

# GIFT VIII

HIGH QUALITY EARLY CARE & EDUCATION  
FOR SCOTT COUNTY



Scott County  
Community Foundation



A REPORT FOR THE SCOTT COUNTY COMMUNITY FOUNDATION PRODUCED IN PARTNERSHIP  
WITH THE IU SOUTHEAST APPLIED RESEARCH AND EDUCATION CENTER



**APPLIED RESEARCH  
AND EDUCATION CENTER**  
INDIANA UNIVERSITY SOUTHEAST

Director & Primary Investigator: Melissa S. Fry, Ph.D.

Research Assistants: Ava Minnery, Kelsie Jacob

Maps: Erin Coulson

Cover Design: Baylee Riley

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Applied Research and Education Center

4201 Grantline Road | New Albany, IN | 812.941.2323

The Applied Research and Education Center (AREC) is an outreach project of Indiana University (IU) Southeast. The AREC provides research, consulting and technical assistance to nonprofit organizations, foundations, government agencies, and local businesses. The student staff enhances classroom learning through applied research projects as it actively engages every stage of each community-based project. The AREC combines learning, teaching, and doing to support and empower community organizations in the IU Southeast region.

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## Scott County Early Care and Education Strategic Action Plan

### Big Picture Long Term Goal

Every Child in Scott County will have high quality, developmentally appropriate early childhood education and care from birth to age five.

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### Context

Scott County is well-placed along a major interstate with commutable access to Louisville, Kentucky and Jeffersonville, Indianapolis, and Columbus Indiana. Social networks in the community are strong and have proven their capacity to align resources to work on pressing issues related to health and substance use disorder over the last decade. Identifying key leverage points to support systems change that can shift vicious feedback loops to virtuous ones is essential to seizing the opportunities available to Scott County. Across the country, policy makers and philanthropic organizations increasingly recognize early

childhood education and care as a leverage point for local communities that will have dramatic impacts on our national economy, quality of life, the health of our democracy, and even our global standing.

The Scott County Community Foundation convenes an early care and education team to think strategically about how to coordinate local efforts to improve access to affordable high-quality care throughout the county. Educational attainment in the community remains low. Declines in manufacturing paired with the rise of industrial agriculture and a knowledge economy left Scott County residents struggling to thrive. As family



wage jobs declined across the economy, the labor force participation of mothers of young children rose from 40% in the mid-1970's<sup>1</sup> to nearly 73% nationally and 68.5% in Scott County.<sup>2</sup> No major changes to public schools, the school day, or to the institutions of birth to five care accompanied this massive shift. Fifty years into leaving it up to families to figure it out, we see negative consequences for education, employment stability, and the quality of our labor force. Parents and caregivers are in crisis trying to find care so they can work to support their families.

### Supply and Demand

- Scott County is home to an estimated 1,743 children under age 6.<sup>3</sup> Of those, an estimated 1,117 live in households where all parents are in the labor force (that means the individual parent in a single parent household or both parents in a two-parent household).
- Scott County is home to about 340 slots of registered care for children birth to age 5.<sup>4</sup>
- 238 of the registered childcare slots in Scott County are Paths to QUALITY™ Level 3 or 4 (most of these in three or four year old classrooms at the public schools).<sup>5</sup>

- 69.6% of children birth to five can't be placed in registered childcare due to lack of supply (an estimated 777 kids).<sup>6</sup>

### Cost

The federal guideline for childcare affordability is that it should be no more than 7% of family income.

- The average weekly cost of infant care in Scott County is \$147 dollars. For that to be “affordable” for year-round care a family would need to earn more than \$105,000 per year.<sup>7</sup>
- Average annual costs of care for children under six range from \$6,442-\$7,350, that's 8.9%-9.9% of the median income for married couple families with children under 6. That means this average cost is unaffordable for more than half of Scott County families with children under 6.<sup>8</sup>
- The average cost of care does not cover the cost of providing quality care. Providers struggle to pay living wages and stay afloat. School-based programs are trying to figure out how to make the financial model work.<sup>9</sup>

Early care and education affects a wide range of youth and adult outcomes. Education affects employment which shapes income, which shapes health, mental health, and susceptibility to substance use concerns. Poor outcomes in these areas feed back into challenges in school, and the cycle continues.

Investments in high quality early care and education have been shown to reduce public spending on special education, juvenile justice, criminal justice, healthcare, and cash welfare.<sup>10</sup> Such savings paired with increased tax revenue resulting from higher earnings of today's families with children under six and future earnings of children who have quality birth to five care mean that government subsidies deliver a significant return on investment for the public trust.<sup>11</sup>

For employers, on-site care and subsidies to encourage use of high-quality care and ease the financial burden have been shown to increase the stability, reliability, and productivity of parenting

workers, improve the quality of jobs available in the early care and education sector, and improve the quality of the future labor force.<sup>12</sup>

Unfortunately, without significant support from government and employers, parents cannot afford to pay what it costs to deliver quality care. Interestingly, even when they can, many continue to make two problematic assumptions about childcare:

- 1) In-home care is always better than center-based care because it is closer to having mom at home with child (which remains the idealized model in our culture).
- 2) Very young children just need an adult or teenager available to keep them safe; what they do (or don't do) with the time has no lasting impact on the child.

These assumptions support the belief that child care should cost very little and that any in-home arrangement is better than sending a child to center-based care.

## Mental Models

Systems Thinking posits that the greatest leverage for social change lies in shifting mental models or paradigms.

### Current Mental Models

- The stay-at-home mom as the ideal for birth to five care means we see managing labor force participation of parents as a private trouble, not a social issue.
- A baby-sitter model that suggests a warm body that keeps a baby safe is all that is needed when parents are away in the first five years provides a foundation for low wage, low-skilled labor that is undervalued.
- We can't afford to spend more on early care and education. People tend to be more willing to pay to react to problems they can see rather than to direct resources to prevent them. This leads to low investment in healthy brain development and ever-increasing outlays to manage the consequences of failing to support healthy development.

## Strategic Action Plan: Community Education and Advocacy

**Public Education and Advocacy Campaign** to shift mental models and build the foundations necessary to support greater investment in increasing access to affordable high quality early care and education in Scott County.

### Goals

Shift the conversation around early care and education to one rooted in a clear understanding of the importance of birth to five and the potential returns on investments in increasing supply and access to affordable high-quality care.

Increase engagement in collaborative efforts that align resources to increase the supply of and access to high quality early care and education in Scott County.

### A New Paradigm

- Early care and education is very important work that requires knowledge of early child development neurobiology and best practices for supporting growth.
- Early care and education is an honorable and essential professional career path and should be treated as such.
- 90% of brain development occurs in the first five years of life. How we feed, care for, and engage infants and toddlers determines a great deal of what they will be able to do with their lives. It is in our interest as a society to invest in quality developmentally appropriate care.
- All of us—those with children and those without, need every member of each new generation to have the opportunity to reach their full potential. They will become part of our democracy, our economy, and someday their earnings and activities will support most of us financially and will care for us as we age.
- Investing in the success of people means not having to spend so much to respond to the challenges they face or the problems they cause when they fail. Spending on early care and education can reduce spending on

turnover, lower productivity, absenteeism, special education, juvenile justice, criminal justice, healthcare, and welfare.

- We need a stable, reliable and productive labor force. Parents of young children who are well cared for in a quality environment with qualified staff are better workers.
- Communities thrive when all of their people have strong healthy starts and an opportunity to thrive.

#### Potential Components

- ❖ Establish a core team that represents diverse stakeholders and sectors.
- ❖ Develop Core Message and Branding
- ❖ Develop strategic campaign plan with target audiences in mind: parents, employers, elected officials, community members who do not see themselves as having a direct tie to the issue.
- ❖ Execute community education and advocacy campaign that raises the profile of early care and education and shifts the conversation surrounding quality early care and education.

#### Possible plan elements:

- Hire a Communications/PR consultant to work with the team to develop a consistent core message and branding for the campaign that will be used throughout. That consultant can help guide the team through developing a plan.
- Use diverse social media channels in use in Scott County.
- Engage stakeholders and residents where they are—through organizations they already engage with and at their places of employment. These plans might include collaborating with various community coalitions, employers, HR professionals, the faith-based community, and schools.
- Bring speakers to the community: Heckman Institute or Harvard Center for the Developing Child, Tim Bartik from Upjohn Institute for Employment Research.

- Host workshops tailored to distinct target audiences.
- Facilitate neighborhood conversations.
- Organize community forums.
- Host library activities.

Activities will seek to shift mental models in the following areas:

- Build Understanding of Early Childhood Brain Development.

How we will know if we have succeeded:

- \* Employers invest in ECE and remain at the table as partners in addressing the issue.
- \* Provider participation in Professional Development opportunities (low cost and designed to make engagement doable for the ECE workforce).
- \* Parents/caregiver participation in programs to learn how to nurture brain development.
- \* Local parents, teachers, and leaders know that 90% of brain development occurs by age 5.
- Demonstrate how and why early care and education is a community concern, not simply a private family concern. Help people come to see that they have a stake in the issue too.

How we will know if we have succeeded:

- \* Employers invest in ECE and remain at the table as partners in addressing the issue.
- \* Participation in planning, building, and maintaining quality ECE system includes participation from nonprofits, government, and for profits across sectors.
- \* Older residents and those with no children will indicate support for increasing the supply of high-quality

care and improving families' access to that care.

- \* Schools, Prosser, Ivy Tech, IUS pipeline of ECE workers will be more fully elaborated and well connected to produce a quality labor force.
- Increase understanding and awareness around why, if so many people need childcare and want quality, we don't see the sector growing. Help people understand why early care and education is a public good and the issue cannot be solved by markets alone.

How we will know if we have succeeded:

- \* Conversations in local government include attention to the areas where the community may save money if they direct funds to ECE.
- \* More residents see ECE as a voting issue and participate in advocating for quality ECE with local, state, and federal government representatives.
- \* Increase in public dollars (at multiple levels) and mechanisms for supporting access to high quality care.

#### Strategic Action Plan: County Early Care and Education Director

The Director of Early Care and Education for the county will serve as backbone support for moving toward the goal of every child having access to high quality affordable childcare. The position will be piloted with the hope of developing a sustainable model for funding the position through a combination of public and private resources to reflect the ongoing need for coordination across sectors and the reality that high quality childcare is a public good from which private employers and the public trust enjoy significant benefit.

#### Goals

- Establish a cross sector committee to monitor and support the maintenance of a high quality ECE system in Scott County.

- Improve coordination of supports and services for families with children under age six.
- Provide manpower to facilitate and monitor ongoing activities in shifting mental models, improving system coordination, and developing the workforce pipeline for a system of high-quality early care and education.



#### Potential Responsibilities of a New Position

Coordinate and align public funding and resources, support from and to area employers, and the needs and resources of nonprofit providers to enhance access to high quality affordable care.

Provide communication, coordination, and administrative support to the workforce development pipeline and between that pipeline and area providers and resources for self-employment in the sector.

Connect families to Building Blocks and the network of providers and resources (both within and beyond ECE) through the lens of early childhood.

- Potential to join in referral networks that can share data to improve services to families.

How we will know if we have succeeded:

- A cross sector early care and education committee, including representatives from each piece of the workforce development pipeline, area employers, and owners/directors of ECE programs representing each type of provider will be established and meet at regular intervals to monitor progress in early care and education.
- Alignment of public and private resources will lead to annual increases in the portion of families with all parents working who are receiving childcare from a licensed provider.
- Increase in parent and young child enrollments in support services including but not limited to: public programs for food, housing subsidies, and healthcare and parents and children engaged with nonprofit support systems such as Cradle, LifeSpring and Centerstone behavioral health services, and parent education and support programs provided by Building Blocks.
- Increases and improvements in ability to track outcomes for young families and to understand referral follow-through and connection to outcomes (note: this may lead to use of new and different metrics for monitoring outcomes).

