

**Access to the Illinois  
Preschool for All Initiative:  
Insights from Five  
Lower-Incidence Immigrant Groups  
In Northern Cook County**

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## *Executive Summary*

A key measure of the success of preschool initiatives is their ability to reach and serve children who are at special risk and face challenges in school. Given the risks they can face, children from immigrant families have been of particular interest in recent years. However, relatively little is known about the particular experiences of families from smaller, or “lower-incidence,” immigrant groups. In the Illinois and Chicago context, these groups would be those immigrants from countries other than Latin American countries, such as Mexico and countries in Central and South America.

With support of the Joyce and McCormick Foundations, the Urban Institute has now conducted two studies to examine barriers faced by these families in accessing<sup>1</sup> Preschool for All (PFA) in the Chicago metropolitan area. We talked with Pakistani and Nigerian families for the Joyce project, and Vietnamese, Polish, and Haitian families for the McCormick project, as well as with PFA providers that served them. These have resulted in two reports—the first presents the findings on the Joyce study<sup>2</sup>, and this report combines the findings of the Joyce project with the additional groups examined with the support of the McCormick Foundation. The McCormick grant also supported a second phase of the study, which involved focus groups with community-based organizations serving lower-incidence populations to discuss effective outreach strategies, which also resulted in a report summarizing these findings. (See Adams and McDaniel, *Untapped Potential: Working with Community-Based Organizations to Support Participation of Children of Lower-Incidence Immigrant Communities in the Illinois Preschool for All Initiative*, available at [www.urban.org](http://www.urban.org).) While not presented in depth here, some findings from this companion report are mentioned where relevant.

### **Why focus on lower-incidence immigrant groups?**

While lower-incidence immigrant groups may seem small in number when considered country by country, their numbers are far from trivial when they are considered as a group with shared experiences, needs, and concerns. In the Chicago metropolitan area, for example, lower-incidence immigrant groups are estimated to make up roughly half of all immigrants.<sup>3</sup> These groups vary in the size and density of their population, in their

race and ethnicity, in how long they have been in the country, in whether they are U.S. citizens or legal residents<sup>4</sup>, and in their English proficiency. Despite these differences, our research found that the families faced common barriers and challenges. The issues underscore the importance of understanding the experiences of these groups, and of ensuring that PFA services are available to all children, regardless of country of origin, language, or citizenship status.

### **What barriers to accessing PFA are faced by families from lower-incidence immigrant groups?**

Our respondents highlighted several barriers for lower-incidence groups. Generally, lower-incidence immigrant families in our studies appeared to face barriers similar to those experienced by other immigrant and low-income families, but these barriers seemed to be exacerbated by their smaller population size and the smaller numbers of people speaking their language. It is likely that their smaller numbers result in the communities being less able to create sufficient demand for certain types of services, as there are fewer adults from the communities available to work in programs to meet the needs for language and cultural diversity, and perhaps (in some cases) it is also less likely that there are cultural intermediary groups to help them.

Some of the issues that emerge from this research include:

*1) Parents varied widely in their knowledge about PFA or early childhood programs, and programs reported little outreach to these populations.* A number of respondents reported not being aware of the PFA, and families that did know about the program (or about early education programs in their communities) often reported that word of mouth was the most common way they heard about the preschool program. Provider interviews suggested that outreach for school-based programs was often focused on younger siblings of already enrolled families, and that little PFA-focused outreach occurred for center-based programs. Finally, when outreach to immigrant communities did occur it was very seldom directed towards lower-incidence immigrant groups, and if available in another language, was usually only available in Spanish. While this is not surprising as funds are limited and programs have waiting lists, it is problematic since isolated families whose children might benefit greatly from early education may be the least likely to know about the program.

*2) Many of the parents we spoke with understood the value of early care and education, though this may vary.* Across our focus groups, most of the parents were positive about the value of their children having an early learning experience so as to learn and do better in school. This suggests that, at least for the parents we spoke to, it is less

necessary to convince them of the importance of early education. However, in the second phase of the McCormick study, respondents from community-based organizations working with lower-incidence families suggested that this varied across their families. In particular, they reported that newer immigrant families, families who came from rural areas in their country of origin, and/or who had less education, were less likely to understand the value of early education.

**3) Parents' experiences differed depending on whether their children were enrolled in school-based settings or in community-based settings.** PFA allows prekindergarten funds to be used in different settings, including school-based programs—mostly offered on a part-day (2.5 hours) and school-year schedule—and community-based child care programs that operate on a full working day, full year basis. School-based settings were free, but care in community-based programs required that parents pay (or get help paying) for child care. Across both studies, parents' experiences and perceptions about PFA differed significantly across these two settings. In particular, parents using PFA in child care settings were: a) less likely to be aware of PFA as a program, as it was simply one source of funding for the program; b) likely to have had to get child care assistance to help pay for the care, which means that the child care assistance enrollment process was what they focused on when asked about their experiences with enrollment; and c) were likely to have sought care to allow them to work rather than solely for an early learning experience for their child(ren).

**4) Parents reported language and logistical challenges around enrollment.** Across our studies, respondents reported language barriers as a challenge for enrolling their children. They struggled with understanding the forms, not being able to communicate with staff, and needing to find someone to help them with the process. However, the extent to which the enrollment process itself was challenging (other than the language barriers) varied by program type. Parents enrolled in school-based programs were less likely to report the process as difficult, while parents who were in community-based programs described greater logistical challenges. However, upon further examination, it became apparent that these parents were describing the enrollment process required for child care assistance, rather than the PFA enrollment process. This suggests that efforts to simplify access to PFA should include a focus on simplifying the child care assistance enrollment processes for those families accessing PFA through community-based programs.

**5) Respondents reported lack of staff speaking languages of lower-incidence groups, with some concerns about families being less likely to enroll.** In addition to language barriers to enrollment, many respondents reported that there was no staff in their PFA programs who spoke their language. Respondent families often reported that they did

not expect programs to have staff proficient in their language, however they did note that “other” families from their countries of origin might be more likely to enroll their children were such staff available—suggesting that this may be a barrier for some families. Furthermore, some families noted concerns about their young children transitioning to programs without access to an adult who spoke their language.

**6) *Some parents described the benefits of assistance from intermediaries to help them participate in PFA.*** Only some of the parents in our study used intermediary immigrant-serving organizations (i.e. that provide information and services to lower-incidence immigrant groups). Our findings suggest that

- Those parents who had access to an intermediary immigrant-serving organization with staff who spoke their language and were able to give them information about social services (including preschool options), were more likely to report that the enrollment process was not challenging.
- Providers from the few intermediary immigrant-serving organizations among our respondents reported that families relied heavily on their services—for assistance with language and advocacy when applications for child care assistance were denied, for instance.

Our follow-up work with community-based intermediary organizations serving lower-incidence immigrant families suggests that there are a number of ways such organizations could help lower-incidence families participate in PFA. [This issue is the subject of our companion report, mentioned earlier.]

**7) *Other important barriers.*** In addition to the issues described above, families described other challenges. Many of these are common to other low-income and immigrant families, but appear to be compounded for lower-incidence groups by the special challenges noted above. Specifically

- *Challenges in accessing child care assistance.* Given the part-day schedules of PFA in schools, working parents often can only access PFA if it is in a community-based child care setting. This, in turn, means that access to, experience of, and understanding about PFA for working parents was very much shaped by their access, experience, and understanding of child care assistance.<sup>5</sup> The extent to which barriers to child care assistance were an issue for different immigrant groups depended upon their work patterns, which affected their need for child care assistance. However, our research suggests that the families we spoke with faced particular barriers—including their ability to get child care assistance, as well as employment situations that are particularly challenging for the child care assistance system as currently designed (odd-hour work, irregular work, cash-only work,

employed by small businesses/individuals). These barriers are further compounded by the language and access barriers described above, and their lack of access to community support systems.

- *Limited supply.* Families face a limited supply of classrooms/slots for PFA—both providers and parents talked about waiting lists, and their inability to get into programs. Again, this is exacerbated by the greater lack of information and outreach for families in their languages of origin and lack of intermediary organizations to help families' access existing slots.
- *Confusion about whether Social Security Numbers (SSN) are needed to enroll in PFA.* While there are significant numbers of lower-incidence immigrants who are U.S. citizens or legal residents, some are not, or have family members who are not. For these families, asking for SSNs can create a barrier. Although we did not ask parents about this directly due to the sensitive nature of the question, it appears that providers are quite unclear about whether they are to ask parents for SSNs as part of the PFA enrollment process. We received widely varying responses to this question.

