



Promising Practices Supporting Early Childhood Transitions in Wisconsin: Eight Case Studies

Executive Summary

For the Wisconsin Department of Children
and Families

December 2023



Wisconsin Department of
Children and Families



Center for Community
and Nonprofit Studies
SCHOOL OF HUMAN ECOLOGY
UNIVERSITY OF WISCONSIN-MADISON

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In the fall of 2022, the Wisconsin Department of Children and Families (DCF) contracted with the Co-Create team of the University of Wisconsin-Madison Center for Community and Nonprofit Studies (the CommNS) on the Early Childhood Transitions Project. The project seeks to understand how communities can better support families as they navigate various transitions in the early years (prenatal through age 8) by learning from promising practices and well-aligned systems for transitions in Wisconsin. The project was funded by the Preschool Development Grant (PDG), a federal grant that supports Wisconsin in improving early childhood outcomes in a comprehensive, equity-focused manner for the state's most vulnerable, underserved, and rural populations.

Phase 1: Understanding Families' Experiences of Transitions

Early in the process, we collaborated with DCF to gather information from members of their Parent/Caregiver Equity Advisory Cabinet (PCEAC) about their experiences of early childhood transitions. From these parent and caregiver interviews, we developed an initial list of early childhood transitions and associated challenges and supports. To further develop our understanding of transition experiences, we held a statewide meeting of Wisconsin direct service providers and professionals engaged with young children and families. We also convened a Project Advisory Workgroup of fourteen advisors reflecting a range of professional and lived experiences and diversity in backgrounds.

Phase 2: Case Studies

To understand how organizations and collaborative initiatives support families experiencing transitions, we conducted a series of case studies in Wisconsin. We selected eight case studies based on our initial identification of promising practices and from suggestions offered at the Direct Service Providers Meeting and from the Project Advisory Workgroup. For each case study, we interviewed leaders of the initiative, such as organization directors, program leads, or founding members, for a total of 34 interviews. We also conducted seven focus groups with staff, board members, parent advisory group members, or other key stakeholders. To gain further context we interviewed key informants, such as public health and school employees, to speak to the experiences of families of young children in the case study communities. As a team, we analyzed data within and across the case studies to identify promising practices to best support families in early childhood transitions.

The case studies included:

- **First 5 Fox Valley** – With services and support primarily located in Outagamie, Calumet, and Winnebago Counties, First 5 Fox Valley implements the national Help Me Grow model to connect children and caregivers to the services they need in their community through health care navigators, developmental screenings, and a resource directory.
- **Collaboration to support families with housing insecurity in Dane County** – Five partners among an informal coalition of organizations who work with housing insecure families in Dane County and who support families in multiple ways, including providing housing, offering support to students, and providing child care and medical care.
- **Family Resource Center St. Croix Valley** – Serving Pierce, Polk, and St. Croix counties, this family resource center provides home visiting services that reach families in rural areas and a Welcome Baby program at five hospitals, along with outreach and community engagement.
- **Milwaukee Community Schools Partnership** – The Milwaukee Community Schools Partnership is a formal collaboration between the United Way of Greater Milwaukee and Waukesha County, Milwaukee Public Schools, and the Milwaukee Teachers Education Association that includes 16 community schools.
- **Oshkosh ESOL Services for Students with Refugee Backgrounds** – The Oshkosh ESOL (English for Speakers of Other Languages) program supports students with refugee backgrounds by providing language classes and targeted mentorship to students, along with community outreach to refugee families as they arrive in the Oshkosh area.
- **Waadookodaading Ojibwe Language Institute** – Located in Sawyer County on the Lac Courte Oreilles reservation, the Waadookodaading Ojibwe Language Institute is a kindergarten-through-Grade 9 Ojibwe language immersion school that is designed to support the whole child and by extension, their families and community.
- **Community Partners Campus** – The Community Partners Campus in Wausau removes barriers for families by co-locating needed services under one roof. They focus on addressing basic needs and offering medical and mental health care in one location.
- **Progressive Beginnings Therapy Clinic** – Progressive Beginnings Therapy Clinic in Sheboygan smooths the transition from Birth-to-Three early intervention services to school services for children with disabilities, with a specific emphasis on developmental changes that children go through.

Promising Practices: How Initiatives Support Transitions

Considering our learning of the transition-related needs and challenges that families experience in early childhood, we examined how organizations or initiatives respond to those needs. Below we describe the eight promising practices we identified from our case studies. It is important to note that all the initiatives we studied demonstrated multiple promising practices, often working together.

