2017 | June 26 Mid-Year Convening Research Summary
Community and Program Data: Building Blocks for Accountability and Progress

Collective Impact movements across the nation are anchored in the ability of communities to gather, access, analyze and use data to improve outcomes for their citizens, including children and their families. Our work in Bridgeport Prospers, as you will see and experience today, uses data as the foundation on which our city’s house of change can be built.

Many have written about the importance of data. Here several core thoughts which are as relevant for us in Bridgeport as for any community or sector in America.

- **On Accountability:** "What gets measured gets managed." (Peter Drucker)
- **On Decision-Making:** "Without big data analytics, companies are blind and deaf, wandering out onto the Web like deer on a freeway." (Geoffrey Moore)
- **A Data Mindset:** "In God we trust; all others must bring data." (W. Edwards Deming)
- **On Using Data:** "Facts do not cease to exist because they are ignored." (Aldus Huxley)
- **On Getting the Best Data We Can:** "Errors using inadequate data are much less than those using no data at all." (Charles Babbage)
- **Sharing the Data:** "If statistics are boring, you’ve got the wrong numbers." (Edward Tufte)

These insightful quotes were gathered by Bryan Dykes, author of Web Analytics Action Hero. He also notes that "If your analysis findings aren’t capturing your audience’s attention, you either have the wrong numbers or the wrong audience."1 We know that we have some very powerful numbers, anchored in solid research at the national level, and we know that the audience today is the right one, but not the only one.

Data is the building block for accountability and progress, so, today, we start with data. But data is not the same as action. Please study these research briefs with us today and with your family, friends and colleagues tomorrow. Today is called “Fact to Act” for a reason. Richard Bach says it best: “Any powerful idea is absolutely fascinating and absolutely useless until we choose to use it.”

It’s time to use.

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Bridgeport Prospers, Cradle to Career

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ADVERSE CHILDHOOD EXPERIENCES (ACES) in the lives of young children include child abuse and neglect, parental substance use, mental illness and incarceration, family domestic violence, and the absence of parents through divorce, death, or abandonment.

National Data and Research

- **Early Brain Development.** About 85% of brain architecture is developed by the age of three. Development of brain functions is fastest in the first three to five years of life. Language, cognitive, and emotional development are intertwined and are promoted through positive parent-child interaction and healthy living environments. Lead exposure, even at low levels, can cause learning disabilities.

- **Low Birth Weight.** Children born at low birthweight have more chronic health and developmental problems than babies born at normal birthweights. Low birthweight children experience higher rates of vision and hearing impairment and cerebral palsy, miss more days of school, and have more learning difficulties.

- **Maternal Preconceptual, Prenatal and Postpartum Health.** Maternal health challenges, including poor nutrition, smoking, and alcohol and substance addiction, can result in compromised child development.

- **Behind at Three.** Longitudinal studies reveal that children who score below age-expected norms in language, motor and behavior development at age three have a greater likelihood of school learning problems, poor social skills, behavioral challenges, and later criminal justice and welfare involvement.

- **ACES, Early Delays and Later Problems.** Extensive research has linked ACES to adults’ chronic health problems including diabetes, health disease and obesity, and risky health behaviors including addiction. Experiencing four or more types of ACES within the first three years dramatically increases the occurrence of developmental delays by the age of three years.

- **Negative Impact of Maternal Depression.** Prenatal and post-partum depression are risks to healthy parent-child interactions. Maternal depression can endanger young children's cognitive, language, social-emotional, and behavioral development.

- **Witnessing Violence.** Witnessing violence, especially among family members, places children's physical and social-emotional health at risk. Even among infants and toddlers, exposure to violence can result in post-traumatic symptoms. Exposure to just one kind of violence increases the probability that a child will be exposed to other types of violence, and exposed multiple times.

Bridgeport Data

- The rate of low-weight births in Bridgeport is **15%** as compared with the state rate of **9.4%**. Among African American mothers in Bridgeport, the rate is **12.4%**.

- **9%** of Bridgeport children under the age of three are served by the CT Birth to Three System.

- In 2014, **70%** to **80%** of three-year old children entering Head Start were not “on track” for age-expected development in their physical, social-emotional, language or cognitive development.

- Many very young children in Bridgeport are cared for by licensed and unlicensed family child care providers. While these individuals become primary caregivers, we know little about the quality of their services.

- Two evidence-based home visiting programs, Parents as Teachers and Child First, operate in Bridgeport, along with **8** Reach Out and Read programs. These are inadequately resourced to meet the needs of Bridgeport families with young children.

What Works to Ensure Children are Healthy and Ready by Three?

- **Early Childhood Developmental Screening,** often provided in well-child visits but can be done by parents as well, determines if a child is learning basic skills expected for the child’s age. The American Academy of Pediatrics recommends that all children be screened at 9, 18, and 24 or 30 months. If a child is at high risk of developmental challenges, additional screening or monitoring may be needed. Many Connecticut programs use Ages & Stages as the screening tool.
What Works to Ensure Children are Healthy and Ready by Three?

- **Early Intervention** provides services, education and support to infants and toddlers who have an identified physical or mental delay, disability or special need, or whose risk factors place the child at high risk of delay. The Connecticut Birth to Three System provides early intervention, regardless of family income level as part of the federal IDEA Part C program. Screening must include physical, and motor skills, cognitive, and communication skills, social-emotional development and self-care skills.

- **Reading with Children.** Early language and literacy develop at the same time, beginning at birth, with both visual and vocal exchanges between a child and caregiver. Children with books in their homes and who are read to in the first years of life are more likely to read on grade-level.

- **Home Visiting.** Evidence-based home visiting programs improve child development and school readiness, maternal mental health, parenting practices, family economic security, and family connections to needed services.

- **Screening for and Treating Maternal Depression.** Screening for maternal depression and ACES followed by an evidence-based intervention, such as Cognitive-Based Therapy, is effective in reducing maternal depression and improving parent-child interaction and children’s development.

