2020 MD Family Engagement Summit – Session 4 Transcript

Dr. Williamson:

Thank you all so much for being here today. I hope that that video touched your heart and soul, just as it touched mine. There are so many messages that we can take out of that video. First, I want to take just a few minutes to thank Keri Hyde and Dorothy Stoltz, the Family Engagement Coalition co-chairs, and the entire Family Engagement Coalition. They have worked so hard on ensuring that over the past few months, they have put together a very critical and very informative and thoughtful summit series. Please know, ladies, that we appreciate all that you do. I, for one, have attended each one of these programs in the series, and I've found each one of them to be extremely interesting and informative.

Dr. Williamson:

I know many of you have already seen the film, No Small Matter, but for some of you, this was your very first time seeing it. The overall message of the film is critical. It emphasizes that access to high-quality early childhood education is so important for the success of our children. It shows that there is a significant impact due to that access to kindergarten, in how they perform throughout their school years and into adulthood.

Dr. Williamson:

High-quality early childhood education is the foundation of success that is crucial to support strong partnerships between schools and early childhood programs. We need to be thinking in terms of our education system as prenatal to college and career.

Dr. Williamson:

This is our fourth engagement of the Family Engagement Summit series, Small Changes for Big Results: Understanding equity and implicit bias when engaging families. So far, we've discussed birth-12 equitable family, school and community engagement; mental health and racial trauma; and inequalities in America.

Dr. Williamson:

Today's keynote and panel discussion will be a follow up to the film, and it will look specifically at teacher wellbeing, and how we're supporting the early childhood and education workforce. I think you'll find today's discussion very interesting, as it will illustrate how dedicated and committed our teacher are to families and their children.
So, let's get started with our keynote speaker, Dr. Lieny Jeon, who is an assistant professor in the department of advanced studies in education at Johns Hopkins School of Education. She is leading the Baltimore Education Consortium's early childhood data collaborative. Dr. Jeon received her doctorate in human development and family science, with a minor in quantitative methods at Ohio State University. She completed her postdoctoral training in the Department of Defense Child Development virtual laboratory school.

Dr. Williamson:

Her research focuses on early care and education, family characteristics and neighborhood disadvantage that impact children's lives. Dr. Jeon focuses on early childhood educators' social and emotional wellbeing, and their professional learning, and the way that they impact young children's development. She also examines how early care and education buffers challenging home and neighborhood environments, and maximizes the progress of children at risk for school success.

Dr. Williamson:

Her research has been published in national and international peer-reviewed journals, and featured in the New York Times. In 2017, she was selected as an AERA-SRCD, that's the American Education of Research Association, and the Society for Research in Child Development, for early career fellow in early education and development.

Dr. Williamson:

Dr. Jeon will present her research, Early Childhood Professionals' Wellbeing Matters: Strengthening Health and Wellness in Early Childhood Education. She'll speak about early childhood professionals' psychological and physical wellbeing, and its impact on classroom quality and outcomes, using findings from her research on childcare center providers, family childcare providers, and Head Start teachers. In addition, Dr. Jeon will talk about the importance of organizational climate and supporting early childhood education professionals' wellbeing.

Dr. Williamson:

We are so delighted that she could be with us today to present her research on teacher wellbeing. With that, I'm turning it over to you, Dr. Jeon. Welcome.

Dr. Williamson:

I am not hearing you, Dr. Jeon. I don't know if you're on or not. Am I the only one that cannot hear? Mariella?

Mariella:

Yeah, I'm having trouble hearing you, as well, Dr. Lieny. Maybe try again? No, I still can't hear you.

Dr. Jeon:
Can you hear me now?

Mariella:
Yes. Okay, cool.

Dr. Jeon:
I don’t know what happened, between something happened with my audio, so let me try this.

Mariella:
That’s okay. We’re good now. We can hear you.

Dr. Jeon:
Okay, good. All right. Let me share the screen. Can you see my screen?

Dr. Williamson:
Yes, we can see the screen.

Dr. Jeon:
Okay, great. Thank you. Okay, I will say thank you, Dr. Williamson, for introducing me. It was an amazing introduction. It is really my honor to be part of this documentary you watch, because it always inspires me. It truly speaks about why we need to care about early childhood professionals’ wellbeing, why it really matters, and why we need to think about how to strengthen wellness in early care and education.

Dr. Jeon:
Please feel free to leave any questions or thoughts in the chat box while I’m talking at any time, so that we can keep our conversations going on throughout the presentation. I saw that the chat box was going really fast. I might not be able to read all of them now, but I promise that I will read everything after this presentation. And I saw that there were some current teachers and previous teachers. I’d love to hear your experience and what you think about this research, as well.

Dr. Jeon:
All right. We saw in the documentary why high-quality early childhood education is so important. In the US, there are approximately 15 million children under age six who require childcare, and in the literature, we know that high-quality childcare is related to better cognitive and social-emotional outcomes of children. This is particularly more important for children from disadvantaged backgrounds, because when they’re exposed to some toxic stress or disadvantaged in home and neighborhood environment, high-quality care can actually buffer those disadvantages that they may experience. And as you saw in the documentary as well, previous studies also have demonstrated that there was a $7-11 return on every dollar invested in high-quality early care and education.
Dr. Jeon:

We all talk about high-quality early care and education, but then, how can we really define high-quality? Let's say that there is an early care and education setting here. In the literature, childcare quality has been defined by structural quality and process quality. Structural quality explains more of program quality, such as group size, teacher to child ratio, teachers' professional qualification, or other administrative preferences, which tend to be regulated at the program level.

