



2021

Building a better future for Whatcom County children

Survey of families' needs in their
child's first five years



Introduction

The first five years of a child's life are pivotal in their later growth, development, and health. All children benefit from a coordinated system of community resources to help them thrive, like health care, quality early learning experiences, healthy nutrition, and parent support. When these systems are coordinated, it provides ongoing successful outcomes for children's health and well-being.

However, when the system is not well-coordinated, it can be difficult for families to access resources for their children and challenging for service providers to connect families to needed supports. This can have long-lasting consequences on children's health and well-being.

Whatcom Early Learning Alliance (WELA), alongside many other community partners, is building a better future for Whatcom County children by strengthening the networks around families and ensuring they have the resources they need for children to thrive.

Whatcom County has a long history of building coordinated systems to serve families with children. Since 2012, the *Single Entry Access to Services (SEAS)* has helped families and medical professionals navigate services for children birth to 21 years old with special healthcare needs. In 2020, SEAS navigators supported 804 families and providers in accessing services, including healthcare, childcare, and benefit programs.

Coordination efforts have also enhanced the response to mental health concerns occurring during pregnancy and the first year after birth. The *Perinatal Mental Health Task Force (PMHTF)* has built a strong network of providers who can serve families during this critical—and often challenging—time of life.

Building on these efforts, WELA is implementing Washington State's Help Me Grow (HMG) model to better support families with young children. A core component of HMG is having a Coordinated Access Point. SEAS is a natural hub of the Coordinated Access Point for connecting families and will integrate HMG into their existing service model.

By 2023, SEAS will expand to support all pregnant and postpartum families with young children under the age of 5, regardless of health status. The HMG model also provides guidance on building a well-coordinated, easily accessible system of culturally responsive services that benefit all children.

To better understand the needs of our community, **we conducted a survey of nearly 400 local families and professionals to determine where our system of child and family services is working well and where more support is needed.** The results are summarized in this report and a [supplemental report](#) focused on Spanish-speaking families. Their responses are a guide for our work in creating a system that helps all children thrive.

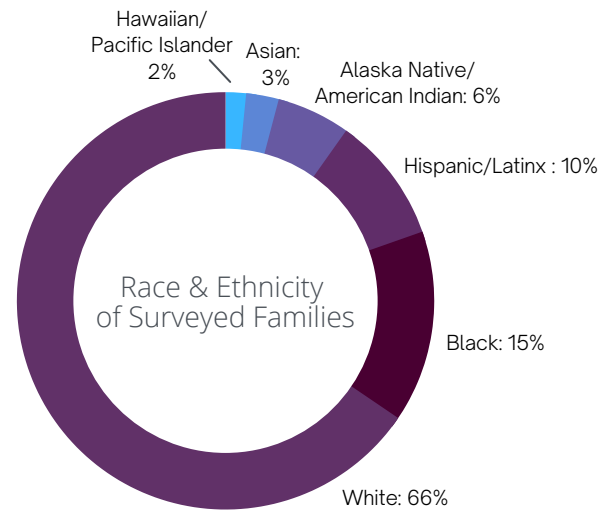
Dear Reader:

We invite you to reflect on the perspectives shared in this report, offered by our own community. How could they help shape your work? Where do you think change can happen? Improving children's lives takes all of us; we appreciate your engagement.

About the Survey

Results were gathered from 307 families with at least one child 5 years old or younger. Families with insurance were almost evenly split between private plans and Apple Health (Medicaid); 14% did not have insurance. 70% of surveyed families speak English; 30% speak Spanish. The survey was shared by family-serving agencies and staff. Thus, respondents were likely more connected to services than the general public.

Professionals working with families provide information and referrals for resources. **Results were gathered from 64 providers**, including those in community health, schools, childcare, preschools, and healthcare.



Key Findings

Overall, many families are satisfied with the services they've received.

For families who have used services to help meet their families' needs, 64% said they would use them again.

Many families can't afford the services they need.

The most common barrier families had in getting support was the cost of services. 45% of families said they'd experienced cost as a barrier to services.

Parents want more support in being parents.

Parents thrive when they receive emotional support and help building skills. Half of families said parenting support would be the most helpful resource for them.

There is a lack of services for families of various backgrounds.

Families said it's difficult to find providers who speak languages besides English, understand various cultural backgrounds, and serve children with disabilities.

Relationships matter.

Our system is at its best when there are strong connections between providers, providers and families, and families and their children.

Families want more opportunities for themselves and their children.

Families want increased high-quality early educational experiences for their children as well as family fun, cultural activities, and enrichment opportunities.

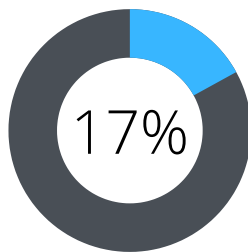
Providers want to refer people to one place that can serve many needs.