Bridgeport Prospers Progress: Moving from Fact to Act

- On June 26, *The Bridgeport Basics*, a free video resource for parents of infants and toddlers, will be launched.

- The Institute for Child Success is working with the Birth to Three CAN to plan for a “bundle” of evidence-based early childhood supports. Phase I included exploration of Family Connects, a universal home visiting program, universal developmental screening, and possible expansion of Reach Out and Read. Phase II will include possible expansion of Parents as Teachers. Phase III may include supports for licensed and unlicensed family care providers for infants and toddlers.

- All Our Kin, an active member of the Birth to Three CAN, supports unlicensed family care providers to improve knowledge about early childhood, increase positive parenting, become licensed, and function effectively as small, largely women-operated businesses. Future recommendations will be explored with the Institute of Child Success during Phase III of the CAN, as well as using data collected through the CT funded Two Gen grant. This will include exploration of the landscape of evening and weekend child care.

- Work began this year to explore opportunities for collaboration with The Child Development Infoline (CDI). Informed by lessons learned in Norwalk in partnership with Bridgeport’s early childhood stakeholders, and through the establishment of a Bridgeport Prospers’ endorsed Continuous Quality Improvement (CQI) process, CDI can assist in addressing the identified developmental and learning challenges confronting the city’s youngest population.

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1. Adapted from Gruendel, J. & Ruble, K.A. (2017). Briefs: Early Intervention; Born Healthy; Family Supports; Parent-Child Interaction. BEST NC Pathways to Third Grade Reading. See also June 2016 Summary and Technical reports of the B-3 and PK-3rd CANS. http://www.unitedwaycfc.org/bridgeportprospers
WELL-CHILD SCREENINGS recommended by the American Academy of Pediatrics for children from birth to age eight include body mass index (BMI), vision, hearing, developmental progress, and screening for autism, psychosocial/behavioral, blood lead, and oral health problems.

EARLY INTERVENTION is the process of providing services, education and support to infants and toddlers who have been evaluated as having a physical or mental delay, disability or special need, or whose risk factors place the child at high risk of delay. Services through the federal IDEA Part C program for infants and toddlers with developmental delays or disabilities must address:

- Physical and motor skills, such as reaching, rolling, crawling, and walking
- Cognitive skills, such thinking, learning, solving problems
- Communication skills, such as talking, listening, understanding
- Social-emotional development and skills, such as playing and feeling secure and happy
- Self-help skills, such as eating and dressing.

National Data and Research

- Low-weight Birth and Developmental Problems. Low-weight birth increases the likelihood of vision, hearing, learning, and behavioral problems that require early detection and treatment.
- Early Detection. About one half of all children entering kindergarten are reported by their parents to be behind in their developmental skills, but just 30% of these children were identified prior to kindergarten entry.
- Federal Early Intervention Program. Young children with certain health challenges, including genetic disorders, birth defects, and hearing loss, are eligible to receive IDEA Part C early intervention services. The most frequent reason for a referral is early language delays, which become evident between 12 and 18 months of age. In Connecticut, 65% of referrals are boys.
- Good Outcomes from Early Intervention. Children who receive early and regular developmental screenings, followed by early access to high quality early intervention services if needed, improve social competence and cognitive abilities in the short-term and often achieve long-term educational benefits, including math and reading skills on par with peers. Early detection and diagnosis helps parents and early care and education staff make appropriate decisions about educational programs.
- Infant Mental Health. Very young children's social-emotional development, also called infant mental health, is closely intertwined with behavioral indicators of developmental delay. Developmental screening can identify infant behavioral symptoms of early anxiety and even depression in the first years of life. These may appear as slow growth and physical delays, infant crying that cannot be consoled, sleep problems, fearfulness, and social isolation.
- Adverse Childhood Experiences. Young children through age three who experience four or more types of Adverse Childhood Experiences (ACES) have a much higher risk of developmental delays and disabilities by age three.

Bridgeport Data

- In the CT Birth to Three system statewide, 74% of children improved their functioning by age three. In Bridgeport, just 9% of city children ages birth to three (584) are served by this system.

The following programs take Birth to Three referrals:

**GENERAL REFERRALS**
- Benchmark Infant and Toddler Services
- Rehabilitation Associates of CT, Inc.
- St. Vincent's Special Needs Services
- The Kennedy Center, Inc.
- Theracare

**FOR AUTISM**
- ABC Intervention Program
- Beacon Services of CT

**FOR HEARING**
- American School for the Deaf
- CREC-Soundbridge

- In 2014, 70% to 80% of three-year old children entering Head Start were not "on track" for age-expected development in their physical, social-emotional, language or cognitive development.
What Works to Provide Early Interventions and Supports?

- **Developmental Screening.** Urban children enrolled in developmental screening are more likely than controls to have their needs identified early and receive timely intervention and support services.

- **Reach Out and Read** is a universal, evidence-based program that promotes early literacy as part of well-child visits through shared book reading, developmental surveillance and take-home books for children.

- **IDEA Part C Early Intervention Program.** Nationally in 2015, 66% of states reported that children enrolled made significant developmental gains. In Connecticut in 2015-2016, children enrolled for at least six months in the Birth to Three system made gains in: positive social-emotional skills (including social relationships); acquisition and use of knowledge and skills (including early language/communication); and use of appropriate behaviors to meet their needs.

- **Help Me Grow** is an evidence-informed early childhood systems model that includes a centralized access point for families and professionals, family and community outreach supports, child health care provider outreach including links with medical homes, and data collection supports for quality improvement, and advocacy. Help Me Grow was created in Connecticut in 1997 and operates now in 22 states, reaching more than 50,000 families, physicians and community partners.

### Bridgeport Prosper Progress: Moving from Fact to Act

- In June of 2016, the B-3 CAN identified the need to map the various types of developmental screening tools in use by parents and providers. This work will be completed in the summer of 2017.

- The launch of **The Bridgeport Basics** on June 26, 2017, provides families with information and online examples of parental behaviors that support children's on-time early development.

- A formal partnership with the CT Child Development Infoline in 2017 is expected to improve parental use of developmental screening tools and the referral process.