Dr. Jeon:

There is also process quality, which accounts for classroom climate, the teacher's interaction with children, their responsiveness, teachers' relationships with children, their emotional support, instructional support, and classroom organization, such as behavior management.

Dr. Jeon:

Both of these quality indicators have been related to children's outcomes. These are all important. However, it is important to note that while structural quality features help to create positive process quality, they always do not ensure that it will all occur. So, one important aspect that we shouldn't miss is these teachers. What do we really know about early care and education professionals?

Dr. Jeon:

We saw in the documentary, they are engineers of the classroom. They're architects in the classroom. They're brain-builders. So, they are the ones who create the climate in the classroom, but we really often overlook these teachers. In this presentation, I will talk about these teachers themselves, and what they're experiencing in early care and education settings.

Dr. Jeon:

Just a quick note, during this presentation, I will use the term teachers, professionals, educators, providers, interchangeably, but I'm referring to all of those who are working with children from birth to age eight in any kind of early care and education settings.

Dr. Jeon:

Just a summary of the documentary: Early experiences really matter, and stress and adversity that children experience may undermine learning and impair wellbeing. We know that secure and responsive relationships are really the key to children's development, so the adults who provide for their care and education bear a great responsibility.

Dr. Jeon:

Let's talk a little bit about the prevalence rate of psychological wellbeing issues going on in early care and education settings. Let me first show you some numbers related to depression in the US in EC
settings. Here's our graph. If you see the bottom two bars there, 6%, 10%, these are US general man population and women population depression rate, reported by NIH.

Dr. Jeon:

A few years ago, I had an opportunity to conduct a national survey on early care and education professionals' wellbeing. In my survey, I found that about 10% of teachers report depressive symptoms, which is pretty similar to US general women population, given that most early care and education teachers are women. So, these included teachers in private childcare centers, Head Start centers, and also public pre-K programs.

Dr. Jeon:

In 2012, there was a study published by Dr. Whitaker and his colleagues showing that when they closely look at Head Start teachers, who are serving the most vulnerable population of children and families, 24% of these Head Start teachers reported depressive symptoms. That's one in four, which is very concerning.

Dr. Jeon:

Eight years later, in 2020, right before COVID happened, I had an opportunity to conduct another Head Start study in Maryland, Baltimore City, and Oklahoma, Tulsa. We found that on average, 32% of Head Start teachers were reporting depressive symptoms, and in more recent research, we found that we have some consistent rates, like 30%-ish number of depressive symptoms found in Head Start teachers.

Dr. Jeon:

When it comes to stress, almost half of teachers report stress, and a quarter of teachers report that they are extremely stressed. So, it's not very surprising to see that we have high turnover rate in early care and education. Teachers leave the job 26-40% rate annually, especially for the first five years, almost half of teachers decide to leave the job. And we saw the issues in the documentary, but I'm going to speak a little more about it.

Dr. Jeon:

When teachers experience psychological issues, such as depressive symptoms, personal perceived stress, and job-related emotional exhaustion, these are all related to classroom quality, their relationships with children, their professional commitment, and children's outcomes. For example, when teachers report higher levels of depressive symptoms, or higher levels of stress, their classroom quality, like emotional support, classroom organization, becomes more negative, they report more conflicts with children, and they are more likely to leave the classroom, having lower professional commitment, and it is also related to children's outcomes.

Dr. Jeon:
I'm going to introduce a few studies that I have conducted in the past to talk a little bit more about these. In 2014, I conducted a study understanding the effects of early care and education providers' depressive symptoms. I looked at 761 center-based and home-based childcare providers and preschool-aged children that they are serving, and they're from disadvantaged families.

Dr. Jeon:

What I found was that teachers' depressive symptoms were associated with lower quality of classroom environment, which in turn was related to children's behavioral and emotional issues, such as externalizing behavior problems and internalizing behavior problems. These relationships were held even after controlling for other family influences, like poverty status or maternal depression, which means that teacher's depression itself has a unique effect on children's outcomes.

Dr. Jeon:

I actually conducted a very similar study using a sample of early Head Start teachers later, and with 197 teachers serving 275 toddlers, I found that teachers' depressive symptoms are also associated with lower quality of emotional and behaviors that were measured by classroom assessment scoring system, which in turn was related to teacher-reported problem behavior. Again, this has a unique effect, as we're controlling for other family influences that you're going to have.

Dr. Jeon:

In another study, I had an opportunity to look at teachers' stress. In this study, I collected data from Maryland and Ohio at private childcare centers and Head Start centers, and I found that given the different responsibilities and roles these teachers and assistant teachers have, the effect of their stress on children's outcomes looked a little different. These teachers’ stress was very closely related to children's behavior issues, such as anger/aggression and anxiety/withdrawal. On the other hand, assistant teachers' stress was more closely related to social competence.

Dr. Jeon:

So, there are a lot of possibilities why we found this thing. One thing we were thinking about was that lead teachers are generally more responsible for behavior management and overall classroom climate, so their stress level may be more related directly to the general behavior issues, such as externalizing and internalizing behavior issues. On the other hand, assistant teachers are more involved in small group activities, or free play activities, so they have more opportunities to promote general social skills or cure relationships, but if they are stressed, they may not have enough energy to involve children into those kind of experiences.

Dr. Jeon:

So, that might be the reason why we see some differences in lead teachers and assistant teachers, but overall, when we look at cumulative teacher stress level in the classroom, basically summing up main
teacher stress level and assistant teacher stress level, we found that this cumulative stress level was related to all three different outcomes.

