

A publication of **Child Care Aware®** of Kansas

Kansas Child

Fall 2021 Volume 20, Issue 4

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A Focus on Equity

- Child Well-Being in Kansas
- Every Child Needs Nature
- An Opportunity to Equitably Fund Child Care
- Starting the Conversation about Racism with Young Children

Equity in Kansas' Early Care and Education System

Quality early care and education benefits everyone living and working in Kansas. That's never been more true than right now, when many parents are struggling to find child care that meets their needs and employers are struggling to fill open positions.

When we ensure that all families have access to quality child care options — regardless of their income level or where they live — we build the critical infrastructure necessary for our businesses to succeed, our communities to flourish, and our children to grow into happy, healthy, productive Kansans.

OUR CURRENT REALITY

Kansas is becoming more diverse, and young children are leading the way. It should come as no surprise, however, that many young children and their families in Kansas, as in other states, are faced with navigating an early care and education system that launches some to success and leaves others behind.

According to the Kansas Children's Cabinet and Trust Fund, 54% of Kansas families live in a child care desert. That rate jumps to 60% for Hispanic/Latino families and 63% for families in the lowest-income quintile (and drops to 40% for white families and 34% for families in the highest-income quintile). Additionally, 30% of young children in Kansas are children of color, and yet, on average, only 18% of child care providers are of color.

Taken together, all of this relevant data (shared in the most recent All In for Kansas Kids Need Assessment) means that Kansas has an early care and education system that is easier to access and more likely to meet unique needs for higher-income, white families. We need to ask ourselves if this is the Kansas we want for our children and families.

Even beyond income, race, and ethnicity, it is essential to consider how other lived experiences — including geography, ability, sexual orientation, gender identity and expression, family structure, language, and culture — intersect with and potentially further compound disparities for young children and their families.

THE PATH FORWARD

Achieving our shared goal of an equitable early care and education system that benefits everyone isn't out of reach. We can — and should — invest in efforts to recruit, fairly compensate, and retain a workforce that mirrors our young children. We can also partner with underserved communities to expand access to child care that meets the unique needs of young children and their families.

GETTING STARTED

Where do we start? Quite simply: We start here, we start now. We do this work as individuals, as organizations, and as a system — asking ourselves tough questions about

our commitment to equity and making changes when we come up short.

I hope you enjoy this issue of *Kansas Child*. It is one that I'll return to often as we continue to make progress toward achieving equitable outcomes for Kansas' young children and their families. I'm grateful for the wisdom, lived experience, and dedication of the voices that have contributed to the articles that follow. And I'm grateful for you, dear reader, and your dedication to an early care and education system that works for all Kansans. ●



KELLY DAVYDOV

Executive Director,
Child Care Aware® of Kansas

Kelly joined Child Care Aware of Kansas as Executive Director in September 2020. Kelly's professional background includes leadership for two key initiatives in Iowa: the state's early childhood system-building effort, Early Childhood Iowa, and it's 2-Gen anti-poverty initiative. Kelly, her husband Dmitry, and their two sons, (Ethan, 13 and Henry, 11) have made Kansas City their new home. Together, they enjoy exploring state and national parks and farmers markets and spending their winter weekends poolside at swim meets.

Kansas Child
is a publication of
Child Care Aware®
of Kansas

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Child Care Aware® of Kansas, 1508 East Iron, Salina, KS 67401, publishes *Kansas Child* quarterly, which is made possible through the financial support from our corporate, private, and foundation partners.



Kansas Child is intended to provide a forum for the discussion of child care and early education issues and ideas. We hope to provoke thoughtful discussions within the field and to help those outside the field gain a better understanding of priorities and concerns. The views expressed by the authors are not necessarily those of Child Care Aware® of Kansas or its sponsors.

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Igualdad en el Acceso al Idioma

BY JESSICA SOTO-BOTELLO

¿Cuántos de ustedes recuerdan ver sido interpretes para sus familiares cuando eran pequeños? Al menos yo si lo fui como desde los 10 años. No tenía idea exactamente a veces lo que estaba diciendo o si lo estaba diciendo bien, pero mis familiares confiaban en mí. Era su única esperanza para que ellos pudieran tener acceso a algún servicio en la comunidad. En ese entonces el personal bilingüe en cualquier lugar era muy mínimo. No todos los lugares comunitarios que ofrecían servicios contaban con personal bilingüe que estuviera disponible para poder interpretar. Recuerdo que mis familiares no sabían de muchos servicios que ofrecían en su comunidad por falta de entender o no leer el idioma. Incluso pensaban que no eran elegibles para ciertos servicios ya que pensaban que eran solo para personas de un nivel económico alto.

Las cosas han cambiado bastante con el tiempo. En ese entonces tal vez se carecía de personal bilingüe en el idioma en español. Conforme ha pasado el tiempo hemos visto que interpretes en el habla español ha aumentado. Incluso letreros ya están hechos en los dos idiomas (inglés y español) en la mayoría de los lugares. Aun así, con estos

cambios también nuestra población en los Estados Unidos ha crecido aumentando personas de otros países que hablan otros idiomas. Cada día vemos la llegada de varias personas no solo de países de Centro América, pero también de África, Asia, Europa, por ejemplo. Incluso no porque vengan del mismo país significa que hablan el mismo idioma. Varios países tienen diferentes tipos de dialectos que no todos del mismo país lo hablan o lo entienden.

A través de los años en los Estados Unidos ha crecido la variedad de idiomas y culturas en nuestras comunidades. La necesidad de tener personal que hable mas de un idioma es muy alta. Es muy necesaria, en especial en el área médica y educacional. En estas dos áreas que son muy importantes es un derecho que el personal le proporcionen servicios usando su idioma primario. Incluso si le dan información de importancia por escrito deben de explicárselo o dárselo en su idioma primario. Lugares médicos y las escuelas normalmente tienen acceso a alguien que hable su idioma primario en la comunidad o a una línea donde pueden llamar y seleccionar el idioma que se requiere. En lo educacional nosotros como padres tenemos las opciones de seleccionar donde llevar a nuestros hijos para que reciban una educación. Que mejor que desde que están pequeños encontrar una guardería que ofrezca un plan de estudios bilingüe en su rutina diaria.

Gracias a la tecnología nos ha facilitado el acceso a obtener servicios eh información en nuestro propio

idioma. El cual es magnifico para nosotros como padres que el inglés no es nuestro primer idioma. Aprovechando que Estados Unidos ha crecido en idiomas y en culturas ah que apoyar a nuestros hijos que también aprendan de esas diferentes culturas e idiomas. ¿No sería genial que nuestros hijos hablaran más de dos idiomas? No importa si en su familia no se habla ese idioma, apoye a sus hijos aprender de otros niños de diferentes culturas. Dele la oportunidad a su hijo de traer lo que aprendió de sus amiguitos ha casa. Procure que diariamente extienda las conversaciones de las experiencias que vivió en la escuela siempre tomando en cuenta las diferentes culturas. Hable, lea y juegue con sus hijos. Una gran manera de involucrar el idioma y la cultura es hablando de los diferentes idiomas y de donde vienen. Leyendo libros que muestren diferentes idiomas y culturas. Aprovechese de la tecnología y busque juegos que involucren otros idiomas y culturas para exponer ese interés en sus pequeños. Que mejor manera de aprender y jugar haciéndolo diariamente en su hogar y crear a nuestros futuros intérpretes y así tener una igualdad de idiomas. ●

Educational Support Resources

- Schools' Civil Rights Obligations to English Learner Students and Limited English Proficient Parents
- Llevándolo a Casa
- Hable, Lea, Juegue

JESSICA SOTO-BOTELLO

Child Care Aware of Kansas,
Child Care Health Consultant

Jessica resides in Garden City, Kansas. She graduated from Fort Hays State University with a bachelor's in general studies with an emphasis in social services. Her passion has always been helping others and being a helping hand in moments of need.

