

First 1,000 Days

A CALL TO ACTION



POPULATION
HEALTH TRUST
ADVISORY COMMITTEE

Children's Council
of Skagit County



OUR VISION

ALL CHILDREN ARE HEALTHY AND HAVE POSITIVE,
RESPONSIVE RELATIONSHIPS AND ENVIRONMENTS

Introduction

OUR HEALTH IS the result of biology, behavior, and physical and social environments. Health begins long before pregnancy and birth, and is influenced both by parental well-being and by a child's early environment and experiences. The conditions faced in the early months and years lay the groundwork for a lifetime. Physical and social environments that promote healthy development, especially during infancy and early childhood, are critical. Young children depend on their parents to provide a safe, stable, and nurturing environment, and parents and caregivers deserve access to resources and support to best provide for their children.

A child's brain grows very quickly during the First 1,000 Days of life, starting before birth. Scientists at Harvard have discovered that more than 1 million new neural connections are formed in our brains every second in the first few years of our lives! Healthy brain growth results in a strong foundation for future learning, behavior and lifelong health. We know that children raised in stable, supportive environments do better in school and grow into healthier, more productive adults.

Children are the focus of this Call to Action.

Every strategy and action taken will help us make sure that each child has the safe, stable, nurturing relationships and environments they need.



IN RECOGNITION OF the importance of the earliest years of life, The Population Health Trust and Children's Council of Skagit County partnered to convene the First 1,000 Days workgroup with the aim to:

1. Understand the scope of community needs
2. Identify what is being done and what is working well
3. Conduct a gaps analysis
4. Evaluate data to determine priorities
5. Develop strategies and action steps
6. Create an improvement plan to guide the community with a shared vision

The work in this plan was driven by:

1. The science of human development that demonstrates the impacts of early life experiences on health and well-being throughout the lifespan
2. Community-identified health priorities
3. The desire of local agencies to come together and advance this work
4. Alignment of philanthropic support

How to Use This Document

THIS 'CALL TO ACTION' outlines the results of a shared community process. It is intended to serve as a guide to make sure ALL children in Skagit County are healthy and have positive, responsive relationships and environments. Everyone has an important role to play in this work. This plan is for parents, caregivers, relatives, friends, neighbors, employers, organizations, and professionals that work with young children and their families. **You can be involved!**

This document is meant to give an overview of strategies and actions so that anyone in the community can see how to advance this work. *Readers that want to know more about the process should view the full First 1,000 Days Workgroup 2018 Summary Report and Recommendations on the Population Health Trust website: www.skagitcounty.net/PHTAC.*

Supportive Communities & Systems

GOAL 1 Skagit County has an equitable, easily navigated and integrated health, social services, and early learning system for caregivers and families to access resources, services and supports

STRATEGY A

Create a common understanding of the importance of the First 1,000 Days to increase the support and commitment of local leaders and the community-at-large in prioritizing early childhood

“Every system that touches the lives of children offers an opportunity to strengthen the foundations and capacities that make lifelong healthy development possible”

~ Center for the Developing Child, Harvard University, 2010

ACTIONS

- Identify a lead organization for public awareness campaign
- Roll out a collaboratively designed messaging campaign between the lead organization and Children’s Council that engages multiple sectors and targeted audiences



STRATEGY B

Create a coordinated and effective information and referral system that prioritizes addressing challenges unique to under served populations

“Tracking down information felt like an underground network” ~ Parent feedback during focus group

ACTIONS

- Dedicate staffing to develop, operate and maintain a formalized information and referral system
- Build referral relationships, utilizing hubs such as prenatal and well-child care providers, DSHS, and WIC
- Develop a sustainable, universal application process that screens for multiple services
- Develop a common brand for family outreach materials

STRATEGY C

Provide universal access to quality health, early learning, family support, special needs, and basic needs services, prioritizing the populations facing the greatest health disparities

ACTIONS

- Develop a coordinated process for communicating with families about community resources
- Build local capacity to expand perinatal and infant behavioral health services
- Use WIC-inspired model to increase connections to nutrition education, breastfeeding, linkages to services and parental supports

FACT Only 41% of Aguacateco, Triqui, and Mixteco women have health insurance. Triqui women have the lowest insurance rate, at just over a quarter.

STRATEGY D

Support healthy relationships, reduce sources of stress, and build and enhance core life skills for parents and caregivers

ACTIONS

- Reduce barriers to basic needs services including location, scheduling, fragmentation, and multiple application requirements
- Make individual family support available to all, such as community health workers, home visiting, and newborn visits
- Create and promote multiple avenues to access high quality parenting education

“For me, there are a lot of challenges about the hours services are available. I’d have to take an entire day off work to come to a 30-45 minute appointment”

~ Quote from a parent focus group

Stable & Nurturing Families

GOAL 2 All families have what they need to provide safe, stable, nurturing relationships and environments

STRATEGY A

Assure use of quality health, early learning, family support, special needs, and basic needs services