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1. Adapted from Gruendel, J. & Ruble, K.A. (2017). *Healthy Birthweight; Physical Health; Early Intervention Briefs*. BEST NC Pathways to Third Grade Reading


National Data and Research

- **Many Preschool Settings.** Early learning settings and programs for children ages three and four include Head Start, child care centers, public Pre-K and nursery schools.

- **Young Children Behind at Three.** Frequently, children growing up in challenging environments, including poverty, family violence, substance use, trauma and mental illness, are behind in development when they enter preschool at age three.

- **Greatest Learning in High Quality Preschool.** Children served in high-quality preschool have more advanced numeracy and language skills, greater social skills, fewer behavior changes, and warmer relationships with their teachers.

- **Identification of Developmental Delays.** Enrollment in early education provides opportunities for the identification of developmental delays or challenges.

- **An Increase in Academics.** Over the last 20 years, there has been a dramatic increase in focus on academic skill development in preschool. Many elementary school teachers expect reading and math instruction to begin in preschool. This conflicts with a focus on learning through play.

- **A Push for Better Educated Teachers.** There is a national push to increase the education level of preschool teachers. About 60% of teachers in public preschool classrooms and in Head Start programs have attained a bachelor’s degree. In private child care centers and non-public preschool, only 1 in 3 have attained that degree.

- **A Complex Funding Structure.** Preschool that is not delivered by public school systems is funded through a maze of federal, state and local sources, parent fees, and philanthropic awards.

Connecticut Data

- **Too Few Children Served.** Statewide, about 1 in 4 Connecticut children are enrolled in preschool at age four. About 1 in 4 children are enrolled at age three.

- **State Funding in Decline.** State school readiness funding per student declined over the period from 2010 through 2016, from just under $10,500 to just under $8,000.

- **Not Enough Quality.** In 2016, Connecticut achieved only 6 of the 10 quality benchmarks tracked annually by the National Institute for Early Education Research.

Salary Disparities. In Connecticut in 2013, the median annual salary for child care workers, preschool, and Head Start teachers was below $35,000. The median annual salary for kindergarten and elementary school teachers was between $71,000 and $75,000. Child care workers generally work a 12-month year while school teachers generally work a 10-month year. A similar trend occurs nationally as well.

Bridgeport Data

- **Most Bridgeport Four-Year Children Old Are Enrolled.** Parents report that 3 of 4 Bridgeport children attend some type of early education program at age four.

- **Quality is Unknown.** Bridgeport has enough licensed slots to serve 90% of all three- and four-year old children, but settings are very different and program quality is not known.

- **Not Ready at K?** Kindergarten teacher ratings recorded as part of the Connecticut Kindergarten Entry Inventory reveal that 70% of Bridgeport students entering kindergarten need some or a lot of academic help. Yet Head Start, based on Creative Curriculum assessments, reveals that most of its four-year old children leaving that program are ready for kindergarten.

- **Complicated Funding Streams.** School readiness programs in Bridgeport juggle funding from up to eight grant sources through the CT Office for Early Childhood. In 2017, Bridgeport returned 30 funded slots to the state due to lack of enrollment.

What Works to Improve Access, Enrollment, Quality and Outcomes in Preschool?

- **Improve Real-Time Data.** Create a linked data system across all early education providers that provides real time student enrollment, participation, absence, behavioral, and outcome data linked to the state’s unique student identifier (the SASID).

- **Link Preschool and Elementary School.** In partnership with the school district, develop a PK-3rd grade framework for aligning education from preschool through the third grade, including teacher professional development, curriculum mapping, student growth monitoring, outcomes assessment, attendance policy, and family supports.

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What Works to Improve Access, Enrollment, Quality and Outcomes in Preschool?

- **Strengthen Family Engagement.** Work with parents and families to understand why 3 and 4-year old children are (a) not enrolled in preschool, (b) enrolled but not regularly attending, (c) experience behavioral challenges in the classroom.

- **Begin tracking the Development of the PreK Class of 2020.** All four-year children are expected to be enrolled in preschool starting 2020. These children are now one year old.

Bridgeport Prospers Progress: Moving from Fact to Act

- In 2016, the B-3 and the PK-3rd Community Action Networks (CANs), which include members of the Bridgeport Public Schools and Head Start, along with private preschool providers, released our Phase I Summary and Technical Reports. Information included in these reports includes results from mapping of PreK licensed care centers with slot capacity/enrollment, Head Start growth data, tracking funding sources, kindergarten readiness data, and recommendations for developing strategies for next steps.

- For the last several years, the United Way of Coastal Fairfield County has supported the use of the CT Preschool Assessment Framework (CTPAF) across multiple PreK classrooms, including Head Start, public school PreK, and private providers. The data collected is used to plan professional development opportunities and to target differentiated curriculum instruction.

- Bridgeport Prospers is an active member of the Partnership for Early Education Research (PEER), a regional research-practice partnership. PEER produces rigorous, collaborative, actionable research that can inform early childhood education policy and practice at the local and state levels in Connecticut. The goal of this work is to increase access to high-quality early childhood education and reduce disparities in educational outcomes.

- In direct partnership with the school district, PEER’s long-term research agenda includes four topics of interest to Bridgeport: Program Quality, Kindergarten Transition, Dual Language Learners, and Family Support/Engagement.

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1. Adapted from Gruendel, J. & Ruble, K.A. (2017). *High Quality Early Education Brief*. BEST NC Pathways to Third Grade Reading

HOME VISITING is a program in which a trained professional, or a professional and a community member, work with parents and their children in the home to improve child and family outcomes, support families to have basic needs met, and help coordinate access to necessary services. Home visiting is generally offered to families with children ages five or younger. It may be provided only to families living in circumstances of significant adversity, or offered to all families universally at the birth of a baby.

National Data and Research

- The federal Office of Planning, Research and Evaluation, in April 2017, published a rigorous review of the effectiveness of evidence-based home visiting programs. Twenty evidence-based programs were reviewed. Program structure, processes, and child//family outcomes were examined.