Dr. Jeon:

This tells us that even though even assistant teachers have different roles and responsibilities, some have different effects on children’s development, it is all important to support all teachers in the classroom, so that we make sure that children have good experience in childcare, quality experience, and better outcomes, as well.

Dr. Jeon:

In another study, I also had an opportunity to look at family childcare provider stress. We collected data from 888 family childcare providers across 40 different US states, and generally what we found was that family childcare providers report that they feel isolated, and they don’t feel a sense of community, because they don’t have much social network going on around them, and they don’t have much access to professional development resources. They also report that family engagement is more difficult than the center-based providers.

Dr. Jeon:

When they have better professional development resources, when they feel like they have more support from children’s families, like having better relationship with families, their practices were more positive, as well. So, when they have better resources, support from families, then their responsiveness to children were more positive.

Dr. Jeon:

Then we looked at this by different stress level group of family childcare providers. When providers had really no stress or low levels of stress, we found that these kind of professional development resources or support from children’s families were still effective. But it’s very interesting that when we look at the group of family childcare providers who reported mid-level stress or high-level stress, these kind of resources, like PD resources or support from children’s families no longer became effective in improving their responsiveness.

Dr. Jeon:

This means that the resources that we always talk about, like professional development or family engagement, relationship with families, these might not be very effective for childcare providers who are under stress. But this tells us that it’s very important to provide these kind of resources, but at the same time, we really need to think about staff wellness to maximize the effectiveness of other resources that we are providing.

Dr. Jeon:
While I was doing psychological wellbeing research, what I found was that a lot of teachers are also suffering from physical health issues. A lot of teachers told me while I was doing my research study that they don’t have time to visit a doctor, because it is so hard to find a substitute teacher, or sometimes they don’t even have health insurance to see a doctor, and also all the furniture and space in early education settings are designed to be child-friendly and centric, which is really good for children’s development, but then it makes adults not to have their own space that works for them.

Dr. Jeon:

You can see some pictures here. We took these pictures when we did the study on the clinical side in Head Start settings, and you can see that the most frequently observed activity from teachers was bending over with knees straight, and that’s why teachers report a lot of pain, like muscle-related pains, or ergonomic pain, from their work environment.

Dr. Jeon:

When I conducted a study in Baltimore City Head Start programs, I found that 80% of Head Start teachers report that they have at least one ergonomic pain. Around half or more than half teachers report that they have upper/lower back pain, 10% knee pain, shoulder pain, and neck pain. And these can be all related to their headaches, as well. You can see the picture on the right side here. Neck pain and shoulder pain, these can be all related to headaches, we call it tension headache. So, it's not surprising to see that almost half of teachers report chronic headache related to their work.

Dr. Jeon:

Other than these kind of pains related to muscle, we also found that some teachers report symptoms around their physical wellbeing. You can see that 27% environment allergy, 23% report asthma, 60% of teachers report chronic cough, and 17% urinary tract infection, 82% of teachers are overweight or obese, and 36% of teachers report that they had at least one on-the-job injuries. When I compare these numbers with the numbers from Baltimore over population, or Maryland over population, whenever the numbers were available, these numbers were much higher than those general by population symptoms.

Dr. Jeon:

I just wanted to point out that the reason why we ask about urinary tract infection is that a lot of early childhood teachers don’t have a consistent bathroom break. To keep the ratio, they have to call somebody, or they have to make sure that they take turns to keep the ratio before they go to the bathroom. So, because of a lack of consistent bathroom breaks, we saw that this might be an issue, this might be a cause of urinary tract infection, so we started to look at this, and we saw that this is quite concerning in Head Start settings.

Dr. Jeon:

When it comes to health habits, it is again very sad. In an average week, teachers report that they only sleep for 4.4 hours per night. You saw that in the documentary, Rachel had a second job at the bar. In
our study, we found that a significant number of teachers have a second job to get paid better. And they didn't have consistent breakfast or lunch habits, and only 5% of teachers in our Head Start center reported that they sleep more than seven hours a night or eat breakfast or lunch consistently. Only 5%, which is very concerning.

Dr. Jeon:

After we conducted the survey, we had an opportunity to do in-depth interviews with Head Start teachers to ask, what's really going on in their life? And the common theme what we found was a lack of time. They don't have time. They don't have time to prepare lessons, they don't have time to prepare the classroom materials. They cannot sleep because they are so worried about children. So, you can see a couple of quotes here. "You have to take your work home with you." "You physically don't get a chance to go to the bathroom. You physically don't get a lunch break. And it's like, you want so much, but you're given so little." This is from Baltimore City Head Start teachers.

Dr. Jeon:

Then why do we see this much health and wellbeing issues going on in early care and education settings? There are a lot of reasons, ranging from wage and compensation, that we already saw in the documentary, to personal life, organizational climate.

Dr. Jeon:

Let me first talk about wage and compensation. We already saw this in the documentary, but let me show you some numbers, here. We have to recognize that those who work with children are faced with evidence that the work they do is in general not very valued by our culture. I will show you two charts, here. Let's first see these numbers.

Dr. Jeon:

You can see the hourly by mean wage for childcare workers for 1997, and you can compare the number with 2013, here. You can see that there's only a little increase from 1997, almost in 20 years. When we compare this number with the salary of non-farm animal caretakers, who take care of our dogs and cats, they even get paid more than childcare workers who take care of our children.

Dr. Jeon:

Even within the teaching profession, not a highly-compensated field overall, childcare workers are paid much less than those working with older students. Even within early childhood workforce, we see some disparities. You know that early childhood educators' wages are already low across all settings, but disparities in compensation and benefits also exist within the field.