#### Strategic Action Plan: Build High Quality Early Care and Education Workforce Pipeline

Scott County already has high school programs that feed into the Prosser Early Childhood Program, which connects youth to the opportunity to earn a Child Development Associate's from Ivy Tech, which can also funnel people into a primary education degree at IU Southeast with a focus on early education. In addition, IU Southeast offers a Transition to Teaching program specifically focused on early care and education for those with a

bachelor's degree who want to shift career paths to work in early care and education.

#### Goal

- Professionalize the ECE career pathway.
- Increase the high quality ECE workforce (i.e. credentialed workers).
- Increase the number of people going into ECE with a clear understanding of the field as a career path with quality standards backed by scientific understanding of early childhood development and theories of learning and growth.
- Maximize Scott County's use of supports for building qualified ECE workforce (grants, scholarships, and access to provider benefits for employing credentialed ECE staff).

#### Potential Components

- Coordinate with Schneck Medical Center's baby-sitting certification and training to help young people identify and pursue career pathways in quality early care and education.
- Support ongoing professional development and continuing education opportunities through workshops provided by Building Blocks, Ivy Tech, and IU Southeast.
- Create a culture of and accessible structures for continuing education and professionalization of the early childhood education and care workforce.
- Provide support for pursuit of increases in Paths to QUALITY™ ratings.
- Provide support for maintenance of high Paths to QUALITY™ ratings and board certifications.

How we will know if we have succeeded (specific targets will need to be set by the Director of ECE and their Board):

- Increase number of high school youth pursuing the CTE.
- Increase number of high school youth enrolled in Prosser's Early Childhood program.
- Establish Prosser and Ivy Tech Early Childhood programs on site at Mid-

America Science Park to increase accessibility.

- Increase the supply of high-quality care in Scott County.
  - Increase the number and percent of licensed ECE providers in Scott County.
  - Increase the number and percent of ECE providers on Paths to QUALITY™ (PTQ).
  - Increase the number and percent of ECE providers with a PTQ Level 3 or 4 rating.

- Increase the number and percent of children under age 6 enrolled in licensed programs.
- Increase the number and percent of children under age 6 enrolled in PTQ Level 3 or 4 programs.
- Increases in kindergarten readiness outcomes (as measured by the Align Southern Indiana KR assessment already in use).



## Appendix A: Early Care and Education Listening Sessions

### Vision

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#### Broad System Level Outcomes

- Empower women.
- Economy and education prosper.
- Engaged community.
- Anyone who wants to work can work. Childcare concerns are not a barrier to work.
- High quality of life.

#### Access to high Quality Affordable Care

##### Access

- Supply.
- Universal access to preschool.
- Extended hours, 6 AM – 6 PM.
- Universal access to birth to five care.
  - 24-hour care available.
  - Care for special needs.
  - Sick-child care.
  - Flexibility in shifts.
  - Free childcare for all kids.

##### Quality

- Identify unlicensed providers and move to licensed.
- Reliable care with dependable staff.
- Assessment that drives decision-making on every level.
- Curriculum support for early learning.
- Healthy meals, food resources.
- Childcare with great outdoor spaces that are fun and safe.
- Daycare and preschool combined.
- Something other than devices, real life learning.
- Better playground equipment.
- Parental involvement.

##### Quality of Workforce in ECE

- Well paid staff.
- CCDF for all staff.
- Sufficient supply of qualified staff.
- Certification.
- Training for ECE teachers.
- Support to pay for child care expenses of childcare workers (passed legislature this year).

##### Safety

- Safe learning environment.
- Safe daycare.
- Appropriate amount of supervision per child.
- App for parents to check-in on their child.

- Expand safe sleep training/crib giveaway.

##### Affordability

- Financial support from state and local government.
- Additional funding sources.
- Affordable care regardless of income.

##### Kindergarten Readiness

- Set children up for success in school.
- Collaboration with K-12 to allow transition when time comes.
- Kids coming to kindergarten with an even level of knowledge regardless of income level.

##### Cradle to Career Investment in Development

- Resources for parents to be aware of and be able to do enriching activities to enhance their child's brain development.
- Community investment of dollars and knowledge.
- Invest in kids at an early age to in turn invest in future employees.
- Stronger adult outcomes from today's kids
- Early intervention.
- Positive social and emotional development.

##### Shifts in Organizational and Institutional Structures that support Residents, Families, and Healthy Happy Childhoods (Beyond just ECE)

- State policy for paid time off for taking care of children.
- Family stability and security.
- Community involvement.
- Well-known resources, therapists, OB/GYN, pediatrician, etc.
- Nursing care on staff.
- Parent night out events.
- Pediatrician in the county.
- One stop for all needs, i.e., childcare, resources, child development, medical and mental healthcare that is free for all.
- Mental health center with child visitation center in a big, friendly fun house with a playground and garden.
- A nice place to have birthday parties or family gatherings.
- Cultural events for children and families spread throughout the county.

- A mobile one step like library and other resources for families.
- 24-hour car seat distribution and education.
- Early childhood interaction training for parents.
- Daycare close to or in the same building as workplaces.
- Summer programs for preschool age.
- Transportation (free, not super long trips).

## Strengths/Assets

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### Social capital – community minded people

- Community is willing to take risks if it believes in and understands the benefits.
- Community willingness to help and engaged in the work.
- Strong, close-knit community.
- Can-do attitude from the community.

### Quality of Life & Place

- Cheaper housing.
- Available land.
- Location—close proximity to major highway, Louisville, and Indianapolis.

### Network of Organizations that Provide Infrastructure for Strong Community

- Non-profit engagement/non-profits work together.
- Scott County Community Foundation, especially the Early Childhood Committee.
- Collaboration with internal and external entities.
- Ongoing child and community assessment.
- Hospital.
- Health Department immunizations and car seat safety, 1/2 of babies enrolled in WIC.
- Good working relationship between agencies.
- Home visits.
- United Way.
- Youth Giving Circle.
- Ivy Tech training center at hospital.
- Active early childcare community with a strong desire to become even stronger in early learning childcare.
  - Tiny Treasures.
  - Building Blocks.
  - Head Start.
  - YMCA – great vision, feels the need and has the motivation to provide childcare and child programs for the community.
  - School based preschools in the county.
  - Quality care in a loving environment.

### Mental Models

- Awareness of and investment in early care and education.
- Parents are knowledgeable about child development.
- Respect for ECE.
- Expand safe sleep training/crib giveaway.

- Valid, reliable, strength-based curriculum.
- License PTQ and HSPS.
- Self-assessments, data driven decision making.
- ECE trained staff.
- ELA (Early Learning Academy).
- Centerstone Child & Family Services.
- Purdue Extension.
- USDA.
- Special services in schools.
- First Steps.
- Three public libraries.
- Dual credit programs.
- Schools focus on social/emotional needs in addition to academics.
- Faith-based community.
- CRADLE.
- Summer food program.
- After school programs (YMCA).
- Summer camp (YMCA).
- All day preschool at elementary schools (SCSD2).
- Free/reduced lunch and school supplies.

### Leaders

- Jaime Toppe.
- Younger community skipping up into leadership roles.
- Long-term Scott County residents in professional careers.
- Key stakeholders highly committed to driving change.
- Business leaders who are supportive of these efforts – school districts, Samtec, school on-site care.

### Mindset

- Willing to think outside the box.

### Physical Assets

- Vacant building near YMCA.
- MASP (Mid America Science Park).

- YMCA.
- Churches.

- Vienna-Finley area has open space.
- Health Department Building.
- Three public libraries

## Opportunities

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### *Broad Community Opportunities*

- Low quality Internet.
- Transportation.
- Increase household income and employment by investing in childcare.
- Early parenting: reducing early fertility can reduce child poverty and increase likelihood of parents being able to afford childcare.
- Don't have high paying jobs. Building workforce to attract higher paying jobs and pushing existing employers to pay living wages.

### *Wrap Around Support for residents, children, and families.*

- Lack of doctors, therapists, etc.
- Decrease food insecurity.
- Infant/toddler mental health.
- Affordable healthcare.
- No Planned Parenthood in SC.
- No pediatrician or OB in SC.
- Child mental health - need qualified and accessible child psychologists or therapists.
- Lack of child healthcare.

### *Gaps in Programming or Supply*

- Lack of after school options.
- Childcare space.
- Some children were not born here in Scott County so how do we reach new parents?
- Parents need social connections.
- Grant opportunities and support, language (purpose of the grant) and data needed.
- Coordinating enrollment in services
- Locations in rural areas.
- Infant care.
- Waiting lists with less than 8 week waits (supply).
- Church or community centers that offer childcare (supply).
- Employers offering childcare, perhaps through subsidies.
- Age-based youth groups.
- Boys and Girls Club – after school opportunities.
- Use CRADLE and Clearinghouse to connect new parents to programs and resources (Imagination Library).

- Better age range for preschool and early learning programs.
- Flexible hours.
- Existing care is not affordable for SC incomes. There is no "market" to expand quality care that no one can afford.
- Too few quality childcare slots.
- Market rate drives voucher amounts but this rate is also not paying for high quality care.
- Better quality childcare may attract more people to live and work in Scott County.
- Developing quality.
- Supply (spots for childcare).
- Incentive to offer quality ECE.
- Affordable care for newborn, infant, and toddler care.
- Need more capacity.
- Sick care.
- Care for children with special needs.

### *Resources*

- Funding, long term financial and people capital.
- Corporate and community buy-in.
- Lack of education on importance of early childhood care.
- On My Way PreK dollars & CCDF.
- Better facility = better care.
- Funding care for special needs kids.
- Ages 0-3 care, funding when service is not there.
- Diversifying funding streams.
- Needs assessment of business.
- Use the area behind the Health Department building for a bunch of offices to create a one-stop shop for resources.
- Find ways to reduce cost for quality care.
- College educated people who are not married are doing well, may not have kids yet.
- Transportation for families – especially for those with one car and working parent(s).
- Incentivize businesses to further their development so they can provide higher paying jobs and support childcare efforts.
- How to solve the funding problem so childcare center programs do not fail?
- Engage employers to support childcare facilities.

- Employers that focus on wellness could roll this kind of benefit (support their workers' kids) into the wellness focus.
- Local companies asked to contribute to everything, so it is hard to think of another need to give more.

#### *ECE Workforce Development*

- Training and education – potential for new childcare workers.
- Cost of requirements for staff – fingerprints, tuberculosis test, drug screens, background checks, etc.
- Building CTE at both high schools and potentially middle schools.
- Potential labor force.
- Collaboration with CTE at high school level.
- More CDA program offerings for high school students.
- Education and training of staff.
- Reimbursement for certification and training.
- Unemployment versus employment ratio may reflect women who aren't engaged in labor force at all but could be activated to work in ECE if it meant care for their own kids and support for their training and employment.
- Scottsburg High School wants to graduate kids with a CDA, but teachers need the certifications to teach the required classes and lack dual credit for Ivy Tech.
- Childcare while training.

#### *Mindset*

- Reluctance to change, feelings of NIMBY.

#### Data Discussion

- Noticing how high the poverty rate is in families with children under 5. How did that happen?
- What percentage of housing is rentals?
- Experiences can change mindsets and put change into action.
- Poverty is very noticeable in Scottsburg, especially at Scottsburg Elementary.

#### Big Ideas

##### *Education Campaign*

- Education campaign for parents, second education campaign for businesses/employers.
- Outlets/support for quality stay-at-home parenting.
- Advertise to the community.
- Incentive to engage this dialogue.

- Values – the babysitter mindset model is not ideal for child development.
- Reluctance to change.
- Spread the word of the need across the community.
- Building on the tendency of relationship-based motivation in the community.
- Need parents to want to do better with their kids.
- Shift mindset to children.
- Generational mindset (cohabitating) – grandma watches the kids.

