

Hearing from Providers About Their Program Needs

Head Start Coffee Creek

In January 2020, a small focus group was held with three long-term staff members of a Head Start (Community Action Washington County) that works with incarcerated mothers and their children, ages birth to age 5 years, at the Coffee Creek Correctional Facility in Wilsonville, Oregon. These interviews were part of a series of family listening sessions funded by the Preschool Development Grant as a part of a statewide early learning needs assessment. The goal of the listening sessions was to hear family voices that have not yet been reflected in ongoing work to better understand families' early learning needs and experiences. The interviews were planned and conducted by OSLC Developments, Inc. and Portland State University. Staff discussed their understanding of what families experience when looking for child care once paroled, as well as what they provide as early learning providers to incarcerated mothers and their children. They currently have six children enrolled in the Head Start program, with a capacity for eight. The children's mothers are involved in planning and providing some of the learning for their children, and work with staff to build their own understanding of child development and on individual parenting and personal goals.

Who Has Access to the Program While Incarcerated?

During intake at Coffee Creek Correctional, mothers with young children receive a flyer printed in English and Spanish—with information about the Head Start program and requirements to get in. There are also presentations once a week about the programs that are offered, but word of mouth is the biggest source of getting the word out to mothers, mostly through moms who have been in the Head Start program. The program is only available to women being housed in the minimum-security facility, as opposed to the medium-security facility.

Barriers to Accessing the Head Start Program While Incarcerated

The resources available to women housed in the minimum facility are far greater than those housed in the medium facility, although even for those mothers barriers exist. For example,



Getting Information About Child Care Options

Providers strongly emphasized the importance to mothers of knowing about child care options and resources and also empowering the parents they are working with to get information and ask questions so they understand what quality care is and to look for a child care situation that is best for their child and family. Although the Head Start staff do some work to help families find services when they are paroled, as well as collaborating with outside agencies like Department of Human Services (DHS), the primary way parents look for child care is through the 211 database resource. DHS-involved families may also get information from their caseworker. The providers mentioned the "star system" (Spark), which provides ratings for child care programs, noting that it seems like this information is not getting to the families who would need and use it to find quality child care.

Thus, although getting good information about quality affordable options was seen as important, the level of support in facilitating access to this information for these mothers seems lacking, especially after they leave the facility. While moms are incarcerated, they have access to support through a resource center—as long as they are in the minimum facility (vs. the medium facility). The family resource center helps moms with camps for their kids, school supplies, child care, and other resources. The person in charge of this resource center works in collaboration with the Family Preservation Project. if a mother has to be in the infirmary for health reasons, because it is located in the medium side, they do not get access to the Head Start program. Further, providers mentioned that even when the moms qualified, they have to be able to advocate for themselves and request in writing to participate.

There are also likely language barriers because the materials are printed only in English and Spanish, and the system to contact Head Start is through writing. Head Start does have access to Spanish interpretation, but language support is only available after a mother makes an initial contact with the program in writing in English.

Providers also agreed that they would be able to serve more families if they had transportation support for their Head Start program to bring the children to the site:

"I have many moms who are qualified, who have children within the age range...but grandma doesn't have a driver's license and grandpa works."

What Do Parents Want Their Children to Learn?

Providers say they hear about the importance of pre-academic skills, as well as women's concerns about social-emotional readiness. They attribute some of the mothers' focus on social-emotional learning to their involvement with Head Start, where this is a primary focus.

"ABCs and the 123s...but, pushing curriculum aside, I think they want them to be ready for kindergarten...to feel competent and have confidence going in to kindergarten."

However, they report that parents' first concern is that their child is safe, has a sense of belonging, and is nurtured in that environment.

Early Learning Program Supports for Kindergarten Readiness

These providers described spending time weekly with each of the incarcerated mothers of the students in their classrooms to plan the curriculum for the 2-days-a-week Head Start classes. During this time, they discuss the importance of play and how activity-based learning supports their child's development and school readiness skills. They felt that this model of collaborating with the parents engages their sense of self-efficacy and builds the parents' understanding of their child's development, strengths, and learning needs. Head Start staff are able to encourage parents to use their child's interests to embed learning in preferred activities, to normalize that their children will not always be interested in what the parents planned for the day's learning, and to encourage parents to be flexible and let it go rather than force planned learning activities.