Dr. Jeon:
Here in the graph, I displayed the Maryland annual worker's earning, depending on their position type, but I see the disparities across the state, across different states, across age groups they are serving, program sponsorship, or program type.

Dr. Jeon:

For example, a previous study shows that home-based early care and educators, so family childcare providers, earn less than center-based providers after we account for all business-related codes and long hours that they are working. And a lot of family childcare providers report that they don't have health insurance or retirement plan, like benefits.

Dr. Jeon:

Also, early childhood educators working with infants and toddlers earn about $9,000 less in annual salary than early childhood educators serving preschool-aged children. So, you can see these disparities going on within the field, as well.

Dr. Jeon:

One interesting thing I wanted to share from my study is that, of course, wage and compensation is a huge issue, but when I do the research, when I hear from teachers, what I consistently hear is that they came to the field knowing that their wage and compensation are not really good. They came to the field because they're so motivated, they love working with children, but then they realized that there are other stressors going on with organizational climate.

Dr. Jeon:

They have some difficulties with relationships with families, they have some difficulties with other relationships going on, they have a hard time dealing with children's behavior problems, or they sometimes feel like they don't feel competent and they don't have strategies for coping or emotional regulation.

Dr. Jeon:

In all of my studies, I look at different aspects of work climate. I look at children's behaviors, their perceived work climates, such as their relationships with co-workers and relationship with the supervisor, and I also look at how much they feel like they have support from families, basically a family-teacher relationship, family engagement piece.

Dr. Jeon:

When teachers have some negative experience with these three indicators, they reported that they use more negative emotional regulation strategies, which in turn was related to higher level of their stress. So, this tells us that we need to take care of organizational climate when we think about teachers' psychological wellbeing, and also physical health.
Dr. Jeon:

When I conducted a study in Baltimore City Head Start, I also had an opportunity to ask a series of questions about the organizational climate. One good news, positive news, is that 93% of teachers reports that most teachers and adults at the program want all children to do well. Unfortunately, 85% of teachers report that they don't have any designated break time other than children's nap time. 69% of teachers reported that they don't have consistent bathroom breaks. Then it makes sense that we see so much physical issues going on.

Dr. Jeon:

But the good thing is that I see that a lot of early care and education programs more recently try to pay more attention to teacher wellbeing, given the status states that we have been observing over the past 5-10 years, and I know that Baltimore Head Start is really trying hard to emphasize the importance of staff wellness, as well, and that is why I closely work with them, and we collaborate to find a way to address teacher wellbeing.

Dr. Jeon:

So, almost half of Head Start teachers in Baltimore felt like teacher wellbeing is a priority at the center. I think that was very positive. About 70% of teachers felt like teachers are supportive of each other, and 60% feel like the program is a diversity-friendly environment. This definitely tells us that we still have room to grow, and we can still provide more support for teachers' wellbeing, but some positives are going on here.

Dr. Jeon:

In terms of organizational climate, I just wanted to talk about one more thing, teachers' feeling of physical safety, because this appeared to be the strongest predictor of Head Start teachers' health and wellbeing. In the survey, we asked a series of different organizational climate indicators, such as their relationships in some community, diversity climate, or relationships with family. All sorts of different organizational climate.

Dr. Jeon:

This physical safety, their feeling of physical safety, appeared to be the strongest predictor. So, we were wondering why, and when we did the follow-up interviews with teachers, we found that there are three common themes. First is neighborhood safety concerns. You can see the quote here, they have an active shooting going on, so they definitely have some concerns, and you know that a lot of Head Start centers are located in high-crime neighborhood areas, so this makes teachers feel anxious, as well.

Dr. Jeon:

The second theme, I was quiet surprised, was about concerns with parents. You can see a quote here, "The parents can just come in there, want to fight us. We don't have any type of security process, nothing, and we have cameras available." So, despite the fact that they have cameras available, because
they don’t have any other security measures going on, I was surprised by the fact that a lot of Head Start teachers report that they sometimes feel threatened by parents.

Dr. Jeon:

And lastly, they also talked about concerns with behavior issues, as well. You can see a couple of quotes here. "We have kids that have behavior issues, and you have kids that hit, bite, scratch and punch, and basically, we are going home bruised." "I’ve been spit on. I’ve been kicked. I’ve had things thrown at me." These are something we can also think about when it comes to teachers’ health and wellbeing.

Dr. Jeon:

Okay, then, what can we do? Before I wrap up this presentation, I want to introduce some of my self-care resources. There are a lot of self-care resources out there, but a few years ago, I had an opportunity to involve in the development of a professional development called Social Emotional Learning for Teachers. This is publicly available on the Department of Defense Virtual Lab School website, which is housed within the Ohio State University.

Dr. Jeon:

It has five 30-minute lessons that introduce various self-care strategies and what they can do in the classroom. We intentionally made this to be very short, five 30-minute lessons, knowing that teachers don’t have time, and we didn’t want to give extra burden to them. But you can see that there are a lot of activities they can do, there are some videos that might be helpful. So, again, this is freely available, publicly available in the Virtual Lab School website, so please feel free to use these resources as needed.

Dr. Jeon:

And we also need to think about how we can bring the self-care to organizational care, as we saw that there are a lot of stressors going on within organizational climate. How can we really address physical safety issue? How can we promote better relationships between families and teachers? How can we facilitate a better sense of community? How can we create a better physical environment for teachers, physical space and furniture, and how can we better compensate teachers? These are all questions that we still need to answer.