##### *Community Education*

- Highlighting current high-quality providers in the county by local government.
- Entities could be involved in doctor/hospital/emergency room waiting rooms.
- Training and broader education, including all community members and age/life stages.
- Low labor force participation is an opportunity to provide healthcare, education, and training, especially for young mothers.
- ECE education for adults.
- How to market resources and provide information to the community?
- Education is key.
- Employers need data on the return on investment.
- Parents need to know what questions to ask.

- Male single householders with kids are less likely to be working than females.
- Incarcerated people are not included in household estimates.
- Average number of kids per family statistic?

- Parent coalition – help parents engage with each other and connect with the ECE committee.
- Parent programming.
  - Required.
  - Parent camp.
  - Incentive to get involved.
  - Marketing materials – education on importance of quality ECE.

- Go to local employer factories to have conversations and share information.

#### Broad Community

- Health Department addressing gaps in pediatric services – all-inclusive pediatric services in one site.

#### Mindset

- Redefine childcare culture.

#### Resources

- Streamline the voucher process and funding stream.
- Employers to reserve high quality childhood care spots, offer that as an employment benefit.
  - Subsidizing childcare costs.
- Small business development support.
- Churches provide more childcare.
- Wages for daycare workers so they want to work in childcare.
- Transportation.
- Methodist Church has a facility but no one to run the daycare.
- Funding for providers to acquire national board certifications.
- What do parents consider to be the ideal weekly cost for childcare?
- Vouchers – have enough available and get providers to accept them.
- “The resources aren’t there until they need them.”
- Local government responsibility.
- If Kids Place had thrived, what would the childcare situation look like today? What would be different?
- Can we build on lessons learned from Kids Place?
- Change: consistency of funding, demand.
- One-stop shop for resources.
- Funding support for providers.
- Need a building and an organization to operate a state-of-the-art high-quality center.
- Matching grants.
- Use existing trusted relationships and institutions.

#### Workforce Development

- Tie childcare to WFD.
- Post-secondary partnerships.
- Where to build the labor force?
- CDA for parents.

- Work force development is tied to childcare.
- Use the hospital for CPR training for babysitters and teens.
- Reimbursement for certification and make it well known, help keep facilities staffed.
- Use the money to have a satellite Prosser campus that has an ECE program that partners with the MASP or the ELA.

#### Supply, Facilities, & Programming

- Expansion of quality care facilities.
- Infant care for high school mothers so they can finish their schooling.
- Better and more accessible playgrounds.
- New or repurposed facilities for different age ranges.
- Full-day programs.
- Montessori.
- Quality and affordability – public and employee subsidies.
- Geographic coverage – putting facilities only in bigger towns like Scottsburg would make it more difficult for people in rural communities to commute to each place.
- Extended after care to match parent work schedule.
- As a community, create a childcare village for Scott County.
- Pop-up neighborhood activities.
- Parental engagement app.
- Better serve Hispanic population.
- Bilingual center.
- Special needs resources for early childhood.
- Care for special needs.
- Off-hours care.

#### ECE Coordinator Role

- Full time staff dedicated to ECE outreach.
  - Four to five positions.
  - Coordinator, liaison, case manager, information resource.
  - County-wide.

#### Employers

- Leverage employee needs to motivate businesses and employers to support childcare.
- Big companies can provide childcare for their employees.
- Incorporate ECE into general economic development.
- Employer subsidies.

## Challenges/Barriers to execute the Big Ideas

- Funding.
- Consistency.
- Staffing – number, quality, and people showing up.
- Challenge of serving families that have substance use disorder.
- If a new place similar to Kids Place comes around, how to make it mixed income to prevent stigma?

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<sup>1</sup> U.S. Bureau of Labor Statistics. 2023. *Women in the Labor Force: A Databook*. [https://www.bls.gov/opub/reports/womens-databook/2022/home.htm#:~:text=Women's%20labor%20force%20participation%20rate,previous%20year%20\(67.7%20percent\)](https://www.bls.gov/opub/reports/womens-databook/2022/home.htm#:~:text=Women's%20labor%20force%20participation%20rate,previous%20year%20(67.7%20percent)).

<sup>1</sup> United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S2301: Employment Status." Retrieved December 2023.

<sup>1</sup> United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2017-2021, Table B23008: Age of Own Children Under 18 Years in Families and Subfamilies by Living Arrangements by Employment Status of Parents." Retrieved November 2023.

<sup>1</sup> Data on ECEC supply and quality ratings are as of November 2023 and were provided by the region's Childcare Resource and Referral Agency, Building Blocks.

<sup>1</sup> Data on ECEC supply and quality ratings are as of November 2023 and were provided by the region's Childcare Resource and Referral Agency, Building Blocks.

<sup>1</sup> United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2017-2021, Table B23008: Age of Own Children Under 18 Years in Families and Subfamilies by Living Arrangements by Employment Status of Parents." Retrieved November 2023. Data on ECEC supply and quality ratings are as of November 2023 and were provided by the region's Childcare Resource and Referral Agency, Building Blocks.

<sup>1</sup> Based on author's calculations using data provided by Building Blocks.

<sup>1</sup> Based on author's calculations using data provided by Building Blocks and the American Community Survey.

<sup>1</sup> Based on listening sessions with local providers and widely cited and reported data on the childcare industry.

<sup>1</sup> Warner, Mildred E., and Susan Prentice. 2013. "Regional Economic Development and Child Care: Toward Social Rights." *Journal of Urban Affairs* 35(2): 195-217; Fry Konty, Melissa and Jonathan Harrison. 2008. *Child Care in Appalachian Kentucky: Financial sustainability in a low-income market*. Berea, KY: Mountain Association for Community Economic Development; Barnett, C.R. 1996. "Lives in the Balance: Age-27 Benefit-Cost Analysis of the High/Scope Perry Preschool Program." *Monographs of the High/Scope Educational Research Foundation: Number 11*.

<sup>1</sup> Warner and Prentice 2013; Heckman et al 2009; Fry Konty and Harrison. 2008; Barnett, C.R. 1996; Karoly, Lynn A. M. Rebecca Kilburn, and Jill S. Cannon. 2005. *Early Childhood Interventions: Proven Results, Future Promise*. Santa Monica, CA: RAND; Prichard Committee. 2007. "Strong Start Kentucky: Investing in Quality Early Care and Education to Ensure Future Success."; Warner, Mildred et al. 2004. *Economic Development Strategies to Promote Quality Child Care*. Ithaca, NY: Department of City and Regional Planning Cornell Cooperative Extension; Regiontrack 2015; Temple, Judy A. and Arthur J. Reynolds. 2006. "Benefits and Costs of Investments in Preschool Education: Evidence from the

Child-Parent Centers and Related Programs." *Economics of Education Review* 26(1): 126-144.

<sup>1</sup> Stevens, Katharine. B. 2017. *Workforce of Today, Workforce of Tomorrow: The Business Case for High-Quality Childcare*. Washington, D.C.: U.S. Chamber of Commerce Foundation Center for Education and Workforce; Shellenback, Karen. 2004. *Child Care & Parent Productivity: Making the Business Case*. Ithaca, NY: Cornell University Department of City and Regional Planning; Herbst, Chris M. 2010. "The Labor Supply Effects of Child Care Costs and Wages in the Presence of Subsidies and the Earned Income Tax Credit." *Review of Economics of the Household*, 8(2): 199-230. Hipp, Lena, Taryn W. Morrissey, and Mildred Warner. 2017. "Who Participates and Who Benefits from Employer Provided Child-Care Assistance?" *Journal of Marriage and Family* 79(June): 614-635.



## Demographics

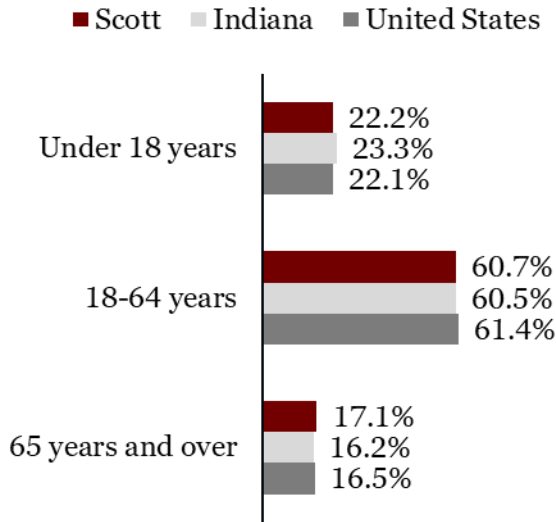
**Estimated Population: 24,403**

**50% Female**

**50% Male**

**7.6% Veterans (1,448)**

Figure 1: Age



Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S0101: Age and Sex." Retrieved December, 2023 from <https://data.census.gov/table?q=s0101&g=050XX00US18143>.

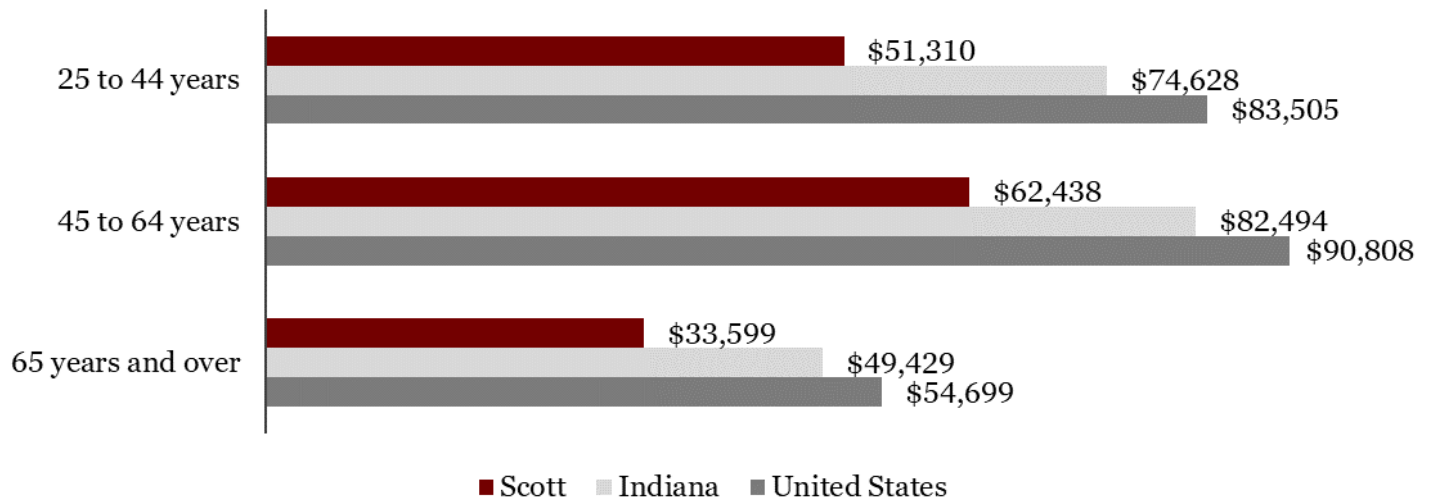
Figure 2: Race, Ethnicity & Language

	Scott County	IN	US
White alone	94.7%	80.0%	65.9%
Black or African American alone	0.2%	9.4%	12.5%
Some Other Race alone	1.3%	5.5%	12.8%
Two or More Races	3.9%	5.1%	8.8%

Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table DP05: Demographic and Housing Estimates." Retrieved January, 2024.