Families have a range of needs. Providers value and appreciate one place to refer families, with follow-up to the referring provider.

Pregnancy, birth, and postpartum care

Becoming a parent

From pregnancy to the first year of their child's life, families are thrust into a major life transition. Becoming a new parent can be difficult as families deal with a variety of challenges, including breastfeeding and nutrition concerns, mental health, relationship stress, and unexpected healthcare issues.

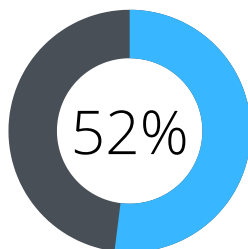


of new parents said they felt "not at all prepared"

Only 6% of parents said they felt "very prepared"

Postpartum Depression

Many new parents—including fathers—are affected by postpartum mood and anxiety disorders. Those who are experiencing high levels of stress, financial problems, have a baby with health issues, or have a history of depression are especially at risk. When these problems go untreated, they can negatively affect children's growth and development, and can lead to chronic depressive disorder in adults.



of families said they wouldn't recognize symptoms of postpartum depression or know where to get help

The first year of life

Even in the best circumstances, the first year after having a baby can be difficult. This transition can be made easier with a strong network that supports the well-being of children and parents.

Resources in the first year of their child's life that families...

...have used and would use again:

1. Breastfeeding/nutrition
2. Parenting education
3. Birth doula and child education classes (tied)

...would've used if they'd had time:

1. Parenting support in healthcare settings
2. Body work (chiropractor, pelvic floor, etc.)
3. Stress management and meditation

Pregnancy, birth, and postpartum care (cont.)

Spanish-Speaking Families

Culturally and linguistically responsive services that engage families in ways that are equitable and respectful of their background is the basis of the HMG model.

Overall, **Spanish-speaking families were far less likely to have used parenting, pregnancy, or support services** during the first year of their child's life. This wasn't for a lack of interest: these same families were also interested in or open to the idea of using services, suggesting a gap in awareness of services or the availability of services that fit their needs.

For Spanish-speaking families who did access resources, some were not satisfied with the services they received. In fact, **63% of families said that they would not access them again**. This was not true for English-speaking families and is an area for further exploration.



Family Voice:

"Me gustaría alguna actividad para que mis hijas puedan aprender, se vuelvan más deportistas."

(I'd like some activities for my children where they can learn and become more athletic.)

Reader Reflections:

Why are Spanish-speaking families less likely to say they'd re-access parenting resources they've previously utilized, compared to English-speaking families? Are there factors that contribute to a less satisfactory experience? Were they less likely to have a need for these services in the future?

Support in the early years

While some families used a variety of services during pregnancy and their children's first years of life, many reported they would have accessed more, if they'd had more time or information.

Parenting Support:

50% of families said that parenting support would be the most helpful resource they could receive right now.

Access to Healthy Food:

51% of Spanish-speaking families said that access to healthy food would be helpful for their family, compared to 34% of English-speaking families.

Mental Health:

Families identified various issues related to mental and emotional health as being a high priority. Drug and alcohol treatment, individual and couples counseling, stress management/meditation and mental health treatment were all services families were seeking or had utilized in the past.



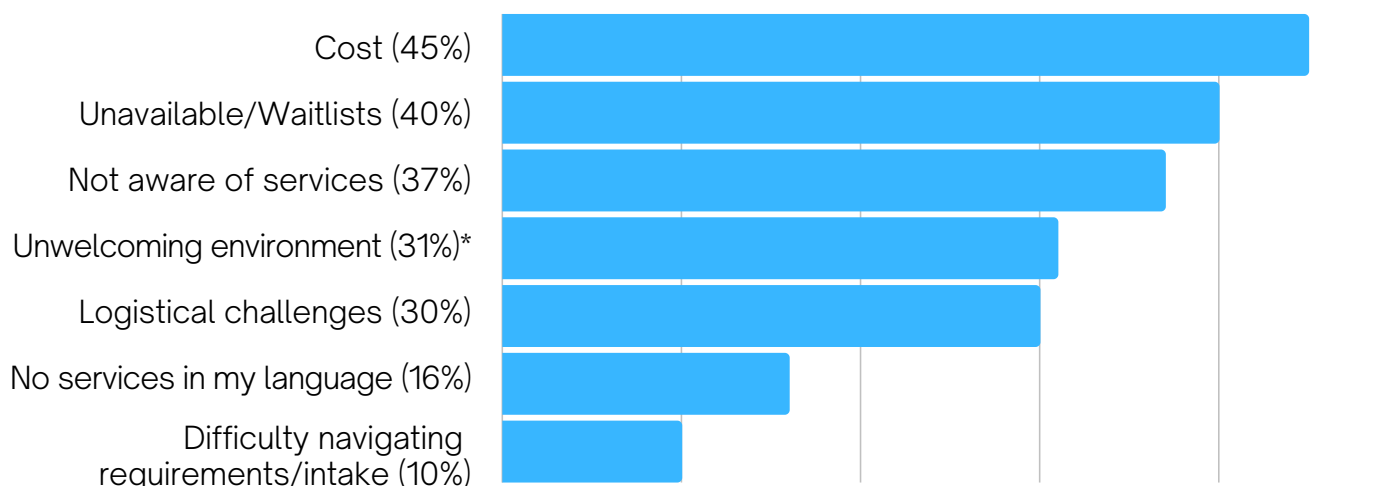
Some families said it was very easy to find the resources they need, while others had a more difficult time finding those same resources. This range of experiences **demonstrates inequities in accessibility.**