Barriers to Accessing Quality Care After Parole

Once women leave the correctional facility, they face additional barriers to finding affordable quality child care. Providers mentioned that what they hear from parolees is that they mostly look for another Head Start because this is what they know, they know what it offers, and how comprehensive it is; waiting lists and availability of Head Start can be a challenge. Parents are also struggling with the cost of child care. "Probably the number one barrier for receiving quality child care is being able to afford it."

Providers talked about the difficulty that paroled mothers have in finding employment—which is often a requirement of their parole—as well as being able to afford quality child care. Finding employment with their criminal background is difficult. The jobs they do get are often restaurant and service work, which often means working nights and weekends. This creates a barrier to finding quality child care due to the high cost of child care compared to their wages, as well as the clash of their employment schedule and child care schedules that rarely provide care in the evenings or on weekends. This leads to children sometimes remaining with the caregivers for a longer time until their paroled parent can find employment to afford child care.

Finding care that is in close proximity to where parents live and work, and access to transportation, is another important consideration and barrier. Having transportation support would mean not having to worry about how they will get their child to care. Transportation was mentioned as a particularly important aspect of reducing the puzzle pieces of daily life for paroled women.

Providers noted that there were often waiting lists for spots in Head Start or other free or low-cost preschool. Providers mentioned that if the children qualified for Head Start, they likely did not qualify for other options; because Head Start has classes only twice a week for 2 hours, this creates a lot of time where the child needs additional care—which can be difficult to afford and to schedule as well.

Finally, providers also mentioned some parents trying to find care that is culturally supportive and inclusive, and that this was difficult to find. They mentioned that while the women were incarcerated and participating in the on-site Head Start program, they did some activities to support children's cultural traditions, although these were limited to celebrating holidays and offering culturally specific foods.



Experiences of Bias

When asked whether they heard about times these women or children may have negative experiences related to cultural or other bias or racism, they said the most common thing she has heard from parents is that they feel too intimidated to be good advocates for their children due to what they perceive as their lower socioeconomic status, as well as due to their race/ethnicity. They noted that these mothers may not feel empowered to ask questions or not feel respected for their knowledge about what their children need. These providers also acknowledged that they have a very low population of Spanish/non-English speaking families.



What Gets in the Way of Parenting?

Mental health and specifically access to support services, whether inside or outside the correctional facility, was mentioned as a significant barrier that many of the mothers they work with face in feeling confident and empowered as a parent. Other things that these mothers faced in feeling like they could "be the best parent they could be" while incarcerated were the lack of time with their children, the limitations of the physical spaces for visitation, and lack of transportation support for family to bring children to the facility to visit. A specific barrier mentioned for incarcerated mothers having quality visits was the visiting room environment, which was described as very loud, crowded, not child friendly (the space for visits is itself a small corner with very few toys), and that access to the playground is dependent on the whims of the officer in charge.

A barrier mentioned for paroled parents was the difficulty around trying to get "back on their feet" after prison. As mentioned above, the difficulties faced by the mandate to find employment, challenges in doing so, and difficulties finding employment that also could be aligned with affordable available child care. For these women, such factors can make the difference between success post incarceration and recidivism:

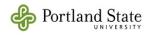
"It's almost like they should be given a state voucher (for child care)...as they parole. 'Cause that's a barrier to them getting on their feet, and we know that women are facing multiple stressors, and if we're talking about staying in sobriety and out of criminality...if we're really serious about recidivism, how can we get people back on their feet?"

Key Takeaways

- The on-site Head Start program offers valuable support to incarcerated mothers and their children, not in supporting children's early learning but supporting mothers to understand and prepare for life after parole.
- There is a need for better access to information and resources to find quality child care options for these women, post parole.
- The barriers faced by paroled mothers in terms of the nature of employment that is most often available to them (low-paying, service industry jobs that require nights and weekends) creates significant and often insurmountable barriers to accessing sufficient affordable, quality child care.
- To be successful post parole, these mothers would benefit from significant post-parole support for both their own personal well-being as well as for their children's development.

Acknowledgements

AB O CULTURAL DRIVERS Responsive Evaluation & Research OSLC DEVELOPMENTS, Inc.



Funding for this work was provided by the Oregon Early Learning Division as part of the Preschool Development Grant. We would like to thank staff from Community Action of Washington and the Coffee Creek Program for agreeing to work with us to create an opportunity to hear about the needs of families. We are especially grateful to the families who took the time to share their experiences, needs, and hopes with us.

The project described was supported by Grant Number 90TP0020-01-02 from the Department of Health and Human Services Administration for Children and Families (DHHS). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of DHHS.