## Conclusions and Policy Implications

This study suggests that families from lower-incidence immigrant groups do face barriers in learning about and accessing PFA services. Some of the barriers they face are common to other immigrant and low-income families, while others are compounded by the fact that these populations are smaller in number. As a result, they are less likely to find programs with individuals who speak their languages, may have less access to intermediary organizations that can help them learn about and enroll in early education programs, and may be more isolated.

In addition to the key findings identified above, larger lessons from this work include:

- This study corroborates other research finding barriers for immigrant families, including language barriers, enrollment challenges, and cultural and language issues. As such, it underscores the importance of addressing these barriers to support participation among lower-incidence immigrant children.
- However, while the immigrant families we spoke with shared some common challenges, we also found important differences across and within groups. This underscores the importance both of understanding that immigrant families are not a homogenous group, and of exploring these differences to craft effective policies and programs.
- The findings suggest that strategies to reach low-incidence immigrant groups would benefit from working with trusted intermediaries, such as community-based



organizations serving low-incidence communities. Ways to work with such organizations to support PFA participation among low-incidence immigrant groups are described in depth in our companion study on this topic.

In conclusion, these findings suggest that low-incidence immigrant families can face a number of barriers to access and enrollment of their children in the Preschool for All program. While some barriers they face are unique to their immigration status, others are experienced by other low-income and vulnerable families as well. The fact that many of these barriers corroborate findings in other research on immigrant and/or low-income families suggests a sustained effort to address the barriers highlighted in this report could improve participation for vulnerable children in general, as well as children of immigrants. As a result, it seems likely that efforts to address the issues raised by these families would indeed help the PFA fulfill its promise of making pre-kindergarten services available to *all* children.

## Introduction

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In July 2006, Illinois passed landmark legislation designed to ensure access for all 3- and 4-year-old children to quality early childhood education to help prepare them for a strong start in life.<sup>16</sup> While the Illinois Preschool for All (PFA) initiative was anticipated to be funded at levels sufficient to serve all eligible all 3- and 4-year-old children, progress towards this goal has suffered setbacks from the ongoing budget challenges in the recent economic downturn.

Regardless of funding levels, however, one of the critical issues facing PFA is ensuring that the program is accessible to the most vulnerable children. Failing to make sure that these children participate in the program runs the risk of simply widening the achievement gap, as other children around them move forward and benefit from the quality early childhood services. As a result, it is essential to move beyond simply making programs available to children whose families face particular barriers to participation and to take steps to address the range of barriers (some personal to the families, some policy-related) that may prevent a family from enrolling in, or staying enrolled in, a preschool program.

Children with at least one immigrant parent are of particular concern to early childhood leaders and policymakers in Illinois, as well as to policymakers around the country. In Illinois alone, these children make up a significant and growing proportion of the child population. In 1990, 14 percent of the children younger than 6 in Illinois had one or more foreign-born parents,<sup>7</sup> a number that rose to 27 percent by 2008-10.<sup>8</sup> Almost all (97 percent) of these children were U.S. citizens.<sup>9</sup> Children with immigrant parents may face particular challenges at school and are likely to benefit from early childhood education services if they enroll, however they also face unique challenges and barriers to accessing such services (Matthews and Jang 2007). Many children of immigrants are also English language learners, a group the PFA program has identified as being important to serve.

Because of these trends and realities, policymakers are particularly interested in understanding the issues that immigrant families face in accessing early education services, such as the Illinois Preschool for All (or PFA) program. This issue is particularly important in Illinois, as it is one of the most culturally diverse states in the nation with the fourth largest population of English language learner school children (76,000 children in prekindergarten through 5<sup>th</sup> grade).<sup>10</sup> It is home to many families from

around the world—its diversity especially evident in schools and child care centers in the Chicago area.

While much more needs to be learned about the experiences of all immigrant families in accessing early education, there appears to be a particular lack of data and focus on the particular challenges facing lower-incidence immigrant groups. [Lower-incidence immigrant groups in the Cook County area are those not as numerous as those from Mexico and Latin America.] While in 2008-2010, immigrants from Latin America made up 48 percent of all immigrants in Illinois (with the largest single country represented being Mexico, at 41 percent), there is significant representation from other countries and regions as well. For example, among the estimated 1.65 million immigrants who resided in the metropolitan Chicago area in 2007-2009, 24 percent were from Asian countries, 23 percent from European countries, and 3 percent from African countries. Countries that were represented in higher numbers included Poland (9 percent), India (7 percent), the Philippines (5 percent), and China (4 percent).<sup>11</sup> [Note that the proportions of lower-incidence groups are similar for Illinois overall.]

This means that children from lower-incidence groups can comprise a significant proportion of the school-age children within particular communities and schools in Chicago and in Illinois. However strikingly little is known about how families from diverse immigrant communities view, learn about, and access early education services, and whether these programs are able to meet their needs.

The current study focuses on children of lower-incidence immigrants given the dearth of information about their access to and experiences with early educational programs overall and in Illinois. Examining the experiences of these families helps us to begin to develop a better understanding of the immigrant experience, and to try to understand the extent to which current research findings on immigrants—most commonly conducted on immigrants of Latino descent, who themselves are not at all homogeneous—are common to immigrants overall, or instead represent factors that can differ within and across immigrant groups. These can include such critical factors as racial/ethnic background, differences in culture/religion, socioeconomic status and education in their country of origin, length of time in the United States, language, and characteristics of the immigrant community within which they live (i.e. their population density and the extent to which their group has developed local ties and community structures).

To begin to explore some of these questions within the context of access barriers to early education, the Urban Institute conducted two consecutive studies on the barriers and

opportunities faced by selected lower-incidence immigrant groups in the northern Cook County area around accessing the PFA program.<sup>12</sup> Specifically,

- The first of these studies, supported by the Joyce Foundation, focused on Pakistani and Nigerian families living on Chicago's North Side and examined their experiences and perspectives around accessing the PFA program. This resulted in the publication of a report with the key findings titled: *Fulfilling the Promise of Preschool for All: Insights into Issues Affecting Access for Selected Immigrant Groups in Chicago*.<sup>1</sup>
- The second of these studies, supported by the McCormick Foundation, built upon the first study, and expanded to focus on Vietnamese, Polish, and Haitian families in northern Cook County (though relatively few Haitian families participated).

[In addition, the McCormick grant supported additional work to identify possible outreach strategies to reach lower-incidence groups. This involved focus groups with community-based organizations serving lower-incidence populations to discuss effective outreach strategies, which also resulted in a report summarizing these findings. (See Adams and McDaniel, *Untapped Potential: Working with Community-Based Organizations to Support Participation of Children of Lower-Incidence Immigrant Communities in the Illinois Preschool for All Initiative*, available at [www.urban.org](http://www.urban.org).) While not presented in depth here, some findings from this companion report are mentioned where relevant.]

This report takes the initial summary findings from the first study and expands them to include the findings from the three additional immigrant groups examined in the second study. Together, these studies provide insights into some of the questions identified above. However, given that these studies involved relatively small numbers of families and PFA providers, these insights should not be interpreted as being conclusive, and should not be assumed to reflect the experiences of even all families from these immigrant groups in this community, much less in the rest of Chicago or the rest of the state. Nonetheless, these five groups provide some fascinating glimpses into similarities and differences across the families, and provide important information for policymakers and key stakeholders interested in strengthening the program to better serve all children.

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<sup>1</sup> <http://www.urban.org/publications/411934.html>

## Study Methodology

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While a more in-depth explanation of the study methodology is laid out in Appendix 1, a brief summary is provided here. The study involved 9 focus groups with immigrant parents from Haiti, Nigeria, Pakistan, Poland, and Vietnam and 19 one-on-one and small group interviews with school- and community-based PFA providers in northern Cook County. We conducted two focus groups each with Pakistani and Nigerian parents in October 2008, and Polish and Vietnamese parents in October 2009. In December 2009 we held one focus group with a small number of Haitian parents. We interviewed selected PFA providers located within each immigrant community after we had conducted the focus groups with parents to understand providers' perspectives on overall barriers to accessing PFA among the five immigrant groups of interest, and to hear their views on additional issues raised by parents. We interviewed three school-based and five community-based PFA providers in November 2008, and six school-based and five community-based PFA providers in February 2010.

To recruit parents for the focus groups, we partnered with five community organizations. We intentionally tried to identify organizations that did not offer early childhood programs, but served or had regular contact with Haitian, Nigerian, Pakistani, Polish, or Vietnamese families with preschool-age children. In one case, however, the recruiting organization did run an early childhood education program, but the recruiter worked to recruit families that were not involved in the program they offered. Recruiters filled a vital role for the project as resources trusted by families and as the first introduction families had to the study.

