Laura Hoard: [00:00:00] Hello and welcome to today's webinar titled COVID-19 Response in Region XI AIAN Head Start: How Children's Centers, Programs and Programs Faced the Pandemic. Before we get started, all participants will be on mute in order to allow presenters to speak without background noise. Thank you. To ask a question, please use the question and answer option in your toolbar along the bottom of your screen. We'll save your questions to the end of the presentation and discuss them during the question and answer session. And this webinar is being recorded so that it will be made available at a later point. My name is Laura Hoard and I work at the Office of Planning, Research and Evaluation, or OPRE in the Administration for Children [and Families] or ACF in the Department of Health and Human Services. My picture is in the top left of the screen. OPRE is the research arm of ACF and funds the study we're about to talk about today. On behalf of my colleague Meryl Barofsky, whose picture is next to mine and who I co-lead this project with at OPRE, we would like to welcome you to this webinar. But before getting started, we wanted to take a moment to thank the 22 Region XI programs directors, teachers, and families and children who participated in the study. When we started recruitment over two years ago, we never thought we would be where we are now in terms of fighting a global pandemic. Since we were already in the field for AIAN FACES when the pandemic hit, we were grateful we were able to collect information on how programs were supporting families. We recognize that this pandemic has hit tribal communities especially hard. We want to take a moment to acknowledge that loss. Thank you for taking that moment with us. We would like to take a poll to find out who is on the webinar today. The box has popped up that asks about your role. The options are; Head Start/Early Head Start Staff, Other Early Childhood Program Staff, Tribal Leader, Technical Assistance Provider, Researcher, Federal Staff, or Another Role. So folks could complete those. And we see that 63% of folks joining us today are Head Start/Early Head Start Staff, 4% Other Early Childhood Programs Staff, 11% Researchers, 11% Federal Staff, and another 11% Another Role. So thank you all for sharing that with us. With that, I'd like to introduce you to my colleague, Todd Lertjuntherangool, who is our Office of Head Start regional program manager for Region XI. I'd like to thank Todd for participating in today's webinar and your ongoing support for this study.
Todd Lertjuntharangool: [00:02:55] Thank you so much, Laura, and good good morning to most actually, and good afternoon to some. As Laura stated, my name is Todd Lertjuntharangool. I'm the regional program manager for the Office of Head Start Region XI. I want to start off by thanking everyone for joining us today and for all of my colleagues at OPRE, at the Tribal Early Childhood Research Center, and at Mathematica for coordinating with the participating grantees and for facilitating the collection and aggregation of the data. And of course, also for organizing the webinar for us to share the findings from the data collection. There are two graphics that you guys will see on the screen now. On the left, you should see a graphic that indicates the- or represents the 26 states that Region XI operates in. And so unlike a lot of our other 10 or rather 10 geographic regional colleagues, we're not limited to any specific portion of the country, but rather we do operate pretty much throughout the country, wherever our tribal Head Start programs are located. On the right is an abbreviated timeline on how the impact of COVID-19 impacted Head Start and Early Head Start programs nationally. With that, I'm going to turn things over to my colleague. Michelle Sarche, a researcher at the University of Colorado who directs the Tribal Early Childhood Research Center and who has been involved in and faces since the beginning. Michelle.