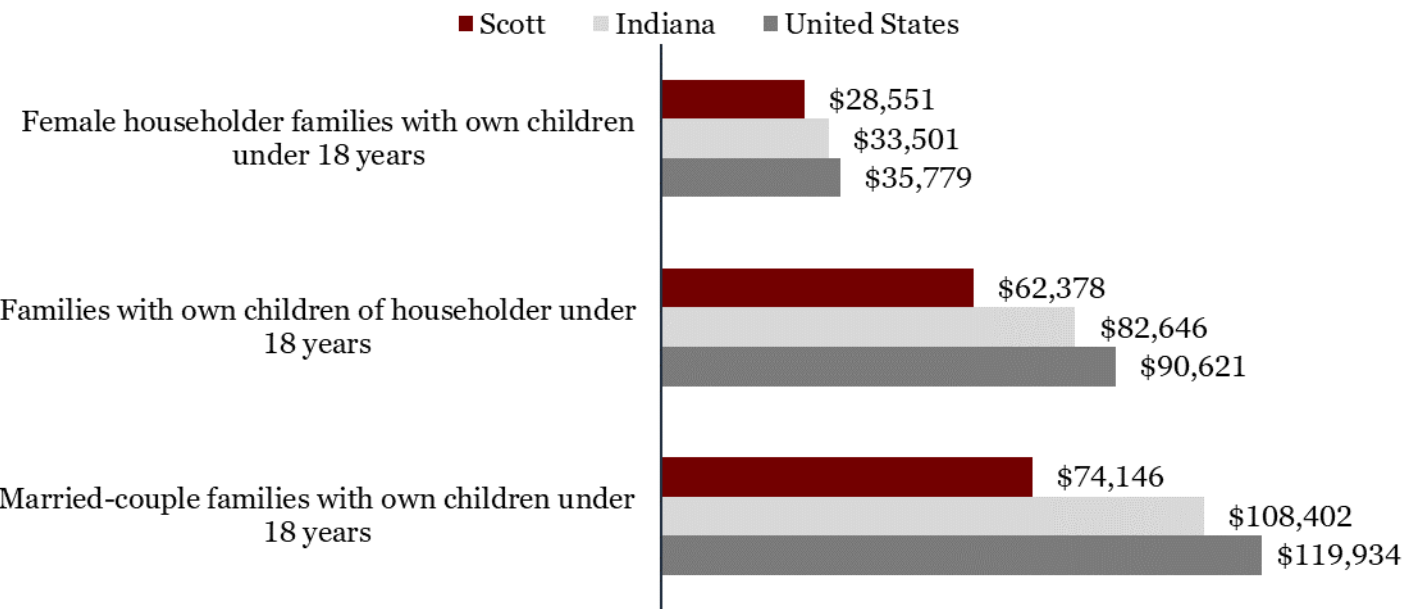
## Economy

Figure 3: Median Household Income by Age of Householder



Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S1903: Median Income in the Past 12 Months." Retrieved December, 2023.

Figure 4: Median Household Income by Family Type



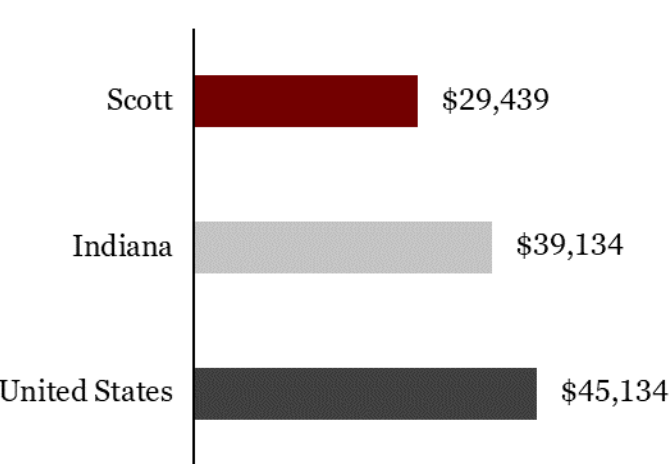
Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S1903: Median Income in the Past 12 Months." Retrieved December, 2023.

Figure 5: Per Capita Income and Median Household Income, 2018-2022

	Scott County	Indiana	United States
Per capita income in the past 12 months (in 2022 inflation-adjusted dollars)	\$26,506	\$35,578	\$41,261
Median Household Income (dollars)	\$49,343	\$67,173	\$75,149

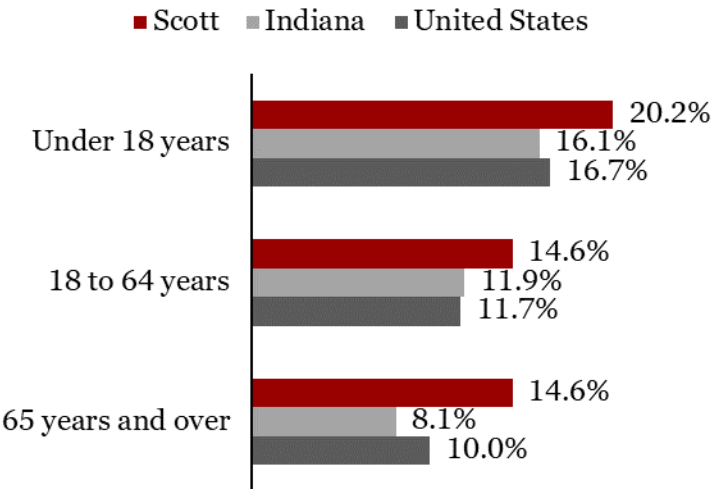
Source: United States Census Bureau. "Table B19301: Per Capita Income in the Past 12 Months" and "Table S2503: Financial Characteristics." ACS 5-Year Estimates 2018-2022. Retrieved December, 2023 from data.census.gov.

Figure 6: Median Individual Earnings



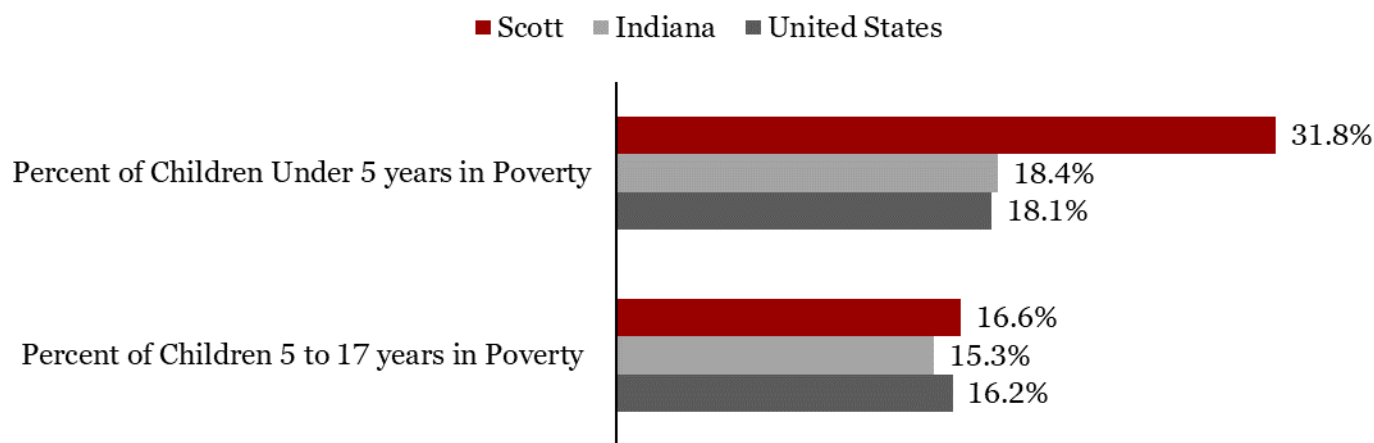
Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S2001: Earnings in the Past 12 Months." Retrieved December, 2023.

Figure 7: Poverty Rate by Age



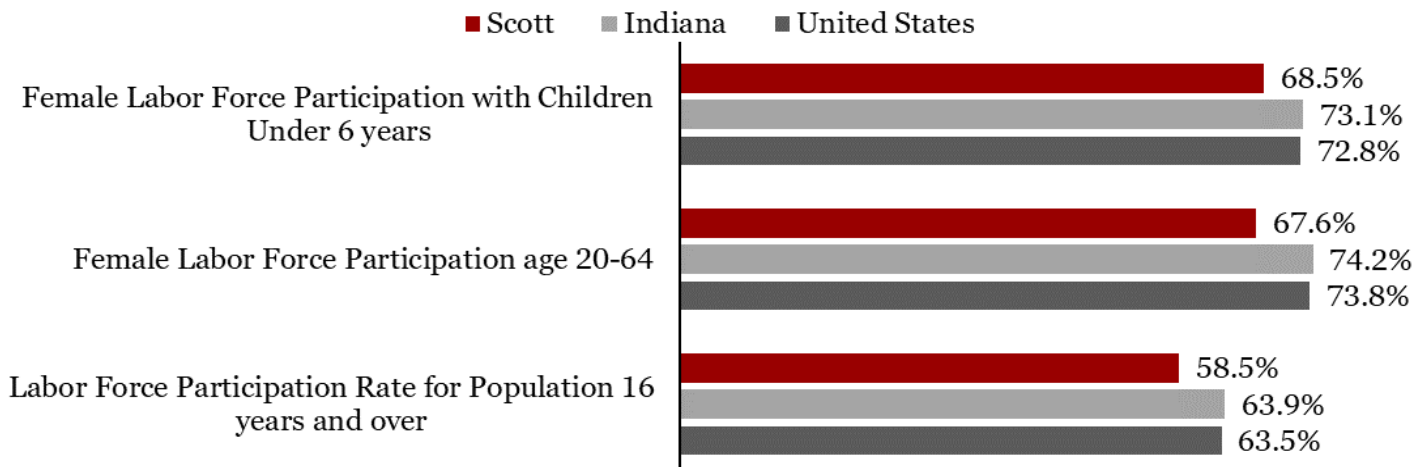
Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table 1701: Poverty Status in the Past 12 Months." Retrieved December, 2023.

Figure 8: Economic Indicators of Family Well-Being



Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S1701: Poverty Status in the Past 12 Months." Retrieved December, 2023.

Figure 9: Labor Force Participation



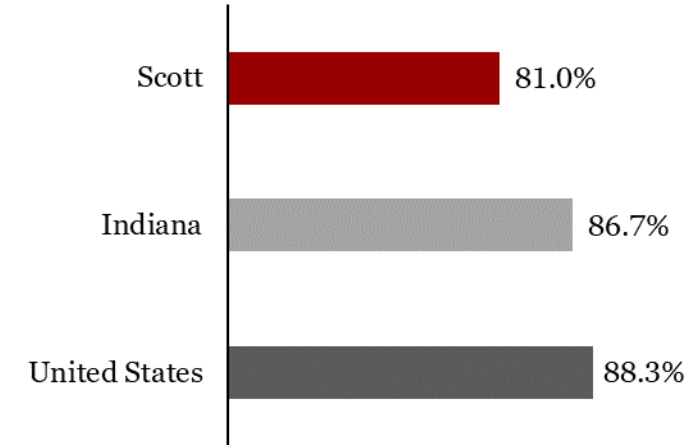
Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S2301: Employment Status." Retrieved December, 2023.

Figure 10: Firms, 2017-2021

Employer and Non-Employer Firms 2017-2021	
All employer firms, Reference year 2017 (most recent available data)	389
Men-owned employer firms, Reference year 2017 (most recent available data)	239
Women-owned employer firms, Reference year 2017 (most recent available data)	33
Total employer establishments, 2021	396
Total non-employer establishments, 2021	1,210

Source: United States Census Bureau. 2023. "QuickFacts: Scott." Retrieved February, 2024 from <https://www.census.gov/quickfacts/fact/table/scottcountyindiana/PST045223>; \_\_\_\_\_. 2021 Non-employer Statistical Series. Table NS2100NONEMP.

