OVERVIEW

School readiness is shaped by many factors, each with the power to influence learning and development – both for better and for worse – from the days young children are born. For this reason, policymakers interested in promoting the long-term academic and life success of children must be prepared to consider their needs on a holistic basis – addressing not just access to high-quality early learning environments, but their health, safety, social-emotional development, and the economic and other stressors facing their families. While far from comprehensive, this state data profile is intended to provide a snapshot of both risk and development – both for better and for worse – from the days young children are born. For

Questions To Consider

Are there specific risk factors likely to undermine the healthy and optimal development of young children? What is being done to address these disadvantages?

Number of Children Age 8 and Younger, 2018

Children in Poverty* Age 0–5 (2018)

Children in Low-Income Working Families* Age 0–5 (2018)

Children in Poverty, by Race, 2018

*The federal poverty level for a family of four was $24,600. “Low income” is defined as having a family income less than twice the federal poverty level.
INFANT AND TODDLER SUPPORT

The first three years of life are a unique and critical period of development, during which up to 1 million new neural connections are formed in the developing brain each second. Infants and toddlers develop and learn at exponential rates as they explore and engage with the environments and adults around them. In order to best support their health and development, families need access to information and services.

Questions To Consider

Are women and children receiving health care services before and after birth?

Are families prepared for and educated about the needs of young children through home health visits, regular well-baby checks or both?

What areas of maternal and child health is my state focusing on?

Current Status of Infant and Toddler Well-Being

<table>
<thead>
<tr>
<th>INDICATOR</th>
<th>DELAWARE</th>
<th>NATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unintended Pregnancy(^1) (% of all pregnancies)</td>
<td>57%</td>
<td>45%</td>
</tr>
<tr>
<td>Prenatal Care Before 3rd Trimester(^2) (% of live births)</td>
<td>94%</td>
<td>87%</td>
</tr>
<tr>
<td>Home Health Visit(^1) (% of children ages 0-3)</td>
<td>20%</td>
<td>14%</td>
</tr>
<tr>
<td>Well-Baby Check(^3) (% of babies)</td>
<td>93%</td>
<td>91%</td>
</tr>
<tr>
<td>Developmental Screening(^2) (% of children ages 10 months to 5 years)</td>
<td>31%</td>
<td>31%</td>
</tr>
</tbody>
</table>

Delaware MCH Funds by Source

- Federal: $1,913,137
- State: $10,461,629
- Local: $0
- Program Income: $3,294,852
- Other: $0

Delaware MCH 2017 Expenditures

<table>
<thead>
<tr>
<th>POPULATION SERVED</th>
<th>INDIVIDUALS SERVED</th>
<th>2017 EXPENDITURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnant Women</td>
<td>3,345</td>
<td>$3,459,655</td>
</tr>
<tr>
<td>Infants</td>
<td>11,628</td>
<td>$3,120,153</td>
</tr>
<tr>
<td>Children (Age 1-22)</td>
<td>1,616</td>
<td>$1,539,489</td>
</tr>
<tr>
<td>Children with Special Needs</td>
<td>1,511</td>
<td>$1,546,551</td>
</tr>
<tr>
<td>Others</td>
<td>7,819</td>
<td>$2,599,530</td>
</tr>
<tr>
<td>Total</td>
<td>25,919</td>
<td>$12,265,378</td>
</tr>
</tbody>
</table>

The federal government allocates the Title V Maternal and Child Health (MCH) Block Grant to states. Delaware provides additional funding to the MCH program (as shown below).

The state has identified eight national performance measures to focus on:

- Well-Woman Visit
- Breastfeeding
- Developmental Screening
- Physical Activity
- Bullying
- Medical Home
- Preventive Dental Visit
- Adequate Insurance

VIEW DATA RESOURCE 1
VIEW DATA RESOURCE 2
VIEW DATA RESOURCE 3
VIEW DATA RESOURCE
Prenatal Care and Birth Outcome, By Race

Receiving appropriate prenatal care helps reduce the likelihood of negative birth outcomes, including low birthweight and premature births, which are often linked to developmental delays and elevated rates of early school failure. Furthermore, births to teenage mothers increase risk for both children (increasing the likelihood of being born at a low birthweight and infant mortality) and their mothers (who are less likely to graduate from high school, maintain steady employment).

Often these outcomes vary significantly across demographic groups, which results in systematic inequities in infant and maternal health and well-being.

Births to Women Receiving Late or No Prenatal Care

Are there racial/ethnic disparities evident in the teen birth data? What steps is my state taking to reduce teenage pregnancy?

Teen Births

Are there disparities evident in the number of children born at low birthweight? What steps might be taken to reduce the prevalence of this outcome, particularly among high-risk populations?

Low Birthweight
Home Visiting

Home visiting is a type of service targeted to expectant parents and parents with children ages 0-5 to support healthy child development. Though models and programs vary, home visits typically allow trained experts to provide services, share best practices, and connect families to other resources all within the home setting.