Child Well-Being in Kansas

How Families Fared Between the Great Recession and the COVID-19 Crisis

BY JOHN WILSON

At Kansas Action for Children (KAC), we want to make sure that every child has the opportunity to grow up healthy and thrive. That's why we gather and analyze child well-being data as part of Kansas KIDS COUNT, an annual snapshot produced in collaboration with the Annie E. Casey Foundation.

**Every child deserves
the opportunity to grow up
safe and thrive.**

Unfortunately, Kansas trailed 24 other states on health care indicators immediately before the COVID-19 pandemic, according to the "2021 KIDS COUNT Data Book," a 50-state report of recent household data analyzing how families fared between the Great Recession and the COVID-19 crisis.

Kansas is one of only 12 states without an expanded Medicaid program, and children are bearing the brunt of that poor decision. Twenty-eight states have lower children's uninsured rates than Kansas. The state also sees more deaths among children ages 1 to 19 than 28 other states.

Overall, Kansas finished 18th among all states. We were 11th in economic well-being, 23rd in education, 25th in health, and 24th in family and community context.

The KIDS COUNT data shows that simply returning to a pre-pandemic level of support for children and families would shortchange millions of kids and fail to address persistent racial and ethnic disparities. That's why it also included a more recent batch of data from the U.S. Census Bureau's Household Pulse Survey. This information, when disaggregated to show differences between groups, illustrates the challenges we face as we rebuild in Kansas and across the nation.

According to the Annie E. Casey Foundation:

- "More than one in eight adults with children in the household (13%) reported a lack of health insurance. This figure was 23% for Latinos, 18% for those of two or more races or another race, and 15% for Black households.
- "More than one in five households with children (22%) said they had only slight confidence or no confidence at all that they would be able to make their next rent or mortgage payment on time. More than a third of Black (37%) and Latino (35%) households faced this disastrous challenge.
- "About one in seven adults with children (14%) said their household sometimes or always did not have enough to eat in the most recent week. The percentages for Black households (25%), households of

two or more races or another race (21%), and Latino households (20%) with children were about twice the rates for their white (10%) and Asian (9%) counterparts."

Every child deserves the opportunity to grow up safe and thrive — regardless of their race, income, ZIP code, or identity. KAC believes in the power of good policy to produce equity. Policymakers in Topeka must use their power to enact legislation that begins to reverse the harms of racism and discrimination that unjustly hold back low-wage workers and people of color. All of us must work together to make sure that happens.

This fall, we will release state-level KIDS COUNT data and further explore what can be done to make sure every single Kansas child can thrive. ●



JOHN WILSON

President & CEO,
Kansas Action for Children

John works to elevate the needs of children and families as a member of the Kansas Children's Cabinet, Governor's Council on Education, and Governor's Tax Reform Council. He served in the Kansas House of Representatives for five years.



Building Anti-Racism into Trauma-Informed Care

BY JANE V. HENDERSON

Before we can have the conversation about the impact of racism on children, we must understand what racism is and what it isn't.

Racism differs from racial prejudice, hatred, or discrimination. Let's use the following formula: racism = racial prejudice + social and institutional power. Racism involves one group having the power to carry out systematic discrimination through the institutional policies and practices of society and through the shaping of cultural beliefs and values that support those racist policies and practices.

As adults learn about racism, it's natural to question whether children are aware of it. The truth is that children notice race and begin to internalize beliefs about race as early as age 2. Children notice differences in skin color and other attributes. As their awareness deepens, they may begin to verbalize those differences with unexpected statements about the differences they see. Children that experience racism may begin to view themselves negatively or, in an effort to fit in, may try to be less associated with characteristics or groups that are perceived negatively.

Adults fear that surrounding children with conversations about race can perpetuate stereotypes and reinforce racism. Society has normalized denial and avoidance, and people often hope that racism will not be highlighted. Minimizing ethnic and racial differences in an attempt to push the narrative of an inclusive nation suggests that differences are not acceptable and not something to be discussed.

While these conversations are potentially uncomfortable, it's important to note that many families of color do not have the privilege to decide whether to discuss or ignore race. As instances of police brutality

and blatant racialized acts of violence against people of color have increased, the amount of racial trauma in communities of color has also increased. The direct implication is that children of color are also experiencing racial trauma whenever they witness police brutality toward their caregivers, family members, community, and peers.

The increased access to racial incidents through social media and news coverage can also be retraumatizing. Children of color have been disproportionately affected by the exposure to adverse childhood experiences, racial trauma, and traumatic stress. The impact of racism has been linked to perinatal problems, chronic health issues, and mental health problems such as PTSD, anxiety, and depression in children and adolescents.

One might question how trauma-informed care fits into conversations around anti-racism. How can it not, when you're seeking to understand someone else's story? Trauma-informed approaches insist we change the question from "what's wrong with you?" to "what happened to you?" For many communities of color, the answer to that question may not solely relate to their direct experiences of racism, but also include historical experiences of segregation, violence, and oppression that occurred within their communities.

Racial trauma refers to mental and emotional pain caused by encounters with racial bias, ethnic discrimination, racism, and hate crimes. To provide trauma-informed care, we use six guiding principles — safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment, voice, and choice —

as well as cultural, historical, and gender issues. We have to recognize that safety, choice, and empowerment have not been equitable experiences for all. Additional efforts are required to create these experiences, especially for marginalized communities.

Extensive efforts are needed to merge trauma-informed practices and anti-racist work to address the interpersonal and structural impacts of racism, and it begins with each of us. To be able to authentically support children and families that experience racism, we must first do our own work to understand the real history of this country, then move past the heaviness of guilt, all while unlearning beliefs and recognizing biases.

Children grow up to become anti-racist adults when adults cultivate anti-racist development. Once we recognize that the path to anti-racism is an ongoing journey, we can fully appreciate other racial groups, empower children with knowledge and pride about different racial and cultural backgrounds, and understand how racism works, as well as how to combat it. ●



JANE V. HENDERSON

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Jane is a doctoral candidate at the University of Missouri-Kansas City in the Counseling Psychology program. Her research interests include multicultural competence, ethnic minority mental health, prevention programs for underserved populations, and exploring the psychological effects of discrimination and oppression, as well as trauma among minority groups.

Sources: *Journal of Health Service Psychology*, *Interracial Books for Children Bulletin*, *Administration and policy in mental health*, *Annals of Epidemiology*, *JAMA*, *American Academy of Pediatrics*



Every Child Needs NATURE

BY ELIZABETH BURGER

“Every child needs nature. Not just ones whose parents appreciate nature. Not just those of certain economic class or culture or set of abilities. Every child.”

First published in 2005, these words from Richard Louv’s book, “Last Child in the Woods,” hold even more power today. During the most difficult months of COVID-19, when most schools and child care facilities were closed, there was still one place of refuge, recreation, and rejuvenation for our children: Nature.