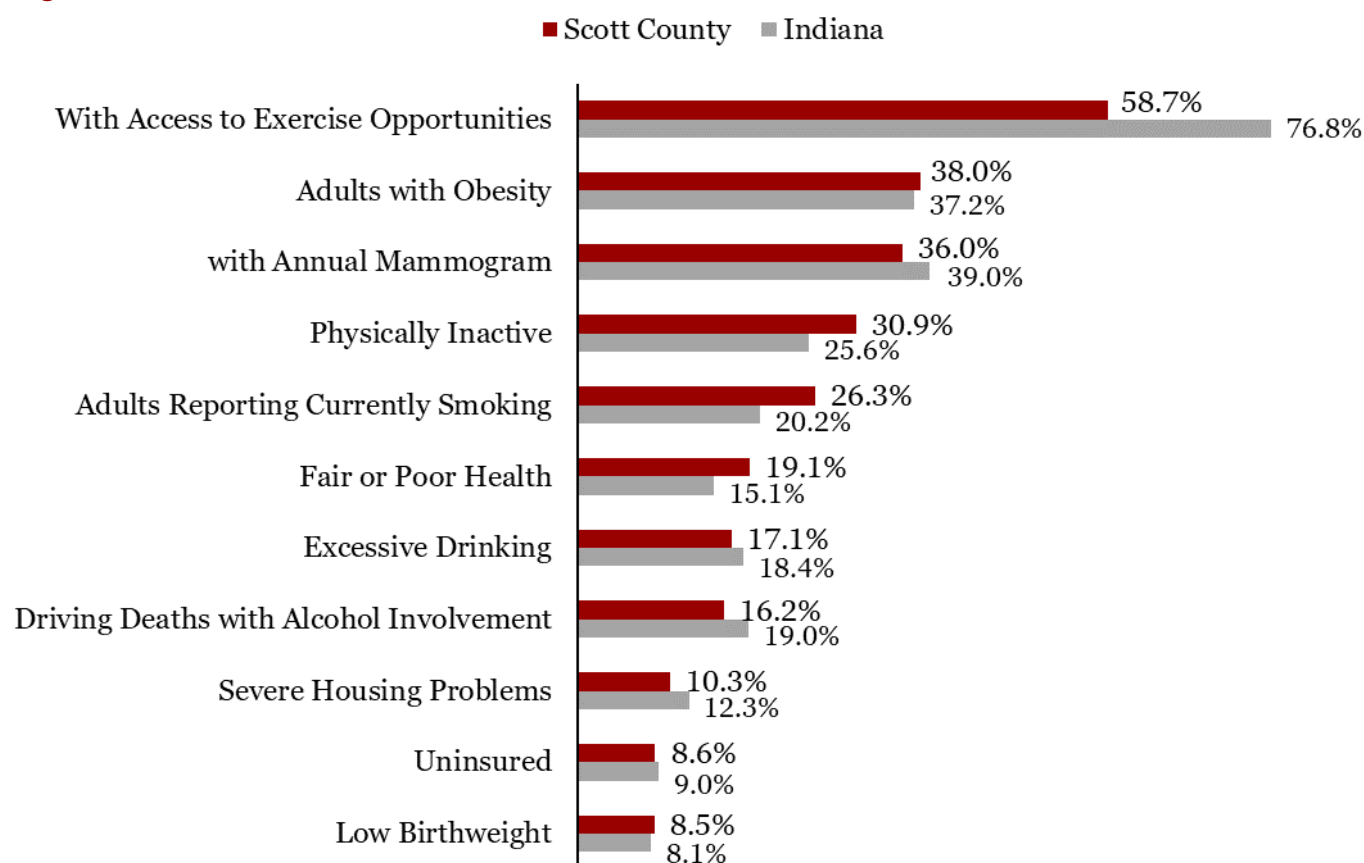
Figure 11: Computer & Internet Access



Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S2801: Types of Computers and Internet Subscriptions." Retrieved December, 2023.

# Health and Wellness

Figure 12: Health Indicators



Source: County Health Rankings and Roadmaps. 2023. "Scott, IN." Retrieved December, 2023 from <https://www.countyhealthrankings.org/explore-health-rankings/indiana/Scott>.

Figure 13: Additional Health Indicators

	Scott County	IN
<b>Injury Death Rate (per 100,000)</b>	142	85
<b>Teen Birth Rate (per 1,000)</b>	43	23
<b>Average daily particulates (ppm)</b>	8.7	8.8
<b>Food Environment Index (0 worst, 10 best)</b>	6.4	6.5
<b>Average number of mentally unhealthy days (in past 30 days)</b>	5.5	4.9
<b>Average number of physically unhealthy days (in past 30 days)</b>	4.2	3.3
<b>Preventable Hospitalization Rate (per 100,000)</b>	4982	3174

Source: County Health Rankings and Roadmaps. 2023."Scott, IN." Retrieved December, 2023 from <https://www.countyhealthrankings.org/explore-health-rankings/indiana/scott?year=2023>.

Figure 14: County Health Rankings

Scott County's Rank out of 92 Indiana Counties	
<b>Health Outcomes</b>	92
<b>Length of Life</b>	91
<b>Health Factors</b>	91
<b>Social &amp; Economic Factors</b>	90
<b>Health Behaviors</b>	89
<b>Quality of Life</b>	89
<b>Clinical Care</b>	83
<b>Physical Environment</b>	19

Source: County Health Rankings and Roadmaps. 2023. "Indiana." Retrieved December, 2023 from <https://www.countyhealthrankings.org/explore-health-rankings/indiana?year=2023&tab=1>.

Figure 15: Opioid Dispensations per 1,000 in 2022

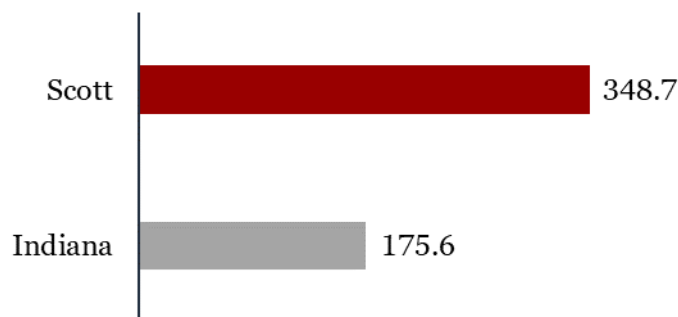
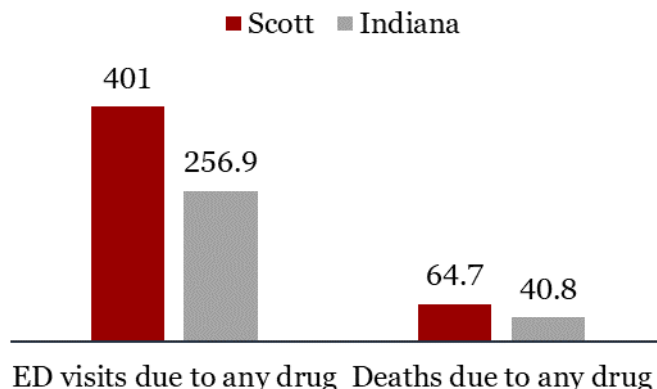


Figure 16: ED Visits and Deaths due to Any Drug per 100,000 in 2022



Indiana Department of Health. 2024. "Indiana Drug Overdose Dashboard." Retrieved February 2024 from <https://www.in.gov/health/overdose-prevention/overdose-surveillance/indiana/>.

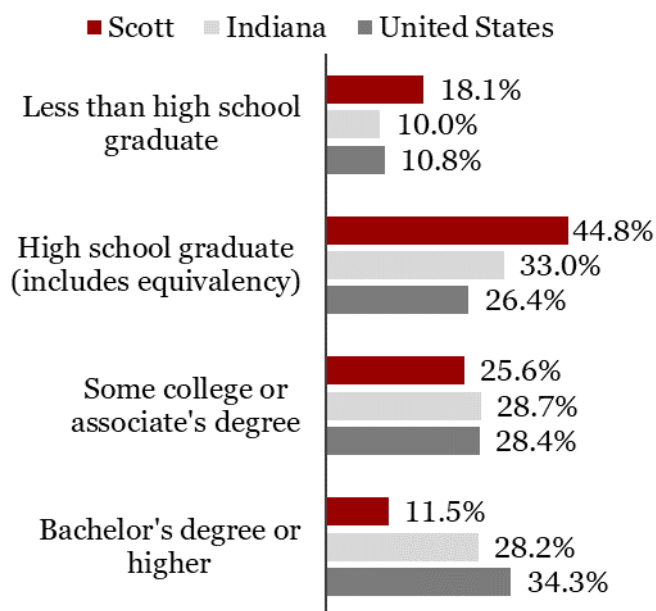
Figure 18: County Response Programs and Top Opioids Dispensed

	Scott	Indiana
County Response Programs	Overdose Response Project, Overdose Fatality Review Team, LHD Naloxone County, Non-Syringe Harm Reduction Program, IN CAREs ECHO	Overdose Response Project, Overdose Fatality Review Team, LHD Naloxone County, Syringe Exchange, IN CAREs ECHO, Non-Syringe Harm Reduction Program, First Responder naloxone County
Top opioids dispensed	acetaminophen, hydrocodone (2,595); buprenorphine, naloxone (2,784)	No data on state level

Indiana Department of Health. 2024. "Indiana Drug Overdose Dashboard." Retrieved February 2024 from <https://www.in.gov/health/overdose-prevention/overdose-surveillance/indiana/>.

