



# HEAD START

MSU Extension Head Start-Early Head Start Programs

# COMMUNITY NEEDS ASSESSMENT

## 2024



MISSISSIPPI STATE UNIVERSITY™  
EXTENSION

## Introduction and Purpose

This Community Assessment is in fulfillment of the requirements of Head Start Performance Standards (45 CFR 1302.11) which requires an assessment of the needs of the communities served every five years. The objective is to provide a snapshot of our service area and to identify characteristics which may have a significant impact on agency planning and program development. The Head Start Program Performance Standards and Other Regulations (45CFR 1302.11 (b)) specify the information that must be included in the Community Assessment and submitted with the grant application. To summarize, the grantee agency is required to collect and analyze information in the Community Assessment about:

1. The number of eligible children 0-5, and expectant mothers, including their geographic location, race, ethnicity, and languages spoken, including:
  - a. Children experiencing homelessness;
  - b. Children in foster care; and
  - c. Children with disabilities, including types and relevant services/resources provided by community agencies;
2. The education, health, nutrition and social service needs of eligible children and their families, including prevalent social or economic factors that impact their well-being;
3. Typical work, school, and training schedules of parents with eligible children;
4. Other child development, childcare centers, and or family childcare programs that serve eligible children, including home visiting, publicly funded state and local preschools, and the approximate number of children served;
5. Resources that are available in the community to address the needs of eligible children and their families; and
6. Strengths of the community.

The community assessment provides the most recent data available regarding demographics, early learning programs, disabilities, health and nutrition, and social services for children and families in the region. The assessment provides a portrait of our programs and activities and identifies community resources available. This assessment also identifies where there are gaps between available services and needs.

The Head Start Program Performance Standards and Other Regulations (45 CFR 1302.102) state that the information gathered in the Community Assessment (CA) must guide decisions based on the status of eligible families and the community setting(s) within the service area. Specifically, they state that: The information in the Community Assessment will be used to:

1. Help determine the grantee's philosophy, and its long-range and short-range program objectives.
2. Determine the type of component services that are most needed and the program option or options that will be implemented.

3. Determine the recruitment area that will be served by the grantee, if limitations in the amount of resources make it impossible to serve the entire service area.
4. If there are delegate agencies, determine the recruitment area that will be served by the grantee and the recruitment area that will be served by each delegate agency.
5. Determine appropriate locations for centers and the areas to be served by home based programs; and 6. Set criteria that define the types of children and families who will be given priority for recruitment and selection.

Ultimately, the community assessment is used to make decisions for outreach, enrollment, selection and the most appropriate delivery of Head Start services. It is a valuable resource for staff, parents and community partners to collectively think about the impacts of population shifts and equitable distribution of services.

## **Methodology**

This assessment was developed from data and statistics collected from several national, state, and local resources including the most recent research from 2023 Kids Count, the 2019 US Census Bureau, and local program statistics. In addition, for this Community Assessment, we surveyed participants of the program in addition to community partners and interested stakeholders, including our Policy Council and Board of Directors. The results of this assessment will allow us to identify services where changes are needed and adapt our program to meet the needs of the area's most in need children and families while also considering programmatic changes to address staffing challenges.

## Executive Summary

In overall child well-being, Mississippi ranks only behind New Mexico. The table below, (taken from *Mississippi Kids Count Factbook 2024*), shows Mississippi is the last ranked state in both Health and Family and Community metrics, 47<sup>th</sup> in Economic Well-Being, and 32<sup>th</sup> in Education – up from last year’s rank of 39<sup>th</sup>, however for young children (ages 3 and 4) not in school, the state again fared worse than the previous year with an estimated additional 2,000 children not in an educational setting. While the number of children in poverty dipped by an estimated 2,000 children, the number of children living in households with high housing costs increased by an estimated 5,000 children. A child’s chances of thriving depend not only on individual, family and community characteristics but also on the state in which she or he is born and raised. States vary in their wealth and other resources. Policy choices and investments also influence children’s chances for success.