- Core child and family outcomes resulting from evidence-based home visiting are: child health; child development and school readiness; family economic self-sufficiency; maternal health; positive parenting practices; reductions in child maltreatment; and reductions in juvenile delinquency, family violence, and crime. In addition, creating linkages and referrals was also examined.

- Core structure and process components of effective home visiting programs include: (1) Implementation support available for mode; (2) Minimum requirements for frequency of visits; (3) Minimum education requirements for home visiting staff; (4) Supervision requirements for home visitors; (5) Pre-service training for home visitors; (6) Fidelity standards for local implementing agencies; (7) A system for monitoring fidelity; (8) Specified content and activities for home visits.

What Works to Support Families Through Home Visiting?

20 home visiting programs with strong evidence of positive outcomes are listed below.

- Attachment and Biobehavioral Catch-up (ABC) Intervention
- Child First
- Early Head Start-HV
- Early Intervention Program for Adolescent Mothers
- Early Start (New Zealand)
- Family Check-Up®
- Family Connects
- Family Spirit®
- Health Access Nurturing Development Services (HANDS)
- Healthy Beginnings
- Healthy Families America (HFA)®
- Home Instruction for Parents of Preschool Youngsters (HIPPY)®
- Maternal Early Childhood Sustained Home Visiting Program
- Minding the Baby®
- Nurse Family Partnership (NFP)® Oklahoma's Community-Based Family Resource and Support (CBFRS) Program
- Parents as Teachers (PAT)®
- Play and Learning Strategies (PALS) Infant
- SafeCare®
- Parents as Teachers

Parents as Teachers has positive outcomes for child development and school readiness, positive parenting practices, and family economic security. In addition, research has shown a reduction in children's motor delays, an increase in children's...
Supporting Families through Home Visiting:  
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What Works to Support Families Through Home Visiting?

oral language skills, and an increase in parental executive functioning skills, and home literacy behaviors. This program serves mothers with risk factors and families prenatally to age five, but families must be enrolled by the time the child is three years of age.

• Child First has positive outcomes for maternal health, child development and school readiness, and positive parenting practices. Other outcomes shown by research include a reduction in child abuse and neglect, a reduction in children's emotional or behavioral problems and language delays, and improvements in mothers’ mental health.

• Early Head Start has positive outcomes for child development and school readiness, reductions in child maltreatment, positive parenting, family economic security, and improved linkages with services.

• Family Connects, one of the universal home visiting programs being explored in Bridgeport, has positive outcomes for child and maternal health, positive parenting practices, and making linkages and referrals. Other outcomes of Family Connects include a reduction in hospital readmissions and emergency room visits, a reduction in child abuse and neglect, an improvement in home safety and in the quality of parental child care selections. This program is available to all mothers at the birth of a baby.

• Healthy Family America is the only evidence-based home visiting model with outcomes in all eight domains.

Bridgeport Prospers Progress: Moving from Fact to Act

• On June 26, we are launching The Bridgeport Basics and present the Institute for Child Success report describing a B-3 “bundle” of home visiting and other early supports for vulnerable babies. This bundle will include universal home visiting, universal access to developmental screening, and greater access to books in the home in partnership with pediatric offices.

• During the coming year, 2017-2018, we will explore establishing a formal partnership with the CT Child Development Infoline to assure that families receive referrals for services and a warm handoff when young children exhibit health and development problems.

• Work with existing home visiting programs to develop data sharing improvements and more uniformity in child and family outcomes reporting.

Social Emotional Development and Health:
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**Social and Emotional Development** is the process during which children develop skills necessary to build strong attachments with adults, maintain positive relationships with peers and adults, develop empathy, construct a healthy personal identify, and manage their own behaviors through self-regulation.

**National Data and Research**

- **Social Emotional Competence Predicts Academic Success.** The emotional, social, and behavioral competence of young children is a strong predictor of academic performance in elementary school and affects employment and income in adulthood.

- **Self-Control is Part of Social-Emotional Competence.** Children who exhibit self-control have good interpersonal relations with both peers and teachers, fewer behavioral problems, and are more successful in school.

- **Economic Disparities and Challenges.** Young children living in lower-income families are about three times more likely to experience emotional, relational, or behavioral challenges than children overall.

- **Violence Impacts Social-Emotional Health.** Witnessing violence, especially among family members, places children’s social-emotional health at risk. One in ten children overall have seen one family member assault another.

- **Violence is Not a Single Event.** Exposure to just one kind of violence increases the probability that a child will be exposed to other types of violence, and multiple times.

- **Positive Parent-Child Interactions are Important.** Positive parent-child interactions support the natural learning process by which young children acquire social knowledge and develop emotional competence, empathy, trust in others, and interpersonal skills with adults and other children. Non-nurturing, non-responsive, or abusive relationships between parents and their young children can derail children's social and emotional health and development.

- **Challenges Cross Domains of Development.** Social-emotional health, cognitive development, and growth in literacy are intertwined in the early years. Physical health and oral language development both impact and are impacted by social-emotional health.

**What Works to Support Young Children's Social-Emotional Development?**

- **Reducing Violence.** Reduce community, neighborhood and domestic violence.

- **Implement Trauma-Informed Practice.** Implement developmentally-appropriate, trauma-informed case practice. This could incorporate the new Toolkit for Law Enforcement.

- **Support Families to Receive Benefits.** Bundle supports and assure families receive all benefits for which they are eligible, thus reducing toxic stress, improving parent-child interactions, and children’s social-emotional development.

- **Employ Evidence-Based Parent and Family Interventions.** These include Adults and Children Together-Raising Safe Kids, Incredible Years—Preschool, Legacy for

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**Bridgeport Data**

- There were 3,393 out-of-school suspensions and 5,085 in-school suspensions in BPS in 2015-16. There were 76 Bridgeport Public Schools (BPS) expulsions.

- In the spring of 2016, Bridgeport students in grades 3-8 responded positively when asked to rate their behavioral self-regulation. Students who reported higher levels of behavior self-regulation were more likely to receive grades of B or above, less frequently absent from school, and less likely to be suspended or expelled.