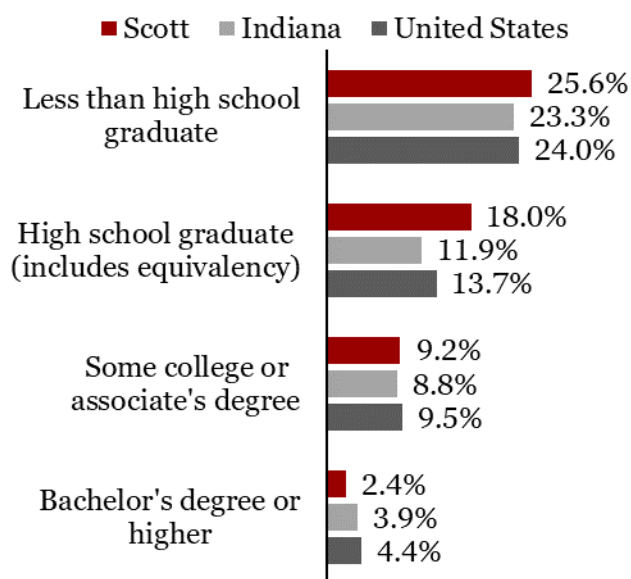
## Education

Figure 15: Educational Attainment



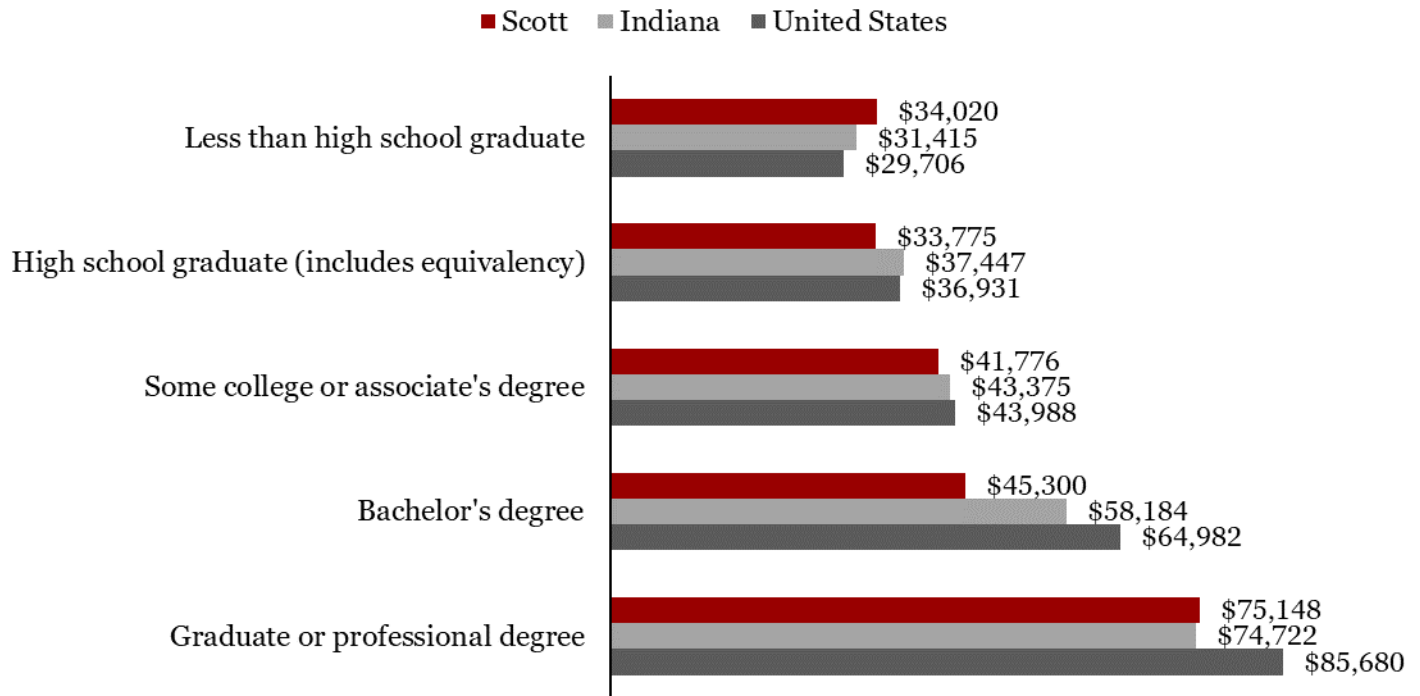
Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S1501: Educational Attainment." Retrieved December, 2023.

Figure 16: Poverty Rates by Education Level



Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S1701: Poverty Status in the Past 12 Months." Retrieved December, 2023.

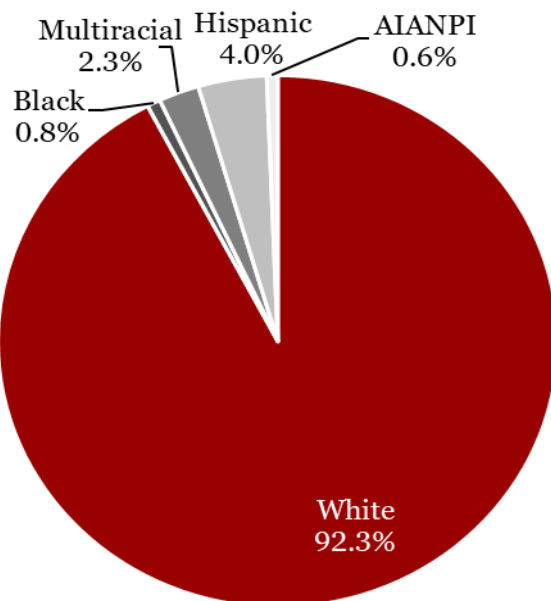
Figure 17: Median Individual Earnings by Education Level



Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S2001: Earnings in the Past 12 Months." Retrieved December, 2023.

## Public Schools

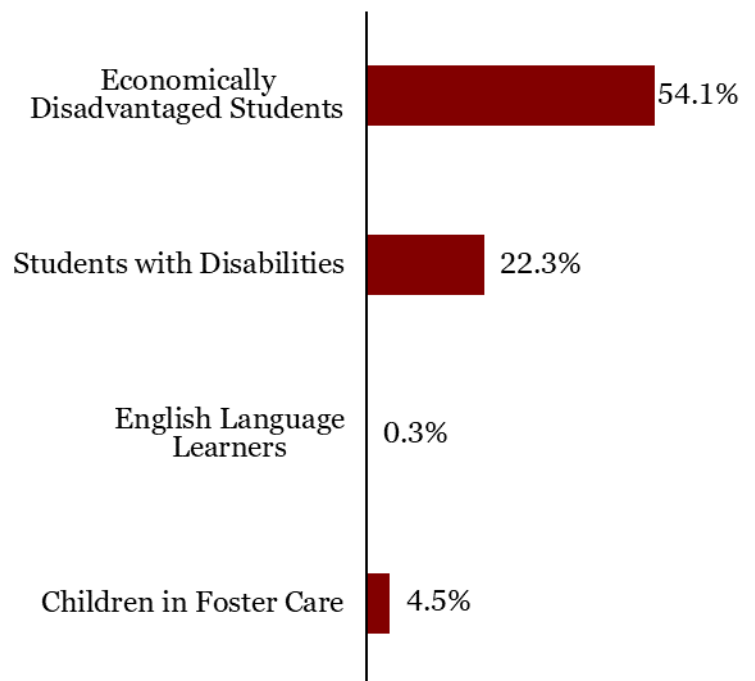
Figure 18: Racial Composition of Student Population



AIANPI = American Indian and Alaskan Native, Asian, and Hawaiian or other Pacific Islander

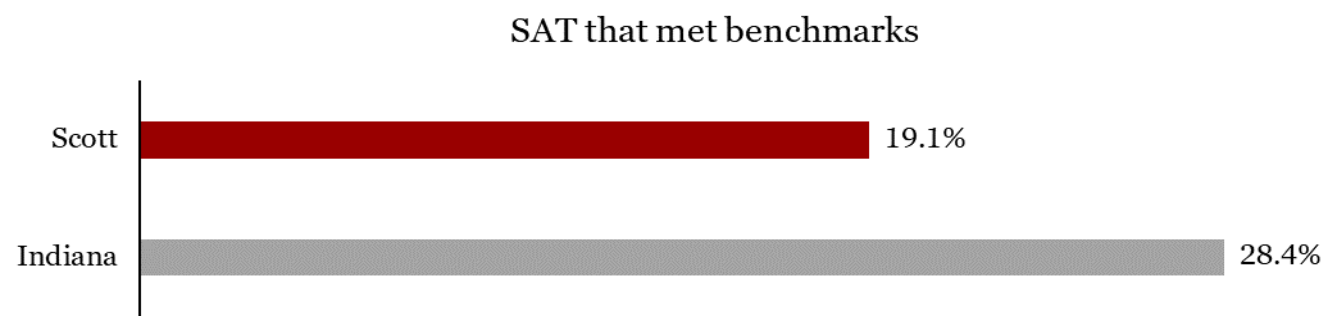
Source: Indiana Department of Education. 2023. "Data Center and Reports, Corporation Enrollment by Ethnicity and Free/Reduced Price Meal Status." Retrieved January, 2024 from <https://www.in.gov/doe/it/data-center-and-reports/>.

Figure 19: Student Characteristics



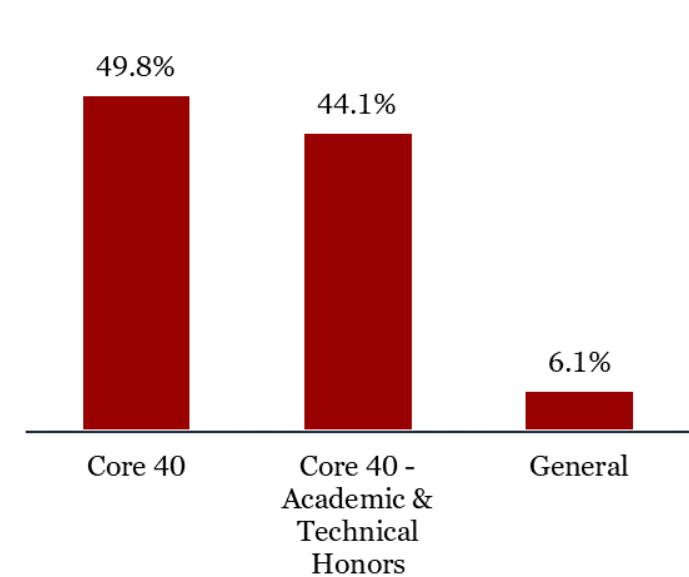
Source: Indiana Department of Education. 2023. "Data Center and Reports." Retrieved January, 2024; and Indiana Youth Institute. 2023. "Interactive County Dashboard." Retrieved January, 2024.

Figure 20: Percent of Students who took SAT that met College and Career Readiness Benchmarks, as Measured by SAT



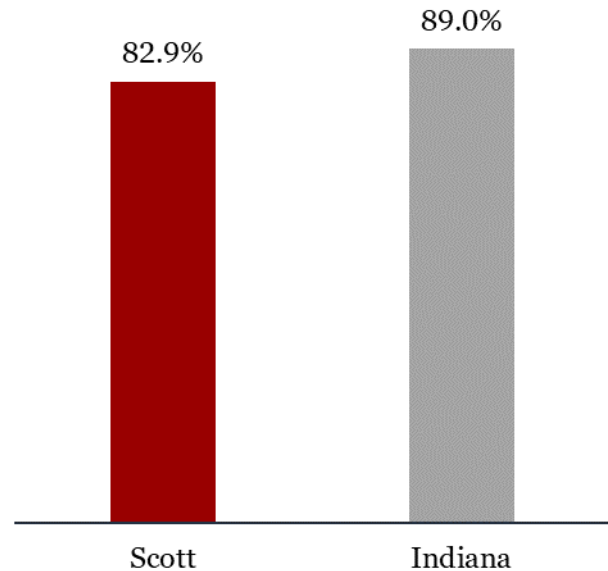
Source: Indiana Department of Education. 2022. “Data Center and Reports, SAT Grade 11 Corporation Results.” Retrieved January, 2024.

Figure 21: Percent of Students Graduating with Each Diploma Type



Source: Indiana Department of Education. 2023. “Indiana Graduates Prepared to Succeed (GPS).” Retrieved January, 2024 from <https://indianagps.doe.in.gov/>.

Figure 22: Overall 4-Year Graduation Rate



Source: Indiana Department of Education. 2023. “Indiana Graduates Prepared to Succeed (GPS).” Retrieved January, 2024 from <https://indianagps.doe.in.gov/>.