Dr. Jeon:

In Baltimore City Head Start study, I found that 70% of teachers said they would become an early care and educator again, knowing what they do. So, this is telling us that they are so motivated to be in the field, we need to value them much better. And I wanted to really use this opportunity to thank all the teachers who participated in these study, my Baltimore City Head Start collaborative leadership who supported this research so much, and who really allow us to understand their lives and what’s going on there.
I want to end this presentation by providing one of my favorite quotes from the National Child Care Staffing Study. "Good quality care requires an environment that values adults as well as children." Thank you.

Mariella:

Thank you so much, Dr. Lieny Jeon. We did have a few questions for you in the chat box. The first one is, if you could share if your research explores teachers' perceptions about race, in terms of how they relate to others and to children.

Dr. Jeon:

Yeah, this is a great question, and actually, this is one of the under-studied areas, as well. Recently, I see a lot of studies coming out regarding equity, and how teachers really perceive children's behaviors, as well. For the sample that I looked at in Baltimore City Head Start, I would say 92% of teachers in Baltimore City were African American teachers, and also more than, I would say, 80% of teachers are African American, as well.

Dr. Jeon:

One thing we found in the literature is that when there is a match between teacher and children's race, they are more likely to understand the behavior issues, and they are less likely to have bias. So, that's one thing I would like to share, and definitely there's some inequality going on, in terms of how teachers perceive children's behavior, and how teachers feel about children's behavior, as well, by race. Thanks for asking that question.

Mariella:

Yeah, thank you so much. There are two other questions in the chat box, were people are very impressed with your research, and one of them asks if you've made your research results available to people like Governor Hogan, or those in Maryland education who can make a difference?

Dr. Jeon:

Yeah, sure. I'd love to find opportunity, and this is why I'm here. I am all about early childhood teachers' wellbeing. That's been my career. I will be more than happy to make all of these available to share with anyone, Governor, and if we can change any policy or any practices in early care and education settings, I'd love to do it.

Mariella:

And then, someone similarly is asking if your research has influenced any local or state policy changes.

Dr. Jeon:
Yeah, that's a great question. We actually did this study in 2020, right before COVID-19 happened, and Baltimore City Head Start and I really have continuous conversation about how to use these research findings, and I believe the Head Start programs are using these findings to change their work environment and to cultivate teachers' wellbeing.

Dr. Jeon:

Unfortunately, we were supposed to do some interventions with teachers, and I was trying to find out what was the better strategies. Then, COVID happened, so we had to postpone another round of research to make more broad impact policy and broad program organizational structure, things like that, but I look forward to resuming this research once we have this post-COVID world.

Mariella:

Thank you. And then, there's another statement, a participant saying that the data makes it clear that everyone needs to work to reduce the suffering of teachers, and that no one and no agency should contribute to the stress, and should consider the impact of actions being taken. What other actions, or what sort of takeaways do you want people to walk away with from your presentation, about how they can start to change this, regardless of what their entry point is into this work?

Dr. Jeon:

Yeah, this is another great statement and great question. What I realized from my research is that one person cannot change, right? As a researcher, I do this research, trying to convey the data, trying to convince the people that this is important. Then I need teachers who also take care of themselves, like having good health habits, take care of themselves, and also, I need to have leadership. We need to have leadership who takes care of their health and wellness, as well. Then, we also need to have a system and the support at a policy level, like local policy, state policy, national policy level, that values that wellness, and we pay them more, we create better environment, and we change the whole program structure. So, I think it's really the collaboration between researchers, practitioners, policymakers, and everybody who really cares about this early care and education.

Mariella:

Thank you so much. I think that's all the time we have for today. There were a few other questions that came into the chat box, so if you want to take a minute and just try to chat those answers to people, that would be great.

Dr. Jeon:

Oh, yeah, sure.

Mariella:

I'll transition over to Stephen Hicks, who will introduce our panel.
Stephen Hicks:

Thank you so much, Mariella, and thank you, Dr. Jeon, for your wonderful remarks, and thank you, Cindy, for bringing this movie again to us. I think the film has a very different kind of meaning than from the first time many of us saw this film, now that we are in the midst of this pandemic. I mean, the discussion about toxic stress, the discussion about wages, all of that really has such different significance right now.

Stephen Hicks:

We are so pleased to have this panel today, and I’m going to introduce each of them, and as I do, I’m going to let them say a couple of words. I know many of you are familiar with their work, but for some of you, they may be new.

Stephen Hicks:

Our first panelist is Dr. Bergeron, and we are so happy to have Dr. Deborah Bergeron here again with us. I was telling her earlier that I feel like we’re the spoiled child. We seem to get a lot of attention from her, and we’re thankful for that. Dr. Bergeron, thank you for being here today.

Dr. Bergeron:

Thank you so much, Steve, and part of that is because of your consistent communication, so you're the go-getter. It's been wonderful. I'm really happy to be here. This is a great topic. We actually, at ECD, used a piece of this film in a film festival we had about a year ago, before it was released, and it's got a lot of good testimonials and insights into this issue. So, it's really great to be here to discuss with you. Thank you.

Stephen Hicks:

Thank you so much. And we also have Dr. Sonia Pruneda-Hernandez with us, professor at Montgomery College. We’re so happy to have her join Dr. Bergeron, the director of the office of Head Start on our panel.

Sonia Pruneda-Hernandez:

Thank you so much. I actually will not be Dr. until the end of the month, at the beginning of December.
Oh, I knew you were getting there.

Sonia Pruneda-Hernandez:

Yeah, so I'm just waiting on my final defense. My name is Sonia Pruneda-Hernandez. I'm the college-wide chair for early childhood education at Montgomery College. And so, my focus at the college is really bringing together all of early childhood. We've really disrupted the system, and instead of working separately, or what we call in silos, the college has been very supportive in really bringing us together, where our non-credit, our lab school, and our credit side all worth together to be able to bring in students or those interested anywhere. So, we're meeting them where they come in, so it's not putting them into something.

