supports

The Adirondack Birth to Three Alliance is working on several strategies to strengthen supports for families in the North Country. These include:

- Investigating how to maximize existing funding sources as well as accessing new funding opportunities made available through health care reform and Medicaid redesign to support the expansion of home visiting services. As part of this effort, the Adirondack Birth to Three Alliance is looking at ways to better coordinate the various home visiting programs that are available to pregnant women and new parents to ensure that a common set of information on community resources is made available. The Alliance developed family support brochures for Essex and Franklin counties to assist with referrals and avoid duplication of services.
- Supported Healthy Families New York in Clinton County in writing a successful proposal for a five-year, \$1 million grant to expand their services to Franklin County and Mohawk Reservation.
- Successfully becoming a pilot site for the ‘New Parent Kit’ developed by the NYS Parenting Education Partnership and the NYS Council on Children and Families. The New Parent Kit includes the New Parent Guide – a kind of owners’ manual for families with newborns. The Guide provides advice for new parents, including information on available resources. The kit also includes a helpful book - What to Do When Your Child Gets Sick. The Adirondack Birth to Three Alliance is working with home visiting programs across the region to provide the kit to pregnant women and families with newborns. Finally, the Adirondack Birth to Three Alliance and the Adirondack Foundation have taken steps to augment the materials families receive, including providing families with Safe Sleepers, baby clothes, and other materials.
- Investigating opportunities in Saranac Lake and other communities for increasing the number of Family Resource Centers and the availability of evidenced-based parenting education.



Section IV: Early Learning

While parents remain children’s earliest and most important teachers, the significance of early care and education services including center and family-based child care, Early Head Start and Head Start, and Universal Prekindergarten Programs, continues to grow as parents of young children spend more time in the workforce and seek enriching opportunities for their children. The arrangements that families make for their children vary tremendously. No matter the setting, it is important that a child experiences high-quality early childhood education that promotes healthy development. Early brain research is clear: a child’s day-to-day experiences affect brain development and these early experiences influence every child’s development.

There are nearly 3,800 regulated slots in early childhood education programs available to children in the North Country (3,784). Of these, 2,016 are in Clinton County, 667 are in Essex County, and 1,097 are in Franklin County. The majority of early childhood education capacity in each county is found in family child care (2,026 slots). The remaining slots are located in center-based programs (1,097 slots) and group family child care (661 slots). Based on the number of available slots it is estimated that 52 percent of children 6 weeks to 5 years of age in Clinton County and 41 percent of children in Essex and Franklin Counties regularly participate in early childhood education programming.

Access to early childhood education programs is important in that it allows parents to work knowing that their child is safe and, if that care is in high-quality program they can rest assured that that the child’s developmental needs are being met. *Data source: NYS Office of Children and Family Services Child Care Facility Data System*

Number of licensed & registered child care programs by type and capacity

Clinton County: 2,026
 Essex County: 667
 Franklin County: 1,097
 North Country: 3,784

Location	Regulated Child Care Program Slots							Total	
	Family Child Care		Group Family Child Care		Center-based Child Care		Programs	Slots	
	Programs	Slots	Programs	Slots	Programs	Slots			
Clinton	53	979	39	339	18	593	110	1911	
Essex	29	423	6	232	11	280	46	935	
Franklin	35	624	14	90	15	224	69	938	
Total	117	2026	59	661	44	1097	220	3784	

Number of children in public school-based pre-K programs

Clinton County: 346
 Essex County: 223
 Franklin County: 244
 North Country: 813

The majority of prekindergarten programs in the North Country are operated by school districts in school district buildings or by community-based agencies operating classrooms in public schools. These programs are not subject to child care licensure and, therefore, are not counted in the numbers of regulated child care program slots above. In Clinton County, there are 346 children participating in school-based prekindergarten. The number for Essex County is 223 and for Franklin County 244, bringing the total for the North Country to 813. Therefore, the total number of early childhood education slots

for all children in the North Country is 4,597. It is important to note that one child could feasibly be enrolled in a school-based prekindergarten program and also receive child care during non-prekindergarten hours or days so these are not exclusive numbers. *Data source: Program data*

Many low-income working families and families on federal Temporary Assistance for Needy Families (TANF) are eligible for government-funded child care subsidies that help parents pay for child care services. It is estimated that approximately 17 percent of eligible children receive child care subsidies. Child care subsidies are funded by the Child Care and Development Block Grant that blends together federal child care and TANF funds with state funding. Each county receives an allotment based on population and the number of

Number of children receiving childcare subsidies

Clinton County: 169
 Essex County: 51
 Franklin County: 213
 North Country: 433

children and families living in poverty. In the North Country, 433 children received child care subsidies, including 169 in Clinton County, 51 in Essex County, and 213 in Franklin County.