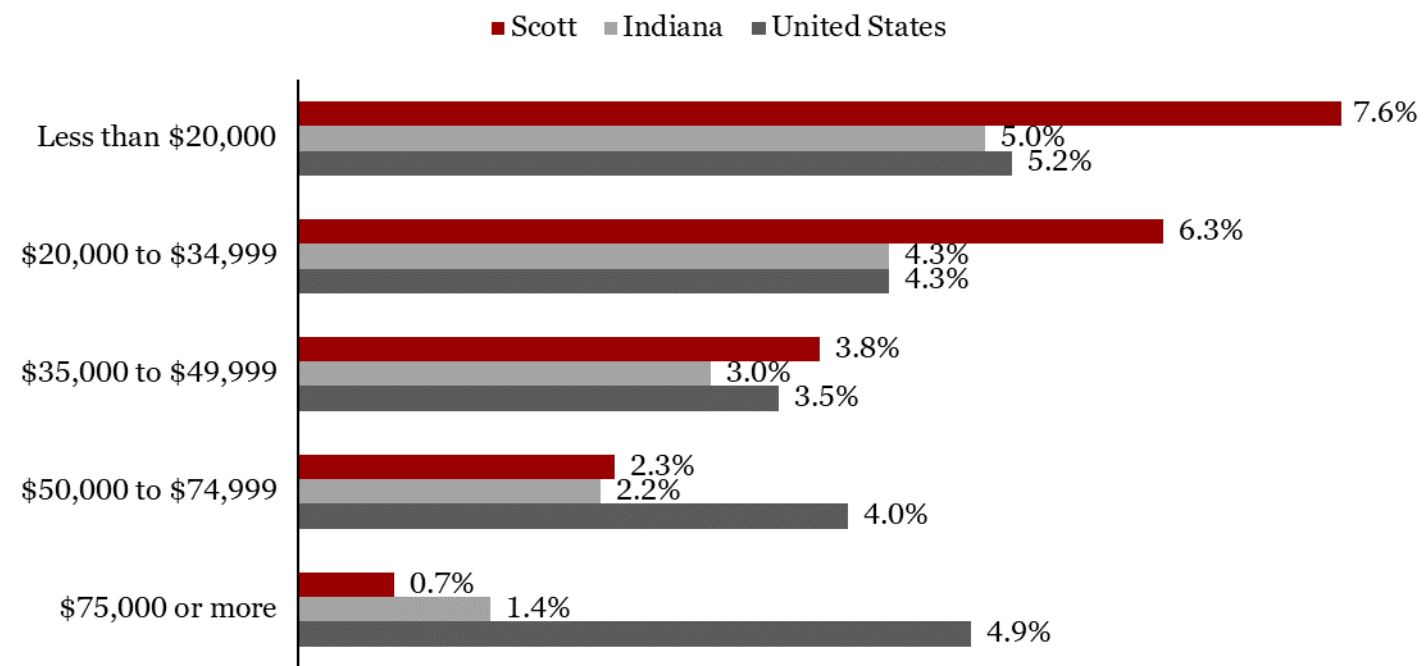
## Housing

Figure 23: Housing Ownership and Value

	Scott County	IN	US
Owner-occupied housing unit rate, 2018-2022	70.0%	70.1%	64.8%
Median value of owner-occupied housing units, 2018-2022	\$137,200	\$183,600	\$281,900

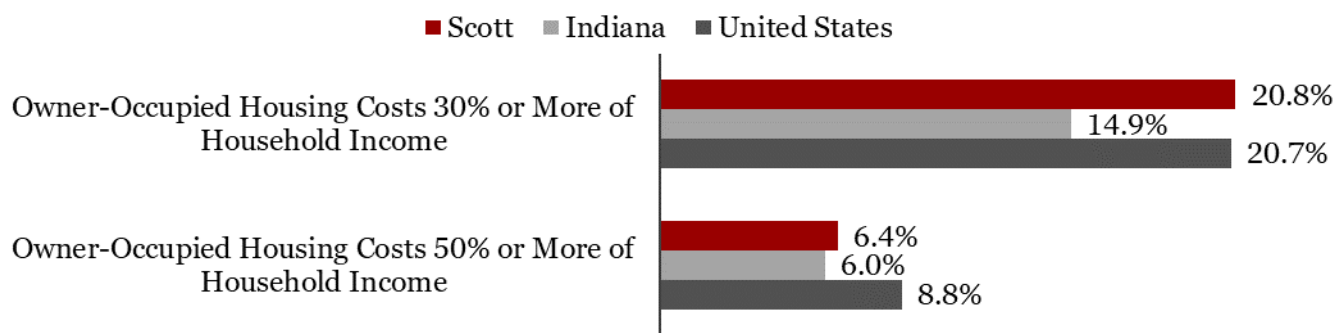
Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table B25077: Median Value." Retrieved January 2024; and United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S1101: Households and Families." Retrieved January, 2024.

Figure 24: Percent of owner-occupied households (with a mortgage) that spend 30% or more of monthly income on housing costs



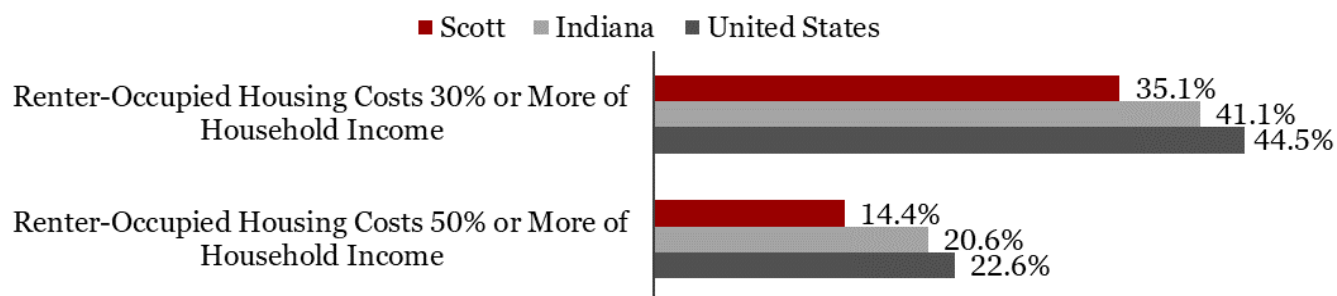
Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table S2503: Financial Characteristics." Retrieved December, 2023.

Figure 25: Housing Cost Burden for Owner-Occupied Units



Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table B25140: Housing Costs as a Percentage of Household Income in the Past 12 Months." Retrieved December, 2023.

Figure 26: Housing Cost Burden for Renter-Occupied Units

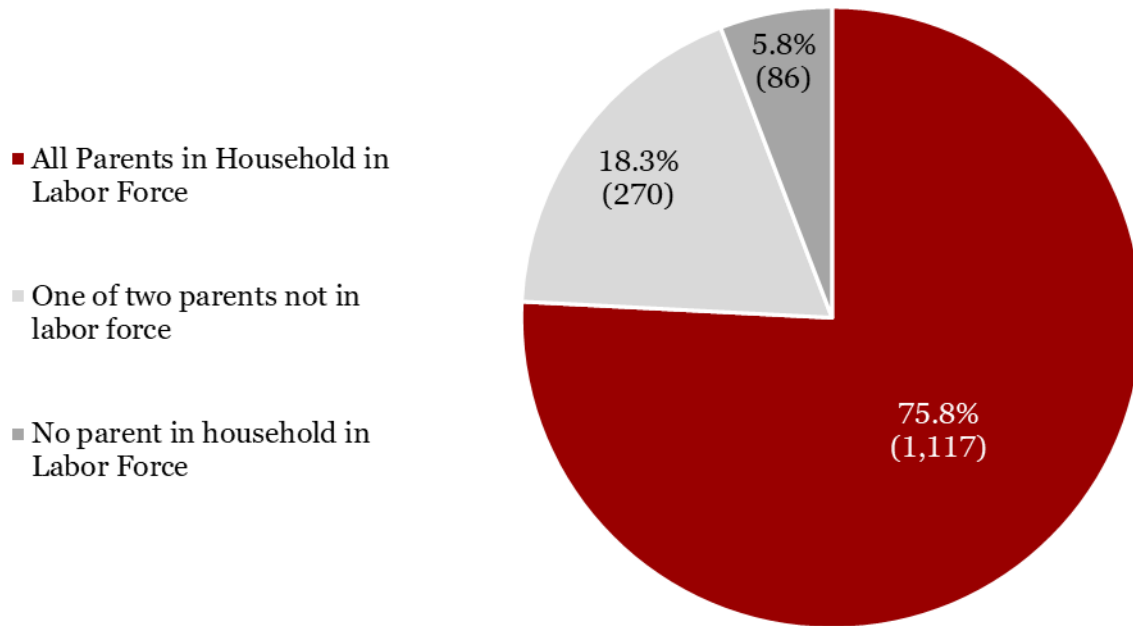


Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2018-2022, Table B25140: Housing Costs as a Percentage of Household Income in the Past 12 Months." Retrieved December, 2023.

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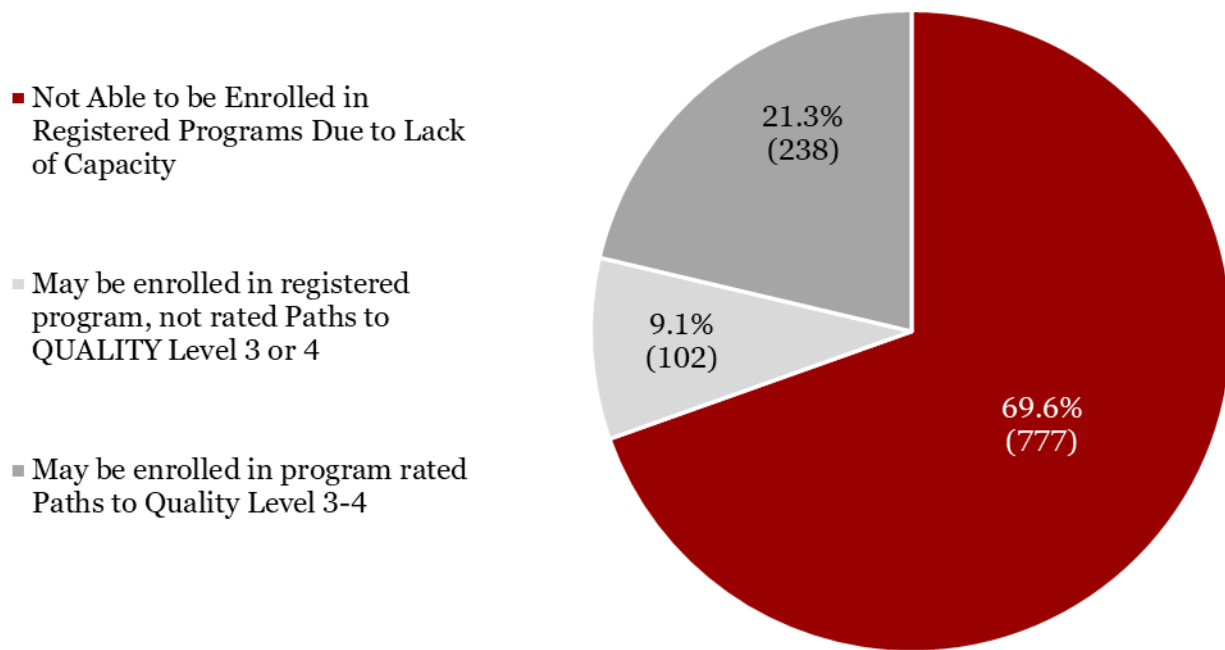
## Early Childhood Education and Care

Figure 27: Children Under 6 by Labor Force Participation of Parents in Household (N=1,743)



Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2017-2021, Table B23008: Age of Own Children Under 18 Years in Families and Subfamilies by Living Arrangements by Employment Status of Parents." Retrieved November 2023.