Our objective was to conduct two focus groups with parents from each immigrant community: one with parents of preschool-age children who were currently enrolled in PFA and a second group with parents whose preschool-age children were not attending a PFA program. Despite recruiters' efforts to properly screen families, "cross-over" in participation occurred with the result that some focus groups included both PFA participating and non-participating families. In those situations we modified the discussion guide and asked PFA-specific questions (e.g., what was the enrollment process?) only of PFA parents. Although this affected some questions, the diversity of experiences contributed to informative dialogues that nonetheless provided rich information about potential barriers to participation. We conducted only one focus group with Haitian parents due in part to the small size of the Haitian population in northern Cook County and the limited number of families able or willing to participate; this was despite extensive recruitment efforts—including home visits and announcements

on Haitian radio programs—by our recruiter. None of the Haitian parents who participated in the focus group were enrolled in a PFA program.

PFA providers were identified and recruited in a different manner than parents. We identified PFA programs within a two-mile radius of the local recruiting organization, given that the recruiters indicated that the parents they work with were generally within walking distance or a short bus or train ride of the organizations. From the list of PFA programs we selected nine schools and ten community-based organizations total. We chose the programs for their proximity to the recruiting organization and the school or center’s familiarity to recruiters (e.g., programs they may have heard families mention). For Haitian families, whose overall numbers in Chicago were smaller, we contacted PFA providers beyond a two mile radius within northern Cook County. We spoke to several providers and asked whether they currently served any families from Haiti and learned only a very small number of Haitian children were currently enrolled. This created another challenge for our efforts to include Haitian families in the study.

As a result of the challenges we faced with obtaining the perspectives of Haitian families, and the providers that served them, we gave chosen to present most of the study findings for the four groups for whom we have better representation. We do include information on Haitian families where we have it, though we do not systematically present these results.

## Understanding the Context: Demographic Differences and Similarities Among Focal Immigrant Groups

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As noted, the two studies together provide data on different immigrant groups, from different regions of origin and racial backgrounds. The populations of immigrant parents interviewed for this study have some important similarities and differences in their characteristics. Understanding these characteristics provides essential contextual information needed to interpret the findings described in the next section.

- *Parent participants:* Only one parent per household participated in the focus groups. Although most participants were mothers, some fathers also participated (particularly in the focus groups with Vietnamese parents, though a few Nigerian fathers participated as well). The focus group with Pakistani families included some grandmothers as well.

- *Language:* The respondents varied in the extent to which they spoke English. The Nigerian focus groups were the only ones where all of the respondents spoke English. In all of the other groups, there was a mixture of families who did and did not speak English, and focus groups were conducted with the aid of an interpreter.
- *Work status:* The extent to which respondents worked outside of the home was one of the key differences across our groups that shaped their early childhood experiences. A significant proportion of the Nigerian respondents were working (with a significant subset working full time); similarly, though the data are not complete, work seemed relatively common for the small number of Haitian respondents. The Vietnamese respondents included a mixture of working and non-working parents; and respondents in the Polish and Pakistani groups mostly did not work outside the home or only worked part time. However, among the respondents, we had the impression that the Pakistani mothers would have liked to work but were not able to do so due to language and transportation challenges, while Polish mothers were less likely to mention wanting to work.
- *Religious identity:* Pakistani families were more explicit about their Muslim identity and affiliation, while religious identity was not an issue raised by the other families in the other immigrant groups.
- *Income:* While we did not collect information on respondent income, due to the sensitivity of the information, though we asked the recruiters to focus on recruiting lower-income families for the study across all groups.
- *Citizenship and legal residency status:* While we did not ask parent respondents about their citizenship or legal residency status (again due to the sensitivity of the information) the recruiters told us that the families included a mix of immigrants with and without legal residency. However, data about the immigrant groups from other sources suggests they may well have different patterns of citizenship and legal status. For example, some of the communities may have received permanent legal residency status, including the Poles who may have entered the U.S. during the 1990's through the "diversity visa" program, and Vietnamese who may have entered legally as refugees.
- *Population size:* The groups vary significantly in their estimated size in the Chicago area. For example, in the Chicago metropolitan statistical area (MSA in 2007-09, there were estimated to be about 146,000 individuals of Polish descent, 19,000 individuals from Pakistani, 15,000 Vietnamese, 10,000 Nigerians, and 4,000 Haitians.<sup>13</sup>



These characteristics provide important context for the findings described below, including the forms of care families use, the kinds of barriers they face, and issues of cultural sensitivity. In addition, the noted differences in characteristics across the immigrant groups highlight the variation in the realities facing at least some of the families from different immigrant groups, even though most were living in northern Cook County and potentially even in the same or nearby neighborhoods. This underscores the importance of not assuming that immigrant families are homogenous.

## Findings

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The two studies, in combination, raise interesting issues for the early childhood community. Below we describe the key cross-study findings in ten different topic areas, as well as the policy implications that should be considered, where appropriate. Note that this report will refer to “this study” when talking about the combined findings for both research projects.

As mentioned earlier, the findings below will primarily reflect the four immigrant groups for whom we had more complete data. We will include data where relevant from our work with Haitians, though it should be used more cautiously than the findings from the other groups. We also mention relevant findings from the second phase of the McCormick study, which involved focus groups with intermediary organizations serving a broad range of lower-incidence immigrant communities in the Chicago metropolitan area.

### Forms of Care Used

PFA allows prekindergarten funds to be used in different settings, including school-based programs—mostly offered on a part-day (2.5 hours) and school year schedule—and community-based child care programs that operate on a full working day, full year basis. Because of the different work patterns of the immigrant groups we examined, we found that the types of care used by families in the study differed significantly. Most Pakistani and Polish parents, whose children were in some kind of early care and education setting, enrolled their children in part-day school-based settings. The other groups, which included more working parents, were more likely to use community-based child care programs. Specifically, the few Haitians we spoke with seemed to use a mixture of school-based and community-based, while Vietnamese and Nigerian respondents were more likely to have their children enrolled in community-based child



care programs that provided full-working-day services. This fundamental difference had major implications for how the different groups experienced PFA services.

While more specific policy issues are raised below, an overarching theme illustrated in both studies that experiences with PFA differ significantly for those working families that use the PFA program in community-based child care settings, and for those families with nonworking parents using the PFA program in school-based settings. What they look for and need from their care arrangements, what kinds of care they use, and their motivations for using care differ widely. Furthermore, as will be described more below, policy efforts to address barriers to PFA enrollment for working families should also focus on addressing barriers affecting the ability of families to enroll in *child care*, including, in particular, their ability to access child care/early education funding assistance (such as child care assistance) and programs that can help them afford or receive care.

### **Knowledge of PFA**

The first barrier to participation is whether or not a parent knows that PFA programs exist and that they can enroll their children. We found that most parents we talked with, across all of our immigrant groups, were not familiar with PFA. However, this lack of awareness has two different levels.

First, relatively few respondents were familiar with “Preschool for All.” There was also wide variation in whether parents knew that there were early education programs available for their children, with some who seemed unfamiliar with the idea, others who knew something about it but not being clear on the details. They also knew very little about where such programs existed, or how to enroll their children. As a result, lack of information about PFA and early childhood programming was clearly a barrier facing a number of the families we talked with.

It was not surprising that families whose children were NOT enrolled in PFA would be unfamiliar with the program. However, it was somewhat surprising that there were also a number of families whose children *were* enrolled in the prekindergarten program who were not familiar with PFA. As we explored this issue, we found a few different explanations, with a major difference between PFA in community-based child care settings, and PFA in school-based settings.

Looking first at PFA in *community-based child care*, it appears that while PFA has a clear identity to policymakers, the program identity seems much less obvious at the community or client level. This is particularly true for community-based early education

providers; for them, PFA supplements their core funding and allows them to enhance the quality of their services, but is not considered a “program” or to have a separate identity. Most of the community-based providers we spoke with, blended funds from a variety of sources, with PFA being only one of the possibilities. As a result, parents were not necessarily enrolling in something called “PFA,” but may have enrolled in some program that received funds from a variety of sources, including PFA, Head Start and child care funds. This has implications for a number of questions about access barriers, as what the parent is accessing in a community-based child care program is often not purely PFA.

The identity issue for community-based providers is compounded by the fact that the PFA is the most recent iteration of prekindergarten in the state, and previous initiatives had different names. As one center-based provider reported:

*I explain to them that we’re part of CPS and PFA, but that’s probably the first and last time I mention it because honestly, it’s changed so many times it’s not that important to me anymore what it’s called; it’s what I have to do and who I have to answer to. The main thing I tell parents is that we work really hard to prepare kids for school...*

However, reasons for lack of awareness of *school-based settings* the findings appear somewhat different. Across our studies, we found that while the schools themselves were usually aware of PFA, there were a significant number of families attending school-based programs that were not familiar with PFA and its purpose. These families were, however, aware that there was early childhood programming available in their public school, and had either enrolled or wanted to enroll their children in this program.