1. *Make things easier by removing barriers.* Families experience many barriers to accessing services and removing those barriers is an important way that initiatives can make it easier to receive support. We found that initiatives address barriers in multiple ways, such as by offering free services or creating centralized information hubs.

2. *Leverage institutional roles.* Schools, hospitals, and clinics all see children and families on a regular basis, as do other organizations such as ECE providers and Head Start. These existing relationships help remove barriers and provide a strong opportunity for creating or enhancing transition-related initiatives.
3. *Make seamless connections between services.* Participating families often reported challenges knowing what services were available and how to connect with them. This burden can be eased when initiatives help families understand what services are available and assist in making connections, such as through family resource navigators.
4. *Meet the health and learning needs of the child.* Families often need support services for children with disabilities or those needing specialized medical care. Initiatives that support transitions well do not assume that children and families are the same but rather look for and respond to the unique needs of the child and family.
5. *Make programs and services linguistically and culturally responsive.* Families experiencing transitions may face barriers related to linguistic and cultural differences. Providing services and environments that are linguistically and culturally responsive to families' needs can happen multiple ways, like providing translation services or making sure that those with lived experience are on the staff of organizations.
6. *Affirm families' dignity, agency, and choice.* In our study, participants mentioned lack of trust as another barrier families experience. Lack of trust may stem from a sense of not being respected, listened to, or able to make choices when accessing services. Some ways that these initiatives increased trust among families was by affirming their dignity, agency, and choice.
7. *Build community among families.* Building relationships between families and creating a sense of belonging in the community-at-large helps families develop trusting relationships with each other and with local institutions. Community also facilitates greater access to resources and information, as knowledge is often shared informally from parent-to-parent.
8. *Address basic needs and support families with substance use, mental health, or other concerns.* Families often face additional stressors that make it harder to navigate transitions, such as struggling to have their basic needs met including food, medical care, housing, and more. Family members may also struggle with substance use or mental health issues. Services that help meet these needs make it easier for families to successfully make transitions.

What Sustains and Strengthens Transition Initiatives

Additionally, we identified organizational strengths, or “behind-the-scenes” features of initiatives, that allow for promising practices to be implemented and sustained. We identified organizational strengths in four categories:

1. *Securing funding.* Funding was of particular importance for effective staffing, including sufficient staffing numbers, being able to hire qualified staff, offering competitive salaries and benefits, and avoiding staff burnout due to overwork. Accessing unrestricted funding was also important.

2. *Staffing*. Staff members and their qualities were considered a vital support for organizations and initiatives, including their professional expertise, lived experience, and passion. Being part of a team was also an organizational strength.
3. *Operations*. Aspects of organizational operations were important strengths of these initiatives, helping them sustain and strengthen their efforts. These included the adoption and adaptation of existing effective models, providing anchor programs, leveraging data and technology, and maintaining flexibility and options.
4. *Interorganizational collaboration*. Whether through informal relationships or official partnerships, working with other entities often facilitated processes for organizations and the families they serve.

Recommendations

Based on our findings, we offer the following recommendations for DCF and others who seek to strengthen transition-related initiatives, programs, or organizations:

1. *Seek to strengthen transition-to-school efforts*. This could involve adoption of the First 10 model, which supports partnerships between ECE providers, school districts, and community partners. In addition, support children who are not part of formal ECE settings by seeking out ways to engage with families coming to school from home care.
2. *Recognize the need to support families beyond the ECE-to-school transition*. It is important to respond to families' various transition needs in flexible ways, through efforts such as home visiting or other broader initiatives. This infrastructure allows important access and flexibility that supports families beyond the transition to formal schooling.
3. *Support organizations doing work with specific populations*. The one-size-fits-all approach does not work for all families. Families with different needs can include those in rural areas, families of immigrant or refugee backgrounds, families of children with disabilities, or families in native or other communities where priority is placed on maintaining cultural assets.
4. *Prioritize funding that sustains organizations and initiatives*. If organizations or initiatives do not have the funds or have not had support to build strong, collaborative relationships, then they cannot effectively achieve their missions over the long term. Funding from the state would be valuable, including multi-year commitments that allow organizations to build sustainable systems.
5. *Provide support for broad collaboration*. Key institutions such as schools, health care organizations, and public agencies are vital for collaboration, but there is also a role for other organizations such as private clinics, county government, family resource centers, and nonprofits. DCF may help partners connect and develop effective collaborations.
6. *Support high quality staff members*. Committed, passionate staff members, often with high levels of expertise and lived experience, were essential to supporting children and families in their initiatives. DCF may have a role in elevating the conversation about the professionals who serve families and the needs for adequate compensation and support for their work.

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