Michelle Sarche: [00:04:13] Thank you so much, Todd. And hello to everybody who is joining us today. I know that many of our friends and colleagues and collaborators are on the call, and it's so good to have you here with us as well as as Laura said, the programs that participated in the study were so thankful for your time and efforts and contributions here. I'm very happy to join you Todd and Meryl and Laura on the call. Also presenting today as Dr. Liza Malone from the Mathematica study team and Ms. Lana Garcia from the Walatowa Head Start program and a member of the AIAN FACES work group. Dr. Sara Bernstein is pictured here on this slide. She is also with Mathematica study team and helped us prepare for today, but she is not able to join us today. Our goals for this presentation are to give a brief overview of the AIAN FACES study and then to focus on the onset of the COVID-19 pandemic and how it impacted our Spring 2020 data collection. And most importantly, the study's first findings on Region XI program and center response to COVID-19 and programs experiences during COVID-19. So to get started, I'm going to provide some brief background for the study, including information about the first round, which was in 2015, and that's the round the first study that the current round was built on and the 2019 study goals, design, and
participants. So as I shared, AIAN FACES 2015 was the first national study of Region XI Head Start and the 2019 study we are discussing today builds on its foundation. Because we want to reserve most of our time today for those 2019 findings and discussion, we provide just a short overview of the 2019 study design here. But for those of you who would like more detail, it can be found on the ACF website, which we link to at the end of the presentation. There you can also find a webinar we held earlier this month sharing our first findings on Region XI Head Start children's experiences in the Fall of 2019. So again, this is our second presentation on the 2019 findings. Before turning to those findings. So I wanted to share about the AIAN FACES 2019 study sample. To achieve a nationally representative sample of Region XI as a whole, and there are about 154 grantees nationwide. Twenty-two randomly selected programs were recruited to participate. In each of those 22 programs, we followed each tribe or village's review process to get permission to conduct the study activities and to archive the data for qualified secondary users. We collected data from children based on child directed assessments, parents, teachers who reported on individual study children as well as their classrooms, center directors, and program directors. As you can see in the pyramid here, our goal for these 22 programs was to collect data in 40 centers, 85 classrooms, and from 720 children and their parents. Before we move on to reporting findings, we want to share the background and timeline for the overall Spring 2020 data collection, starting with some thoughts from Region XI about that period of time. So, Todd, I'm going to hand things back to you.

**Todd Lertjuntharangool: [00:08:04]** Thank you, Michelle. And just to kind of rewind my own memory, going back to the month of March 2020 when the national emergency was declared. I'll start off by being transparent, saying that I, I myself didn't really anticipate the significance of the virus at that time. I'm pretty sure a lot of folks on the webinar today probably share that. Nor did I anticipate the amount of time that we would all be in a virtual or remote mode of working because of the virus. And here we are nine months later. But rewinding time, that's when the national emergency was declared, and when we first started seeing programs being impacted nationally. We started seeing a range of programs cutting back service. Providers modifying services is probably a better way to say it. A lot of programs specifically in Region XI, I think as an initial reaction stopped a lot of the center based service and look to the most vital of services, things like food delivery, to ensure that they came up with a plan for some continuity of that while they came up with internal plans. One thing I do want to point out
is I think we know this, that the proactive decision making by tribal leadership around the country was initially very effective. There were some communities that were impacted by it out of the gate. But but in a lot of our tribal communities, tribal leadership making difficult decisions to kind of bring things to a halt until they could come up with a plan. We saw that being very effective, it managed to mitigate a lot of the initial impacts in those communities. I will say that, of course, that between now and then, unfortunately, those impacts have unfortunately found a way into a lot of those communities that did not or were not initially impacted. One thing that we observe, too, was just the information coming out and changing. It was it was so fast. It was really, I think, difficult to manage the overflow of information of the updates of the guidance. And so I also really feel for programs who are on the receiving end of all of that. And so for us, it really made us think about how we deliver that support, how we deliver that guidance, because we also did not want to contribute to the overflow of information our grantees were getting. Nor did we want to create multiple streams of information and guidance that might confuse our grantees or create inconsistencies in the guidance that we provided. We, you know, since that time, we’ve seen so much fluctuation in how programs are operating and the way programs have been impacted, that I would say it's probably difficult to even look at the data and at least since then nationally and identify trends and patterns. It was just very hard to anticipate, you know, what to expect or what we could expect. And then lastly, just given where we are now, one thing I do want to do is encourage programs to really be mindful of budgets, keep a close eye on budgets, because that's one area also that has been significantly impacted. And we encourage programs to be proactive. And if you need budget modifications to request those that you can utilize whatever remaining funds you have from your current budget periods. Keeping in mind that those programs in the fifth year that may be transitioning into a new fifth year, assuming that you're eligible to do that, you cannot carry over funding from one project period and one grant number into a new project period, a new grant number. So I think during that time, too, we also- it really came to light just how impacted our tribal programs were with the limited access to technology and equipment and Internet for our families. And so I think that's one thing that's also been highlighted in the last few months. And one thing that I encourage programs to think about when we when we look at our budgets and whether or not we have funds that need to be modified or reallocated. I think for the most part that that wraps up those initial months in the Spring. And so I'm going to go ahead and transition over to my friend Ms. Lana
Garcia at the Walatowa Head Start so she can also give her perspective and experience on some of those initial months of the pandemic. Lana.

