



**Healthy Start Sustainability Survey:
Executive Summary**

**Healthy Start Field Office
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Introduction

All past and current Healthy Start grantees were asked to participate in a survey, with the goal of providing stakeholders with information regarding sustaining Healthy Start support services. The survey was requested by the California Department of Education and was developed, administered and analyzed by the Healthy Start Field Office, University of California, Davis. The following report is a summary of key findings.

Data Collection and Analysis

The request to complete the on-line survey was sent out on the Healthy Start Listserv, through Regional Network Leads, and to the grantee e-mail list maintained by the California Department of Education. Healthy Start has funded a total of 1470 grants (823 planning and 647 operational since its inception). A total of 150 completed surveys were returned, for an estimated response rate of 18-23%¹. *Zoomerang*, an online survey software program, was used to collect and analyze data.

A number of respondents elected not to provide information that would allow determination of the cohort in which they were funded or the service region in which they are located. Therefore, it is not possible to provide a complete demographic analysis. Based on the information that was supplied, surveys were received from each of the eleven Healthy Start Network regions and from each of the twelve Healthy Start cohorts (see following tables for breakdown).

Number of responses from each Healthy Start Network region.

Region	1	2	3	4	5	6	7	8	9	10	11
#	11	3	8	10	5	10	8	16	22	6	28

Number of responses from each Healthy Start cohort.

Cohort	1	2	3	4	5	6	7	8	9	10	11	12
#	6	6	8	9	8	9	12	15	21	24	6	4

Summary of Key Findings

The results of this survey suggest there are Healthy Start collaboratives that are sustaining, in that they are meeting Healthy Start goals and Elements of Success, as well as continuing to provide services commonly associated with child and family support. The actual number of grantees who have sustained is not clear from this field study. It does appear that, with few exceptions, even those sites considering themselves as successful face numerous barriers and are less able to provide services to children and families than they were when they received Healthy Start funding. Suggestions to ensure sustainability include the need to maintain a focus on key

¹ This is an estimate based on the number of Healthy Start planning and operational grants. Distribution via Listserv and e-mails may not have reached all grantees (e.g., e-mail accounts not all valid, no longer a contact person at site). Grantees must have had a planning grant prior to receiving an operational grant.

strengths of the program, establishing and maintaining relationships with collaborative partners, providing adequate staff resources to coordinate efforts, and working to ensure that the program and services provided impact the youth and families being supported.

1) Collaboratives are meeting the three Healthy Start goals. At least 90% percent of respondents indicated that they were making “good progress” or “partial progress” in meeting the three Healthy Start goals: 1) ensuring that each child receives the physical, emotional, and intellectual support that he or she needs; 2) helping schools and other child and family-serving agencies to recognize, streamline, and integrate their programs to provide more effective support to children and their families, and 3) building the capacity of students and parents to be participants, leaders, and decision-makers in their communities. Ten percent or less of respondents indicated that they had made “little or no progress” in meeting any of the three goals.²

2) Collaboratives are meeting the six Healthy Start Elements of Success. Approximately 90% of respondents reported they were “meeting” or “partially meeting” all six of the Healthy Start Elements of Success, with over 75% reporting they were “meeting” two of the Elements: 1) supports and services to families are provided in a facility that has adequate space, is comfortable, and is accessible to children, and 2) combined resources of families, communities, counties, cities, nonprofit organizations, businesses, school(s) and district(s) are committed to long-term support of children, youth, and families through your initiative.

3) Full integration in the local school(s), including administrator support and active teaching and learning support staff involvement is the Elements of Success perceived as most important in developing and sustaining Healthy Start or a similar collaborative (mentioned by 69% of respondents). A full-time coordinator that builds communication between policy-makers and those providing supports and service and, combined school and community resources that are committed to long-term support through an integrated initiative are also considered important (both noted by 60% of respondents).

4) The most common primary sources for funding for services provided by respondent’s sites are grants from public agencies (53%) and LEA Medi-Cal Billing Option (47%). Roughly a third reported Title I (33%) and Medi-Cal Administrative Activities (30%) as funding sources. Funding sources not listed in the survey options but that were frequently mentioned as “other sources of funding” included First Five California, donations/fundraising, and in-kind donations.