Delaware uses the following evidence-based models for home visiting programs:

- Early Head Start Home-Based Option
- Healthy Families America
- Nurse-Family Partnership
- Parents as Teachers

Paid Family Leave

Paid family leave policies support employees requiring time off to bond with a newborn baby, adopted or foster child – or to care for a seriously ill family member.

Delaware does not have a statewide paid family leave policy.

States with Paid Family Leave Policies

Nine states (reflected on the map below) have implemented universal paid family leave policies, while eight additional states have enacted paid family leave provisions for state employees only. These are: Arkansas, Delaware, Indiana, Kansas, New Mexico, North Carolina, Tennessee and Virginia.

<table>
<thead>
<tr>
<th>State</th>
<th>First Year</th>
<th># Weeks</th>
<th>Benefit (% Income)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA</td>
<td>2004</td>
<td>6</td>
<td>Up to 70%</td>
</tr>
<tr>
<td>CT</td>
<td>2021</td>
<td>12</td>
<td>Up to 95%</td>
</tr>
<tr>
<td>DC</td>
<td>2020</td>
<td>8</td>
<td>Up to 90%</td>
</tr>
<tr>
<td>MA</td>
<td>2021</td>
<td>12</td>
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</tr>
<tr>
<td>NJ</td>
<td>2009</td>
<td>6</td>
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<tr>
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<td>2018</td>
<td>8</td>
<td>Up to 50%</td>
</tr>
<tr>
<td>OR</td>
<td>2023</td>
<td>12</td>
<td>Up to 100%*</td>
</tr>
<tr>
<td>RI</td>
<td>2014</td>
<td>4</td>
<td>Up to 60%</td>
</tr>
<tr>
<td>WA</td>
<td>2020</td>
<td>12</td>
<td>Up to 90%</td>
</tr>
</tbody>
</table>

*Up to 100%, not to exceed 120% of state average weekly wage

Infant and Toddler Support

Questions To Consider

- What is the prevalence of paid family leave across the country? Are conversations about paid family leave happening in my state?
- What percentage of at-risk families are able to access evidence-based home visiting programs in my state? Are post-partum home visits an MCH priority in my state?
- What home visiting models is my state utilizing? Are these models recognized as evidence-based? How are different models used to support families’ unique needs?

INFANT AND TODDLER SUPPORT

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VIEW DATA RESOURCE
Price and Affordability of Infant Care
Licensed child care is delivered in both center-based and home-based settings. According to the U.S. Department of Health and Human Services, this care is affordable if it costs no more than 10 percent of a family’s income, with efforts underway in some states to ensure subsidized child care costs are capped at no more than 7 percent.

$11,000
Average Annual Price of Infant Care in Delaware

16%
Infant Care Price as a Share of Median Family Income in Delaware

29%
Families in Delaware that can Afford Infant Care (10% standard)

Federal Expenditures on Infants and Toddlers
While many states have invested heavily in prekindergarten programs serving three- and four-year olds, services to children aged zero to three are most commonly underwritten through a pair of federal programs: the Child Care and Development Fund (CCDF), a federal block grant that supports both child care subsidies and quality enhancement initiatives, and Early Head Start (EHS). Compared to preschool programs for older children, the infant and toddler slots funded by these programs are typically available to fewer children. CCDF subsidies for infants and toddlers often reimburse providers for less than the actual cost of care.

CCDF & EHS | Number of Children Served 0-2

<table>
<thead>
<tr>
<th>CCDF</th>
<th>2,128</th>
</tr>
</thead>
<tbody>
<tr>
<td>EHS</td>
<td>669</td>
</tr>
</tbody>
</table>

CCDF | Number of Children Served By Age

<table>
<thead>
<tr>
<th>Age</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>456</td>
</tr>
<tr>
<td>1</td>
<td>760</td>
</tr>
<tr>
<td>2</td>
<td>912</td>
</tr>
</tbody>
</table>

$2,948
CCDF | Average Per Child Expenditure, Ages 0-2

$7,833
EHS | Average Per Child Expenditure, Ages 0-2

6.5%
Percentage of All Children Ages 0-2 Receiving CCDF Subsidy Supports

2.0%
Percentage of All Children Ages 0-2 Receiving Early Head Start Services

*Head Start programming includes both the Head Start preschool program for children ages three and four and Early Head Start, which serves children under three. The figures above depict enrollment and investment in Early Head Start.
At ages three and four, children may be eligible to enroll in one or more types of publicly-funded pre-kindergarten. This includes state-funded pre-K, often delivered in both public and private settings, and Head Start, a federally-funded preschool program operated by local grantees. State funded pre-K programs generally incorporate child eligibility and provider quality requirements. These programs are typically not compulsory.

**Questions To Consider**

- How many children are attending pre-K, public or private?
- Are certain populations more likely to attend pre-K?
- How expensive is child care for 4-year-olds?
- Do the wages depicted for the early childhood workforce permit for the hiring and retention of highly-qualfied early childhood educators?