Lana Garcia: [00:12:10] Thank you, Todd. Good morning and good afternoon, everybody. I want to thank the Office of Head Start, OPRE, and Mathematica for inviting me to take part in this webinar. So I just really want to kind of piggyback off of what Todd had said about not really being prepared for this global pandemic as a director. I mean, our first closure was supposed to be for two weeks. And this is I'm talking about for Walatowa Head Start, which is located in the Pueblo of Jemez in New Mexico. And our first overall tribal closure took place March 17th. And it was supposed to last until April 13th and then- April 3rd, I'm sorry, and then April 1st came around and it was like things were still not looking good. And so and then a lot of the state schools around us, the public schools, had closed for the rest of the year. So there we go as well. And some of the things that, you know, we wanted to make sure the families continue to receive were meals. So we did a drive thru approach, pick up and go approach. We served breakfast, snacks, and lunches through the the rest of the school year. And we also did every two weeks we did we distributed lesson lessons, activities, and supplies to to complete those activities for the rest of the school year. And then once we kind of got into summer, we were grateful to receive the COVID funding, which we were still planning for summer school. I mean, we were still focusing on those children that were going to go into kindergarten and we wanted to make sure that they still had some services for that. But during that time, I mean, we had to rely on conference calls, face timing, for some, text messages, phone calls, just to keep that communication with our families and trying to find out if there's anything they need. What else can we do? I mean, because the entire our entire organization was on shutdown. And a lot of other programs like your social services, your behavioral health, those were all appointment only or they were also like through Zoom through those kinds of formats. And so just wanting to make sure that we stay connected with our families so that we can help the best that we could. And and really just finding out the capabilities of families, you know, if they know how to use certain devices, things like that. But certainly through this whole uncertainty, I believe, you know, we were so grateful that the camp sessions, that Office of Head Start offered, you know, made it- helped us through this whole time. You know, with the flexibility and things like that, with funding, with with regulations. Those were all very helpful for us as a staff in being able to provide the best services that we could in this new virtual remote learning that we were just, you know, thrown into. So I was just
really grateful for those sessions. And really just listening to my staff as well, you know, making sure my staff is OK, because if my staff isn't OK, you know, I want them to be healthy so that they can provide those services for our children and families. So really listening to my staff to on just the impacts of COVID on them and their families. So, yeah, that's it for now. And I'll share some more later on.