**Nature can help us
cope in times of trouble.**

Nature’s healing forces don’t need to be found on a faraway mountaintop or in a tropical destination; research indicates that even a few minutes outside in green space can reduce stress, anxiety, and depression and enhance mood, creativity, and resiliency. Science confirms what many of us instinctively know: Nature can help us cope in times of trouble.

However, like so many systemic inequities laid bare by COVID-19, far too many children, families, and communities lack access to nature they

can turn to for reprieve and respite. Research reveals what most of us see in our own communities; just think about which neighborhoods in your community have the most trees and the nicest parks and sidewalks. Ironically, nature’s benefits are relatively greater for those most negatively impacted by economic disadvantage, systemic racism, and other challenges — the very factors that lead to communities without ready access to parks, trails, and green space. Children in isolated rural areas can also suffer, due to a lack of public land and safe places to bike or walk.

Sunflower Foundation is committed to the health and well-being of children and families across the state. We began investing in community and school trails in 2005, hoping to increase equitable opportunities for outdoor recreation and connections to nature. Over the years, we’ve been inspired by our grantee partners, including and especially schools. That quarter-mile loop of asphalt in the schoolyard becomes so much more when creative teachers, staff, parents, and students get involved. Many schools use the trail for science lessons, pre-test “wobble walks,” all-inclusive running clubs, and “walking, talking buddies” for painfully shy students.

A child doesn’t need expensive equipment or special training to meander on a trail or explore a public park with their family, friends, or imagination. As Richard Louv said, nature’s benefits to children transcend any kind of socioeconomic status or demographic.

Sunflower Foundation is grateful to all the schools and communities that recognize the importance of investing in green spaces and trails. We look forward to future partnerships to ensure that every child has the chance to experience the healing power of nature. ●



ELIZABETH BURGER

Senior Program Officer,
Sunflower Foundation

Elizabeth directs the Healthy Living & Active Communities portfolio, overseeing grants and initiatives that focus on system changes to help make “the healthy choice, the easy choice” around physical activity and nutrition. Elizabeth grew up in the country and never tires of being outside, preferably hiking or running. She is thrilled to channel this personal passion to help communities, schools, and nonprofits develop safe, accessible, and inviting trails for people of all ages, abilities, backgrounds, and incomes. She believes the magic of the Sunflower Trails program is the potential to create equitable opportunities for everyone to connect to their own movement patterns and the rhythms of the natural world.

Sources: *Landscape and Urban Planning, Environmental REsearch, BloombergCityLab*

ks.childcareaware.org

Implicit Bias

A Brief Conversation Between a Black Activist and a White Ally

BY KHALILAH COLLINS
AND LISA TOBE

Khalilah Collins (KC): When I do trainings or workshops about implicit bias, racism or oppressions, I always start with an activity where I give people five circles and ask them “Who are you?” It amazes me how groups identify. Typically Black, Indigenous, People of Color (BIPOC) always put their ethnicity, race, and gender. White people write their titles or roles (i.e., mother, doctor, knitter, child

charge are to understand where that bias comes from. Is it rooted in truth? Does it ultimately harm people?

Implicit bias means that my name, Khalilah (the female derivative of Khalil, translated as friend and totally fitting for me), could potentially keep me from getting a job interview. This unfamiliar or ethnic name on my resume signals Black/inferior. Implicit bias, which is typically formed from socialization, allows institutions to continue to oppress people. Implicit bias

LT: Why do we as whites prioritize our need for comfort over the damage we cause others by continuing to ignore the real impact of our biases?

KC: In this time when the world is literally begging the question about how to do this better, I challenge you to check your preconceived notions for evidence and merit. You must ask yourself what fuels the way you move and act. If implicit bias is what keeps us safe, the real question is: From who or what? ●



care provider, etc.) When these roles find their way into descriptions used by a circle of the BIPOC folk, they always have racial and ethnic identifiers. Why is this? Because society constantly reminds BIPOCs that those things are center to our being, to how we show up in the world, maybe even to the jobs we're able to attain or the places we go. I never get to show up as my amazing self. I always show up as a Black woman first and then everything else follows.

Lisa Tobe (LT): For me, a white woman, I identify as a mom, activist, athlete, writer, and coach. I never think about being white. I don't have to. Everything is made for me. Up until eight years ago, I didn't think much about implicit bias either — how it related to me or affected others.

KC: Folks often throw around the term “implicit bias” when talking about diversity, equity, and inclusion. We all have bias. It is part of how we categorize and make sense of the world. It can be how we keep ourselves safe. The challenge and the

keeps us from having honest conversations with our colleagues and co-workers and building a sense of understanding and unity.

LT: As an ally, I want to think that my work shifts the norms that create this oppression, that I am above bias. While comforting, it's simply naive. The conversations that I hold about racism are flavored by my audience. Even now I'm afraid to expose biases interwoven into my daily actions.

KC: Implicit bias means we are still trying to seek justice for Breonna Taylor a year after police officers killed her in her own bed during a no-knock raid. Their perception of Breonna as a drug trafficker kept the officers from taking reasonable caution to protect her from their deadly force.



KHALILAH COLLINS, MSW

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Khalilah is a social justice warrior who continues to challenge systemic racism through diverse career positions. She holds a master's in social work from Spalding University.



LISA TOBE, MPH

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A trained public health strategist, Lisa has spent her career working with diverse organizations to facilitate equity-focused systems' transformation.

An Incredible Investment in Our Children

Making the Expanded Child Tax Credit Permanent

BY MITCH RUCKER

Today's children and young people form the backbone of our future success. Kansas depends on them and their families.

Everything we do at Kansas Action for Children (KAC) is underpinned by the belief that all Kansas children deserve an equal opportunity to thrive. We also recognize that, as a state, we are denying that opportunity to many of them. Health, education, and nutritional outcomes show that the families and kids who miss out most are largely those of color and those who work in blue-collar and low-wage jobs.

That's why the federal government's expansion of the child tax credit is so important. By permanently expanding the credit, lawmakers could cut childhood poverty in Kansas by more than half.

Most families with children have already claimed the credit for years, of course, but this spring's COVID-19 relief package revamped it in exciting ways. As John Wilson, KAC president, wrote in the Kansas Reflector back in August:

"Rather than simply boosting your refund at tax time, the American Rescue Plan Act made a chunk of the credit payable in monthly installments for the rest of 2021. That's important for families who might be struggling year-round. The credit works out to a maximum of \$300 per month for children under 6 and \$250 per month for those between 6 and 17."

There are some income limitations, and you can learn more about the program at [whitehouse.gov/child-tax-credit](https://www.whitehouse.gov/child-tax-credit).

Making the expanded credit permanent would lead to astonishing results. Some 58,000 kids in Kansas, or more than half of those in poverty, would move nearer the poverty line or be boosted above it, according to the Center on Budget and Policy Priorities. But these wouldn't be the only children to see gains. Roughly 92% of all Kansas kids — 651,000 of them — would benefit.

Government can do many things for the American people. Codifying this expanded tax credit would be an incredible investment in our children and the future of our country. ●



MITCH RUCKER

Early Learning Policy Advisor, Kansas Action for Children

Mitch works with policymakers and stakeholders to improve and expand access to early childhood education in Kansas. Prior to joining KAC, he worked on campaigns across Kansas, and served as the legislative director for the Majority Leader of the Kansas House of Representatives. A fifth-generation Kansan, Mitch grew up on his family farm outside of Burdett and holds a B.A. in Political Science from the University of Kansas.