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What Works to Support Young Children’s Social-Emotional Development?

Children, Nurturing Parenting Program, Parents as Teachers, Strengthening Families Program, Systemic Training for Effective Parenting, and Triple P, Levels 2, 3 and 4.

- **Employ Evidence-Based Child Interventions that Support Social Emotional Development.** These include 4Rs, Al’s Pals, Caring School Community, High Scope, I Can Problem Solve, Incredible Years, Open Circle, PATHS, Peaceworks, Positive Action, Raising Health Children, Resolving Conflict Creatively Program, RULER, Child First, Second Step, Social Decision Making, and Tools of the Mind.

- **Employ Trauma-Informed Child and Family Interventions.** These include Attachment Bio-Behavioral Catch-up, Child-Parent Psychotherapy, Nurse Family Partnership, Child First, Parent-Child Interactive Therapy, Triple P, Video Interaction Guidance, and Watch, Wait, and Wonder.

- **Provide Evidence-Based, Trauma-Informed Treatment for Maternal Depression.** These include Cognitive Behavior Therapy and Interpersonal Therapy.

Bridgeport Prospers Progress: Moving from Fact to Act

- Since 2013, the Bridgeport school district has partnered with Yale School of Medicine (The Consultation Center and Yale Center for Emotional Intelligence) to implement RULER, an evidence-based social-emotional learning intervention. In May 2016, three of four teachers, staff and administrators responding to a survey indicated that the RULER program had been useful in teaching practical social and emotional skills.

  An evaluation study conducted as part of the RULER initiative indicated that behavioral self-regulation and student-teacher trust are associated with positive student outcomes. Students who reported higher levels of student-teacher trust were more likely to receive grades of B or above, and less likely to be suspended or expelled.5

- Beginning in 2016, several Bridgeport schools began to change the way they address school/classroom discipline by implementing Restorative Practices, an approach that aims to build social capital and achieve social discipline.

1. Adapted from Gruendel, J. & Ruble, K.A. (2017). Social Emotional Development and Health. BEST NC Pathways to Third Grade Reading


National Data and Research

- **Early Math Predicts Later Learning.** At kindergarten entry, early math concepts (including numbers and ordinality) are the most powerful predictors of later 3rd grade learning.

- **Teacher Quality Matters.** High quality instruction is key to PK-3rd grade student success. Teachers of math at these levels vary widely on their classroom math instruction practices and content preparation.

- **Lower-Income Students May Receive Weaker Instruction.** International studies reveal that weaker math content is often provided for students living in low income circumstances than for wealthier students, and may contribute to about 40% of the math achievement gap in the U.S.

- **Strong State Accountability Systems Matter.** Students in states with stronger accountability systems do better on the 8th grade National Assessment of Educational Progress (NAEP) assessment, even though the items measured by state and NAEP tests differ.

- **Summer Learning Loss.** Lower-income students can lose 2-3 months of learning over each summer.

- **Explicit Instruction in Remediation.** Teacher-focused instruction at the point of remediation produces better math knowledge and skills than student-centered activities for students struggling with mathematics concepts. Student-centered activities involve manipulatives, calculators, movement, and music. Teacher-focused instruction is based on routine practice and drill.

Math in Bridgeport: 2012–2016 School System Turbulence

- **Staffing.** There has been a significant loss of the number of math program assistants and coaches; the central office mathematics curriculum specialist position remains vacant.

- **Curriculum:** The district switched to curriculum aligned with Common Core Standards in 2010-2012. The district then adopted the Math in Focus curriculum in 2012. A third set of curriculum revisions began in 2014.

- **Instruction:** New Math in Focus textbooks were implemented in 2012 with limited professional development, limited access to sufficient materials, and with the lack of an assessment system (see below). Student gains from 2006-2010 were lost.

- **Assessment System:** A state of the art assessment system developed in 2006-2007 recognized by the Broad Foundation was eliminated by the superintendent in 2012, and replaced with a system that has proven to be inadequate.

What Works to Provide Early Interventions and Supports?

- ** Employ Real-Time Data Tracking.** Implement real—time math data for tracking student growth and benchmarking student and cohort performance by school, grade, and student. Without this data, and its regular use to support students and instruction, it is not possible to assess the efficacy of interventions.

- **Implement a District-Wide PreK-3rd Grade Framework.** Implement a parent-informed, instructionally-aligned PreK – 3rd grade alignment such as outlined by the national P-3 Center.
What Works to Provide Early Interventions and Supports?

- **Implement Tiered-Supports.** Implement an evidence-based, multi-tiered system of supports (e.g., in the Washington State Learning Assistance Program) that includes core instruction tiered supports, data-based decision-making, a comprehensive student assessment system, and supplemental student supports and services.

- **Strengthen Early Family Engagement in Math.** Implementing an evidence-based, math-informed family engagement approach, such as the WestEd/PBS KIDS Family Engagement Program, at the preschool level helps parents to support children’s math learning.

- **Employ Evidence-Based Math Instructional Programs.** There are many math programs available that are evidence-based. These are identified by the following scientific clearinghouses: University of Missouri Evidence-Informed Intervention Network: Elementary School Math, Johns Hopkins University Best Evidence Encyclopedia, Hanover Research, and the What Works Clearinghouse.

Bridgeport Prospers Progress: Moving from Fact to Act

- The launch of **The Bridgeport Basics** will introduce parents and caregivers to basic activities they can do every day that promote early number learning and math skills of very young children.

- The Middle Grades Math Community Action Network (CAN) began work over the past year with full participation from the Director of Math and District Math Coaches. District curriculum and instructional data are being collected for analysis. Phase II CAN work will begin in the fall of 2017.

- Potential implementation of the Early Warning System in partnership with the Bridgeport Public Schools will include a component that reports on math performance.

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1. Information provided by the Bridgeport Public Schools Mathematics Department, Spring 2017.
CHRONIC ABSENCE is defined as missing 10% (about 18 days) or more of the total school year regardless of the reason.