Lizabeth Malone: [00:16:38] Thank you, Lana. This is Liza Malone from Mathematica. What we want to do real brief before building on everything Lana just said, is to go back for a moment to the study timeline that was happening in the Spring to put the findings we're about to share in context. For Spring 2020 data collection for AIAN FACES started in late February with center directors and program directors invited to complete surveys starting in early March. The study looked to cancel in-person data collection. That is, we were doing direct child assessments and also classroom observations, and we moved to close and cancel that as the country began to shut down in the middle of March. And we also paused at that time follow up efforts, generally phone calls, emails where we would have typically sent to people to encourage them and remind them about completing the surveys. We just wanted to take pause, knowing everything that people would have been dealing with at that time. Survey-directors, though, were still able to log on and complete their web surveys during this time if they wanted to, they were there. But in the following few weeks after mid-March into April, as the impact and the scope of the pandemic became clearer, we worked to develop a set of questions to understand how centers and programs were handling the COVID-19 pandemic. We developed those new questions, went through the Office of Management and Budget to get approval during April and May, and then those questions were able to be added to the surveys at the beginning of June, and the survey stayed up until the middle of July. So all of the data that we're reporting today are coming from June and July of 2020. Nearly 3/4 of program directors and more than half of center directors answered the COVID-19 related questions that we asked. Working together with the Office of Head Start and the Office of Planning, Research and Evaluation, we develop questions on a range of topics. Both program directors and center directors were asked about closures, contact with and services for enrolled families, and changes in services or referrals for enrolled families. Program directors also then reported on contact and communication with staff, professional development or other supports for their staff, as well as information about program enrollment, plans to operate supplemental summer programs, and general program supports from the Office of Head Start. Which mirrors
everything that Lana actually were just sharing, as we wanted to know from everyone in Region XI. Center directors also provided additional information on the impact of COVID-19 the pandemic on staff and families and the community. The COVID-19 director questions can be found on the ACF, ACF AIAN FACES website. If when you’re on that website, there’s an instrument's tab and you can find that page by going to Google and typing OPRE AIAN FACES or OPRE AIAN FACES. So now let’s turn to some first findings on how Region XI programs and centers were responding to the COVID-19 pandemic. First, we want to share a bit about the contact that children's programs and centers were able to have with the children and the families they serve. Recalling that these data were collected in June and July, we see from these two pie charts that all of children's centers in our sample had physically closed at some point, and most or 98% were still closed at the time of the survey. In June and July, at the time of that point in the survey, we find that all children's program directors reported being able to make contact to some extent within enrolled families. The majority of children's program directors, or 85%, were able to make contact to a moderate or great extent, as shown in the darker two sections to the right of the bar chart. And then 15% were able to do so small extent. Similarly, we find that all of children's programs were able to provide services to some extent to enrolled families during the COVID-19 pandemic, as indicated by the two darkest sections of the bar chart to the right, 76% of children's programs were able to provide services to a moderate or great extent. We also collected information about how children's centers were making contact with families as a group during this period. As you can see on this bar graph, they used a variety of strategies to contact families with most using physical delivery or pick up locations, and more than half using phone calls, social media, text messaging, video platforms and mail. In the same vein, we find that children's centers also used a variety of strategies to provide services to children and families during the COVID-19 pandemic. Most, 92%, provide remote learning opportunities and also established drop off and pick up sites to distribute materials, food, and supplies to families. More than half of children's centers also partnered with other local entities and provided remote supports for parents to provide services. The next couple of slides are about barriers to contacting enrolled families. Looking at this bar chart, the biggest barriers in contacting are providing services to families where limited access to hardware such as the lack of a computer or smartphone, limited access to the internet, reduced availability to engage because of other demands such as caring for children, getting food or dealing with illness, and another barrier was limited telephone access that many children's program directors
indicated. For these barriers, more than half the children's program directors indicated that they were barriers to a moderate or great extent, as shown by the darkest two sections of the bars on the right. The biggest barriers for staff in children's programs were similar to those noted for families; limited access to hardware, limited access to internet, and reduced availability to engage because of other demands. More than half of children's program's directors report that these barriers to a moderate or great extent were happening, shown by the darkest two sections of the bars. Next, we will focus on findings of the needs children's families were expressing during the period of time up to June through July, when these questions were asked and how their centers try to meet these needs. As shown in this bar, in the majority of Region XI children's centers, or 99%, families told Head Start center staff that at least some extent they needed educational activities to support their children's home learning because of the COVID-19 pandemic. In response to this need, almost half, 48%, of children's centers added or increased educational activities to support learning at home during the COVID-19 pandemic. In the majority, or 96%, of children's centers families also told center staff they needed food and nutrition supports to at least a small extent, as shown by the three darkest sections of this bar chart. In response to this need for food and nutritional supports, the majority, or 64%, of children's centers added or increased food and nutrition services during the COVID-19 pandemic, as shown by the red section of the bar chart. Children's families also told children's centers that they needed home visits to be virtual because of the COVID-19 pandemic. As shown in this bar chart, the majority in- the majority of children's centers families, 64%, were reporting they needed these virtual visits to at least some extent. And in response here, we see 42% of children's centers did add or increase their use of virtual home visits during the COVID-19 pandemic. But more than half, or 53%, did not change the provision of virtual home visits as of June or July when the questions were asked. Finally, we want to share some findings of what children's programs found most helpful and on the supports children's programs were providing to staff at the time of the survey this past June and July. One support that directors and children's programs reported as helpful was the ability to use Head Start funds more flexibly. The majority, or 63%, found this to be helpful to a great extent, and 37% found it to be helpful to a small or moderate extent. In more than half of children's programs, directors also reported that supports to help staff more easily access the internet were helpful to a great extent during the COVID-19 pandemic, as shown by the darkest section of the bar chart at 63%. And 37% found them helpful to at least a small or moderate extent. More than 3/4 of directors in children's programs
reported that they hope to have the following specific supports in place for future emergencies, such as trainings for family service staff to deliver content and services remotely, guidance to create a plan for continuing operations, and supports to help families more easily access the internet. Directors in children's programs also reported what types of supports for professional development and day to day operations were in place for staff during the COVID-19 pandemic. A large portion, 91%, report that they had professional development, including distance learning and virtual teaching strategies. At least half also reported that they had technological support or equipment in 74% of children's programs, use of video platforms for communication in 57% of children's programs, and the OHS MyPeers virtual learning network community among 50% of children's programs. Children's programs also reported on how many new or increased supports they encouraged for staff to improve their well-being during the COVID-19 pandemic. As shown in this bar graph, most programs, 96%, encourage personal health and safety, like using masks and social distancing. More than half provided informational resources to staff, checked in or connected with staff more frequently, and offered professional mental health consultations. Children's programs also provided many new or increased supports to improve staff retention during the COVID-19 pandemic. From this bar graph, we can see that most of children's programs, or 87%, allowed staff to take administrative leave, 46% provided more flexible hours, and 31% provided part time or reduced work schedules. Now I'm going to turn it back to Lana to share a bit more about her program's experience. And we hope others on the webinar might have thoughts to share as well, so please go ahead at any time and use the question and answer option in your toolbar along the bottom of the screen. Lana.