Understand Yourself to Build and Improve Intercultural Relationships

BY CHIQUITA MILLER

Have you ever had a friend with a significantly different background from you? Are you uncomfortable around people who are different from you? What are the benefits of building a relationship with someone from a different race, ethnicity, religion, or political background? Do you criticize or judge people who act differently than you do?

These are questions everyone who is interested in equity should ask themselves. Knowing yourself and understanding others are both key to the process of seeking equity.

Embracing our differences helps to bring everyone together — to create spaces where everyone belongs.

Research shows that social, economic, and cultural barriers among people dissolve once they build relationships. Community members start to share a common vision. They value each other's background and circumstances and stand together in times of conflict,

disaster, and misfortune. When community members unite, people are safer, fewer conflicts arise, and families thrive. Embracing our differences helps to bring everyone together — to create spaces where everyone belongs.

When you build intercultural relationships, you begin to ask questions about yourself and your way of life, and you start to understand how socialization has contributed to the ways you think and behave. This new self-awareness can help you recognize why you may sometimes avoid people who are different from you. The more you understand yourself, the more you can learn about those with different incomes, educational experiences, cultural traditions, belief systems, national origins, or ethnic backgrounds.

Research suggests that humans begin to define their personal preferences from birth. Interactions with parents, siblings, and other relatives shape a child's development and their understanding of their local environment and culture. Other influences — such as school, church, and friends — contribute to a child's beliefs and values. We carry these ideas forward through adulthood.

Research shows that social, economic, and cultural barriers among people dissolve once they build relationships.

By building a relationship with someone from a different culture, ethnic background, socioeconomic level, or family makeup, you can expand your understanding of yourself, your community, and the people around you.

These relationships can lead to social progress, social unity, and social stability for all. ●



**CHIQUITA MILLER,
PH.D., LMAC, CFLE**

Family and Consumer
Sciences Agent,
Wyandotte County K-State
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Dr. Chiquita Miller has spent more than 20 years at K-State Research and Extension in Wyandotte County. The most rewarding aspect of her job is working with various participants, forming partnerships, and supporting the unmet needs of the community.

Focusing on **EQUITY** over **EQUALITY**

Life Expectancy and Health Disparities in Kansas

BY TERESA MILLER

More than 18 months into this global pandemic, we have seen its disproportionate effects on communities of color — both in terms of economic impact and lives taken. We've also had long overdue conversations about racial justice, health equity, and how we can all work to create more equitable communities.

**These discriminatory
policies have negatively
impacted families
and communities
for generations.**

To better understand opportunities for health and racial equity, the Kansas Health Foundation (KHF) is examining life expectancy data in Kansas. Life expectancy, the average age to which people can expect to live, is a powerful tool showing how those living just a few miles apart — including children — may have vastly different lifespans. It's also used to gauge the overall health of a community.

While the state life expectancy in Kansas is 78.6 years, it is below 70 in 13 census

tracts in Wyandotte, Sedgwick, Shawnee, Cherokee, and Leavenworth counties.

It's probably not surprising that the census tract with the lowest life expectancy (62.5 years) is in Wyandotte County. What might be more surprising is that the census tract with one of the highest life expectancies in Johnson County is just 10 miles away. And people there live an average of 23 years longer.

There is a direct correlation between the prevalence of disease, low life expectancy, and historically redlined communities.

Redlining is a term used to describe the discriminatory federal housing policies from the 1930s. The federal government created color-coded maps to indicate where it was safe to insure mortgages. Places where African Americans lived were colored red to indicate that these neighborhoods were too risky for mortgages.

These discriminatory policies have negatively impacted families and communities for generations. Residents in redlined neighborhoods see reduced wealth, more poverty, higher incidence of chronic disease, and lower life expectancy. There has been less public and private investment in these areas, which results in poor housing conditions, educational disparities, poor infrastructure, and limited or no access to grocery stores or health care.

KHF is focused on addressing low life expectancies and health disparities. We're making an impact by leveraging our resources in communities and advocating for statewide policy efforts that address the root causes of health disparities. We know we can't do any of this by ourselves. As we continue our equity work, we need to empower partners to help strengthen communities. Partnerships with child care providers and early childhood educators will be key to that process.

Thank you for all you do to improve the lives of the littlest Kansans. We look forward to working with you. ●



TERESA MILLER

President & CEO,
Kansas Health Foundation

Miller brings a state government background to KHF, most recently as Secretary for the Pennsylvania Department of Human Services. She previously served as the state's insurance commissioner and held leadership roles in the federal government's Centers for Medicare & Medicaid Services and Oregon's Department of Consumer and Business Services.



An Opportunity to Equitably Fund Child Care

BY MK FALGOUT

For decades, America's child care system quite simply has not worked. Families struggle to afford quality child care, if they can find it at all. Meanwhile, child care providers operate on razor-thin margins, unable to cover the true costs of providing quality care. This means that child care providers — who are overwhelmingly women — go woefully undercompensated for their work, with many experiencing poverty-level wages.

This was the case even before the pandemic caused a public health crisis that forced many children to stay home — decreasing child care business revenue while simultaneously increasing the operating costs that programs had to cover in order to meet public health and safety recommendations. Together, these shifts brought the child care industry to the brink of collapse and created devastating impacts for women-owned small businesses already struggling to break even.

Moving forward, creating a more equitable child care system — one that expands access to resources for low-income communities, communities of color, children with disabilities, and rural communities — will require the thoughtful and targeted implementation of current and future public investments.

In response to the country's extraordinary and urgent child care needs, Congress made the largest-ever investment in child care, providing a historic \$39 billion in the American Rescue Plan Act. These funds are intended to help child care providers pay their bills, keep their doors open or resume business, and expand access to child care to more families.

Knowing that more still needs to be done, policymakers can leverage public resources slated for child care to create a more equitable system where families from all backgrounds have access to high-quality child care and providers are paid like the professionals they are.

Policymakers can leverage public resources slated for child care to create a more equitable system.

The Opportunity

The American Rescue Plan Act includes \$15 billion for the Child Care and Development Block Grant (CCDBG) and \$24 billion for a COVID-19 child care relief and stabilization fund. State leaders have the opportunity to leverage these investments, as well as future funds, to ensure that child care workers and early educators are fairly compensated for their critical work.

The \$15 billion investment in the CCDBG increases funding to states to expand access to child care subsidies for families with low incomes. The historically underfunded subsidy system is currently only able to serve one in seven eligible children, according to the U.S. Department of Health and Human Services, with subsidy payment rates that do not cover the actual cost of providing quality child care.

The other \$24 billion is intended for states to distribute as quickly as possible as grants for providers to address immediate

financial needs and protect the existing child care market. They may be used to cover expenses such as:

- Personnel costs
- Rent or mortgage obligations
- Personal protective equipment and cleaning supplies
- Supplies to respond to the COVID-19 public health emergency
- Goods and services necessary to maintain or resume child care services
- Mental health support

This child care relief and stabilization fund provides an opportunity for states to leverage historic investments as a down payment toward building systems that more equitably serve families and providers. States can largely decide how to administer these funds to address the needs of their local communities. Some states have processes in place to directly subgrant to thousands of child care providers, while other states require expanded capacity to ensure that funds reach all the providers in need.