School-based providers gave some insights into this issue. Some said they did not necessarily refer to the program as PFA, and that while parents knew their child was enrolled in a service that was part of the public school system, they did not necessarily know it was a public prekindergarten program, or the name of the initiative. This suggests that providers did not see the need to market the program by using its name. It also suggests that parents may just see school as a single entity in which they are enrolling their child—not that it is different than enrolling their child for elementary school—with the only difference being the age at which they enroll them. For these parents, therefore, there is no particular reason why the PFA program should be seen as separate or different from the traditional education programming into which it feeds.

As a result, it seems as though PFA does not have a particularly separate identity—an issue that raises potential questions for policymakers and early care and education leaders. While these findings suggest that greater outreach to low-incidence communities about PFA would be important, it raises questions as to whether it is

important to make these outreach efforts specific to PFA, or to focus on helping families know how to find and enroll their children in care that has certain attributes or particular programs.

### **How families learn about early childhood programs**

Knowledge about PFA is in turn related to *how* families hear about or find information about such programs. The first study helped highlight the importance of examining questions of program outreach and information sources. As a result, in the second study, we focused more attention on this issue, in particular asking providers more about their outreach efforts, but also asking parents for a few more details.

Parents provided a variety of responses to this question. Many reported learning about such programs through word of mouth from family, friends, neighbors or coworkers, or from the internet or fliers. For example, 8 of the 11 Polish families in the group that was participating in preschool education reported that they heard about programs from friends and family.

There were differences across our groups in the extent to which any parents reported hearing about the availability of program from the schools. Generally, across the two studies, it was those families who were more likely to use school-based programs (i.e. the Pakistani and Polish families) were most likely to report having heard about the program from their schools. This was true both among families who had enrolled their children, and those who had not. In contrast, the Nigerian and Vietnamese families, and the few Haitian families we spoke with, did not mention schools as the source of information about preschool options, even if they used school-based programs.

When we then talked with providers, we were able to better understand these patterns. Specifically, we found that their outreach efforts were often limited overall—which is not surprising given that most of the programs we spoke with were full—and were targeted to particular groups of families. Furthermore, the answer to “how do families find out about your program?” differed for schools and community-based programs

- *School-based programs* reported that their outreach was primarily to the families they currently were serving, as their enrollment came primarily from younger siblings of children already in the program, and that many of them had waiting lists. As a result, they did little to reach out to new families in the community.
- *Community-based programs* reported doing some outreach overall for enrollment in their center, though not necessarily outreach for PFA enrollment. They also reported that some amount of their PFA enrollment was filled through children aging into the

program who had been there when they were younger, and some was new enrollment—the proportion of their PFA enrollment that aged in ranged from 10 percent to almost 50 percent, which then affected how many additional children needed to be recruited.

There were relatively few programs that described more intensive outreach efforts, involving reaching out to community organizations, churches, or other places where families might congregate, or where the program might find new clients.

Furthermore, despite the fact that the programs in the study served at least some families from at least one of our focal immigrant groups, very few described outreach efforts that targeted any of these low-incidence immigrant groups—with the exception of one program that was explicitly focused on serving one of the focal immigrant communities. However, for the rest of the programs, if outreach was done to community groups or organizations, it was mostly to Spanish-speaking groups or in the Spanish-speaking immigrant community. One or two mentioned putting ads in immigrant-serving newspapers. In addition, none of the programs had any recruitment or outreach materials available in any language other than English and (in a few programs) Spanish.

As a result, it appears that the main way that non-Latino immigrant populations would hear about and be able to enroll in PFA is through one of the following paths

- if they had an older child enrolled at a public school with PFA,
- if their child was already in a community-based program and aged into it,
- if they were connected to other individuals in the community who knew about such programs, or
- if local trusted immigrant-serving organizations chose to make particular efforts to inform families about these options.

All of this corroborates the parent reports described earlier. Newer immigrants or immigrants who are more isolated or have fewer connections in the community, and immigrants who speak languages other than English or Spanish, would seem less likely to know.

In addition, our focus groups with a number of intermediary-organizations working with lower-incidence immigrant groups found that very few were aware of the PFA, or actively linked their families to this service—although they were uniformly in agreement about the importance of the program. [See companion report for more information on strategies to work with these organizations around PFA outreach.] This has important

implications for policymakers who are concerned about ensuring that these services are made available to a range of families.

### **Value of Preschool Education**

One common question is whether immigrant parents value early education for 3- and 4-year-olds, or if the first challenge is to convince them of its importance. Across our studies, across all of the focus groups, and across all of the different immigrant groups, we found that most respondents were very positive about the importance of early education for this age group, regardless of whether they were participating in the program or if their children were enrolled in any form of early education. Further, parents' perspectives on the program suggest that they valued it because they understood it could help their children be ready for school and become educated. As one of the Polish parents asserted:

*It's natural to the Polish culture that children are supposed to learn or study. And the parents who decide against enrolling their child—that would be a low-life, someone who is not very open-minded.*

Some of the common benefits mentioned across the immigrant groups included the importance of children having the opportunity to learn—as a Vietnamese parent said: “any kid can learn, if they learn earlier, it's good; they can do anything.” Other commonly mentioned benefits for preschool was to learn to be with other children, to be in a group, to cushion the transition to school, to learn English, to learn to follow rules and pay attention to teachers, to become more independent, and so forth. Interestingly, some of the Polish parents (who tended to have one parent at home) focused more on the social benefits, as they felt that they could teach children their letters and numbers at home, but couldn't help them learn the social skills. Some parents worried that their children would fall behind in school, starting out at a disadvantage, if they didn't attend prekindergarten. [Note, however, that the selection process for our respondents in the Polish focus groups may mean that the participants in our focus groups were particularly likely to see the value of group interactions, given that many had all been part of a playgroup.]

Across the groups, there were some concerns, however. Some of the more common concerns that were voiced were about how long children were in care, about the timing and its impact on children's schedule, about children being exposed to bad behaviors, as well as two issues described more later—specifically, concerns about transitioning to the new language, and concern about the food and whether their children would eat it.

Interestingly, while there was some variation in the contexts the different immigrant groups had for early education from their countries of origin, parents from the five groups all described some form of early education programming in their countries of origin.

More work needs to be done to explore this support for preschool education, and to understand where it comes from and whether it is more commonly true of families in these different groups. For example, our conversations with intermediary organizations serving lower-incidence groups in the final phase of the McCormick project suggested that while many of the families they serve do value early education, there is a subset of families—often newer immigrants, immigrants from rural areas, and immigrants with less education—who are less likely to understand the value of early learning opportunities. This suggests that outreach strategies focusing on helping parents understand the value of early education may need to be targeted to particular subsets of the immigrant communities in question.

### **Supply of PFA Programs or Classrooms**

Another difficulty is inadequate classroom space to meet demand. This issue, and the issue of investing in capital expenditures to expand the supply, has been a focus of significant policy discussion in Illinois.

In both studies, we found that parental perceptions of the supply of care was described differently by parents who enrolled their children in school-based programs, than by those who used community-based programs. For example, across our focus groups, families who wanted to enroll their children in school-based programs reported problems getting into programs, waiting lists, and programs being full. These comments were most common among Pakistani and Polish respondents who (among the different immigrant groups) were more likely to enroll in schools, as well as some of the Vietnamese families who wanted to enroll their child in a school-based program. This perspective was corroborated by the school-based providers with whom we spoke.

The discussion among parents using community-based programs was somewhat different, as they were less likely to talk about waiting lists, though they were not necessarily always able to find care either. In considering this group, however, it is important to remember that they didn't necessarily seek a PFA program but instead were looking for a child care program that met their needs and allowed them to work—which means that they are not necessarily focused on a single program (as one might be with a neighborhood school), and that they may have enrolled their children at younger ages. Instead, these respondents were much more likely to talk about whether they

could find the right child care program that met their needs, whether they could afford it, and whether they could obtain child care assistance to pay for it, rather than any problem accessing PFA. The center-based providers we spoke with varied in terms of whether they were full or had vacancies—with more programs in the second phase of the study reporting being full than in the earlier phase of the project.

### **Transportation Barriers**

Our respondents varied in their assessment of whether transportation was a barrier to enrolling in PFA. Given that transportation is not a requirement for PFA, except for children with special needs, very few programs offered any transportation other than for children with special needs or for field trips.

When we talked with parents, we found that many said they would like to have transportation to school, but the absence of it was not a problem for them. These parents said that they could drive, or enrolled in programs close to home so they had no difficulty getting to them.