Family Voices:

- "Mental health needs to be made more available as well as childcare in this county."
- "I would like more social interaction for my child, play time with others, sensory play."
- "Me gustaría que tuvieran una actividad , clases de gimnasia, natación."
(*"I would like my child to have an activity, gym classes, swimming."*)
- "I hope my children can get good care and a good learning environment."
- "I wish my child could have play time with diverse play groups, instead of being the only BIPOC, only Muslim, only one to speak languages besides English, etc."

Barriers to getting support

Even when services are available, it can be difficult for families to access them. While cost was the most common barrier, many other factors were also significant barriers to getting support.



**Spanish-speaking families were more likely to have experienced an unwelcoming environment (42%), compared to English-speaking families (28%)*

Reader Reflections:

- Are there programs that can help cover the costs of services that providers or families may not be aware of?
- Are there creative strategies providers can use to reduce service costs?
- Are needed services not being provided in our community or are the waitlists so long that people aren't able to access them?
- Are providers aware of services? How can they learn more about available services and effectively pass along that information?
- What factors are creating an unwelcome environment?

What do providers need for helping families access services?

- "Home health and visiting nurse services would be truly valuable."
- "Have resource staff at doctor's offices when exiting appointments."
- "Finding methods for 'warm handoffs' to new services is very helpful for families."
- "Increased outreach that meets families where they're at—rather than expecting them to find service providers on their own."
- "Please translate information and encourage cultural awareness. It makes a big difference."

Communication matters

During the first years of their child's life, parents rely on those around them for support, information, and resources. Programs will be more successful reaching families if they build on trusted resources and communicate in the ways that families prefer.

Feedback from both families and providers demonstrated that **communication matters because relationships matter**. Families turn to each other and their providers for resources, while providers rely on one another for peer support. Most importantly, the early relationships children have with their parents build the foundation for the rest of their lives. HMG recognizes and builds on each of these relationships, creating a strong system that supports all people and organizations.



Where do families go for information?

Families were **most likely to turn to peers, family members, and coworkers** for parenting information.



Do families trust providers?

76% said they could talk to their childcare provider about their needs. **42%** said they could turn to their child's healthcare provider.



What communication works?

Parents and providers prefer communicating in different, sometimes mismatched, ways. **Parents prefer email, phone, or text.** Providers prefer one-on-one, phone calls/Zoom, or email.



What are families' experiences with SEAS?

The majority of families who'd used SEAS found it helpful. However, Spanish-speaking families were less satisfied and less likely to have heard of or used SEAS.

What's next?

It will take all of us working together. You are part of the Help Me Grow network, with WELA and our community partners working to create a community where all families have the resources they need. The survey responses from families and providers will help inform and guide how resources are developed, accessed, and communicated.

Our current and future work includes:

- Using the Help Me Grow (HMG) framework to build on our community's strengths and develop a well-connected, easily accessible system of resources and support. HMG will be utilized in the process of identifying existing resources, thinking creatively about how to make the most of existing opportunities, and building a coalition.
- Expanding the SEAS Program to become a Coordinated Access Point, through which all families with children up to 5 years old will be served, regardless of health status. SEAS will continue to serve children and youth up to 21 years old who have special healthcare needs.
- Improving services for parents who are experiencing mood and anxiety disorders in the first year of parenthood through the Perinatal Mental Health Taskforce.
- Building a reliable, up-to-date resource directory through which comprehensive information about services can be effectively managed, distributed, and used.

Reader Reflections:

The families and providers who participated in this survey offered invaluable insights on how we can improve our system. What stood out to you in their responses? Where do they want to see change happen? How can you use their responses to shape your work?

We encourage you to consider how you can become part of this project. To learn more about being involved or for more information, contact Vesla Tonnessen at welacoordinator@gmail.com.



Community Partners:

SEAS Program
Whatcom Infant and Children's Council

Bellingham School District
Nooksack Valley School District

Whatcom Taking Action
Perinatal Mental Health Taskforce