Additionally, state offices that administer CCDBG funds are typically set up to send money to programs that accept child care subsidies. However, it's important to note child care relief and stabilization funds are available to all licensed providers in the United States.

While distributing these stabilization funds swiftly is critical to preventing more child care programs from closing, this funding has the potential to extend significant and immediate financial relief to child care providers, including both child care centers and family child care homes. Prioritizing equitable funding distribution processes that have the capacity to reach providers quickly, consult directly with impacted providers, and actively support providers in accessing funding will help ensure that we build a more equitable child care system.

Equitable Funding Implementation

In order to distribute funds equitably, policymakers should consider partnering with community-based intermediary organizations that hold relationships with child care providers, such as Child Care Aware of Kansas (CCAKS). These community-based organizations can serve in a variety of partnership roles to close resource gaps and maximize the distribution of funds.

Intermediaries can leverage long-standing and trusted relationships within their communities, positioning them well to support child care providers. Recently, intermediaries have used public funds to administer successful programs that support child care providers, while remaining responsive to providers as stakeholders.

Subgrants

The proximity of intermediaries like CCAKS to the early care and education field allows them to administer subgrants rapidly, while targeting a wide range of child care providers who meet varying community needs or need funding the most. Many intermediaries have proven processes to distribute public funds efficiently to child care providers. In states with less capacity or without systems designed to administer thousands of checks directly to child care providers, intermediaries can subgrant to child care programs quickly. This added capacity creates an opportunity to ensure funds reach the providers most in need of financial relief.

Communication

Intermediaries can also serve as a bridge between providers and policymakers to promote equity in funding distribution. Intermediaries can harness their far-reaching networks so that all programs — especially family child care programs where the child care provider often stretches her capacity to manage the business side of the program — know what resources are

Intermediaries can serve as a bridge between providers and policymakers.

available to help keep their doors open. Some intermediaries also have processes to connect providers with policymakers deciding how best to address child care needs. This kind of direct consultation helps ensure that funding distribution addresses the barriers that providers experience when accessing funds.

Technical Assistance

Intermediaries can also offer technical assistance to support child care providers on a variety of topics, including applying for grants, tax and payroll, and the efficient use of grant funds on allowable expenses. For smaller child care centers and family child care programs, which are often overextended, this added capacity can make all the difference — ensuring that providers in communities with fewer financial resources and those with fewer staff can access all available resources.

Intermediaries can work with policymakers to ensure an equitable distribution of resources.

Success in Kansas

The way Child Care Aware of Kansas has partnered with the Kansas Department for Children and Families (DCF) and the Kansas Department of Health and Environment (KDHE) is a prime example of how intermediaries can work with policymakers to ensure an equitable distribution of resources to support the

child care field. Throughout the pandemic, CCAKS has led a variety of initiatives aimed at protecting the current supply of child care and supporting providers as they navigate the public health and economic crises.

In March 2020, CCAKS launched a child care grant program as part of the Kansas DCF Hero Relief Program, which offered subgrants directly to providers to sustain the supply of child care across the state, ensuring that even programs in hard-to-reach frontier communities gained access to resources. CCAKS tracked who was applying to receive grants so they could better target their outreach to fill the gaps. The program provided revenue replacement funds as enrollment in child care programs dropped and compensated providers serving the children of essential workers through bonuses. In six months, the program subgranted more than \$11 million in CARES Act funding equitably to more than 4,500 child care programs. This was a direct result of the program's access to providers across the state, facilitated by CCAKS.

Additionally, in partnership with KDHE, CCAKS used CARES Act funds to create the Child Care Health Consultation Network. This program offered health consultations to more than 500 child care providers, helping programs find the best ways to meet COVID-19 health and safety recommendations — from setting up partitions to accommodate social distancing to establishing separate entry and exit points to limit contact during parent pick-up and drop-off. The program then helped providers apply for grants to make those changes. This targeted program built capacity for child care providers to adjust their operations during the pandemic and enabled those with limited resources or staff to implement these changes.

Thoughtful distribution of public investments will be key to building an equitable child care system.

An Equitable Future

As the country continues to respond to the COVID-19 pandemic, the thoughtful distribution of public investments will be key to building an equitable child care system — the industry that makes all other work possible.

Building off proven strategies and lessons learned from previous distribution of public funding, intermediaries like CCAKS can leverage their experience to help states prioritize equity in distributing the \$24 billion for child care relief and stabilization and future public investments.

An important first step toward building an equitable child care system was the federal infusion of \$39 billion to stabilize and protect the current child care industry. But expanding access to quality child care for all families of young children will require sustained, long-term public investments that offer fair, livable wages for early educators and that provide affordable, high-quality child care options in the many settings required to meet families' needs. ●



MK FALGOUT

Research Assistant for
Early Childhood Policy,
Center for American
Progress

Through policy research, MK's work focuses on advocating for progressive system change that will increase access to quality child care and early learning opportunities for all families, while fairly compensating early educators and child care providers.



LET'S CONNECT!

A MESSAGE FROM CHILD CARE AWARE® OF KANSAS

Data and numbers can inspire people to act. But personal stories and perspectives can be even more powerful. They can motivate Kansans to look for creative ways to help working parents meet their child care needs and to help child care providers offer quality care.

At Child Care Aware of Kansas, we are committed to listening and sharing both data and stories. These different forms of knowledge are central to our decision-making, reporting, and messaging processes.

Recently, the Child Care Aware of Kansas team and the Board of Directors set new guiding principles. These two shape how we connect with families, child care providers, and communities.

Children, Families, and Child Care Providers Are Our “North Star”

The voices of families and child care providers are central to determining our plan, identifying priorities and strategies, and deciding how to carry out our work. Effective, authentic partnerships with families and child care providers allow us to truly understand needs and how best to address them.

Diverse Partnerships

We cannot do this work alone. We will engage and include families, child care providers, and community members — as equals and with shared purpose — throughout the process, learning in partnership as we go. We recognize that our goals and proposed actions require the input, expertise, and collaboration of multiple partners within and across the Kansas early childhood system.

Whether you are a child care provider, parent, or community member, please connect with us to share your feedback, experiences, ideas, goals, and dreams! Give us a call, use the contact form on our website, or connect with us on Facebook, Twitter, or LinkedIn.

Your experiences are the story behind the data, and your feedback is instrumental in shaping the early care and education system in Kansas. Your insights may end up influencing programs, policies, or community-wide decisions about early care and education in Kansas. ●

Starting the Conversation about Racism with Young Children

TIPS FROM A PEDIATRIC PSYCHOLOGIST

BY ROGER HARRISON, Ph.D. &
GEORGIA S. THOMPSON

Over the past year, racial tensions have heightened across the country, leading to conversations about equity, diversity, and inclusion in the media, schools, and workplaces. For families with young children, the home should be the first place to explore these issues.

Here's how to best support parents, caregivers, and young children with these conversations.

When To Begin Conversations

During the preschool years, children start to notice and understand concepts like fairness. This is an ideal time to start conversations with children about fairness and racism. Children begin to develop empathy, along with other social-emotional skills, at a young age. They understand who and what is valued through both subtle and explicit messages from the caregivers in their lives.

Showcase Your Values

Besides talking to children about racism and fairness, parents and caregivers of all races and ethnicities should look at their home environment and assess whether it reflects their own values around equity, diversity, and inclusion. The toys, books, and art in a home can display positive representation for a child but can also show a family's "affinity biases," meaning who people are inclined to like and value.