	Indicator	Year	Number	Percent/Rate	Rank
Economic Wellbeing 47 <sup>th</sup>	Children in Poverty	2021	189,000	28%	50
	Children whose parents lack secure employment	2021	241,000	35%	49
	Children living in households with a high housing cost burden	2021	194,000	28 <sup>th</sup>	28
	Teens not in school and not working	2021	12,000	7%	24
Education 32 <sup>nd</sup>	Young children (ages 3 and 4) not in school	2017-2021	38,000	50%	8
	Fourth-graders not proficient in reading	2022	N/A	69%	28
	Eighth-graders not proficient in math	2022	N/A	82%	46
	High school students not graduating on time	2019-2021	N/A	12%	17
Health 50 <sup>th</sup>	Babies with low birth rate	2021	4,339	12.3%	50
	Children without health insurance	2021	46,000	6%	6
	Child and teen deaths per 100,000	2021	405	55	50
	Teens who are overweight or obese	2020-2021	N/A	41%	48
Family & Community 50 <sup>th</sup>	Children in single-parent families	2021	292,000	45%	49
	Children in families where the head of the household lacks a high school diploma	2021	76,000	11%	39
	Children living in high poverty areas	2017-2021	152,000	22%	50
	Teen births per 1,000	2021	2,545	26	49
2024 Mississippi Kids Count Factbook					

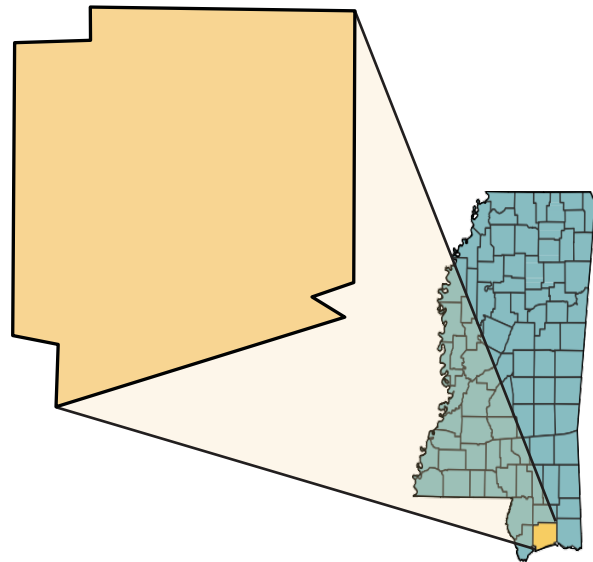
This report includes demographic, economic and health data for Harrison County, and in most cases, a comparison with statewide statistics. Mississippi State University-Extension Head Start became a grantee in 2019, after reports that more than 70% of children served by Head Start were in programs that were identified as low-performing and subsequently forced to compete for their grants via the Designation Renewal System. In addition, Head Start children in the area consistently scored the lowest among all child care options in Kindergarten Entrance Assessments, with some Harrison County school districts reporting that Head Start children score lower than Head Start eligible children who had not been served. MSU-Extension is committed to providing opportunities for children and families to experience positive outcomes to ensure future school success.

From February 13-17, 2023, the Administration for Children and Families (ACF) conducted an intensive Focus Area Two (FA2) monitoring review consisting of interviews for content area and leadership staff, Board and Policy Council members as well as policy and procedure reviews, center and classroom monitoring and safety checks and file audits for both children and personnel. On March 27, 2023, we received a very positive report that included only one noted area of improvement regarding lack of documentation for lead free paint for school-based partnerships. The review team identified several areas of strength, including our facilities and the learning taking place in each center, family engagement supports, our monitoring for health and safety, our wellness program, ERSEA and the documentation provided to support our efforts across service areas, our HR and fiscal systems and our partnership programs. The lead reviewer commented that for a program only in business for four years, we have done an amazing job and have excellent systems for an excellent program. Through our efforts, and other committed early care and education professionals, we will change the narrative for our most vulnerable children and families in Mississippi.

## About Our Geographic area:

Harrison County is the largest county in Mississippi's coastal region, spanning more than 900 square miles, and is home to 206,169 residents (US Census Bureau), with 24% of this population including children under 18, according to Kid's Count (2023). The county, which is centrally located on the Gulf of Mexico, encompasses five distinct cities, including Biloxi, D'Iberville, Gulfport, Long Beach, and Pass Christian. In a state where one in five residents lives below the poverty line, it is actually among the wealthiest areas in the state.

Our organization has been a singular beacon for quality early childhood education in the state. Over the last decade, MSU-ES has been tasked with operating the Mississippi Child Care Resource and Referral Network, administering the state's QRIS and providing a network of quality improvement supports for early childhood providers, culminating in the \$15M/year Early Years Network grant. There is no meaningful ECE initiative in the state in which MSU-ES has not played a leadership role. We expanded our capacity into the Head Start/Early Head Start world on August 1, 2019 for Harrison County, Mississippi.