Sonia Pruneda-Hernandez:

My actual research that I'll be defending very soon is very focused on community college childcare providers, and even more focused, it's minority childcare providers at community colleges, and what barriers they have had, and what struggles they have had.

Stephen Hicks:

Great. Thank you so much. And we're also happy to have Laura Latta with us. She is the lead research project coordinator for parents, infants, and early childhood at the Institute of Innovation and Implementation at the University of Maryland School of Social Work, who is a really strong partner with the Maryland State Department of Education.

Laura Latta:

Thanks so much, Steve. I'm really happy to be here. I actually started this job the day that everything shut down, and since I started, I've worked with Maryland's infant and early childhood mental health consultation programs throughout the state, and we have been surveying them and finding out what they've been experiencing, and what childcare providers have been experiencing, and families, during this time, and it's been really amazing. So, I will pass it back to Steve.

Stephen Hicks:

Great. Thank you so much. I'm Stephen Hicks, the assistant state superintendent for the Division of Early Childhood, here at Maryland State Department of Education. I want to start this question for all of you. The film covered a lot of ground that we've talked about, from the affordability of childcare, wages, toxic stress. Can you share, thinking about this film, also thinking about pre-COVID, but also now during the pandemic, which of these issues do you think are the most salient, in your role, in your position, and why? Anyone can start. Who's the brave one to start?

Sonia Pruneda-Hernandez:

I'll start.
Stephen Hicks:

All right, thank you.

Sonia Pruneda-Hernandez:

Okay. I believe that the issue, in my role, the issue that's more salient, as I read this question, is the education's wages. We are bringing in family childcare and childcare providers, and really supporting them to get these degrees, but we also know the outcome is when they finish and complete those degrees, those wages are not very high. So, our students, our childcare providers, are coming in with this passion, they're so excited, they want to complete these degrees, but then the outcome is like, when I go get this job, I'm not making that much, and I don't have the benefits. What do I do to continue to move up?

Sonia Pruneda-Hernandez:

And I'll be really honest, I was in the same situation. I was a family childcare provider, worked in centers, and I completed all the degrees, from the CDA to the associate's to the bachelor's, but had to continuously keep moving. So, that's one of the issues that when I'm speaking with students, and they sound so passionate, it always scares me that they're so passionate, they love what they're doing, but will they be able to survive on this wage?

Dr. Bergeron:

And you know, Steve, one of the things that I'll just talk about, it's kind of a different topic, because I waver a little bit, and I'll tell you why. First of all, I think the issue of wages and education spans the gamut. I come from public ed. These same conversations are happening in public education, where based on the slide we saw earlier, teachers are actually paid quite well, comparatively, but still in the scheme of economics feel like they're not in line with where they want to be.

Dr. Bergeron:

So, I don't think the issue of wages will ever go away. I think we have to look at certainly livable wages, and ensuring we're attracting folks to the field, and I feel like there's always a shortage in those kind of things.

Dr. Bergeron:

But I also want to talk about the reality of our business, and I particularly talk about Head Start, that allows entry into a profession because of the fact that the barrier to entry is not so high. Head Start is known for bringing in parents, and as Sonia was saying, we invite them in as parents, they enroll their children, and then we see that spark, and we put them to work. Maybe they start as a volunteer. Maybe they start as a part-time assistant. They get the bug. We help them get the education. Maybe they first get a CDA, and then maybe they go get an AA, and then maybe a BA, and I have met master degree and PhD directors who started just like that.
Dr. Bergeron:

So, as we talk about wages, and what we'd like to see, I always like to couch it in being really careful of unintended consequences, and thinking about the whole field, and how accessible it is to people to building a future, and the reality is, it's because that barrier to entry is there. So, I think it's a balance, and I also know from research and experience ...

Dr. Bergeron:

And I don’t want to downplay wages here. Don’t get me wrong, it’s important, but I like to balance the conversation, because research is really clear, and my experience as a school leader, and doing on the ground recruiting, and always looking to attract and keep talent, there are lots of other factors that teachers actually value more than just a paycheck.

Dr. Bergeron:

So, it's thinking about the other things. We talked about toxic stress and work environment. Teachers really value a healthy work environment, much more than a lot of other professions. Research is clear about that. They value being appreciated. They value feeling needed, and they really value professional development. They love environments where they feel like they can grow.

Dr. Bergeron:

So, while we grapple with wages, and we try to tackle this really huge issue that feels sometimes like, what can I do about it? I run a Head Start. I can't change the wages. My budget is kind of stet. We'll work on that. We'll continue to make noise about that. In the meantime, on the ground, you can create really great working environments for folks, and that can be a big piece of why they come, and why they stay, and why they endure. And I think Head Start is a good example of that. I meet people who would never leave Head Start, because they love the mission and the support they give as a professional.

Stephen Hicks:

Thanks, Deborah. Yeah, I think obviously, we are very aware of the wages issue, and we've tried different strategies, and I think we should always concentrate and focus on that, and just like every other profession, it's really a comprehensive package that these professionals, our early childhood professionals, need. They need great work environments. They need good relationships with their co-workers, their supervisors. They need respect. And I think if we look at efforts like all of the national organizations that have worked with Power to Profession, they've really highlighted that comprehensive nature, and I think what I also heard you say was about those expectations, about having those high expectations for a profession, and then they also have to be matched with those comprehensive services.

Dr. Bergeron:

That's exactly right.
Stephen Hicks:

Laura, what struck you about the film that we should be really cognizant about?