### National Data and Research

- **Chronic Absence Hurts Learning.** Chronic absence in the preschool through 1st grades negatively impacts 3rd grade reading and math achievement and attendance in later grades. In preschool, it is associated with weaker kindergarten readiness scores. Students who are chronically absent are retained in grade more often and are more likely to drop out and engage in delinquency and substance abuse.

- **Disparities in Attendance.** Racial differences exist in attendance patterns, family, and community factors (including domestic and neighborhood violence, food insecurity), lack of transportation, and other stressors of living with low income negatively impact children’s school attendance.

- **Just Over One in Ten Elementary School Students Chronically Absent.** Across America, 11% of elementary school students are chronically absent. Connecticut is slightly better than the national average (9.6%). Between 2011 and 2014, chronic absenteeism declined in Connecticut’s public schools overall, but increased among African-American students.

### Bridgeport Data

- **One in Five Bridgeport Students Chronically Absent.** In 2015-2016, 17.4% of all city students were chronically absent, about 3500 students in total. Rates were higher among Hispanic students (19.3%) and students with disabilities (24%).

- **Chronic Absenteeism Varies by School.** The lowest rate of chronic absenteeism in Bridgeport schools is 3.6%; the highest is 30.4%.

### What Works?

- **Establish District and School Attendance Review Teams.** CT Public Act 15-225 establishes conditions under which a school district must establish Attendance Review Teams at the district level and at individual schools. In general, a district with a chronic absence rate of 10% or with schools that have rates greater than 15% must establish district and school teams, respectively. The core functions of an attendance team are to gather and use data, create a systemic districtwide response, implement policy and practice improvements, and promote shared accountability and a continuous improvement process.

- **Collect, Review and Use Data on a Regular Basis.** Real time, individual student and trend data needs to be available to the School Attendance Review Team(s) no less frequently than every 10 days. These data may be combined with data generated by a formal Early Warning System to increase information about students who are or may be at risk of failure. Chronic absenteeism is a core indicator in these systems, beginning in the 6th grade. These data must be shared with teachers, principals, students and parents, and then followed by appropriate interventions. Thirty-one states across the nation have created some form of early warning systems for their school districts. See the June 26th brief on Early Warning Systems.

- **Inform and Engage Parents.** Employ school-family-community partnerships, district and school-based family engagement strategies, and strategic communications that help parents to understand the absence patterns of their own children and the impact of absences on students’ learning and success. There are many resources available. For example, In Class Today is a program of communication with parents of at-risk students shown to reduce absences across all grade levels, including absences among students’ siblings. Similar materials are available from national initiatives including Attendance Works, the Campaign for Grade Level Reading, and Every Student, Every Day.

- **Employ a Tiered Framework Beginning with Prevention.** The Connecticut State Department has published a chronic absence prevention and intervention guidance document that includes how to implement a schoolwide tiered approach that through
What Works?

early identification of student attendance patterns. The graphic on the right illustrates the levels and actions that can be taken at each tier.

- **Address Student Health and Social-Emotional Challenges.** Identify and address physical health challenges, such as asthma and oral health, and social-emotional challenges reflected, for example, in suspensions and expulsions. School-based health providers contribute to a reduction in absences and behavioral incidents, improve a child’s academic, social-emotional and career skills, and contribute to positive school climate. Intervention practices that support social-emotional development and learning can help students develop better self-regulation skills, remain in the classroom, and be better engaged with school.

- **Expand Professional Development.** Support teacher and administrator development through pre-service training and ongoing professional development on implicit bias, cultural competences, discipline practices, and the use of data to monitor and track student attendance. Building school-level capacity to understand and use data to identify and target resources is critical.

- **Wrap Services Around Students and Families.** Community schools wrap services around students, and often their families, to address challenges facing low-income families and improve school attendance. In these models, schools function as “community hubs” and provide access to essential services or supports, like food pantries, laundry services, tax return prep, or adult ESL classes. These efforts require school or the district to be intentional about understanding community service gaps and parent and child needs.

Bridgeport Prospers Progress: Moving from Fact to Act

- The Bridgeport Public Schools have had initial conversations with Attendance Works and the Connecticut State Department of Education to explore an approach for the reduction of chronic absence. Further information will be available over the coming months.

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EARLY WARNING SYSTEMS (EWS) examine sets of indicators known to be valid predictors of an outcome. In an education context, these have been developed largely to predict the likelihood of students dropping out of high school. Early Warning Systems enable educators to identify individual students who are at risk of failure (usually dropping out) and provide individualized support.

National Data and Research

- **More than Half of States Use EWS.** Thirty-one states (62%) have implemented some form of Early Warning System. Most are used to improve high school graduation rates.

- **EWS Work as Early as 6th Grade.** Although often employed at 8th or 9th grade, these predictors have proven accurate as early as the 6th grade.

- **Good Predictive Validity.** The predictive validity of well-designed and implemented Early Warning Systems is strong.

- **EWS Shifts Accountability Focus.** Early Warning Systems shift the focus for school and student accountability from a test-score-only approach to one anchored in attendance, retention in grade, performance in core courses and, in some systems, behavior incidents (e.g., suspensions and expulsions). Some school systems are beginning to incorporate data on homelessness, incidents of childhood trauma, and child welfare involvement.

- **Pair Data with Student Supports.** Early Warning Systems are most effective when data is coupled with individualized student supports.

- **Diplomas Now Results.** MDRC's national evaluation of Diplomas Now, an Early Warning System that includes a multi-tiered student intervention response, reveals positive impacts and underlines the need for a careful implementation and research strategy for school-based, data- and supports-driven reform.

- **Include Development of an EWS within Bridgeport's ESSA.** The federal Every Student Succeeds Act (ESSA) requires all states to designate each high school with a graduation rate lower than 67% as "low performing." The high school graduation rate is one of the five indicators that must be included in the public ESSA process of rating schools.

**Bridgeport Data**

- Bassick High School had a 2015-2016 four-year graduation rate of **61%**. The rate at Central High School was **76%** and at Harding it was **57%**.