**Lana Garcia:** [00:28:37] Thank you, Liza. So I really want to touch on the fact that I, I really listen to my staff in developing our- what- how our virtual education was going to be. Because they have families, they have children that were also doing virtual learning from other schools, and some of the challenges that they were having with that in that, you know, their Head Start children were kind of, I don't want to say, I guess the other children in public schools, you know, and maybe older grades kind of receive more attention than the Head Start kids. And then just the times of virtual learning, how long they were sitting in front of the computer, and just some of those challenges that I heard from my staff sharing with me is how we kind of had to develop our virtual learning. Because, like I said, I got to hear firsthand experiences, and I wanted to make sure that
we were meeting all the needs of our families. And while internet access was an issue and has been throughout our community, I felt like, you know, being a full language immersion program, we had to think of ways on how to bring the language into the homes, you know, and and, you know, did we really need the internet for that, you know. We wanted to be able to have devices that would allow us to record lessons in the language that children could just visit any time and play any time. So and once we decided on which device we wanted to use, it was like all the schools were wanting that device. So it pushed our order back, you know, for so long. And we actually just got those in a couple of weeks ago. And so we're currently trying to program those and, you know, get put those the management pieces on there, the controls, and things like that, and hopefully download the lessons that we have been recording in our classrooms, outside, and out in the fields, like different lessons that we've been doing. So I think, yes, yes, internet is, was and is an issue, but we learn to work around that because we cannot rely on that to maintain our language. And you shouldn't. So and then some of the other concerns that we had was, and then we had to work around, was our enrollment and health screenings, some of these concerns that families had. And we have to be flexible around those. You know. And I believe there's going to be a webinar on how to help with those types of things. But if we hadn't had those camp sessions, like I said, and I encourage you, if you have- I believe they're available on e-click. If if you haven't listened to those as a staff, you need to do that. And that's what we did from the beginning, is we would sit together and listen to all of them. And we talked about what information do we want to learn from families. And that's how we, you know, developed our virtual learning because we had to find out, do our families have the capability to use the devices? Who are staying home with the children if parents are working? Some of those questions are, you know, what really helped us in individualizing services for our families. And then I think lastly, having our reopening plan that we made available to our entire community. I had feedback from our own public health program, our response team, our governors. They had, you know, a feedback on our reopening plan and we distributed it. Then we had conference calls to make sure that families knew what was going to happen in each phase. I had phase- three phases in my reopening plan and and parents were able to call in and listen and ask questions and just really, you know, really we wanted them to know exactly what was going to happen during phase one, during phase two. And we're still in phase one. But at least, you know, our families know what to expect when the children come back on site and not and not all children will come back on site. You know, we have to continue to listen to the public health orders,
CDC guidelines on who how many the number of children are allowed to be in the centers. And we follow all those CDC guidelines to the T. I think that's it for now.