Laura Latta:

I think the biggest thing was around the toxic stress, and really that it's about the kids, but it's about the adults that are around the kids. It's about the childcare workers, and about parents, and how are we supporting them? And when you look at some of the data pre-COVID, it's frightening. And then, looking at the stress and what teachers are facing right now, with COVID, with racism, it's really just overwhelming. How can they help to regulate kids when they're dysregulated? I think that's one of the biggest things that keeps coming up.

Laura Latta:

We're hearing a lot about how childcare programs don't have personal protective gear, and are so stressed about cleaning that they aren't able to really attend to the kids' social emotional needs. So, all of those different things, they're really focused on the bottom of Maslow's pyramid, and aren't able to move higher up, and what are we doing to support them during this time?

Stephen Hicks:

Great. Thank you very much. And thinking about our profession, the early childhood profession, Professor Pruneda-Hernandez, you work in higher education, and improving access to high-quality early childhood for children really starts with how we prepare our teachers. What are some of the key components in preparing teachers, and what can we do better, as a society, and of course, here in Maryland?

Sonia Pruneda-Hernandez:

I have actually done a lot of research on this. The last five years have been focused on it, and I think something important that we need to understand is that when we're talking about childcare, it's very different than public school. Childcare, we're looking at this birth through age five, and it's not Head Start, and it's not military. I worked in the military as a director.

Sonia Pruneda-Hernandez:

The childcare, where we're talking about family and childcare centers in the community, the majority are women of color, and out of that majority of women of color, there's a high percentage that are immigrants. So now, we're looking at this high number of women of color, high number of women that are immigrants, that also need this English language. So, what do we do for ... how do we meet them, instead of saying you need to fit into what higher ed institutions are? Because our higher ed does not meet their needs, and that's why this, a pathway to credit, non-credit to credit, actually works.
So, looking at this, I will be really honest, the college has allowed us as faculty to say and restructure our program. When we were finding women that would come in and test for English that didn't test, we found that a lot of scholarships would not pay for the non-credit side. They may need one or two classes, but that's $5-600, and they could not afford that. So, we've created this pathway from non-credit to credit, but along the way, we had a lot of providers saying, well, these are not credit, they're not going towards my degree.

Sonia Pruneda-Hernandez:

So then, really going to the college and saying, while they're taking these classes, why can't they get their CDA? And we give them college credit. They complete it, they come to the credit side, and they have six, or some colleges offer nine. We offer six. And so, they're coming in now with their English basic, they can come into the English 101. We've even now this summer piloted a map. Move them to the credit side, but they're coming in with credit.

Sonia Pruneda-Hernandez:

I think when we're looking at, our population is looking at how can we meet their actual needs? They have a lot of strengths, and a lot of these women may even have degrees from their countries. How do we show them and demonstrate, you need to go to WES, or to another organization that can evaluate it.

Sonia Pruneda-Hernandez:

So, I just, from my perspective, and from my research, higher ed has a lot of different structures, and our providers sometimes do not understand them, and how do we help them? How do we give them that one-on-one? How do we actually move from the non-credit to the credit, in an actual seamless pathway, so they can come in and out as needed, and even transfer. Some of these degrees, like the AAS technical degree, most of the universities in our state do not accept it. So then, reaching out to universities that will take it, and will take it completely, so that our actual childcare providers can continue and get that bachelor's.

Sonia Pruneda-Hernandez:

So, for me, I think that is extremely important. There are things that we can do better, and I think it's listening to the childcare providers, hearing their voices, and then meeting those needs.

Stephen Hicks:

Great. Thank you, Sonia, and of course, you being someone who came up through this career lattice, I think, really provide the kind of insight that these teachers can benefit by, and you can identify those barriers, and help to overcome them. Thank you for that.

Stephen Hicks:

Laura, as a researcher, you've been probably looking a lot, I know, in your work, regarding some of these misconceptions we have about childcare and early childhood education, and a lot of the public still sees
childcare as simply babysitting. But we are, as we were talking a moment ago, about increasing the kind of expectations we have. Because we have realized how important those early years are, with the brain research and neuroscience, and that that is really a small and short window of time where we have an opportunity to support young children's learning from an early age.

Stephen Hicks:

How might we better highlight the important of that period of time, from birth to five, or I might even say prenatal to five, in children's development, and how might we better support our early childhood professionals to think really comprehensively about wellbeing, and social emotional support, or the teachers for the children, and also financial support?

Laura Latta:

Thanks so much for that question. I think through forums like this. I mean, the research is there, that what childcare providers are doing is not just babysitting. And so, it's out there, and all the return on investment is out there, it's just, how do you reach that out to folks who are making the decisions? So, to policymakers. And you really need a comprehensive approach to that, and really folks from all different areas to be on board with that, and to be working together.

Laura Latta:

I think, in terms of supporting early care educators' professional wellbeing, and I'm not going to touch the financial, just because we already discussed that in some detail, but really making sure that what we have with infant and early childhood mental health consultants, they're able to go in and actually help to build the capacity of the childcare staff around how to set up the classroom. What sort of interaction did I have with this child, or how could I change that?

Laura Latta:

One of the things that we're trying to do is get folks in earlier. A lot of the times, the childcare workers aren't raising the red flag until kids are about to be kicked out. And so, one of the things that we really want is for them to be getting support on a regular basis, and early on, so that they can really support their overall classroom, and really focus on prevention. There would be less of those major behavioral issues if we are getting in on the front end.