Start With Questions

Parents and caregivers should primarily ask their children questions during conversations about racism — as opposed to sharing too much information, which can become overwhelming. Ask questions such as, "What do you think about...?" or "How do you feel about...?" This approach helps parents and caregivers understand their child's developing

perspective, while also shaping the direction of future conversations.

Focus on Experiences

Families should regularly make space for ongoing discussions that can incorporate and highlight the family's values. Parents can be really intentional in the way that they practice inclusion and verbalize value for young children.

Diversify your family's experiences by attending festivals, fairs, events, and cultural activities to expose your children to different cultures and expand their knowledge of differences and similarities.

Stand Up for Equity

Another way parents and caregivers can promote equity, diversity, and inclusion is engaging in advocacy work with their child's school or child care program. For example, a parent could advocate for a more diverse teaching staff or a more inclusive curriculum. These acts of leadership also serve as positive modeling for children when they see their parents speaking up for what they feel is right.

Resources for Families

Parents should think about their family's core values when identifying resources that will meet their needs. To start, parents can check out the following resources:

- "Talking to Kids About Race and Racism," a guide for having conversations with children around racism and fairness
- Ibram Kendi's "Anti-racist Baby," a book that empowers parents and children to uproot racism in our society and in ourselves

- The Conscious Kid, an education, research, and policy organization dedicated to equity and promoting healthy racial identity development.

The bottom line is that parents and caregivers — as children's first and most important teachers — should have conversations about race as soon as possible to help them better understand the world around them. ●



ROGER HARRISON

Pediatric Psychologist,
Nemours Children's Health

Roger is a pediatric psychologist with Nemours, diversity and inclusion educator in the Office of Health Equity and Inclusion (OHEI) at Nemours, and clinical assistant professor of pediatrics at Sidney Kimmel College of Medicine at Thomas Jefferson University. He received his Ph.D. in clinical psychology from Brigham Young University and completed his clinical internship and post-doctoral fellowship at Nemours.



GEORGIA THOMPSON

Senior State System
Specialist,
Nemours Children's Health

At Nemours, Georgia supports initiatives working to improve health outcomes for young children. She has worked in early care and education for over 15 years, beginning as a preschool teacher and advancing to PK-12 education, professional development, quality improvement, and higher education.



Women & Children First

Addressing maternal and child health disparities in Kansas

BY DAVID JORDAN

All Kansans should get to live in communities where good schools, healthy environments, safe homes, quality jobs, and access to health care and high-quality goods and services are the norm.

To achieve that goal in Kansas, we need to address long-standing racial and ethnic disparities in health, poverty rates, and educational attainment. Addressing these inequities is complex, but improving the health and well-being of mothers, infants, and children is a critically important strategy. It is predictive of future public health challenges for families, communities, and the health system.

Unfortunately, significant racial disparities exist in maternal and child health. A recent Kaiser Family Foundation brief highlighted:

- Black and American Indian and Alaska Native (AIAN) women have higher rates of pregnancy-related death compared to white women.
- Black, AIAN, and Native Hawaiian and Other Pacific Islander (NHOPI) women are more likely than white women to have births with risk factors that increase the likelihood of infant mortality and that can have long-term negative consequences for children's health.

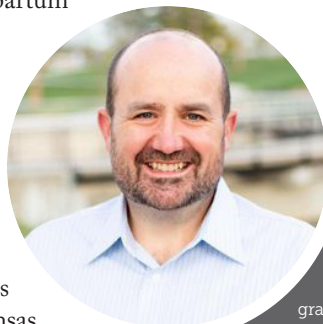
- Infants born to Black, AIAN, and NHOPI women have markedly higher mortality rates than those born to white women.

These disparities, in part, reflect increased barriers to health care among people of color. To improve access to health care for people of color in Kansas and to ensure every Kansan has an opportunity for a healthy start in life, we must:

- Invest in prenatal care and equity-based birth education.
- Improve access to prenatal services for women of color.
- Improve access to comprehensive health care by expanding Medicaid eligibility, extending postpartum coverage to 12 months for new mothers, and continuously covering children ages 0-5.
- Invest in a culturally competent health care workforce.

Investing in maternal and child health policies can address long-standing inequities in Kansas, as well as improve health outcomes, school readiness, and long-term financial earnings. ●

We need to address long-standing racial and ethnic disparities in health, poverty rates, and educational attainment.



DAVID JORDAN

President, United Methodist Health Ministry Fund

David leads the Health Fund's grantmaking, relationship-building, policy development, and advocacy efforts. He represents the Health Fund on local, state, and national boards, including serving as a member of the Governor's Commission on Racial Equity and Justice.

Healthy Parents, Healthy Kids

BY KATRINA MINTER

The Family Conservancy's parent education program — Healthy Parents, Healthy Kids — provides a sense of community to the residents of two public housing developments in Kansas City. When the pandemic set in, that sense of community was disrupted. The Healthy Parents, Healthy Kids team had to pivot from in-person to virtual programming: Weekly classes were moved from the classroom to Zoom, and one-on-one meetings were replaced by porch drop-offs, phone calls, text messages, or FaceTime.

Sabrina Boyd, the coordinator for Healthy Parents, Healthy Kids, explained: "COVID may have shut many people down, but for us, it gave us a new eye on how to reach our target population. For many, Healthy Parents, Healthy Kids was the first place they reached out to when they didn't know what to do. I had several families that were locked down and out of work. I had mothers who gave birth during COVID. Those were the families I was able to assist."

When circumstances left many participants without food, diapers, laundry detergent, or utilities, basic needs became the priority. Batsa's story is one example. When his entire tight-knit Nepali family — wife, baby daughter, parents, brothers, and sisters — contracted COVID-19, Batsa missed several weeks of work. Thankfully, all the family members recovered, but the lost income was devastating.

"When baby diapers were almost gone, I contacted Ms. Sabrina about the household condition, baby needs, and I have no work," Batsa explained. "Not only did The Family Conservancy provide diapers and wipes, but toys, books, cleaning supplies, and much-needed groceries."

Learning to Adapt

Hearing stories like Batsa's got the program team thinking. They brainstormed ways to meet the growing needs of families. Katrina Minter, who oversees the program, contacted a friend at Liberty Fruit Company in the hope of securing fresh fruit for the families.

To her surprise, her request was more than met. Liberty Fruit Company has been contracted by the United States Department of Agriculture to distribute food boxes to families in need during the pandemic. Since May, they have been packaging fruits, vegetables, and dairy products into family-sized boxes and transporting them to food banks, community and faith-based organizations, and other nonprofits serving Americans in need.

While shifting to meet the rising needs of the program participants, the Healthy Kids, Healthy Parents program remains focused on delivering positive parenting strategies. The team developed new approaches to support parents in their role as their child's primary teacher and caregiver.

"Children can't be children on their own," says Boyd. "They need their parents' help, and the parent has to be attuned to the fact that it takes more than having a baby and giving them food and clothing to make them whole."

The team began conducting socially distanced porch visits to deliver and demonstrate activity kits. The most recent kit focused on temperament. It included information for parents and all the supplies for children to craft a tree. The activity was designed to enhance cognition and improve hand-eye coordination. For parents with an infant under the age of 1, the kit included the same temperament information, along with a baby manipulative toy.