5) The most prevalent service currently provided through Healthy Start is family support (mentioned by 84% of respondents). Over 70% of sites reported offering basic needs, case management, sign-up for Medi-Cal, and parenting education. Over half reported offering youth academic support, medical and health, mental health, and health education services. Forty-three percent or fewer sites reported currently providing CHDP Exams, afterschool programs, adult education programs, employment services, or program evaluation.

² Sites that have not sustained are more likely not to have completed the survey. As a result it is probable that the responses are skewed in favor of those that were more successful in meeting stated goals.

6) Eighty three percent of respondents currently have a Healthy Start/Integrated Services Coordinator. Almost half of respondents reported having a full time Coordinator; a third reported having a part time Coordinator. Thirty-nine percent of respondents with a Coordinator indicated that this person works primarily on Healthy Start activities one hundred percent of the time, suggesting that many Coordinators have additional responsibilities.

7) Almost half (45%) of respondents reported that their Healthy Start/Integrated Services Coordinator has held that position for five or more years. Almost that same percentage reported that the Coordinator has been employed between one and five years. Less than 5% reported currently having no one in this position.

8) Half (49%) of respondents reported that staff directly hired to work for Healthy Start have been most negatively impacted by the end of Healthy Start grant funding. Fifteen percent or fewer reported that the end of grant funding has negatively impacted program and administrative functions, resources, and staff out-stationed from other agencies.

9) The majority, 63%, of respondents reported that the end of Healthy Start grant funding has negatively affected their ability to maintain program goals/elements. Interestingly, almost twenty percent reported that the loss of funding has had no impact, and seven percent reported that the end of funding has had a positive impact.

10) The loss of Healthy Start funding has led to a reduction in sites' ability to provide services to children & families; forced sites to find external financial resources to adequately sustain programs; and resulted in having to shift priorities to match funding directives. As one respondent wrote, "Playing the financial shell-game distracts from services being provided to children and families." The loss of funding has also led to a situation in which sites are constantly vulnerable to losing more staff and a reduction of time in which to provide services; resulted in collaborative members who are less motivated to attend regular meetings; made it more difficult to maintain relationships and momentum; decreased visibility and increased number of unqualified personnel resulting in decreased levels of trust on the part of the school community; and led to less attention being given to community participation and decision-making.

11) Sustaining Healthy Start requires maintaining a focus on key strengths of program (not just following available funding streams); establishing and maintaining relationships with collaborative partners; and coordination and clerical support (full time). It also requires: ensuring the program and services provided impact the success of the youth and families being supported; integrating services into the school system; obtaining long-term, consistent funding; administrator and teacher buy-in; coordination of program and agencies; funding personnel to advocate for integrated services; and the ability to engage a wide range of stakeholders.

12) The most often made suggestions for keeping Healthy Start sites connected made by respondents revolved around the effective use of technology (website, electronic billboard, Listserv, e-mail, newsletters, video/tele-conferences, Healthy Start software available to all sites). The next most mentioned suggestions focused on continuing to hold regional and statewide meetings and/or to provide funding for sites to hold and/or attend meetings, conferences, and workshops.

**Representative quotes made by respondents regarding their experiences
with sustaining Healthy Start**

This has been my most challenging professional experience, but yet my most rewarding. We have exhausted many options on a shoestring budget to sustain our work. We now have a part time development director/evaluator who has made all the difference in our ability to sustain our work.

I believe it has served our site well to have a community agency coordinate the partnerships. The agency, along with the school, is very active in sustainability. I have been disappointed that the larger institutions (i.e. school board, County services) have not re-aligned to support school-based services.

It is a constant battle. The State and County value the program but the District has not a clue as to its value. It is a constant battle to keep administrators aware of the value of the program and the need to keep it funded.

We truly loved having Healthy Start on our campus. I was the case manager of the grant when it was here originally and I am now the principal of the school. It is very hard to meet the needs of our population without this grant, and yet I have no way of funding it the right way on my own budget when the academic needs of my students are as great as their basic needs are. It was truly a sad moment when we could no longer find ways to fund the staff that made it all work. Parents are not being reached the same way.