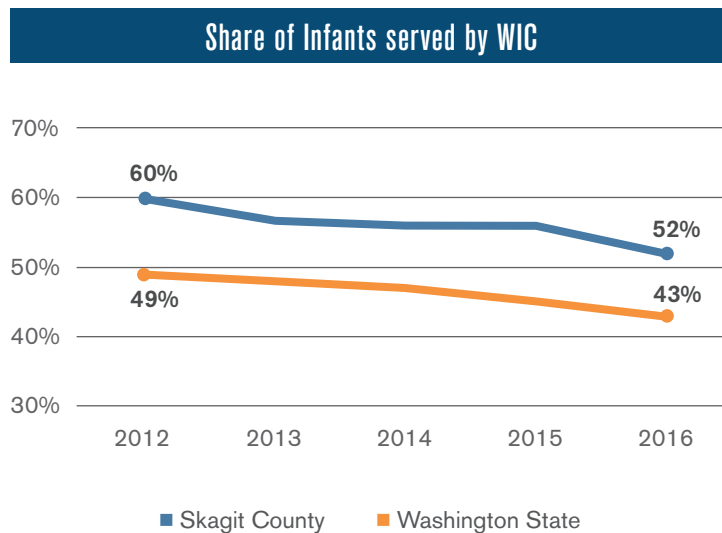
ACTIONS

- Offer activities, classes, and appointments in multiple languages, a diversity of geographic locations and with scheduling options that accommodate caregiver needs
- Eliminate child care needs as a barrier to families participating in programs and services
- Articulate the value of services and supports to all families, particularly those experiencing linguistic or other barriers, and provide a warm hand-off with referrals



SERVICES SUCH AS Maternity Support Services, Infant Case Management, and Women, Infants & Children Nutrition Program (WIC), are meant to mitigate the burdens and stresses of poverty on families with young children. The fact that programs exist doesn't mean that they will be utilized.

The need has remained stable since 2012, yet enrollment is decreasing.



“ I honestly believe NFP saved my life and set me up with an amazing relationship with my daughter AND her dad.”

- Nurse Family Partnership participant

“ This is my first pregnancy and the information, support, and service offered at WIC is very helpful. Everything from nutrition to breast-feeding has been very informative and really opened my eyes so I can do right by my child.”

- WIC participant



“ Our NFP provider was an invaluable resource and support in those first two years and helped provide education that made us better parents, helped me through complications from the birth, and helped give us the confidence to create a lasting and joyful bond with our daughter. I felt like our NFP provider cared about our family and genuinely wanted what was best for us. She helped us succeed as parents because of all the support and love she gave us.”

- Nurse Family Partnership participant

Well-Equipped Professionals & Early Learning Environments

GOAL 3 All professionals who work with children and their families are highly skilled, compassionate, and reflect the make-up and needs of the community

STRATEGY A

Recruit and retain a diverse and well-qualified early learning workforce

Compensation in 2014	
Average Annual Salary Comparison	
Child Care Center Teacher	\$26,676
Child Care Center Director	\$35,544
Family Child Care Provider (Gross Earnings)	\$37,203
K-12 Teacher	\$58,821

ACTIONS

- Advocate for appropriate professional compensation for all professions supporting families in early childhood
- Expand local career pipeline system to grow capacity in our early childhood workforce, prioritizing avenues that support under served populations

“In Skagit County, the number of child care providers has dropped from 122 with capacity for 2,676 children in 2013, to 97 providers with capacity for 2,459 children in December of 2017.”

- Child Care Aware of Washington

STRATEGY B

Encourage professionals to support healthy relationships, reduce sources of stress, and build core life skills



ACTIONS

- Provide training to health care and childcare professionals working with young children on the science of early childhood and trauma-informed care
- Cultivate trauma-informed organizational cultures with policies and practices based on current early childhood science
- Expand consultation services to child care providers, such as early childhood mental health

“Drawing on a common understanding of how positive development can be either promoted or derailed, practitioners and policy makers can think in new ways about how we can do a better job supporting children and families.”

- Center on the Developing Child
Harvard University



STRATEGY C

Support family, friends, and neighbor (FFN) caregivers to provide quality care

ACTIONS

- Find ways to connect to FFN in our community
- Gather information on FFN needs and potential areas of support- Develop and share resource materials aimed at FFN caregiver needs and child development best practices

FACT 44% of respondents to the Skagit Parent Survey for Children Age 5 and Under indicated that their child regularly spends time in the care of grandparents or other relatives. 18% of respondents reported that their child regularly spends time in the care of neighbors or friends.

GOAL 4 All families have equitable opportunities for optimal health and well-being

STRATEGY A

Learn about populations experiencing disparities and understand their unique strengths, needs and lived experiences

ACTIONS

- Identify formal and informal leaders within communities experiencing health disparities
- Seek and incorporate families' experiences and perspectives on raising children in our community
- Collect/use qualitative and quantitative data to support decision-making

FACT 18% fewer mothers on Medicaid received early prenatal care when compared to mothers not on Medicaid.