Data source: <http://otda.ny.gov/resources/legislative-report/2016-Legislative-Report.pdf>

Parents receiving child care subsidies have the choice of who provides care. While many parents choose to use their subsidy to pay for care by a regulated provider, others choose to use the subsidy to pay for care provided by a relative or friend. Such care is exempt from licensing and regulation if the provider provides care to no more than two non-relative children. Choosing not to use regulated care can be an indicator of availability of regulated care. In some cases, regulated care is not available because the parents work nights and/or weekends and, in other cases, they just prefer to have family members care for their children. Ideally, the percentage of families using unregulated care is low, because there are not the safe guards provided by regulated care and regulated care programs often provide higher quality services. In the North Country, the percentage of families using unregulated care is lower (15.7%) than the state average (22%). The percentage of families using their child care subsidies for unregulated care in Clinton County is 7 percent; Essex County 19.6 percent; and Franklin County 19.2 percent.

Number/percentage of children receiving subsidies in unregulated settings

Clinton County: 12, or 7%
Essex County: 10, or 19.6%
Franklin County: 46, or 19.2%
North Country: 68, or 15.7%
New York State: 22%

Number and percent of programs participating in QUALITYstarsNY

Clinton County: 5, or .05%
Essex County: 7, or 15%
Franklin County: 5, or 7%
North Country: 22, or 10%

22 regulated early childhood education programs and providers (10%) are participating in QUALITYstarsNY. QUALITYstarsNY is a continuous quality improvement system that supports programs and providers achieve program standards that have been shown by the research to result in positive outcomes for children. In addition, research has shown that parents whose children are in high-quality early care and education programs are more productive, take fewer days off, and are more likely to advance in their careers.

Data Source: QUALITYstarsNY - special request

Approximately 20 percent of all children are enrolled in programs participating in QUALITYstarsNY. This is important because children who experience high-quality early childhood education have been shown through decades of evaluative research to do better in school, were less likely than their peers, who did not participate in such a program, to become involved in the juvenile and criminal justice system, had lower rates of teen-age pregnancy, were more likely to graduate from high school, and had higher incomes. *Data Source: QUALITYstarsNY-special request*

Number and percent of children in QUALITYstarsNY

Clinton County: 431, or 27%
Essex County: 173, or 18%
Franklin County: 172, or 16%
North Country: 776, or 20%

As of May, 2016, 114 staff of early childhood education programs and family and group family child care providers had registered with Aspire – New York’s Early Childhood Workforce Registry. As a result, the following numbers only reflect a small portion of the North Country’s early childhood education workforce, but the numbers are important in order to show comparisons over time.

Of the 114 registered on May 16, 2016, only 84 had the education records verified. Of these, 36 or 43% possessed a degree or a credential. This included 12 with a Career Development Associates Credential (CDA); 6 with some college coursework; 5 with Associate’s degrees; 8 with Bachelor’s degrees; 3 with some graduate coursework and 5 with Master’s degrees. *Data Source: Aspire Workforce Registry – special request*

The New York State Association for the Education of Young Children has established the Training and Technical Assistance Professional Credential to formally recognize the value and specialized knowledge, skills, and attitudes necessary for those who provide community-based training to early care and education programs and providers. The credential provides a standard of quality for early learning training and represents a level of professional achievement for trainers and technical assistance providers. In the North Country, as of May 16, 2016 a total of 16 trainers had completed an application to work toward the Training and Technical Assistance Professional Credential and of those 3 (16%) had received their credential. Because the credentialing process is relatively new, it is expected that these numbers will grow over the years.

Data Source: Aspire Workforce Registry – special request

Number and percent of credentialed trainers

Clinton County: 2, or 28%

Essex County: 0

Franklin County: 1, or 25%

North Country: 3, or 16%

What the Adirondack Birth to Three Alliance is doing to improve early childhood education

The Adirondack Birth to Three Alliance and the Adirondack Foundation are implementing several strategies to improve early childhood education in the North Country. These strategies include:

- Supporting early childhood education programs and providers across the region to become involved in QUALITYstarsNY. This has included supporting recruitment efforts and seeking to engage public and private support for increasing the number of programs that are able to participate.
- Supporting the Adirondack Foundation’s Small Grants for Small Children initiative which provides needed funds to programs to purchase equipment, curricula materials, provide professional development opportunities to staff, and address other critical funding needs. The Adirondack Birth to Three Alliance has supported the Small Grants for Small Children program by getting the word out to eligible providers across the region.
- To address the shortage of early childhood education providers in the region, the Adirondack Birth to Three Alliance supported the Child Care Council of the North Country and the ACAP Child Care Resource and Referral Program’s successful application for the Adirondack Foundation’s Generous Act funding to recruit and provide preliminary training to new early childhood education providers in areas of the region that lack providers.
- The Adirondack Birth to Three Alliance has established an Early Childhood Workgroup to develop strategies and an action plan to increase access to and support of high-quality early care and education in Clinton, Essex, and Franklin Counties and the Saint Regis Mohawk Reservation.

BT3 is a project of Adirondack Foundation and is supported by foundations and charitable gifts.

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