It Takes a Village

The Family Conservancy's Healthy Parents, Healthy Kids program provides the foundation for the village needed to raise children. For so long, many of our families felt all alone, like the system had let them down. After families join the program, Boyd becomes the advocate they've never had but always needed. When their needs are

beyond her capacity to fulfill, she works diligently to provide them with a warm hand-off to community resources.

After the families gain trust in Boyd, they expand that trust to others in the program, including fellow class members who become key members of their support systems — someone to babysit during a job interview or to share a few diapers to hold them over until payday.

Over the past year and a half, the transformative nature of the Healthy Parents, Healthy Kids program has come into clear focus: Strangers who lived next door to each other became true neighbors and sometimes even friends. The program builds up parents, which results in happy children and strong families. These families then come together to transform an isolated neighborhood into a nurturing community. ●



KATRINA MINTER

Manager of Community Programs, The Family Conservancy

Katrina holds a bachelor's degree in social work from Missouri Western State College. Her previous experience includes 10 years directing child care programs and 23 years in the nonprofit sector with The Family Conservancy in Kansas City, Kansas. Katrina is mother to two step-daughters and Nana to four beautiful grandchildren. She enjoys spending time with her husband, family, and friends. Her passion is making a difference in the lives of children and families.



CHILD CARE DATA SNAPSHOT

What do we know? What are we missing?

BY EMMA KELLEY

Here's what we know about the demographics of children in our state. According to the U.S. Census Bureau, in 2019, children under 18 made up nearly a quarter of the total population of Kansas, with 6.4% under the age of five.

Unfortunately, many of those children are growing up in poverty. Kids Count Data Center found that 15% of all children under 18 in Kansas were living in poverty in 2019, with a disproportionately high number being children of color. For example, Black children are only 6% of the child population in Kansas, but they make up 32% of children in poverty. Additionally, the Kids Count Data Center found that 14% of children in Kansas speak a language other than English at home.

CHILD POPULATION AND POVERTY IN KANSAS

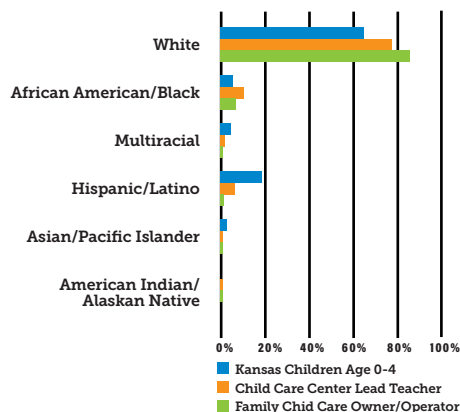
	Kansas Children by Race/Ethnicity	Kansas Children Living in Poverty* by Race/Ethnicity
American Indian	1%	5
Asian/Pacific Islander	3%	16%
Hispanic/Latino	19%	27%
2+ Races	5%	20%
African American/Black	6%	32%
White	66%	9%
TOTAL	100%	15%

DATA FROM KIDS COUNT DATA CENTER. CHILD POPULATION BY RACE IN KANSAS, 2019 AND CHILDREN IN POVERTY (100%) BY AGE GROUP AND RACE AND ETHNICITY IN KANSAS, 2019.

* The share of children <18 years who live in families with incomes below 100% the federal poverty level. Note: 5 = Estimates suppressed when the confidence interval around the percentage is greater than or equal to 10% points.

While we have many sources of information about Kansas children and families, what do we know about the people that care for our children? As the topic of equity gains importance in the state, important questions have been raised about the demographics of early childhood care and education providers. These individuals play a crucial role in the development of children, particularly those who are most vulnerable.

RACE/ETHNICITY OF KANSAS CHILDREN & EARLY CHILDHOOD WORKFORCE



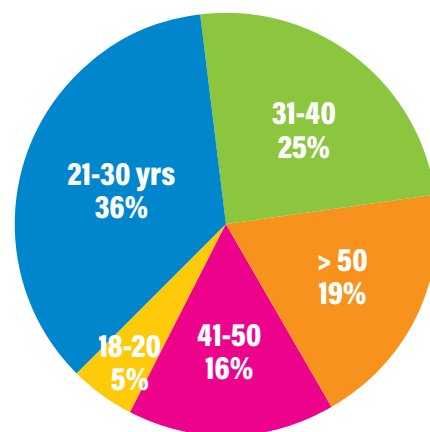
DATA FROM WHO CARES FOR KANSAS CHILDREN: 2018 KANSAS CHILD CARE WORKFORCE STUDY. AUG. 2018. KIDS COUNT DATA CENTER. CHILD POPULATION BY RACE AND AGE GROUP IN KANSAS, 2019.

With the information we have, we can paint a vague picture of child care providers in the state. In 2018, Child Care Aware of Kansas published a report profiling the child care workforce, interviewing providers from all 105 counties. Of those surveyed, most family child care providers were older than 50. Additionally, 87% of family child care providers and 79% of child care center lead teachers surveyed were white. The report also found that less than 7% of providers spoke a language other than English, about half the percentage of children who speak another language at home.

It's safe to conclude that the cultural and racial characteristics of children are not always equally represented within the child care workforce, which means many children are not being exposed to caregivers that reflect their own cultural backgrounds and identities. This also means that white, English-speaking children have fewer interactions with teachers and providers of color and have less exposure to other cultures.

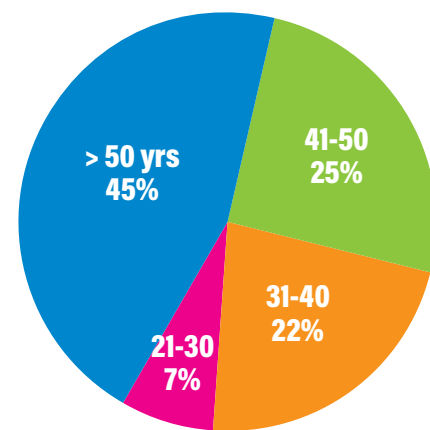
Although there has been an increased focus on economic demographics in early childhood education, especially after the

AGE OF CHILD CARE CENTER LEAD TEACHERS



DATA FROM WHO CARES FOR KANSAS CHILDREN: 2018 KANSAS CHILD CARE WORKFORCE STUDY. AUG. 2018

AGE OF FAMILY CARE OWNERS/ OPERATORS



DATA FROM WHO CARES FOR KANSAS CHILDREN: 2018 KANSAS CHILD CARE WORKFORCE STUDY. AUG. 2018

impact of COVID-19, little to no data is regularly collected on the race and ethnicity of the children receiving care or the care providers themselves, especially those outside publicly funded programs who may be harder to reach. Expanded routine data collection of this kind of demographic information would further our understanding of disparities across the state and help us promote equity in the child care sector. ●



EMMA KELLEY

Data Specialist, Child Care Aware® of Kansas

Emma earned a bachelor's in human development and family studies at Iowa State University. After working directly with clients in human services for several years, Emma finds it fulfilling to work behind the scenes with data. She knows that she's making a difference in programs and policies that impact the lives of families on a daily basis.

Becoming a Racial Equity Champion From Intention to Impact

BY LADONNA MCCULLOUGH

Becoming a racial equity champion is no easy feat. Understandably, such a mindset shift involves discomfort and a fear of making mistakes. These obstacles often hinder viable allyship and transformative change.

Once we understand that inequities are systemic and embedded in the societal structures we all navigate daily, we are better equipped to bravely lean into the work and expand our awareness of the injustices occurring around us.