- The chronic absenteeism rate for the school district in 2015-2016 was **17.4%**. Rates at individual schools range from **3.6%** to **30.4%**.

- Twenty percent (19.7%) of BPS 3rd graders scored at a proficiency or advanced level of the English Language Arts section of the Smarter Balance Assessment Consortium (SBAC).

- For the math section of the SBAC, 14% of 3rd graders scored as proficient or advanced compared with 5% of 5th graders and 10% of 8th graders.

**What Works to ProvideEarly Interventions and Supports?**

- **Improvements in Data Access.** Improve overall district data-driven planning, population accountability, and individualized student pathways. This strategy may require either the addition of a dedicated (new) school district IT professional or the creation of an external data partnership to receive and analyze data.

The national Data Quality Campaign identifies four key policy principles to advance a data access and improvement approach.

1. Measure what matters.

2. Make data use possible through teacher and administrator training, tools, and supports.
What Works to Effectively Implement and Use Early Warning Systems

3. Be transparent and earn the trust of the community in how this data can be helpful to their children.

4. Guarantee access to parents and teachers while assuring appropriate levels of privacy.

- Establish EWS Research Partnership. Establish an ongoing research and implementation partnership in the development, launch, and evaluation of Bridgeport’s Early Warning System.

Bridgeport Prospers Progress: Moving from Fact to Act

- Bridgeport Prospers has engaged with Manpower Demonstration Research Corporation (MDRC) (May-June 2017) to create a template/feasibility report for the creation and possible implementation of an Early Warning and Support System, beginning at the 3rd grade (or younger if feasible). A first report will be completed by this summer.

- Bridgeport Prospers has had preliminary conversations with Superintendent of Schools to explore the design and implementation of a data sharing agreement, based on unique-student data that has been deidentified. Further discussions to be scheduled will include the Superintendent, the BPS data personnel, and the Bridgeport Prospers Data Table.

- The Bridgeport Public Schools is in early conversations with Attendance Works and the Connecticut State Department of Education to explore an approach for the reduction of chronic absence. Further information will be available over the coming months.

- The CT State Department of Education has shown interest in working with Bridgeport Prospers, the school district, and MDRC to design and implement a 3rd grade “early support system” designed to identify young students in need of early academic and other supports.

- Work on a later grades Early Warning System (6th grade and up) will be included in the evolving Bridgeport Working Cities model being designed for possible Federal Reserve Bank competitive funding.

1. Adapted from Gruendel, J. & Ruble, K.A. (2017). Grade Promotions Brief. BEST NC Pathways to Third Grade Reading
SUMMER LEARNING LOSS is the lost academic skills and knowledge over the course of summer vacation. The loss in learning varies across grade level, subject matter, and family income. A common finding across numerous studies is that, on average, students score lower on standardized tests at the end of the summer than they do at the beginning of summer (on the same test).

National Data and Research

- **Two Months Loss Each Summer.** Low-income children and those living in low resourced, urban neighborhoods fall behind by as much as two months in reading and math achievement each summer, while their middle-income peers make slight gains in reading. These year-over-year compounding losses leave lower-income children up to three grade levels behind their higher-income peers by fifth grade.

- **The Long Arm of Early Grade Learning Loss.** Summer learning loss in the early grades has a negative impact on high school course placement, drop-out rates, and college attendance rates.

- **Greater Loss in Math than Reading.** On average, children experience greater summer learning loss in mathematics than in reading.

- **High Quality Programs Yield Student Benefits.** High levels of attendance in multi-year expanded summer learning opportunities increase social-emotional competencies, including executive function and self-regulation skills, maintain healthy weight, and enable parents to work.

- **Access to Books Helps.** Improving summer access to books for lower-income children can result in learning gains. Student with access to 15 self-selected books experience reading gains of 35% to 40% a grade level, or about two months. The book selection should be matched to student skill levels.

- **Lower-Income Children Lack Access.** Lower-income young children are most likely to benefit from summer programs but least likely to attend.

- **Fall Re-Teaching.** Nine of ten teachers spend about three weeks re-teaching lessons.²

What Works to Reduce Summer Learning Loss?

- **Employ Evidence-Informed Designs.** Existing summer programs should be evaluated against core evidence-based components. In these designs, students attend 6 hours a day for at least 5 weeks during the summer. Group size is small and instruction is matched to student needs. The curriculum is aligned with the school year. Both remediation and enrichment are required. Individual mentoring and tutoring may be included. Family involvement is sought. The BELL/Horizons summer program is an evidence-based model operating in Connecticut.

- **Increase Parents’ Knowledge of High Quality Summer Programming.** Gather information on all city and school district summer programs, including those specifically targeted to remediate academic gaps and challenges, and create an online, interactive web resource so that parents may search for summer programs.

Bridgeport Data

- The evidence-based BELL Summer Program serves 200 Bridgeport children at the Greens Farms Academy through the Horizons Program. City students are also served through the Horizons Program at Sacred Heart University.³

- At present, there is no collection of concise, but detailed information of city- or school-based based summer learning programs and no online, interactive repository of City of Bridgeport summer programs. Data on participation levels, barriers to enrollment and attendance, and student outcomes have not been publicly accessible.
What Works to Reduce Summer Learning Loss?

and enroll their children online. Construct a parent Summer Learning Checklist so that families may acquire information from summer programs about their purpose, cost, design, and effectiveness.

- **Address Cost and Transportation Issues for Low-Income Families.** While “summer school” offerings may be free to students, many summer camps and learning opportunities include a fee that may be beyond the capacity of parents to pay. Also, transportation can be a barrier. Create scholarship funds and provide bus passes as two ways of addressing these structural barriers.

- **Increase Summer Access to Books.** Providing first and second grade children with access to 15 self-selected books each summer for three consecutive years may confer the same benefit as attending summer school for three years, at a fraction of the cost.