Overall, more than one in four (28%) of Mississippi's children live in households experiencing poverty, compared to 17% nationally. This does not tell the full story, given the stark racial disparities in poverty (45% black compared to 13% white). Overall, 25% of Mississippi's children live in households with food insecurity. Few counties have a higher median and per capita income, and with a poverty rate of 17.5%, only 20 other counties fare better. However, there is a stark contrast for the children of Harrison County – with 28.1% below five who live in poverty, with a ranking of 36<sup>th</sup> out of 82 counties. Bolstered by the tourism industry that creates opportunities for working families in casinos alongside the restaurants and retail environments that surround them, residents of this community benefit from a diversified economy, demonstrated by one of the lowest unemployment rates in the state. As with many southern states, this area saw a significant increase in population post-Hurricane Katrina, complicating the need to rebuild, and adding to the strain on resources. Even though economic indicators are trending upward, the fact remains that 33% of children in Mississippi live in a household where parents lack secure employment. Many parents who want full-time work are forced to piece together part-time or temporary jobs that do not provide sufficient or stable income. In addition, some lack the education and skills needed to secure a good job.

## Population Statistics:

	Harrison County		Mississippi	
	Actual	%	Actual	%
<b>Population</b>	209,396	7.0%	2,970,615	100%
<b>Male</b>	102,604	49.0%	1,446,690	48.7%
<b>Female</b>	106,791	51.0%	1,523,925	51.3%
<b>Children under 5</b>	12,982	6.2%	178,237	6.0%

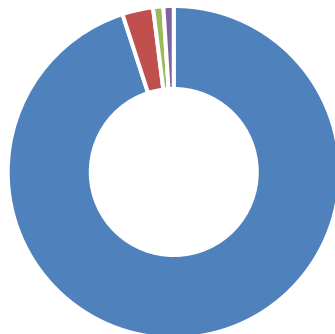
### Harrison County Population by Race

■ White ■ Black ■ American Indian ■ Asian ■ Two or more Races



*3.5% of Harrison County's population is Hispanic or Latino*

### Primary Language in the Home



■ English - 95% ■ Spanish - 3% ■ Other - 1% ■ Asian and Pacific Languages - 1%

*95% of Harrison County residents speak only English, while only 5% speak other languages.*

## Economic Indicators:

	Harrison County	Mississippi
<b>Household Median Income</b>	\$55,211	\$52,985
<b>Unemployment Rates (January 2023)</b>	2.5%	3.3%
<b>Children with no Parent in the Workforce</b>	8.7%	11.5%
<b>People Living in Poverty</b>	34,186	536,535
<b>% in Poverty</b>	16.8%	18.7%
<b>Children in Poverty</b>	10,695	175,995
<b>% Child Poverty</b>	22.2%	26.0%
<b>Children in Single Parent Families</b>	35.0%	36.8%
<b>Owner Occupied Housing</b>	58.1%	68.8%
<b>Renter Occupied Housing</b>	41.9%	31.2%
<b>Children in Care of Grandparents</b>	3,606	56,642

- Approximately 37% of all children in Mississippi live in a single parent household and low income families are a disproportionate amount with nearly 75% of all prospective Head Start and Early Head Start parents being single mothers.
- As recent as May 2022, estimates are that 22% of Mississippi households with families had little or no confidence in their ability to pay their next rent or mortgage payment in time. In addition, 52% of low income households with children spend 30% or more of their monthly income on rent, mortgage payments, taxes, insurance and/or related expenses.
- Mississippi Kids Count estimates that over 95,000 (14%) children live in extreme poverty – up approximately 10,000 children from a year ago. Extreme poverty is defined as those who make less than 50% of the federal poverty level. For a family of 4, that would equate to \$13,739 per year. The Children’s Defense Fund estimates that 71% of children in poverty are children of color.
- In Mississippi, 3,804 children were in the foster care system and of that number 36% are under the age of 5. This number increased by 210 kids in the last year, but the numbers of children under 5 remains significantly higher than any other age range. Gender distribution of children in care is virtually equal and slightly more than one third of children were placed with non-relatives while 28.5% were placed in foster homes with a relative. Geographically, children in care are distributed widely, with the highest concentrations in Jackson, Harrison, Hinds, Lee and Lowndes Counties. As of February 2024, a total of 236 children were in foster care



in Harrison County alone.

- Mississippi has one of the lowest average costs for child care in the nation, but in 2023, the average annual cost of infant care was \$5,436 (\$453 per month) and \$4,784 (\$399 per month) for a preschooler. Families of children with special needs have limited options and are expected to pay a higher rate.
- According to the Mississippi Department of Employment Security, the Consumer Price Index for the Southern Census Region continues to increase at an alarming level, with the most critical increases from January 2022 to present in the areas that families need most:
  - Household Energy – 13.7%
  - Rent – 11.3%
  - Food and Beverages – 9.9%
  - Housing – 9.6%
- Harrison County is one of eight counties in Mississippi with a higher rate than the United States average (61.7%) for labor force participation meaning that a 62.6% of the workforce aged 16 or older is currently employed or actively looking for a job.
- The US Bureau of Labor Statistics reported that in 2022, Mississippi added 27,158 jobs, and increase of 2.4% over the previous year. The majority of those jobs were Health Care and Social Assistance with 5,600 additional jobs over the past 12 months. Educational Services added 1,400 jobs in the same timeframe, followed by Manufacturing with 1,300 jobs. The largest decrease in employment in all sectors was in Retail, where 400 jobs were lost.