This was, however, not the case with some of the parents. Specifically:

- Pakistani respondents were much more likely to discuss transportation barriers as a major concern for their ability to attend PFA or prekindergarten programs, as many of them did not have cars or drive. In fact, many Pakistani respondents together would hire someone to drive their children to school—a costly option for them, reaching \$70-100 a month.
- Some Nigerian parents also talked about needing transportation between school and child care. The few Haitian families we spoke with suggested that transportation was important, in particular because they had trouble enrolling their children in nearby schools so needed help transporting their children to the programs they were able to access.

In many of these cases, it appears that part of the problem is that they were seeking to enroll their children in school-based programs, and schools are geographically dispersed by design. As a result, if a family can't get into their local program, they are likely to have to travel farther—a reality not necessarily experienced by families seeking care in a community-based child care programs.

One of the providers we talked with discussed the particular challenges of transportation for immigrant women, describing how often immigrant women are the



secondary driver in the family, so the husband takes the car to work and the mother has to figure out how to get the children to the program without a car.

These findings suggest that transportation issues may create a barrier for some families to participate in PFA programs—particularly if a family cannot get into its neighborhood school and has to enroll in one farther away. It is worth examining whether this issue creates particular barriers for immigrant families who are more isolated, have less access to cars or public transportation, who live in communities where school-based programs are full, or who may face language barriers in accessing transportation schedules (GAO 2005).

### **Enrollment Barriers**

Research on program participation often examines ease of enrollment as a common factor affecting program participation. When respondents in this study were asked about the enrollment process, three issues emerged—language barriers, logistical challenges, and special documentation challenges.

#### *Language barriers for enrollment*

Across the two studies, language barriers in the enrollment process came up as an area of concern for immigrant families. Parents in several of our groups described the challenges they faced due to not speaking English well, not understanding the registration or enrollment forms, and needing to find someone to help them. Vietnamese and Pakistani families, in particular, noted this challenge. Although the Nigerian families in our first study all spoke English and did not mention this problem, PFA providers talked about these issues affecting other Nigerian families. Some parents talked about finding these challenges intimidating, and making them feel uncomfortable, which suggests that it may function as a greater barrier for families who can't figure out how to work around it (i.e., finding friends or family to help translate). It is quite possible that the families who attended the focus groups were relatively less isolated and more capable of finding strategies to work around these barriers than some other families in their communities.

Interestingly, while Polish families also talked about the issue, some Polish parents reported experiences with PFA programs that eased this process—where they had access to individuals who could help by translating the paperwork, were offered a translator, were able to find programs with Polish staff or where there was someone at the program (i.e. another parent) who spoke Polish who could help. This may well be related to the fact that of the five groups we interviewed, the Polish population is the largest—which



means that there may be greater demand for Polish speaking adults in programs, and that providers would find it easier to find Polish-speaking adults to help in their programs.

These comments were corroborated by PFA providers. A number of the providers reported that they had the capacity to provide some assistance to Spanish-speaking families, a few had resources to help Polish- and Urdu- speaking families, but none of the other programs we spoke with had staff or materials in Vietnamese or French Creole (Haiti), except for one organization specifically serving one of these immigrant communities. Some providers also mentioned that they served some families with low literacy skills, and that this created additional challenges.

Providers seemed to have differing opinions as to whether these issues presented barriers for families. On the one hand, a number of the providers we interviewed did not see language as a major barrier, reporting that parents were used to these problems, and would bring a friend to help translate, take materials home, etc. This is, in some ways, not surprising, as many providers would only see those families who were able to overcome the challenge. In addition, it is useful to remember that school-based providers reported that many of their families were already connected in some way to the school (i.e. they did outreach to siblings of current students), which meant their families had already managed to learn how to deal with school enrollment processes.

On the other hand, there were providers—in some cases, those who had some relationship to the broader immigrant community—who felt that it could create barriers for families who were less connected. We heard similar concerns and experiences from our focus groups with community-based organizations serving low-incidence immigrant groups, who reported that a number of their families faced language barriers to enrollment.

These findings suggest that language barriers may indeed present a barrier to immigrant families who are English Language Learners (ELL), and that these barriers are likely to be higher among immigrant populations that are relatively smaller in size. These findings corroborate other research which highlights the importance of translating materials into other languages and also working closely with immigrant-serving organizations to reach out to families and help them with the process requirements (Matthews and Jang 2007). While some PFA experts believe it is common for schools and community-based programs to have access to someone speaking the languages of the parents in the community, our interviews suggest that this may not always be true—particularly for lower-incidence groups.

Finally, the previous section highlights the fact that enrollment processes for families enrolling in community-based programs are strongly affected by processes required for the child care assistance system and/or Head Start. As a result, this underscores the importance of examining the extent to which supports are available to help individuals speaking languages other than English or Spanish enroll in the child care assistance and Head Start systems.

### *Enrollment logistics*

In both studies, it is apparent that the extent to which the enrollment process is challenging depends upon whether the family is enrolling in a school-based program or a community/center-based program. In our first study, for example, school-based providers responding to this question reported that it took 30–45 minutes for families to enroll in PFA, while community-based child care programs reported that enrollment took two hours given the paperwork required for child care assistance or Head Start. While we did not collect this kind of information in the second study, provider reports corroborated significant differences in the extent to which enrollment logistics were a potential barrier for families.

First, looking at school-based enrollment logistics, we found that families enrolling in school-based programs (for example, many of the Pakistani and Polish families, and some of the Vietnamese families) generally did not report any problems with the amount of information required or the process, other than the language issues mentioned above. [One parent reported that the process was easy, it was finding a school with space that was the problem!] Similarly, the school-based providers generally reported that they believed that families found the process relatively easy—though again, it is worth noting that many of them primarily served families who were already involved with the school system, and who therefore may be more accustomed to school enrollment paperwork and systems. However, we received contradictory reports from our intermediary community-based organizations, who reported that in some cases families faced barriers enrolling in the school-based programs as well. We were not able to reconcile these conflicting reports in this study, suggesting that this is worth further study.

In contrast, we received consistent reports that the families enrolling in community-based programs—most commonly Nigerian families in the first study, and Vietnamese in the second—were very likely to talk about the logistical challenges of enrolling. However, in both cases, the enrollment challenges they described were not due to the PFA program. Instead, the challenges they faced involved barriers around enrolling in the local child care programs, specifically because they had to apply for child care

assistance or Head Start in order to be able to afford the program. Child care assistance enrollment was seen as particularly cumbersome for families. Parents and providers in both of the initial studies, and the community-based intermediary organizations in the companion study, all identified the logistical challenges facing parents in the child care assistance application process, and providers in the second study described what they perceived as a recent tightening of restrictions upon child care assistance funding, an increase in application denials, and challenging paperwork. A number of the community-based providers reported devoting significant resources to helping families with child care assistance paperwork, and sometimes had staff dedicated to this purpose.

In addition, providers in the second study provided details about logistical problems that can create particular challenges for immigrant families to get child care assistance. While these are not necessarily unique to immigrants, some are characteristics that are common among immigrant groups—such as a lack of familiarity with dealing with bureaucracies, as well as work situations that are especially difficult for the child care assistance system. For example, it can be much harder to prove employment for parents who work for cash (such as cleaning houses, or doing odd jobs) or who are self-employed, and it can be harder to get and retain child care assistance for parents with unstable or inconsistent job hours. One provider described a parent who was denied child care assistance because their employer only had a cell phone number, which was not considered sufficient. While it was beyond the scope of this study to substantiate these issues, they suggest some policy issues that may inadvertently have a disproportionate effect on immigrant workers due to the kind of work they have.

These findings further support the importance of considering enrollment logistics across the different systems when considering possible barriers for PFA enrollment. Given that low-income *working* families will most likely need to enroll in the child care assistance system or Head Start to be able to afford the full-day services they need, any logistical challenges or barriers in those systems will by definition also limit their ability to access the PFA services

### *Special Documentation Challenges*

Finally, our studies identified some documentation requirements that may present particular challenges for immigrant families. Specifically, these include Social Security Numbers (SSN), birth certificates, and immunization records.

The most challenging of these is when programs require parents to provide SSSNs, as asking parents for SSNs as part of the enrollment process can deter families who are

concerned about revealing their immigrant status. While we did not ask parents directly about this issue because of the sensitivity of the question, we did ask providers. Although official PFA policy does not require or request families to provide SSNs to participate, we found variation both across and within provider types as to whether they asked families to provide this form of identification, as well as in what they thought they were *required* to do in this area.