**Meryl Barofsky:** [00:33:59] Thank you, Lana, that was really great. And so right now, I encourage everybody, if you have any questions, to ask your questions in this chat at the bottom of your screen, there's a Q&A button. There is a specific question for you, Lana, to ask if you're willing to share your reopening plan.

**Lana Garcia:** [00:34:22] Yes.

**Meryl Barofsky:** [00:34:24] Ok, we can say- we can we'll do that offline, but we will get back to you, Elizabeth. And someone also asked about asked about the slides being made available. We are working on getting those on the OPRE website, hopefully in the next couple of weeks, and we will send an email out to all of the participants on this call, as well as other wider distribution once those are available. So as soon as as soon as we can. So I wanted to start off with a question, I think, for Lana and Todd, why don't you talked a little bit, actually, both of you talked a little bit about this, but kind of the difficulties with virtual learning. And I wanted to ask what you saw as a particular issue for Region XI. So was it more technology? I know, Lana, you talked about getting devices, broadband access, and then how can we think about supporting Region XI programs with virtual learning?

**Todd Lertjuntharangool:** [00:35:31] So, Lana, I'll let you go first. You want to go first?

**Lana Garcia:** [00:35:35] Sure. So, like I said, we really had to find out from our families what those issues were. But it was it that they didn't have any devices at all. Who was going to be home with the children? Like if Grandma was home with the children, does Grandma know how to use that specific device, a tablet or iPad, whatever that is? Do they know how to get on Zoom? Because we were offering, we're still offering mental health presentations for children during the day and then we have some for the parents in the evening for when they come home. So we wanted to understand what the capabilities were and who was going to be at home with them, because, like I said, with the other siblings at home sometimes, their, their needs kind of, you know, were priority over the Head Start kids with homework and things like that, that had to be done. And so a lot of our families told us that they would have to come home after work, after
working all day long to come home and then help their child with those activities. And then so once we did the home visits or the virtual visits, that’s when we found out, like what were the main issues. And it was internet access, and it was and it was not having devices, it was not having phones. We even had families who didn’t have phones. And so really, you know, like I said, with the COVID funding and some of the funding that the tribes received, we all had to work together to make sure that our families had what they needed, the resources that they needed. We had and we had, what are they called? They’re kind of like little wi-fi, hot spots and, yeah, something, they could they put them on busses that we had like four busses in the community, and then they drove them to different parts of our community so that families would be able to get on. Currently, we also have fiber that’s going to be put in throughout the community and they’re going to install wi-fi into the homes as well. So it’s working together with the governors. I mean, we met with our tribal leadership twice, just the schools alone, so that we could share with him the concerns that we were having and we could all work together to help our children and families. So really, it’s just collaborating with your tribal leadership, making sure that they know what those needs are.