- **Include Summer Learning in the City's Federal Education Plan.** The federal Every Student Succeeds Act explicitly references summer enrichment and learning. The National Summer Learning Association provides a comprehensive listing of federal resources from which funding may be appropriated for use in summer learning.4 See also the 2016 Action Toolkit: Expanding Summer Learning, Meals and Jobs for America’s Young People.5

- **Establish a Summer Learning Research Partnership.** Partner with local higher education institutions to secure and analyze student-specific data from administrative cohorts of students who attended high quality summer programs versus those who did not. (Begin with Norwalk-based Horizons International which received a $300,000 grant from The Wallace Foundation to increase summer learning opportunities and outcomes in 10 states including Connecticut.6)

Bridgeport Prospers Progress: Moving from Fact to Act

- Beginning summer 2017, our year-long, University of Connecticut intern will assemble existing information on summer progress and determine how to replicate (with customization) the work of Norwalk Acts for online summer program access. The goal is to be ready for launch and public access in the spring of 2018.

- In 2017-2018, Bridgeport Prospers anticipates hosting a project table in partnership with the Bridgeport Public Schools to catalogue all summer school opportunities expected for the 2018 summer.

- In the Spring of 2017, the United Way of Coastal Fairfield County launched the 1000 Books Before Kindergarten initiative in Bridgeport.

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1. Adapted from Gruendel, J. & Ruble, K.A. (2017). *Regular Attendance*. BEST NC Pathways to Third Grade Reading


Disconnected and Disengaged Youth: 2017 | June 26 Mid-Year Convening Research Summary

**Disconnected Youth**, as federally defined, are between the ages of 16 and 24, not in school and not employed. These young people are also called “opportunity youth.”

**Disengaged Youth**, as defined by the Dalio Foundation, are high school students who demonstrate an attendance rate of 85% or less, fail two or more courses in a single year, have two or more suspensions in a year, or are expelled or incarcerated.

### National Data and Research

- **Disconnected Youth: Prevalence and Disparities.** Across America, about one in eight young people is neither in school nor in work. There are also significant disparities among disconnected youth nationwide by education and race.

- **Disparities in Unemployment.** African American youth have the highest levels of unemployment, followed by young people of Hispanic heritage. White youth have the highest levels of employment.

- **Disparities in Education Credentials.** Youth without post-secondary credentials have higher rates of unemployment than those who have education beyond high school. Over the past seven years, 22,000 jobs were created in Connecticut requiring at least a BA degree. Over the same time, 4,000 jobs requiring less than a high school degree were lost.

- **Poor Outcomes.** Being detached from both the educational system and the labor market during young adulthood can result in lower incomes, higher unemployment rates, negative physical and mental health outcomes, out-of-wedlock births, and more likely criminal justice involvement.

- **Risk Starts Early.** Risk and adversity during children’s earlier years are correlated with student both disengagement and disconnection. Economic, family, community, and school factors also contribute to this trajectory.

### Connecticut Data

- The number of disengaged or disconnected youth statewide is between **39,000** and **44,000** young adults. About **11,500** disengaged youth reside in the Bridgeport, Stamford-Norwalk area.

- About **78%** are youth of color, or living in low-income families. **36%** are boys of color and **34%** are English language learners or youth with disabilities.

- Forty percent (40%) of disengaged youth entered 8th grade disengaged. Half of them remained disengaged in 9th grade.

- Bridgeport educates as many students as the following Fairfield County communities combined: Westport, Wilton, Weston, New Canaan, and Darien. This makes the numbers of disconnected youth a very real issue for the business community.

### Bridgeport Data

- Between **1,100** and **1,200** Bridgeport youth are disconnected from education or employment.

- Barely half of Bridgeport students take the SAT or ACT. Only **18%** complete a post-secondary degree in six years.

- More than one in two Bridgeport youth ages 16-19 years (55%) are unemployed. Among young adults ages 20-24, one in four (24%) are unemployed.

### What Works to Provide Early Interventions and Supports?

- **Implement an Early Warning (and Support) System.** Creation and faithful use of an Early Warning System that identifies youth at risk, at the 3rd, 6th and 8th grades, followed by skills remediation and developmental enrichment, can increase graduation rates. See the Early Warning Brief.

- **Expand Data-Based Student-by-Student Decision-Making.** Data-based decision making and course-correction based on the strategic use of indicator data can guide instructional supports and design multiple pathways to achieve proficient academic performance.

- **Provide Comprehensive Supports.** Implement academic, career, financial and social supports, and counseling provided before and during transitions between institutions and across levels of education (PK-K; elementary to high school and post-secondary training and education).

(continued on next page)
What Works to Prevent and Address Youth Disengagement and Disconnection?

- **Curriculum and Credit Recovery.** Implement rigorous, college-ready curricula and instruction, paired with opportunities to make up for lost time. This includes the opportunity to earn college credits while in high school, and contextualized learning where appropriate.

- **Create Work and Apprenticeship Opportunities in Expanding Sectors.** Employ current regional market and labor data to craft sector-specific career and employment skill requirements and educational/training pathways.

- **Expand Effective Work-Related Partnerships and Programs.** The active engagement of community, regional/county, and state partnerships is necessary to leverage resource opportunities for disconnected youth. Examples of opportunities include apprenticeships, mentorships and school-work pathways. Promising or proven programs for disconnected youth include JobCorps, YouthBuild, Service and Conversation Corps, and the National Guard Youth Challenge program.

- **Whole Person Supports.** Create a portfolio of supports that promotes school attendance, personal growth and responsibility, and team building. Examples of supports can be administered through sports and service opportunities.

**Bridgeport Prospers Progress: Moving from Fact to Act**

- In 2017, The United Way of Coastal Fairfield County, with the city as co-lead, was awarded the Working Cities Challenge Design Grant initiated by the Boston Federal Reserve. Design sessions are currently underway with multiple, cross-sector partners to realize the vision of increasing opportunities for youth ages 16-24 by addressing barriers to educational achievement, the availability of entry level jobs that provide a living wage, and the identification and resolution of barriers to employment. The competitive, full grant application will be submitted in October 2017. Work from the design plan will inform and guide activity of the Youth Employment/Careers CAN to be launched in the fall.

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