Once again, we found some variation by program type,

- *Community-based child care programs* were more likely to report requesting parents to provide their SSN when enrolling in their program, apparently because they believed they needed to confirm the parents' employment for the purposes of obtaining child care assistance. However, in accordance with the Federal Privacy Act, applicants for child care assistance are not required to give SSNs,<sup>14</sup> so this should not be required information.
- *School-based programs* were very inconsistent about this issue, suggesting that there is some confusion about the policy. In our second study, for example, two school-based programs reported that they did not ask for it, another said they asked for it but did not use it, another said they didn't ask for it for PFA but did if the family was getting any Head Start funds, and two other schools said that the Chicago Public School main office required that they ask for the child's SSN. Providers had similar confusion in our first study. However, at the time of our first study, we were told that this was not PFA policy, and schools were not allowed to require SSNs.

Finally, some providers in the second study mentioned that there was a policy change that they should no longer ask for SSNs, though not all providers were aware of this. These conflicting findings suggest that the PFA program should clarify its policies around SSNs to all programs, and should communicate and enforce policies in this area. They also suggest that it would be important to examine the cross-system policies of the child care assistance system and Head Start, and how local programs are implementing these policies, and to issue a clear statement across systems on this issue. Further, the state could also do active outreach to immigrant communities, and immigrant-serving community-based organizations, to help dispel myths and clarify enrollment requirements and immigrant eligibility.

In addition to SSNs, providers in our second study discussed the challenges that some immigrant families faced in trying to provide required birth certificates and immunization forms. This is, of course, particularly problematic for recent immigrants whose children were born in their country of origin, and who are unlikely to have birth certificates, and who are unlikely to have access to any medical records. Interestingly,

however, one provider noted the difficulty of getting a birth certificate from one of the local hospitals as well. This suggests that these requirements, while understandable in their intent, may present barriers for recent immigrant families.

### **Cultural Responsiveness**

Another common question facing policymakers and educators is the importance of having programs that are welcoming to families from different cultures and the extent to which failing to ensure that programs have this capacity may create barriers to immigrant families. One of the challenges is how one assesses such sensitivity—is it having staff who speak the home language of the different groups? Is it having staff who are from the same country of origin, or who are themselves immigrants and reflect diversity? Is it about materials and training? Is it about celebrating cultural diversity?

While this research was not designed to answer these questions, we did start to explore the extent to which some of these different issues were important to the families in our focus groups, and—correspondingly—what we could learn about these issues from the provider perspective.

#### *Having staff capacity in other languages or from countries of origin*

The first issue we examined was the extent to which programs had staff who spoke the languages of the parents, or who were from the same country. Looking first at this question from the perspective of the parents, across our studies we heard somewhat mixed opinions from parents as to the relative importance of these factors in affecting their participation. [Of these two issues, the question of whether there was staff that spoke the language was discussed more than whether there were individuals from the same country.]

On the one hand, in many of the parent focus groups, respondents reported not expecting to have staff from their country or who spoke their language. Across the two studies, we commonly heard reactions similar to one of the Vietnamese parents who said “We live in America, we can’t request that.” On the other hand, a few parents said they chose programs because there were staff who spoke their language, and some parents in both studies said that these factors might affect whether “other” families would enroll, suggesting that it could be a barrier for some families who may not be willing to acknowledge it in the focus group context. Furthermore, it is possible that this is an area where focus group participants felt somewhat inhibited from being able to share their concerns, given that the focus group facilitators were not from their culture.

Generally, when parents did talk about their concerns about not having staff who spoke their language, it was mostly around their children’s needs. A few Vietnamese and Polish families mentioned their concerns about their child losing their home language, though other parents suggested that, “that is what the family is for, to teach the native language.” Only one parent mentioned the challenges for them of dealing with staff who they could not communicate with.

One particularly interesting issue was raised by some of the Polish parents, who noted concerns that their children might have trouble in their transition into the program if there were no staff who spoke their language. This was also raised by one of the Vietnamese parents. This suggests that particular attention might be paid to support an easier transition for immigrant children with limited English proficiency, and their families, and that allaying family concerns about this transition may make programs more attractive to parents with these concerns.

Additional insights into these questions are provided when looking at them from the perspective of the providers serving these families. Similar to our early findings about the availability of staff or individuals speaking different languages to assist parents with enrollment, we found variation across the provider respondents we spoke with in the extent to which they had access to individuals who spoke the relevant languages, or access to individuals from those countries. There was also some variation in the extent to which providers considered this an important challenge or barrier. While many felt it was a barrier, some reported that many of the parents they served also spoke English, even if it wasn’t their first language.

As mentioned earlier, in our second study, Polish parents were the most likely to report that their child’s program had staff who spoke Polish than the other languages— for example, in the focus group of Polish parents whose children were enrolled in prekindergarten, three had a teacher in the classroom who was Polish, and 10 of the 11 had someone in the school who could speak Polish. Though we only spoke with a small number of providers, we found similar patterns among our respondents—where we found more schools serving Polish parents who had some staff capability in Polish. However, only one of the programs had staff capability in Vietnamese, and none of the programs had any capacity in Haitian. A few programs that served many different language groups tried to cover a number of different languages—either through multiple staff, or (in one case) with an assistant who spoke five Asian languages and dialects. In contrast, many of the programs appeared to have some staff capacity in Spanish.

These findings suggest that helping programs be more culturally aware and responsive, and finding ways to include individuals (staff, volunteers, or parents) who have similar cultural identities or backgrounds, can be an important way to appeal to families. Of course, this can be particularly challenging for smaller-incidence groups. Parents and providers suggested that programs could further improve their cultural congruence by formalizing the role of parents or other cultural mediators (such as local religious or immigrant-serving organizations) to support staff around language and representation. [See our companion report on immigrant-serving community-based organizations for ways that such organizations could support such efforts.]

### *Religious sensitivity*

Finally, Pakistani parents in our first study talked about the importance of having programs respect and support their Muslim religious practices, such as Halal food and prayers—and that failure to do so made enrollment less likely for some parents. In particular, some parents mentioned programs not meeting their dietary requirements. Because of this discussion, we specifically asked parents and programs in the second study about the role of religious beliefs in shaping parents’ decisions about care—generally, parents in the second study did not place a high priority on religion, with the exception of one or two Haitian parents.

The overall findings are, therefore, that while this may not be a dominant issue for all immigrant groups, it may be important for some immigrant groups. Furthermore, it highlights the importance of thinking about cultural sensitivity more broadly and considering some religious identities in that process, rather than just countries of origin. For some individuals, religious identity may be as important as national identity. As a result, broadening cultural responsiveness to include more dialogue with families about their specific religious practices and beliefs and how programs can be more responsive appears to be a valuable area for further exploration.

### **Convenience of Schedules**

While parents choosing community-based programs did so because they needed child care so they could work, school-based programs were available only 2-2.5 hours a day. The parents we talked with in these studies who used the school-based programs had a variety of opinions about these schedules. We found some variation in the opinions of the families using these programs. In the Pakistani, Vietnamese, and Haitian focus groups, there were families using school-based programs who discussed the challenges created for them by the short schedules (2.5 hours). Some parents wanted to be able to work and found coordinating their work schedule with the partial school day



particularly challenging. However, even some of those who didn't want to work found the short hours difficult. On the other hand, the Polish families we spoke with were much more positive about the short sessions, though a number wished they could enroll for an afternoon session rather than in the morning. Interestingly, a number of the school-based providers we talked with agreed that the parents usually wanted (and/or needed) more hours covered.

Whether the short school schedules might deter some families from enrolling—particularly those who face multiple demands on their time—should be examined further. This is particularly important given that the program is voluntary, so any disincentive can affect participation. However, expanding the hours served with PFA funds would reduce the number of children served, unless the expansion was accompanied by additional funds.

### **Fear of Government**

Fear of government agencies can be a powerful barrier to enrollment among families who have any reason to be concerned about deportation or the legality of their situation. This is true even if the children were born in this country and are citizens, as their parents or other relatives may not have legal documentation. Further, this fear can permeate families and communities with legal documentation, due to mistrust of government, confusion over consequences of accessing public benefits, and anti-immigrant sentiment. As mentioned earlier, we did not directly ask parents about their legal status, given the sensitivity of this information. However, we did ask parents whether they thought that some parents might not enroll their children due to fear of government. However, even this information was clearly sensitive—one respondent accurately noted, for example, that they wouldn't honestly answer the question if they were frightened. As a result, any answers need to be interpreted cautiously.

In the first study, relatively few parents said they thought that fear of government agencies as a barrier to participation for other immigrant parents, though one Nigerian focus group did suggest that this was a problem. The second study produced a similar result, though also added more nuance to this discussion. It highlighted the fact that different immigrant groups come into the United States with different legal statuses—for example, a number of Vietnamese entered the United States as refugees, which means they are legal immigrants here. As a result, it is hard to know how to interpret the reply to the question about “fear of government” without knowing more about their actual status.