Figure 28: Children Under 6 with All Parents in Household in Labor Force (N=1,117)



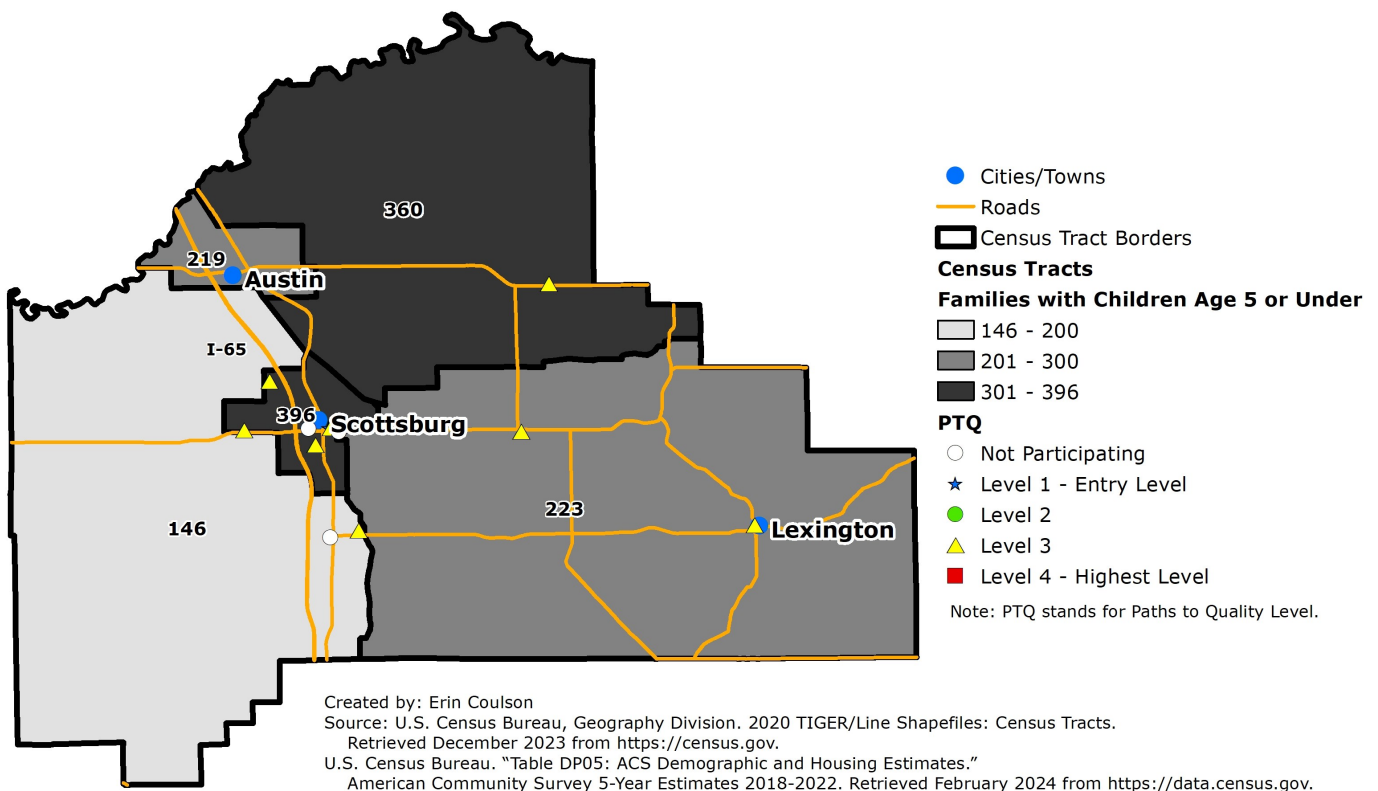
Source: United States Census Bureau. 2023. "American Community Survey 5-Year Estimates 2017-2021, Table B23008: Age of Own Children Under 18 Years in Families and Subfamilies by Living Arrangements by Employment Status of Parents." Retrieved November 2023. Data on ECEC supply and quality ratings are as of November 2023 and were provided by the region's Childcare Resource and Referral Agency, Building Blocks.

Figure 29: Average Weekly Cost of Care by Age & Income at Which Cost is Affordable

	Average Weekly Cost	Annual Cost (50 weeks)	Income at Which the Cost is Considered "Affordable Child-care"
<b>Infant (6 weeks - 12 months)</b>	\$147.00	\$7,350.00	\$105,000.00
<b>Toddler 1 (12-23 months)</b>	\$138.00	\$6,900.00	\$98,571.43
<b>Toddler 2 (24-35 months)</b>	\$136.33	\$6,816.67	\$97,380.95
<b>Preschool (3 Years)</b>	\$128.83	\$6,441.67	\$92,023.81
<b>Pre-K (4-5 Years)</b>	\$128.83	\$6,441.67	\$92,023.81
<b>School-Age Full Day (Kindergarten+)</b>	\$114.00	\$5,700.00	\$81,428.57
<b>School-Age Before and After Care (Kindergarten+)</b>	\$86.40	\$4,320.00	\$61,714.29

Source: Average costs provided by Building Blocks, the region's childcare resource and referral agency. Note: Affordability based on federal guideline that household should spend no more than 7% of income on childcare.

Figure 30: Families with Children Age 5 or Under in Scott County, Indiana



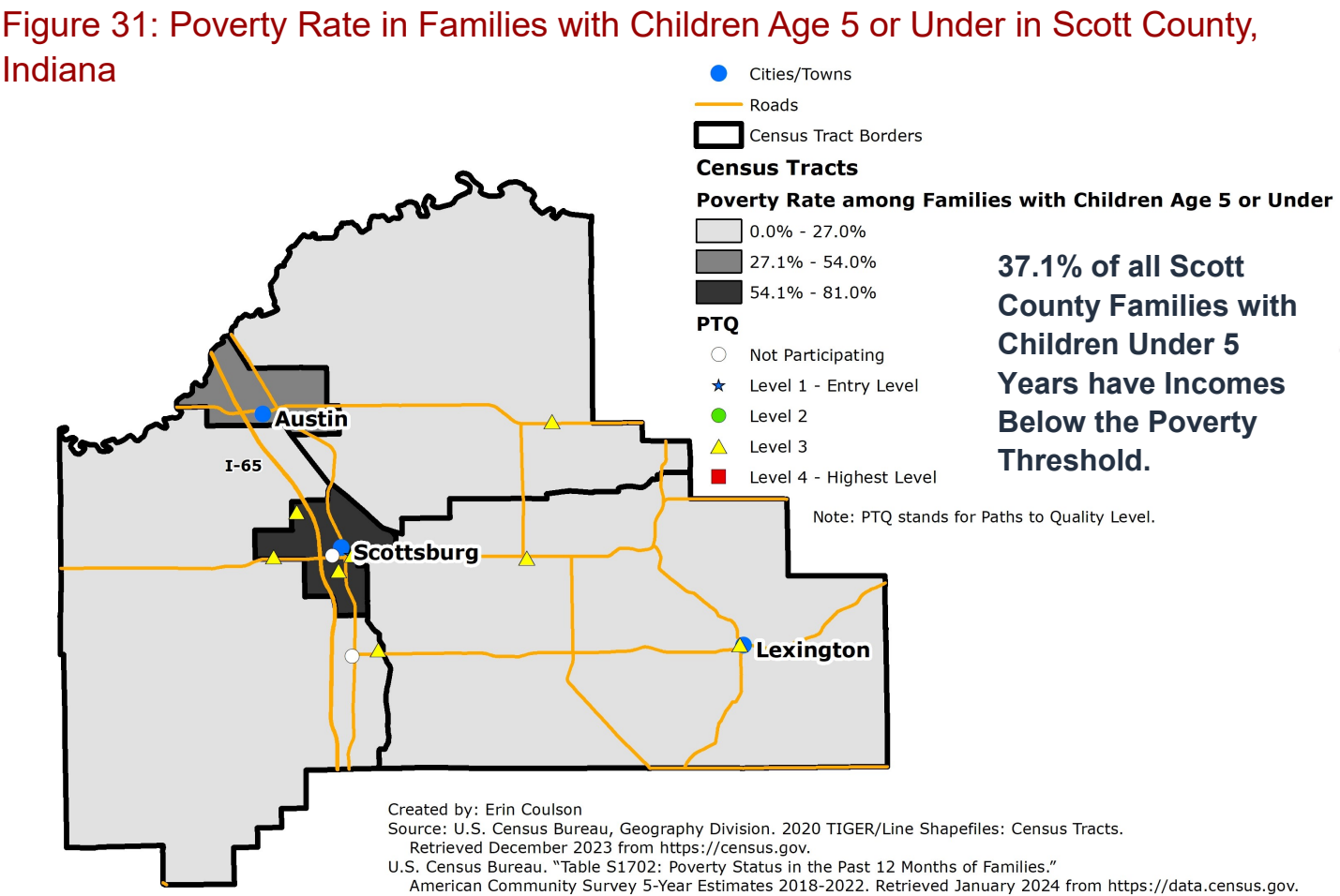
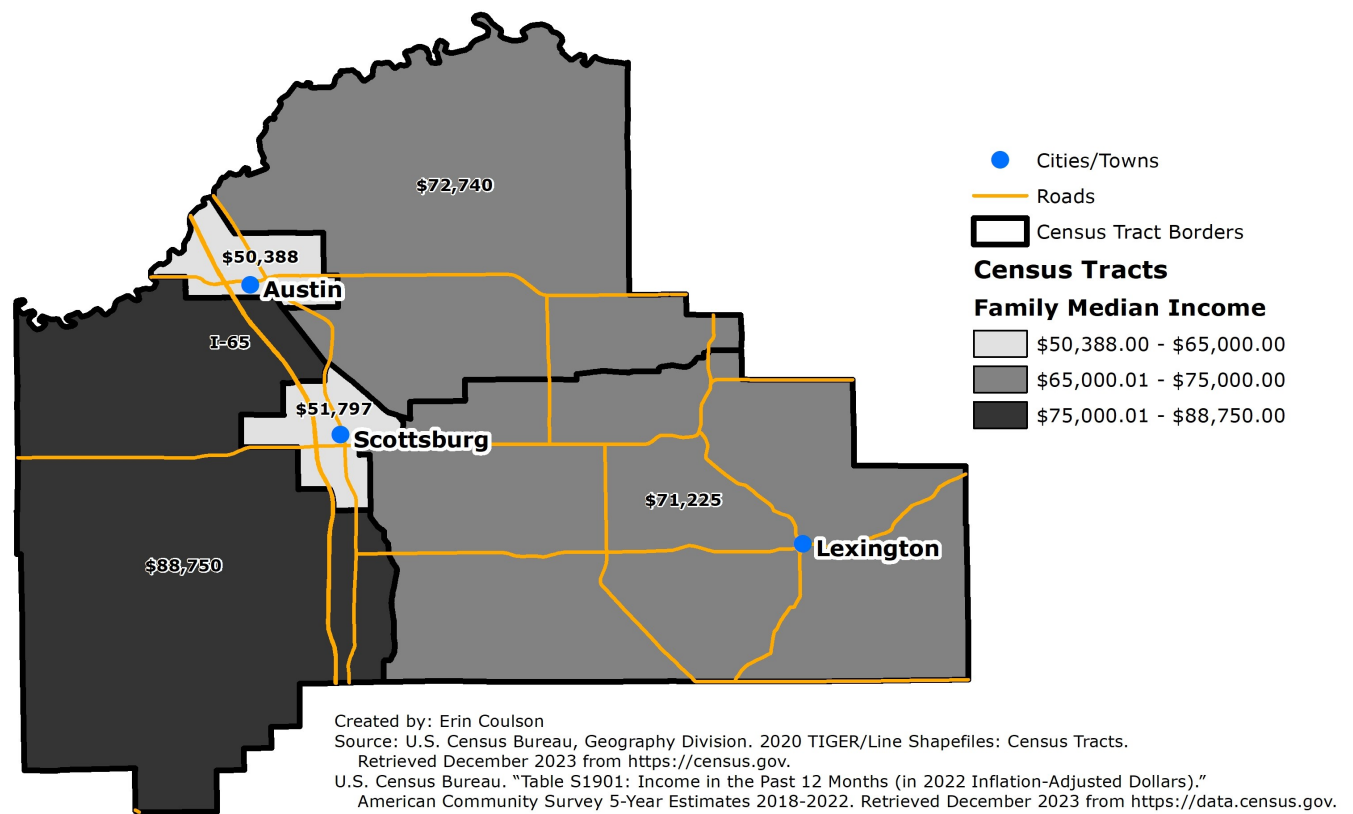


Figure 32: Median Household Income in Scott County, Indiana





## *GIFT VIII*



Scott County  
Community Foundation

[www.scottcountyfoundation.org/](http://www.scottcountyfoundation.org/)



**APPLIED RESEARCH AND  
EDUCATION CENTER**

**INDIANA UNIVERSITY SOUTHEAST**