The effects of poverty and systemic trauma on the academic preparedness of youth from culturally diverse and/or low-income backgrounds start appearing during early education. A combination of intricate factors — such as nutrition, home and community environments, social and emotional relationships, and access

to quality education and health care — comprise and influence the continuum of hardship that children from historically marginalized backgrounds encounter during their early critical development.

**Remember that this
is a lifelong journey;
you need to bring others
along with you!**

These inequities are pervasive and immediate. When left unaddressed, they not only impede a child's early learning development but have an ongoing negative impact throughout the rest of their lifespan.

You need to ask yourself what is keeping you from truly embracing and implementing a Diversity, Equity, Inclusion, Accessibility (DEIA) or racial equity lens in your personal and professional life.

Most of the time, the answer is fear. Fear of saying or doing the wrong thing. Fear of displaying ignorance. Fear of being misunderstood.

So how can you begin to overcome this fear? Here are three strategies to consider.

Educate

This involves more than reading an article or book. You must be willing to learn — and unlearn conditioned understandings, beliefs, and assumptions you hold about others. As a champion, you must self-reflect, engage in courageous conversations about race, and challenge the status quo — even when it means friends and family members may avoid you.



Engage

Interact with those that you advocate for. Put their voices first, and remember not to center yourself. Be genuine in your conversations and interactions. Don't tell a community what you think they need; listen to them explain what they know is needed. Being a champion is not about saving others but walking alongside them in solidarity. Remember that it is about their voices, not your own voice!

Being a champion is not about saving others but walking alongside them in solidarity.

Implement

Focus on building your DEIA capacity. Create a personal DEIA resource toolkit. This may include books, videos, websites, contacts in the field, webinars, and conferences. Be willing to self-assess. There are several DEIA readiness and self-assessment tools available to help you gauge where you are on your journey. Share your DEIA resources with others. Remember that this is a lifelong personal journey; you need to bring others along with you!

Here's how to get started on this journey:

1. Set the foundation.

Move beyond buzzwords. Build your knowledge of DEIA terms, concepts, and theories. Learn about the white racial frame of American society and the impact of systemic trauma on historically marginalized groups.

2. Read.

A great book to help you begin conquering your fear is "What If I Say the Wrong Thing? 25 Habits for Culturally Effective People" by Vernā Myers. Other books to consider include "Waking Up White" by Debby Irving and "Whistling Vivaldi: How Stereotypes Affect Us and What We Can Do" by Claude Steele.

3. Reflect!

Journaling supports self-reflection and your own cultural self-awareness, as you begin to understand how others may perceive you. "How to Be an Antiracist" by Ibram X. Kendi discusses the deep impact of racism and provides antiracist prompts to support your DEIA journey. Don't forget the official workbook companion, "Be Anti-Racist: A Journal for Awareness, Reflection, and Action."

4. Explore tools and resources.

- Cultivate "brave space" as an alternative to "safe space." Learn more about this concept in Chapter 8 of "The Art of Effective Facilitation: Reflections From Social Justice Educators" by Lisa M. Landreman.
- Understand the emotions and trauma that people carry with them daily and how this may show up in conversations.
- Explore the Courageous Conversation Compass, as well as their website.
- For those serving children and families, Arizona State

University's Center for Child and Family Success has curated extensive resources and tools through their Children's Equity Project initiative.

As a champion, you must self-reflect, engage in courageous conversations about race, and challenge the status quo.

5. Network and learn from professionals.

- The National Conference on Race and Ethnicity (NCORE) provides a platform for learning and engaging in racial equity dialogue.
- The White Privilege Conference examines privilege and oppression.
- The Conference on Racial and Social Justice advances justice in education.

Now is the time: Challenge yourself to become a racial equity champion! ●



LADONNA MCCULLOUGH

CEO, Critical Social Change Project (CSCP)

LaDonna's work centers on evidence-based approaches to transforming organizational culture and climate. She works closely with organizations interested in embarking upon a culturally responsive and transformative change journey.

Striving for Fairness and Justice in a Changing World

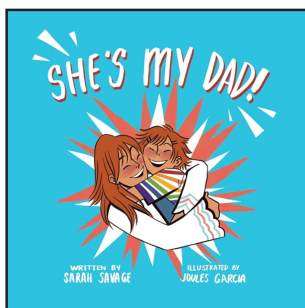
BY ALICE EBERHART-WRIGHT



In the past 18 months, our world has changed enormously. One of those changes is an increased awareness of and commitment

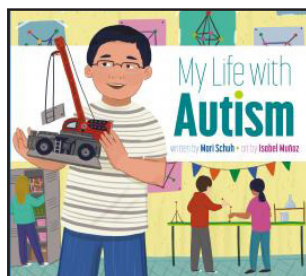
to fairness and justice for all people.

Recently, I headed to the library to see what new children's books are emphasizing those values, books that could help us and the children we care for grow up to be just and fair.



"She's My Dad!" by Sarah Savage, illustrated by Joules Garcia

This book wastes no time getting to its main message. We hug and cuddle kittens that turn into cats. When human beings turn into adults, they may transition to a different gender. Gone are the days when all little boys grow into adult men. Some of them (including some in my own family) transition to the opposite gender. They change their clothes, names, and even body parts to become the person they feel they really are. We have to remember to use the right pronouns: using "she" rather than "he." This may be easier for children than it is for the grown-ups who have known them as males for many years.



"My Life With Autism" by Mari Schuh, illustrated by Isabel Munoz

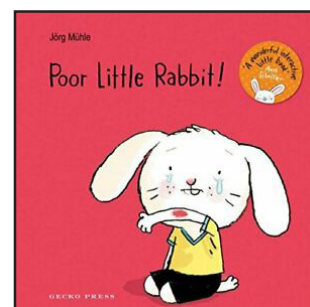
If you care for a child with autism, this book is for you. It really resonated with me because of my personal experience. I worked intensively with one child with autism for five years and now have a great-grandchild who has required years of special services and evaluations to understand his diagnosis and needs. I have another great-grandchild who may be on the autism spectrum but requires very different approaches because of his unique gifts.



"When Mom's Away" by Farida Zaman

This book is perfect for families who have dealt with family separation due to COVID-19. The story follows a mother who has been intensely involved with caring for COVID patients, meaning that she had to stay isolated from her husband and daughter. The pair have to learn to deal with their feelings and find ways to have fun and stay connected through the pandemic.

The father in this story does an amazing job talking with his little girl about her feelings, explaining repeatedly the state of affairs, finding ways to communicate through technology, and creating a celebratory neighborhood ritual to honor the superhero caregivers. This book could be a great conversation topic for many situations.



"Poor Little Rabbit" by Jorg Muhle

This simple and colorful board book deals with tiny accidents — from skinned body parts to a fall. Every toddler should be able to understand a scraped elbow — the pain, the blood, the tears, the Band-Aid, the comfort shown by a loved one. This story can help both kids and parents develop empathy for others and their pain.

I worked on an adolescent pregnancy project at The Menninger Clinic for nearly 10 years that looked at how babies were affected by having teen parents. Unlike older moms, many of the young moms did not automatically reassure and comfort. Many of the toddlers mirrored their mothers' responses. When hearing a crying baby on a tape or seeing a rag doll's leg fall off, they showed no reaction.

"Poor Little Rabbit" teaches toddlers how to deal with their own pain, as well as how to show care and comfort for others going through hard times. ●



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