## Child Health and Social Service Metrics:

	Harrison County		Mississippi	
	Actual	%	Actual	%
<b>Child Health Indicators</b>				
<b>Low Birthweight Babies</b>	271	10.2%	4,192	11.8%
<b>Premature Births</b>	338	12.8%	5,896	17%
<b>Teen Pregnancy (rate per 1,000)</b>	194	31.1%	3,320	33.7%
<b>Infant Mortality Rate (per 1,000)</b>	8.4		8.8	
<b>Child Abuse and Neglect Reports</b>	3,174		33,450	
<b>Child Abuse Substantiated</b>	476		8,086	
<b>Children in Foster Care</b>	426		3,594	
<b>Mothers without a High School Diploma</b>	309	11.7%	4,565	12.4%

<b>Food Insecurity</b>	37,470	18.2%	483,700	16.2%
<b>Food Insecurity (Children)</b>	10,680	21.7%	144,320	20.4%
<b>Temporary Assistance for Needy Families</b>	\$483,936		\$6,034,744	
<b>Supplemental Nutrition Assistance Program</b>	\$62,094,669		\$850,148,588	

**Other Health Factors:**

- Mississippi leads the nation in substantiated cases of child abuse and neglect with 48.3 substantiations per 1,000 children. Harrison County’s rate is higher at 53.9 per 1,000.
- Harrison County leads the state in the number of foster children with 426 served from April 2021 to March 2022. The median length of stay was 16.1 months.
- Mississippi Department of Child Protective Services (MDCPS) reports that only 68% of investigations were initiated withing a timely manner.
- Of the total number of victims on file with MDCPS, infants up to one year old are at the greatest risk, with 14.8% of the total cases. The next highest percentage for an age group is 6% (ages 13 and 14). For children age eligible for Head Start/Early Head Start, the total percentage of cases is 40.5%, making birth to 5 the most at risk of child abuse. **This percentage increased 6% over the past year.** In addition, of the children under the age of 5 who were confirmed by child protective services as victims of maltreatment, the following is the breakdown of abuse:
  - 17.3% emotional abuse
  - 4.5% medical neglect
  - 75.5% neglect
  - 15% physical abuse
  - 15% sexual abuse
- In 2020, Mississippi ranked last in percentage of households who at some point during the year experienced difficulty providing enough food due to lack of money or resources.
- Mississippi’s teen birth rate was the highest in the United States. For every 1,000 Mississippi teenagers, 50 had a baby. The nation’s average was 31. Teen pregnancies are estimated to cost the state’s taxpayers \$137 million.
- The state has the highest rate of premature death in the United States, many due to chronic conditions. In addition, Mississippi is also highest ranked in infant mortality with a large racial disparity – 6.8 deaths per 1,000 live births among white babies vs. 11.4 per 1,000 live births for black babies.
- Harrison County had the highest number of suspected overdose deaths in 2021 with 92 (**almost double the previous year**) and was ranked number 3 in the state in reported number of drug related arrests with 1,512 – up almost 500 from the previous year.
- Seventy-three adults were reported hospitalized for substance use disorders.

- Adults reporting depressive disorders – 22%.
- Almost 20% of adults in Harrison County report being current smokers and 48% reporting alcohol use.
- As of March 2023, Harrison County has had 703 deaths from COVID-19, with 63,903 total cases since its inception.
- Harrison County ranks above the state and national averages in self-harm and interpersonal violence mortality.

## Early Intervention, Screening and Disability Information:

In 2022, only 3.1% of children in Mississippi between the ages of 0-35 months received Early Intervention Services. In 2020-2021, 34.1% of Mississippi’s infants and toddlers received a developmental screening, just less than the national average of 34.8%. However, Mississippi’s Early Intervention participation rate remains lower than other southern states. For children receiving Part B Early Intervention Services, there is a significant trend that mirrors national statistics that males are the overwhelming majority (61% vs. 39% of females). As children age, the prevalence of Early Intervention increases, with the highest concentrations at 4 and 5 years old. Children are more likely to be referred to services as they grow older, with a distinct spike at age 5 when most children enter kindergarten. More than four times as many children could be supported at the age of two through Early Intervention if delays are caught early. Research shows that younger children are more responsive to intervention, with the impact of services tapering off as the child ages.