STRATEGY B

Concentrate efforts and resources on populations experiencing disparities

ACTIONS

- Use targeted universalism principles to tailor strategies to achieve common goals
- Invest in strategies and actions identified as priorities by communities experiencing health disparities and inequities
- Identify a framework to achieve health equity

STRATEGY C

Engage community members with lived experience to co-create the development of policy, practice and programs

ACTIONS

- Actively recruit members of populations experiencing disparities to participate in planning efforts and advisory boards

FACT The median household income in Skagit County in 2016 was \$56,433. According to the University of Washington's Self-Sufficiency Standard for Skagit County, an adult with one infant and one preschooler would need to earn at minimum \$57,437 to meet the basic needs at a minimally adequate level...43% of indigenous Aguacateco, Mixteco, and Triqui women living in Skagit and Whatcom counties earn less than \$10,000 a year.

Photo courtesy of SeaMar Community Health Centers



WOMEN'S STORIES Where do women learn about pregnancy and childbirth? Most develop a set of beliefs and follow norms set within their families, communities and cultures. Depending on the country, region and rural village an indigenous woman comes from in Mexico or Guatemala, pregnancy and childbirth practices could vary dramatically from common experiences in Skagit County. In their homeland, lack of universal access to health centers and lack of knowledge of the role prenatal care has in ensuring healthy pregnancies combined with their traditional beliefs and practices results in many delivering their babies at home. Most indigenous women surveyed by Sea Mar CHC claim none of their friends, family or neighbors seek prenatal care when they are pregnant. One quarter of Triqui women believe going to the doctor increases the risk of having a big baby, and over a third believe it increases the risk of having a C-section. Only one-quarter of all indigenous women surveyed believe going to the doctor while pregnant was important. Going to the doctor in the first trimester for most of these indigenous women is not considered important, either for the woman or the baby's health.



CALL TO ACTION!

BE INVOLVED – BE THE DIFFERENCE IN A CHILD’S LIFE.

Agencies & Organizations

NEW PARTNERSHIPS between early learning, social services, and the health care system will be needed to achieve the overarching goal of this plan: to create a coordinated and comprehensive system that supports children and families.

It is the hope of the working group that organizations and agencies will align their work with the strategies, actions, and vision outlined in this plan. Working together will help us realize the vision that all children are healthy and have positive, responsive relationships and environments.

Individuals

EVERYONE IN THE COMMUNITY has an important role in supporting young children and their families. Your support is needed to make sure all children have what they need to learn and grow.

Here are a few ways you can help:

- 1 Play games, read, and talk with a child in your life. Relationships—not screens—are the active ingredient for learning!
- 2 Learn about child development at developingchild.harvard.edu/resources.
- 3 Set and maintain routines. Praise positive behaviors. Acknowledge emotions and needs. Be consistently involved. Children need stable and predictable relationships and environments.
- 4 Share early learning resources with parents or parents-to-be in your life. Help them find the support available to them in this fantastic journey.
- 5 Volunteer with an organization that serves families during the earliest years of life.

Be an advocate for children and their families. To learn more, follow the Think Babies™ Campaign at www.thinkbabies.org or visit the Child Care Aware Advocacy Action Center at wa.childcareaware.org/advocacy.
- 7 Share this plan with your employer and other business leaders. It is important that they understand the importance of the First 1,000 Days.
- 8 Become a family-friendly employer by adopting policies that support working parents. Those working parents will support your business in return!
- 9 Advocate for and invest in initiatives that support early learning work in our community.
- 10 Talk to the Children’s Council to get involved in the next steps.



To learn about more ways to get involved, please visit the **Children’s Council** website at: childrenscouncilofskagitcounty.org/kindergarten-readiness



“Life affords no greater responsibility, no greater privilege, than the raising of the next generation.”

~ C. Everett Koop

This report is the result of countless hours by a group of highly dedicated family and child health advocates who want to do everything in their grasp to make sure every child in the county has the best possible start. *This report represents their commitment to a better future.*

2018 First 1,000 Days Workgroup Membership

Brigid Collins Family Support Center
Burlington-Edison School District
Burlington Parks & Recreation
Child Care Aware of Northwest Washington
Children’s Council of Skagit County
Children’s Museum of Skagit County
Community Action of Skagit County
Department of Social and Health Services (DSHS)
Island Hospital

North Sound Behavioral Health Organization
Northwest Washington Indian Health Board
Nurse Family Partnership
Nutrition First
Population Health Trust
Public Hospital District #304
Sea Mar Community Health Centers
Skagit Community Foundation
Skagit County Coroner

Skagit County Public Health
Skagit Family Health Clinic
Skagit Island Head Start & ECEAP
Skagit Pediatrics
Skagit Regional Health
Skagit Valley College
SPARC
Sunrise Services
Swinomish Indian Tribe
United Way of Skagit County

Local data served as the knowledge base to drive this process. Data included indicators of family structure and stressors, use of local services, and survey response data from 500 parents/caregivers. This data was used to understand assets and gaps, and to prioritize solutions.