The finding described earlier that many school-based PFA programs reach out to younger siblings of older students also suggests that the parents of these children may have already overcome their fear sufficiently to enroll their older children in the school, and thus are not as likely to avoid the program for their younger children. This does not mean, of course, that there are not other families in the community who are not applying because of their fears.

In both studies, providers also reported that they did not feel that this was a huge barrier, although these providers probably would never see those families for whom fear of the government was a major barrier. However, the individuals we used to recruit families reported that parents in their communities were very concerned about this issue, and that parents would probably not have been comfortable being open about this issue to the Urban Institute research team. This issue needs further exploration.

This issue is a challenging one as in many ways the climate of fear for immigrants is outside the control of PFA administrators. However, it suggests that greater efforts need to be made to make clear to applicants that PFA enrollment information will not be used for any purpose other than enrollment, and to work with trusted intermediaries who can help calm parents' fears, to the greatest extent possible.

## Conclusions and Policy Implications

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This study provides insights into the experiences and perspectives of families from five different low-incidence immigrant communities in metropolitan Chicago. If the findings of this study are true in other parts of Chicago and the state, it suggests that the PFA program could be changed in several ways to facilitate enrollment among immigrant populations.

Some of the key findings from this study include,

- This research corroborates challenges raised by other research on immigrants and services, including language barriers, requirements for enrollment, the importance of cultural sensitivity and responsiveness in programs, and fear of interacting with government agencies.
- The findings from this study, coupled with insights from the companion study looking at community-based organizations serving immigrant groups, suggest that there is variation within immigrant groups as to their understanding of the value of early education. It finds that at least for some immigrant parents, there is no need to convince them of the importance of early education for their 3- and 4-year-olds. They

wanted their children to be ready for school. Their language about what that meant and why it was important was similar to that used by early childhood educators and professionals. However, there may be subsets of families within immigrant communities who may not understand the importance of early education. This suggests that outreach strategies around the value of early education should be targeted to particular subgroups of particular immigrant communities, rather than to all immigrant families or particular immigrant groups.

- This study also identified additional barriers that have been often found in previous research about low-income and vulnerable families. These include lack of knowledge about the service, challenges with inadequate supply, transportation barriers, logistical challenges associated with enrollment for community-based child care programs and child care assistance, costs, and schedules. However, many of these issues, while not specific to the immigrant community, are even more challenging for immigrants given issues around language, fear, and so forth. Some of these issues may be related to the fact that the initiative was not fully funded.
- The research also highlighted some other barriers that are not as commonly discussed:
  - Parents who are working and whose children are enrolled in community-based child care PFA programs seem to face different challenges and barriers than those enrolled in school-based programs. Their barriers to accessing services are those associated with child care—such as cost, child care assistance eligibility policies, and logistical requirements associated with enrollment or redetermination for assistance—and these child care issues become (by definition) barriers to their ability to access PFA. This suggests that any effort to reduce barriers to PFA use for working parents needs to address barriers to child care assistance and access to full-time child care—an issue that is particularly challenging given current budget challenges.
  - The concerns of some parents that programs are not sufficiently sensitive to their religious practices and beliefs highlights the importance of including religious beliefs in any discussion of helping programs become more culturally sensitive.

Overall, these findings highlight two important overarching lessons, as well as opening some other questions to be explored. First, these findings make it clear that while immigrant families face some common barriers to participating in the PFA program, they clearly are not homogeneous, and the differences in their experiences are likely to be driven by other realities of their lives. This underscores the importance of designing

policy solutions that are targeted to these realities, rather than universal strategies that may not be effective for all immigrant families and communities.

Second, this research also underscores the suggestions of other research that in order to address these problems and to build trust, it is particularly important to work with trusted mediators and to create ongoing relationships with intermediary organizations that serve immigrant families.

Finally, the differences and similarities across these five groups highlight a number of additional questions for further exploration. To what extent do these findings reflect the realities of other immigrant groups in Chicago, or for immigrant groups in the rest of the state? How do factors such as language, race/ethnicity, religious identity, length of time in the United States, educational background, size and concentration of the immigrant community, and level of isolation, play out for different groups? Can adjusting key policy parameters or program strategies make the program more accessible to these groups—either through common immigrant-focused strategies, or through more targeted strategies focused towards the needs of particular immigrant groups or particular families within groups? What are effective ways to use trusted intermediaries to reach more isolated families and communities?

In short, these findings suggest that low-incidence immigrant families can face a number of barriers to access and enrollment of their children in the Preschool for All program. While some barriers they face are unique to their immigration status, others are experienced by other low-income and vulnerable families as well. The fact that many of these barriers corroborate findings in other research on immigrant and/or low-income families suggests that a sustained effort to address the barriers highlighted in this report could improve participation for vulnerable children in general, as well as children of immigrants. As a result, it seems likely that efforts to address the issues raised by these families would indeed help the PFA fulfill its promise of making prekindergarten services available to *all* children.

# APPENDIX 1

## *Study Methodology*

The study involved focus groups with parents and one-on-one and small group interviews with PFA providers in two consecutive studies from 2008 to 2010 on the barriers and opportunities faced by lower-incidence immigrant groups in northern Cook County regarding access to the PFA program. We asked similar questions about access of both parents and providers to develop a fuller understanding of the central issues and to identify areas where parents and providers were in agreement, as well as places where their impressions differed. The approach permitted triangulation of the information we received. We were interested in parent and provider perspectives on how well Haitian, Nigerian, Pakistani, Polish, and Vietnamese immigrant families access PFA, and the barriers these families may face. We also sought insight from providers about their capacity to serve racially, culturally, and linguistically diverse families and the challenges to this. We conducted the focus groups with parents in October 2008, October 2009, and December 2009. After preliminary analysis of the parent findings, we conducted interviews with providers in November 2008 and again in February 2010. We asked providers similar questions about access to their programs but also asked clarifying questions about the programs themselves, based on information learned from the parent focus groups. For example, an issue around provisions for religion was raised during some of the parent focus groups, and we subsequently added to this the interview questions with providers.

### **Recruitment of Parent Respondents for the Study**

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We conducted two focus groups each with Nigerian, Pakistani, Polish, and Vietnamese parents, and one focus group with Haitian parents. The study was designed to include one group from each community that consisted of parents with preschool-age children who were currently enrolled in PFA and a second group of parents whose preschool-age

children were not attending a PFA program. For reasons discussed more below, the groups did not divide neatly into “PFA” and “non-PFA” families as originally intended, but they still provided rich information about potential barriers to participation. The focus group with Haitian families included only parents whose preschool-age children were not attending a PFA program. This was due in part to the small size of the Haitian population in northern Cook County and the limited number of families participating in PFA programs (as we learned from conversations with several PFA providers in northern Cook County).

We partnered with five local organizations to recruit families for the study. We searched for community organizations located in northern Cook County where a large concentration of Nigerian, Pakistani, Polish, and Vietnamese immigrant families lives. We intentionally identified organizations that did not offer early childhood programs but that served or had regular contact with Haitian, Polish, or Vietnamese families with preschool-age children. We did this to increase the likelihood that the organization would be able to identify families using different types of child education and child care arrangements. Recruitment of Nigerian families was conducted by an organization that provides an after-school program for older children and serves many Nigerian families. Recruitment of Pakistani families was conducted by a community resource and service organization that assists many Pakistani families with young children. Recruitment of Polish and Vietnamese families was conducted by two social service organizations that assist many Vietnamese and Polish families with young children. Recruitment of Haitian families was conducted by a community leader who serves Haitian families.

Recruiters filled a vital role for the project as resources trusted by families and as the first introduction families had to the study. We developed detailed recruitment guides for recruiters and instructed them on how to contact families, describe the study, screen families, and schedule the focus groups. Though we provided the recruiters with detailed protocols, we relied heavily on their judgment and relationships with families and encouraged them to modify the recruitment strategies in ways that were most appropriate for locating families. For example, the recruiters of Polish and Haitian families found that public service announcements on Polish and Haitian radio stations were an effective strategy for recruiting these families. In contrast, the recruiter of Vietnamese parents knew some families personally and called them directly, or recruited others personally using flyers she handed out in the community.