**Todd Lertjuntharangool:** [00:38:40] Thanks, Lana. And I echo what Lana said, I think what we’ve heard and what we’ve heard from our Head Start programs and what we’ve heard from tribal leaders in consultation this year is, I think access to the technological, technological equipment and also the internet has been the biggest, most significant challenge our programs have faced with remote or distance learning. I think one thing that we encourage programs to do is, of course, with that CARES funding to consider what type of equipment and needs they might have for the families as it relates to distance learning. One thing, we’ve also pushed a lot of programs to do in reviewing their budgets and doing budget modifications, is because so many of our programs are not in classrooms and facilitating normal operation it’s had a big impact on budgets. And so we encourage our programs to look at what the current program implementation is, and if that is remote, to look at the type of equipment and technology the programs, I mean families rather would need, in order to to participate in program and distance learning. Additionally, I think in conversations with tribal leaders through consultation, the whole topic of broadband in tribal communities was really highlighted. And so it took on, I think, an even bigger dialog about what agencies, what sources are there available to support tribes with improving their access to broadband for their community members as a whole. And so I think those are some of the things that that definitely have, from
what I've heard, been some of the more significant challenges for our programs. Now there are some some programs also who who had very good success. A lot of their community was able to connect. The families were able to connect, using, whether it be laptops or tablets, but for those programs who are not, I think it also brought us back to the drawing board in terms of what type of information do we need to be collecting from our families when we do those initial home visits, when we develop a family partnership agreements? Are programs are really looking to find out what type of access families have to internet or what type of equipment they have to support distance learning? And so, I think for me, trying to be proactive in the coming years, it also makes me think about that, like how do our programs need to factor that into identifying what those family needs are at the beginning of the year or rather when they initially enroll those families?

**Lana Garcia: [00:41:08]** One more thing I want to add, too, is like we actually revised our school readiness schools to be more inclusive of their home environment because a lot of our, you know, our school readiness schools are based around the classroom. And and then we have our community engagement pieces as well. But we had to change everything to focus around what’s in their home, like what does that look like now? And I think that helped families give them an idea of, oh, ok, I can make this happen, we can can make this happen. So I think just looking at overall, you know, what that meant to us, what's what is virtual learning? What is remote virtual learning? And being that we're full language immersion program, I think we had a lot of benefits for that.

**Meryl Barofsky: [00:42:02]** I think the next question, I'll turn to Laura and Todd about how also we prioritize what questions to ask? As Liza mentioned, this was a pretty quick turnaround. We were already in the field and then decided to add this module to collect this data. So if you wanted two talk about that, I can certainly help as well.

**Todd Lertjuntharangool: [00:42:29]** Laura, do you want to you want to start?

**Laura Hoard: [00:42:30]** I mean, so I can I can start and then I will jump and ask the both of you to help join in. I mean, I think that we were considering who who would we ask? So first, thinking about who are the folks that are still going to be receiving surveys and what are the questions to ask and how to really get at what folks are doing? And to-
and so it was decided upon to work with the directors and the center directors to see what the experience was like for folks at that level. Appreciating that, without a doubt, there is information for parents and teachers that we don't have, but we were very lucky to be able to get the directors and the center directors. And the topical areas we selected, I will hand that back to Meryl and Todd.

**Todd Lertjuntharangool:** [00:43:20] Ok, well, I can chime in really quick. I think for me, one really important thing that initially came to mind was what are the barriers to actually providing services to families? What are the barrier between the service and the family? And so I think getting a good idea of what our program's experiences were with that, it gave us an idea of where do we need to think about flexibilities, where do we maybe need to reallocate certain resources so that we can really target what those barriers are in anticipation for, you know, like now this fall and winter?