### Pre-Kindergarten Trends Within Publicly Funded Programs

- **6%** 3- and 4-Year-Olds Enrolled in Head Start Program (Estimated 1,428 children)
- **4%** 3- and 4-Year-Olds Enrolled in State Funded Pre-K Program (Estimated 845 children)

### Parent-Reported Percentage of 3- and 4-Year-Olds Enrolled in Any Type of Preschool Program

*Including Both Public Programs and Private Programs Supported by Parent Tuition*

- White: 59.0%
- Black: 55.1%
- Average: 52.9%

The following group(s) have enrollment rates in preschool programs that are below the state average: N/A

### Wages and Price

- **$20,560** Median Annual Wage Child Care Worker (2018)
- **$8,665** Average Annual Price of Child Care for 4-Year-Olds
- **$26,070** Median Annual Wage Preschool Teacher (2018)
- **65%** Median Wage for Preschool Teacher as Percent of State Median Income (2018)
### Pre-Kindergarten Policy

#### DELAWARE EARLY CHILDHOOD ASSISTANCE PROGRAM (ECAP)

<table>
<thead>
<tr>
<th>ACCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Income - Eligibility</td>
</tr>
<tr>
<td>Other Risk Factors - Eligibility</td>
</tr>
<tr>
<td>Child Age</td>
</tr>
<tr>
<td>Required District Participation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FUNDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Agency</td>
</tr>
<tr>
<td>Total Spending (2016-17)</td>
</tr>
<tr>
<td>Funds by Source</td>
</tr>
<tr>
<td>Dedicated Revenue Source for State Funds?</td>
</tr>
<tr>
<td>Agencies Eligible to Receive Funding</td>
</tr>
<tr>
<td>Permitted Subcontracting Agencies</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PROGRAM REQUIREMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum Daily Hours</td>
</tr>
<tr>
<td>Minimum Days Per Week</td>
</tr>
<tr>
<td>Annual Operating Schedule</td>
</tr>
<tr>
<td>Maximum Class Size</td>
</tr>
<tr>
<td>Required Screenings</td>
</tr>
</tbody>
</table>
DELTA WARE EARLY CHILDHOOD ASSISTANCE PROGRAM (ECAP) – CONTINUED

STANDARDS

Early Learning and Development Standards
Delaware Early Learning Foundations

Year Revised
2010

Alignment with College and Career Ready Standards for Early Grades
Yes

EDUCATORS

Teacher Degree
BA (public); AA (nonpublic)

Required Specialization in ECE
Early Childhood Education, Child Development, Preschool Special Education

Assistant Teacher Degree
High School Diploma or Equivalent

Quality Ratings of Child Care Programs

In recent years, many states have designed Quality Ratings and Improvement Systems (QRIS) to provide parents with information about the quality of individual child care providers. The QRIS rating is often a reflection of various measures such as teacher-child interactions, classroom environment, family engagement, and staff educational attainment. Typically voluntary, QRIS systems are meant to help improve the quality of child care providers and help families choose the right provider for their children.

ACCOUNTABILITY

Quality Rating and Improvement System (QRIS)
Voluntary
Licensed center-based programs, Head Start/Early Head Start, Licensed family child care, School-operated early childhood programs, School-aged programs

Delaware Stars for Early Success
Mandatory
Head Start/Early Head Start

Provider Participation

Number of Levels
5

Tiered Reimbursement
Yes

Other Financial Incentive
Yes

Child Care Providers By QRIS Level

<table>
<thead>
<tr>
<th>Level</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>29</td>
</tr>
<tr>
<td>Level 2</td>
<td>66</td>
</tr>
<tr>
<td>Level 3</td>
<td>83</td>
</tr>
<tr>
<td>Level 4</td>
<td>126</td>
</tr>
<tr>
<td>Level 5</td>
<td>247</td>
</tr>
<tr>
<td>Unrated</td>
<td>0</td>
</tr>
</tbody>
</table>

Has my state developed a system to assess the quality of pre-K and child care providers? Is participation mandatory for state pre-K programs?

Does my state require pre-K teachers to have a certain degree? If so, what?

Are pre-K standards aligned with goals of the K-12 system?
### K–3 Policy

#### DELAWARE

| K–3 COMPONENT | Compulsory Age of Attendance¹ | 5 on or before 8/31
| Kindergarten Entrance Age¹ | 5 on or before 8/31
| State-Required Full-Day Kindergarten¹ | Yes
| State-Required Half-Day Kindergarten¹ | No
| Required Kindergarten Attendance¹ | Yes

**Attendance**

- Kindergarten students must be administered a readiness tool and reviewed for readiness within the first 30 days of school.

**Standards and Assessments**

- Not specified in statute, rules or regulations.

- ACCESS for ELLS

- Third grade retention is required with good cause exemptions. Students that score below the standard, level II, on the statewide assessment are provided different exemptions than those that score well below the standard, level I.

**Educators**


- Partially. Teachers must pass a test that includes multiple topics.

- 1:22 for grades K–3.