We worked with recruiters to screen families for the focus groups and to determine whether they belonged in the PFA participating or the non-PFA participating groups. For parents whose children were enrolled in a child care and/or early education program, recruiters were instructed to ask the name of the program and consult a list of PFA

programs we supplied them. If parents named a program not on the list, recruiters were asked to contact us so we could determine whether it offered PFA. Despite the instructions, some cross-over in participation occurred and some focus groups included PFA participating and non-participating families. In those situations we modified the discussion guide and asked PFA-specific questions (e.g., what was the enrollment process?) only of PFA parents. Although this affected some questions, the diversity of experiences contributed to informative dialogues that aided our understanding about potential barriers to participation. It is important to note as well that we were not always able to determine whether a child in a community-based program offering PFA was actually in the PFA classroom. Some community-based programs had multiple classrooms, some of which were funded by PFA. Providers reported that the enrollment process as well as the curriculum was similar, regardless of the classroom. So, the experiences for families—particularly with respect to enrollment, access, and learning about the program—would be the same. This was not a concern in the school-based programs since all prekindergarten classrooms we contacted were part of PFA.

Although the topic of the study was not especially sensitive, we knew that we were recruiting families with unique vulnerabilities, including poverty and immigrant status. We knew from the recruiters that some may be reluctant dealing with public entities (due to their immigration status), and might not be comfortable participating in a study. To maintain families' privacy and rights as research participants, we followed careful procedures for human subjects' protection that were reviewed by the Urban Institute's Institutional Review Board. It is important to note that even though steps were taken to increase parents' comfort, and parents from all five focus groups reported appreciating the opportunity to share their opinions and talk with other parents, some topics remained difficult to discuss given the single encounter and we lacked the time to build trust. While rapport was built between the two Urban Institute researchers (both of whom were from the United States, and were not from any of the selected immigrant countries) and the parents, a few recruiters told us that families were likely to still be reluctant to speak candidly about how long they have lived in the United States or about their fears or distrust of government agencies.

## Identifying Provider Respondents and Provider Characteristics

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PFA providers were identified and recruited differently. Our aim was to speak with selected PFA providers located the neighborhoods where parent respondents lived. Since we did not have parent address information,<sup>21</sup> we looked for programs within a two-mile radius of the local recruiting organization. Recruiters indicated that the parents they worked with were generally within walking distance, or a short bus or train ride of the organizations. Once we identified the approximate boundaries surrounding the organizations, we contacted the Chicago Public School System, which administered PFA in Chicago, and the Evanston Public School System (for Haitian families) for a list of school-based and community-based PFA programs surrounding the five recruiting organizations. From those lists we selected 9 schools and 10 community-based organizations. The decision was based largely on their proximity to the recruiting organization and the school or center's familiarity to recruiters (e.g., programs they may have heard families mention). Some community-based organizations have multiple PFA sites in northern Cook County, and we interviewed some providers affiliated with the same umbrella agency. Therefore, although we talked with 10 community-based providers, some were part of the same organization or organizations. This has implications for the findings and the conclusions we draw, which may not be representative of all or even most PFA programs in northern Cook County.

We conducted 11 one-on-one and 8 small-group interviews with between 2 and 4 people. In total we spoke to 32 individuals, 15 of whom were either program directors, school principals, or program administrators, 15 of whom were lead teachers, and 2 of whom were assistant teachers. Early childhood teaching and/or administrative experience ranged from between 2 years to over 30 years. Although the PFA program began in 2006, all the organizations and schools had been running preschool, child care, or Head Start programs for several years prior.

## Interview Topics

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We asked parents and providers similar questions about access to early childhood education programs by Haitian, Nigerian, Pakistani, Polish, and Vietnamese immigrant families. For families currently enrolled in an early childhood education program (both PFA and non-PFA programs), we asked how they felt generally about early childhood education, how they learned about the program their child currently attends, and how




accessible the program is with respect to supply (e.g., number of programs in the area, waiting lists), location, hours, enrollment, and associated costs or fees. We also asked about the programs' responsiveness to their needs and whether they felt the teachers and administrators were knowledgeable and/or welcoming of their culture, language, or religion. We also asked about fear of participating in government programs. For families not currently enrolled in an early childhood education program (e.g., children cared for at home or in a small home-based child care center), we asked similar questions about their general feelings about early childhood education programs and whether they had heard about Preschool for All. We also asked about factors such as program accessibility (i.e., location, hours, cost, waiting lists, and supply) and how important each was to their decision to participate in a program. We also asked about the importance of a program's responsiveness to their culture, language, or religion, and any fears they may have participating in government programs. In some situations this was somewhat challenging, as some parents did not know about the program, so we had to explain enough about it to help them address the question, but still asking them to respond to a hypothetical situation. As a result, it is somewhat less reliable than asking them about actual behaviors.

The provider interviews addressed similar questions about access to PFA by Haitian, Nigerian, Pakistani, Polish, and Vietnamese immigrant families. Specifically, providers were asked details about their PFA programs regarding the enrollment process, hours, waiting lists, and staffing. Questions were also asked specifically about participation by the immigrant groups of interest and whether they were aware of any barriers to their participation, including noticeable fears of government programs, issues with costs, or difficulty enrolling due to language, paperwork, or meeting other eligibility requirements.




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## Endnotes

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<sup>1</sup> We focused on factors that affect access to PFA for the parent or family, and not issues of the quality or type of early childhood programming offered the child/family, or the strengths and weaknesses of that programming.

<sup>2</sup> Adams and McDaniel, 2009. *Fulfilling the Promise of Preschool for All:  Insights into Issues Affecting Access for Selected Immigrant Groups in Chicago*. The Urban Institute: Washington, DC. <http://www.urban.org/publications/411934.html>

<sup>3</sup> Unpublished data from the 2007-09 American Community Survey, analyzed by Urban Institute, show that 51 percent of the immigrants in Chicago Metropolitan Statistical Area (MSA) were from countries other than Latin America. This includes 23 percent from Europe (the largest representation from Poland at 9 percent), 24 percent from Asia (largest representation from India at 7 percent and the Philippines at 5 percent), 3 percent from Africa, and 1 percent from Canada.

<sup>4</sup> Unpublished data from Urban Institute find that 97 percent of the children of the immigrants in Illinois in 2008-2010 were citizens. Looking at the adults as well, Paral and Norkewicz, 2003, found that roughly half of lower-incidence immigrant individuals in the Chicago metro area are citizens – in 2000, for example, 49 percent of Chicago-area immigrants from countries in Asia (other than Middle-Eastern countries) were citizens, as were 52 percent of immigrants from Europe and former USSR, and 62 percent of immigrants from the Middle East. Paral, Rob and Michael Norkewicz, 2003. *Metro Chicago Immigration Fact Book*. Chicago: Institute for Metropolitan Affairs, Roosevelt University. <http://legacy.roosevelt.edu/ima/pdfs/immigration-factbook.pdf>. Other data suggest that a significant proportion of non-citizen immigrants are legal permanent residents – nationally, in 2005, 35 percent of foreign-born individuals were naturalized citizens, 33 percent were legal permanent residents, and 31 percent were unauthorized. (Passel, *Growing Share of Immigrants Choosing Naturalization*, 2007. Washington, DC: Pew Hispanic Center. <http://pewhispanic.org/files/reports/74.pdf>

<sup>5</sup> Adams and McDaniel, 2009.

<sup>6</sup> Illinois Office of the Governor, “Governor Blagojevich Signs Groundbreaking Preschool for All Legislation,” press release July 25, 2006. <http://www.illinois.gov/PressReleases>.

<sup>7</sup> Migration Policy Institute, “MPI Data Hub, Migration Facts, Stats and Maps, Illinois Social and Demographic Characteristics,” <http://www.migrationinformation.org/DataHub/state.cfm?ID=IL#table4>.

<sup>8</sup> Unpublished data from the 2007-09 American Community Survey, analyzed by Urban Institute.

<sup>9</sup> Unpublished data from the 2007-09 American Community Survey, analyzed by Urban Institute.

<sup>10</sup> Unpublished data from the 2007-09 American Community Survey, analyzed by Urban Institute.

<sup>11</sup> Unpublished data from the 2007-09 American Community Survey, analyzed by Urban Institute, show that 51 percent of the immigrants in Chicago Metropolitan Statistical Area (MSA) were from countries other than Latin America. This includes 23 percent from Europe (the largest

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representation from Poland at 9 percent), 24 percent from Asia (largest representation from India at 7 percent and the Philippines at 5 percent), 3 percent from Africa, and 1 percent from Canada.

<sup>12</sup> We used several criteria to identify the focal groups, including prevalence in Chicago, diversity of regions of origin, racial diversity, having been identified by local experts as of interest, and whether we were able to identify a trusted local immigrant-serving organization to recruit families into the study.

<sup>13</sup> Unpublished data from the 2007-2009 American Community Survey, analyzed by Urban Institute.

<sup>14</sup> U.S. Department of Health and Human Services, "Clarifying policy regarding limits on the use of Social Security Numbers under the CCDF and the Privacy Act of 1974," ACYF-PI-CC-00-04, <http://www.acf.hhs.gov/programs/ccb/law/guidance/current/pi0004/pi0004.htm>.