	Age	Number
<b>Part B</b>	Birth to 1	211
	1	479
	2	902
<b>Part C</b>	3	1,083
	4	2,081
	5	3,662

In Harrison County, there are 250 children, birth to three, receiving Early Intervention services. Early Head Start has one child who has an IFSP (Individual Family Service Plan). According to the Mississippi Department of Education, there are 1,001 (16.6% of enrollment) children statewide who are receiving special education services. About 3.8% of infants and toddlers (approximately 4,100 children) in Mississippi receive Part C Services (early intervention), compared to the national average of 6.8%. Although the Part C enrollment is low, it is reasonable to expect the need in the state to be more significant than in other states due to persistent poverty and other social determinants of health. According to the Census, there are 13,546 children under five with a diagnosed disability.

## Head Start Eligible Children and Families

According to Mississippi Kids Count, less than 50% of age eligible children are enrolled in preschool or nursery school in Harrison County (46.9%), below the state average of 52.4% which has dropped a percent from the previous year. Of the number not in school, the estimate is that 49% of the children not in care fall below 200% of the poverty level. Using census data, we applied the child poverty rate in Harrison County to the age-eligible population of children to estimate there are 2,875 income-eligible EHS infants and toddlers and 1,812 income-eligible preschool aged Head Start children in our service area. By applying the birth rate to the ratio of low-income women, we estimate that at least 320 income eligible pregnant women live in Harrison County.

### Eligibility by zip code/age:

	< 1 yr	1 yr	2 yrs	3 yrs	4 yrs
39501 ( <i>Gulfport</i> )	225	216	231	213	188
39503 ( <i>Gulfport</i> )	213	229	225	202	229
39507 ( <i>Gulfport</i> )	67	57	68	65	59
39530 ( <i>Biloxi</i> )	75	83	78	80	77
39531 ( <i>Biloxi</i> )	145	137	139	137	128
39532 ( <i>Biloxi</i> )	131	135	133	127	117
39540 ( <i>D'Iberville</i> )	5	5	5	5	6
39571 ( <i>Cuevas</i> )	54	50	54	50	50
39574 ( <i>Airey</i> )	37	37	41	43	37
Total ( <i>By Age</i> )	951	950	975	920	892
<b>Total (<i>By Program</i>)</b>	<b>EHS</b>	<b>2,875</b>		<b>HS</b>	<b>1,812</b>

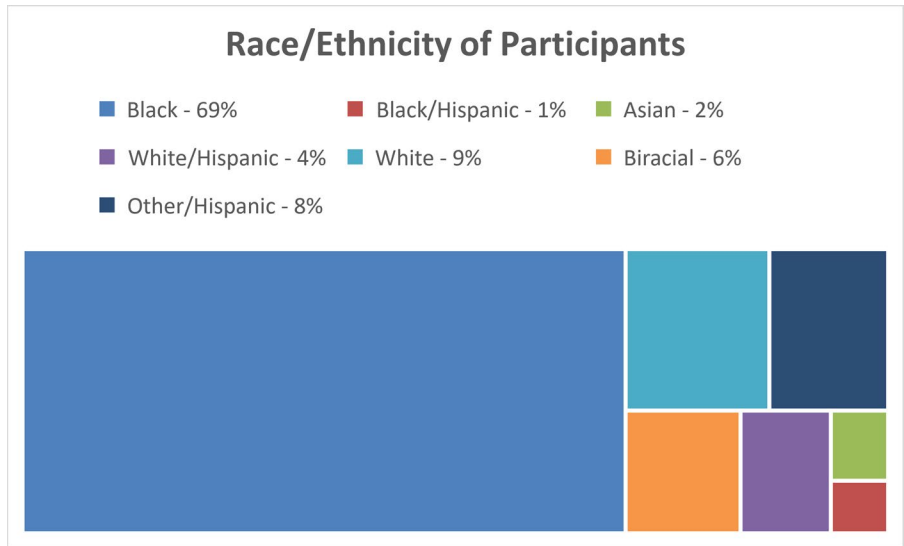
## Head Start/Early Head Start Services Snapshot 2022-2023

There are three Head Start centers that MSU-Extension has oversight of: East Biloxi Head Start, Gilbert Mason Head Start, and Gaston Point Head Start. In addition, we have a partnership with one of the local school districts, Gulfport School District where we have 4 pre-K classrooms; 1 classroom each that are housed at 4 different elementary schools. East Biloxi Head Start is currently housed at Nichols Elementary in Biloxi, MS with the region serving families in the Biloxi Public School District. Gilbert Mason is in D'Iberville within the Harrison County School District. Gaston Point Head Start is in Gulfport, and along with the partnership program, serves families in the Gulfport School District.