Stephen Hicks:

Great. Thank you very much. I really appreciate that, Laura. Yes, I would agree. And then, Deborah, we really, of course, need to be thinking at the same time about engaging parents, and I know you had a wonderful series of engaging parents over a couple of weeks. What recommendations do you have for engaging and supporting the wellbeing of parents and families, and thinking about also the impact that we've had around multiple pandemics, actually, during this summer and now in the fall, with COVID-19, with the racial reckoning and the protests that we've had, but also the economic downturn. Lots of families have reduced income because one or more members of the family household has had a
decrease in salary, or lost their jobs. How do we engage families, given those circumstances, during this really difficult time?

Dr. Bergeron:

I think we can talk to the larger question around engaging families generally, and then how that relates during a time of crisis. Early education, early care and education, Head Start specifically, tends to gravitate toward whole child approach. Families tend to be involved in that process, I think, in most cases, I think generally speaking, far more readily than in the K-12 phase, where I think kids are siloed more from their families than I would like to see, anyway.

Dr. Bergeron:

But I think in Head Start in particular, because it is written into the standards, this is not an option. So, it's not something really people think much about, and it's been true since 1965, so it didn't just come about because some research came out about family engagement. It's from the beginning, founded upon a belief that if families are thriving and healthy, then children are thriving and healthy, and they're better learners, which is pretty logical.

Dr. Bergeron:

So, if we take care of the family, and that doesn't mean just engaging them so that they come to events. It's about truly taking care of them, and establishing positive relationships with them, then as we work with children and we have challenges, those things become much easier to overcome, and learning becomes more accessible from a child who's coming from a healthy home. So, that's a priority for Head Start.

Dr. Bergeron:

Doing a family plan is part of enrollment, so coming up with a plan. What are your dreams for your children? What are your dreams for your family? And knowing what those challenges might be. Finding out that a parent might be unemployed, or never graduated from high school, and looking for opportunities to help that family move in the direction of success as they define it.

Dr. Bergeron:

And I think doing so, in a truly nonjudgmental space, which is easier to say than to do, when you're in the field of caring for children and you think, perhaps, an environment isn't what you would have for your child, but really trying to be fully judgment-free as you welcome families into your environment. Because I think that's where we get stuck, in terms of believing somehow we know better, always, when really, parents are pretty well-equipped to knowing what's best for their children. And they are going to be, as Head Start says, their child's most important teacher forever. So, building that is the best thing we can do.
I'll pivot and talk about the pandemic and other issues, because what we found in Head Start was that when that time hit in March, and programs closed pretty fast, that all happened pretty fast across the country, one of the beautiful things that we noticed was communication with families was really not that difficult for Head Start. And I know in some other environments, particularly in school environments, it was a challenge.

Dr. Bergeron:

If you don't already have a relationship with someone, then reaching out to them during a pandemic becomes a much more difficult task. But our programs were able to set up communication loops, and to more quickly get families back involved in the program, more quickly do things like front porch visits, and things that were as creative as they could be, and I know other child providers were doing those kinds of things, and certainly K-12 as well.

Dr. Bergeron:

So, I think the investment in that family relationship in a sincere way, that aims to create a healthy environment for the child, and you do it because it's best thing to do, it's the right thing to do. But the payoff is, then when you are in a challenging situation, I think that just makes that much easier to handle.

Stephen Hicks:

Great. Thank you very much. Yeah, I think what I took from what you said that's so important is, you have to be prepared for anything that might happen, and if you lay that foundation of communication with families from the start, it benefits you whether or not there's a crisis, but when there is a crisis, you're even that much more prepared. And I also like how you talked about a strengths-based approach. Really building on what families have. Thinking of cultural competency, thinking of how you can really build on the knowledge and skills of what parents typically do best, which is be the child's first teacher.

Stephen Hicks:

I think we have a question here that was submitted from our participants, so I want to ask this. The question is about ... it's maybe for me. What can MSDE do so that families and providers are not distressed by having our childcare vouchers cut off because the numbers still do not show on the list of vouchers?

Stephen Hicks:

We are in the midst of working towards increasing our provider reimbursement rate to provide families with more resources, and it couldn't come at a better time, during the pandemic. So, we're working with providers to make sure that they give us the right information for our childcare scholarship program, and then when we have that, we can make sure that we provide the kind of accountability the federal government demands.
Stephen Hicks:

I want to thank ... There was another question I saw here that maybe Laura would like to address first, real quick, regarding some good models for infant, early childhood mental health.

Laura Latta:

Yeah, I just wanted to mention that there is ... Lisa had asked a question around that, and there is the pyramid model, which is a nationally recognized model, and then there's also an infant and early childhood mental health consultation model, which has been around for decades. I'm happy to share more information, if folks are interested.

Stephen Hicks:

Great, thank you. And there is in the chat box a link to the survey. We hope that you will take the survey, so we can continuously improve these kind of sessions. We hope you also access the resources, and then follow our Maryland Families Engaged website, so you can continue to look for our next sessions.

Stephen Hicks:

I want to thank our panelists, Sonia, Laura and Deborah, for being with us today, and really adding such a great dimension to this work, beyond the film that we saw. I want to thank Dr. Williamson, Dr. Jeon, and also Keri Hyde from Radio Five, and of course, our branch chief, Cindy, for putting all these wonderful sessions together, and Mariella for providing such technical assistance. But really, thanks to all of you. I know there's people from all over our great state of Maryland that have participated, and we also half folks from outside Maryland that have joined us, which is wonderful. A wonderful opportunity to collaborate with others across the country.

Stephen Hicks:

Thank you very much. Stay safe, and please try to implement some of these lessons learned today, in your classrooms, in your work, and how you support families and children. Thank you so much.

Mariella:

Thank you.