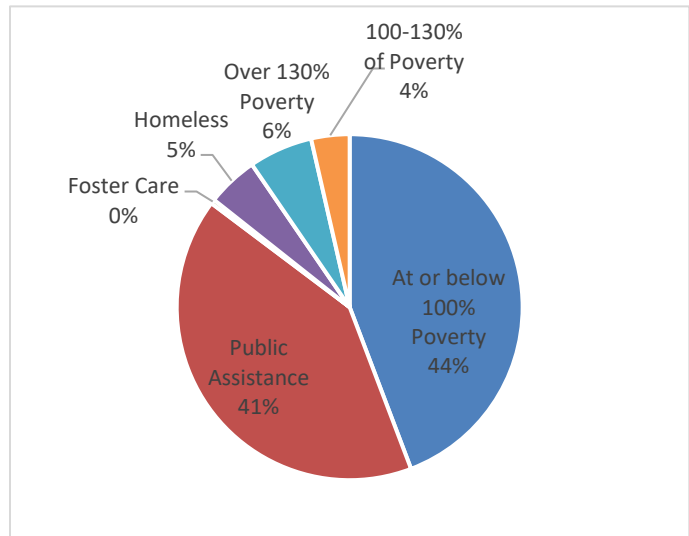
Over the course of the 2022-2023 school year, our program served a total of 220 children in Head Start as well as 31 children in Early Head Start. We are seeing increasing numbers of Hispanic/Latinx families.

Of the total enrolled participants, 214 were non-Hispanic while 37 were Hispanic. Thirty-two of our children are Dual Language Learners, with the majority being proficient in Spanish. Language breakdown of participants is as follows:

- 222 spoke English,
- 26 were Spanish speaking
- 3 spoke East Asian Languages.



There were 111 children served by our program that were income eligible. The number of families served by the program that are over income >130% is 15; and 9 children are over income of 101%-130%. One hundred and three children benefit from public assistance. There was 1 foster child and 12 homeless children (7 in Head Start and 5 in Early Head Start) that have been served by our program this past school year. Four of the homeless families acquired housing during the program year.



Twenty-seven children had an active IEP:

- 11 who are diagnosed with a speech or language disturbance,
- 12 who have a non-categorical/developmental delay,
- 3 who have autism,
- 1 who has an intellectual disability.

Currently, all children with IEPs are serviced through our active partnership with our Local Education Agency (LEA). In Early Head Start, two children were determined eligible to receive early intervention services under IDEA which resulted in the creation of an Individualized Family Service Plan (IFSP).

The following chart shows the breakdown of how many children and families were served by center, as well as the number and percentage of children who had physical and dental exams.

Location	Children Served	Families Served	Physical Exams	%	Dental Exams	%
East Biloxi Elementary	38	35	36	95%	36	95%
Gaston Point	39	33	39	100%	39	100%
Dr. Gilbert Mason	59	53	56	95%	58	98%
Gulfport Partnership	84	83	74	88%	74	88%
<b>Total Head Start</b>	<b>220</b>	<b>204</b>	<b>205</b>	<b>93%</b>	<b>207</b>	<b>94%</b>
Linda Lyons (EHS)	31	28	26	84%	26	84%

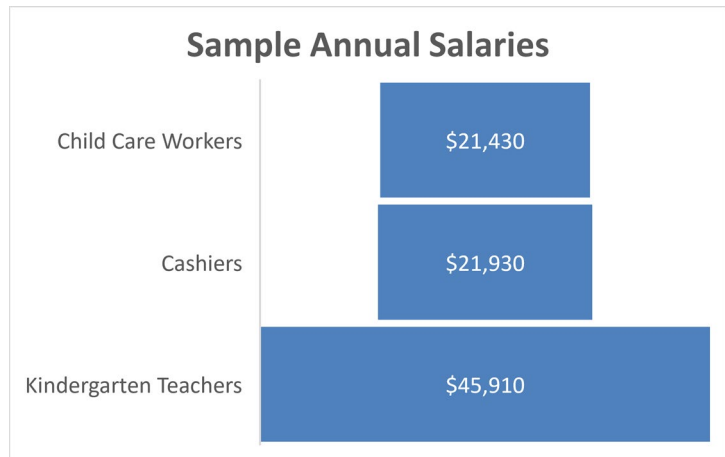
## Child Care Availability and Workforce

For Harrison County, the available slots for children ages five and under vs. number of children is only at 55%. Parents in Harrison County have limited access to affordable childcare and no simple system that organizes the accountability of caregivers. Between Head Start/Early Head Start, Child Care Payment Program (CCPP), and public pre-k, public assistance programs in the state meet some low-income parents' needs. The CCPP, which is funded through the Child Care and Development Fund (CCDF), serves children in households earning up to 85% of the state median income and, of course, Head Start income eligibility relies on poverty status. In 2020, just over 48% of children were enrolled in preschool or nursery programs, which is under the state average of almost 52%. Of the 76 licensed childcare facilities in Harrison County, 38 have capabilities to care for infants, toddlers, and preschoolers, and 16 have provisions for toddlers and preschool only. Together with CCDF and public schools, only about 1,000 children under five are being served in Harrison County, a fraction of those eligible. Including Head Start, 35% of all three- and four-year-old in Harrison County were enrolled in school in 2020. Unsurprisingly, some of the areas with the lowest enrollment overlap areas of highest economic need.

In 2022, Mississippi had an estimated 174,000 children under the age of 5. Of these children, 88% had a least one parent in the workforce. Throughout the state, there are 1,363 licensed child care facilities, with a total of 121,297 child care seats, but 32% of those facilities do not accept CCDF vouchers for children from low income families. Even with that number of slots, there is a massive deficit in the number of facilities/availability and the number of children. Options for care range from licensed center-based care, early learning collaboratives, family, friend and neighbor care, unregistered home-based care, licensed home-based care and Head Start programs. As of October, 2023, only 7 of Mississippi's counties had enough licensed child care seats to accommodate the number of children under 5 in that county. Six counties had no centers that accept CCDF vouchers. For families that can find available child care, the cost is oppressive with an average of \$4,382 per year for toddlers in center-based care. It is estimated that this cost burden is upwards of 19% of the median income of single mothers and 5% of the median income of a married couple with children. Further complicating matters is the high percentage of families with insecure

employment – 35% of Mississippi’s children have parents who lack secure employment, compared to 29% of children nationally. Prices have risen across center-based and home-based child care options since 2018 by approximately 11.4%. According to the Bipartisan Policy Center in 2021, 32% of working parents with young children lacked access nationally, and the gap was even wider in rural areas (35%). Families with lower incomes spend a higher percentage of their household income on child care, and black families paid a higher percentage (8.9%) compared to white families (6.6%). In May 2023, the Mississippi Department of Human Services removed the requirement that single parents seeking CCDF vouchers first seek child support from the child’s other parent. This policy change is anticipated to greatly expand access to affordable care in a time where extreme inflation felt by families in 2023 has likely had a negative impact on the affordability of child care.

In correlation with the insufficient number of child care slots and the rising costs of the slots available, we are also seeing a serious decline in the child care workforce. According to the Mississippi Department of Employment Security (MDES), Mississippi had 5,640 child care workers in May 2022. By 2030, Mississippi is estimated to need 740 additional workers in this sector. Problematically, the child care workforce is not well-paid in Mississippi. Workers are paid an average hourly rate of \$10.30, amounting to \$21,430 per year [10]. These rates are comparable to those of a cashier, an occupation that is much easier to attain and requires no education. However, the rate of pay is



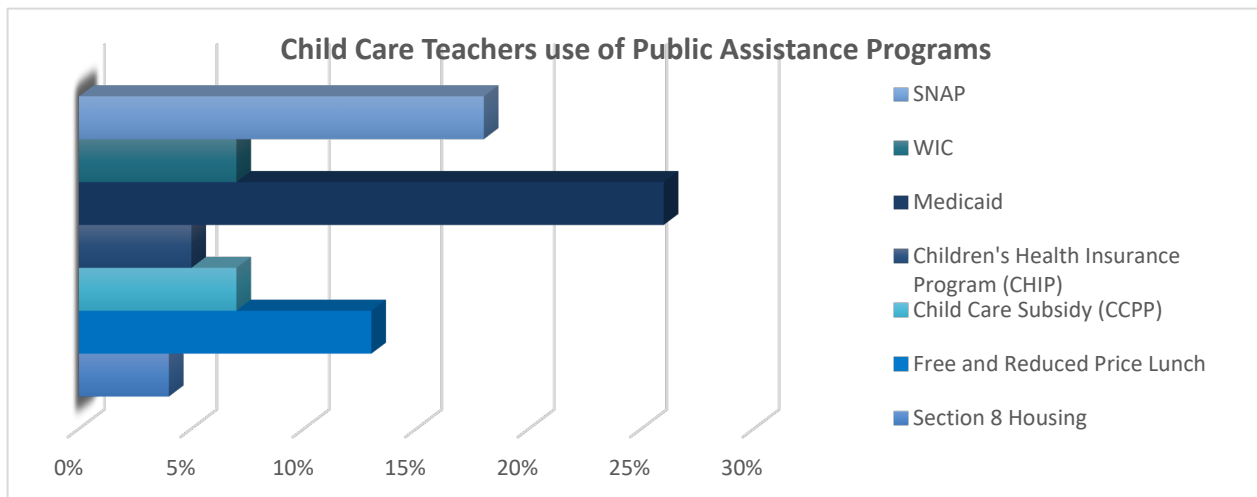
substantially lower than that of Kindergarten teachers and has remained largely stagnant over the past 5 years. According to *Understanding Child Care: The Workforce Behind the Workforce - 2023 Mississippi Child Care Teachers’ Wages Survey*, the average compensation for a child care teacher in Mississippi falls below that of a dishwasher, cashier or retail worker, and shockingly even less than ½ the annual income of a school-based preschool teacher, despite the striking similarities in their work and qualifications. The wage disparity contributes significantly to high turnover rates within the child care field, causing disruptions in the upstream workforce that, in turn, reverberate downstream, affecting both parents and businesses. Over one-third (36%) of respondents stated they had looked for a new job within the last three months. Of the respondents actively searching for a new job, 78% searched for non-child-care-related jobs, and 22% searched within the child care field. A cumulative 57% of respondents answered that they would consider leaving their current job for a non-child-care-related job for an additional \$5.00/hr.



In addition, child care educators are less likely to have health insurance, have higher student debt than the national average, and experience high levels of food insecurity. Teachers, including those working for Head Start and public schools were asked which benefits were offered at their child care facility. Respondents selected:

- Paid time off – 40%
- Health Insurance – 28%
- Paid sick leave – 26%
- Professional growth opportunities – 25%
- No benefits – 12%.

The survey also asked child care workers what household assistance they receive and results showed that at least 36% of respondents reported they receive one type of assistance program or more. The Social Science Research Center at Mississippi State University released findings from a survey of 661 child care providers in November 2023 that demonstrated that nearly 11% of child care providers had a second job, 21% of providers worked more than 40 hours per week at their child care center, and 36% of providers received public assistance. In order to recruit and retain quality early care and education providers, the state needs to examine ways to address salary differentials.



## Head Start Staff

Our program is facing the same challenges as other Head Start programs throughout the nation in finding and retaining qualified staff to work in classrooms. Early childhood, with traditionally low pay, is a field that is struggling to attract candidates to the field and even when we hire staff, the burnout rate is incredibly high. Our profession is seeing record numbers of staff across the nation voluntarily leaving their jobs, we are no different. In the past year, we were unable to open several classrooms due to the inability to recruit, hire and retain staff to safely operate classrooms. As such, we were at approximately ½ of our funded enrollment. In addition to the difficulty in finding qualified staff, we say challenges in keeping staff as well. In the past year, we had 7 Early Head Start staff leave, 6 of whom were teachers (85%) and 27 Head Start staff out of 59 total staff (46%).



Out of those 27 staff, 17 (63%) were education staff. For the 34 staff who left, 26 were replaced during the school year, leading to a negative impact on continuity of care for our children served in those classrooms. In exit surveys of staff leaving the organization, we are finding a myriad of reasons for the vacancies. Almost half of those staff left for work in similar fields, such as local school systems at a higher rate of pay. Because this is a nationwide crisis, competitors have sprung up in unexpected places such as Target or Starbucks who are not only offering higher starting salaries but are also offering new employees signing and retention bonuses.

There has been a drastic change in the education levels of staff from the previous school year where 71% of the Head Start Teachers held a bachelor's degree or higher in Early Childhood Education. By contract, in 2022-2023, out of 15 Head Start classroom teachers, less than half (40%) held a bachelor's degree or higher in their field, with the rest (60%) holding an associate degree in Early Childhood or related field. For Early Head Start, the split is identical with 1/3 of the staff with an associate degree, 1/3 holding a Child Development Associate in infant/toddler development and 1/3 without a credential but enrolled in classes to obtain a degree. With the stringent staffing standards required by Head Start, entry level staff are difficult to find and can be even harder to keep. Working in early care and education is difficult with notoriously low wages. During the pandemic, the Head Start Bureau gave special allocations to allow for staffing increases, but they were temporary measures that expired in the 2023 school year. To compensate for the challenges in finding and retaining staff, many programs are "right-sizing" by decreasing numbers of classrooms/centers and staff and using the savings to make significant market adjustments to existing staff. As an organization, we will explore all possibilities to find new ways to recruit, train and retain highly qualified staff.