**Meryl Barofsky:** [00:43:54] And I'll just add, we did work really closely with the Office of Head Start. We asked the same questions in this study, AIAN FACES, as we did in the FACES study, which is a study of Region XI, a national study. And so we also, if I remember correctly, we also understood that especially parents and probably teachers were probably very, very overwhelmed, not saying that center directors and program directors weren't, but we had a slightly smaller sample. So we thought, you know, trying to target them hopefully would relieve some of the burden on our parents and teachers. And then, like Todd said, really, what can what can the Office of Head Start use this data for? And I think hearing from the center and program directors was probably the best way at that point, to do that. And it was a really quick turnaround, which is not always possible in federal studies, which was exciting. We got another question in that I'll kind of turned it over, I think, to everybody. But how will these findings be used to support these centers of the pandemic continues? And I'll add to that question and hopefully is coming eventually to an end.

**Michelle Sarche:** [00:45:15] So this is Michelle. So I think that these data are an opportunity, even though they were gathered at an earlier phase in the pandemic and things continue to evolve. I think they touch on some needs that are enduring and that were there before the pandemic and that we're going to have to really work to address moving forward. And so what jumped out at me, of course, are all of the technology issues, but it's not just there and aren't any silver bullets there either. Like we can
provide hardware, we can provide broadband access. That's really foundational. But I think, you know, as Lana was sharing, there's all different types of users of the technology. And so are they comfortable with the technology? Do they really understand how to use it? So helping our families and thinking of families, you know, and all the different members of the family, grandparents, aunts, uncles, parents, the children themselves, you know, what do they need in terms of understanding how to use the technology? And from a developmental standpoint, what can be what can we expect, especially when we're reaching such a young population of children? So certainly the technology issues are at the forefront. But again, how do we work to support families in all the different ways that they need support once they have the broadband access and the hardware? And then the food security, I think is something that has come up a lot as well. And again, that's that's always been there. It's just been brought to the fore. And so I think, you know, what can we do to support tribal children and families, address these issues of food security in a more enduring and lasting way? You know, again, the pandemic has revealed so many of our vulnerabilities. So I think, you know, keeping even though the data were collected at a specific period in time, really keeping them front of mind because they aren't issues that weren't there before.

**Todd Lertjuntharangool:** [00:47:37] And this is Todd. I'll also add to that one thing that it definitely did for us is it solidified what we thought might be a big barrier, and that is, again, the technology and the equipment. I think having the data allows us also to justify how we reallocate certain resources in this coming fall, this winter and this coming in this program year. So for us, that was a that was a big thing. I think it also let us know what program programs felt was beneficial throughout this time. It let us know what staff were feeling was beneficial, what families were feeling was beneficial. So that we can try to, I think, hone in our own efforts and how we best support programs through the oncoming months. And so for us, again, like myself, that even though it was captured in the spring and within the initial impact, it really pointed us in the right direction for what we were and we knew we were to implement this fall and this winter to best support programs with getting the services out to those families.

**Michelle Sarche:** [00:48:38] And I just wanted to add, you know. We don't have, per our poll, we don't have any tribal leaders on the call today. But I think we we, as part of the AIAN FACES team, are always looking for who do we need to reach with this information and what are the best ways to reach them? And so we're certainly putting a
lot of thought into how we reach those audiences. Lana was touching on how important it is to work with tribal leadership, and we totally agree in that regard.

**Todd Lertjuntharangool: [00:49:12]** And that also I do want to kind of circle back to something Lana said, and that was around the reopening plans. And I think that is just so important. It's you know, you can't really put a value on it because in terms of parents bringing their kids back, in terms of staff coming back, I totally understand and expect there to be anxiety there. And I think the best thing we can do is to have a well thought out plan and actually communicate with those stakeholders. As Lana said she shared it with the whole community so that everybody knew here was out plan, here are the people we consulted with to make sure that we're doing this in the safest way, if this happens, this is what we'll do. I think that that's going to help a lot of programs as they transition back into some level of center based services. So I, I see it as a gradual transition. I don't see it as one day we're doing virtual the next day we have 20 kids in the classroom. And so I think a well thought out plan, and then delivery and communication of that plan to the community in a timely way is going to be absolutely vital for programs to be successful in gradually coming back to whatever that new normal is going to be after this. So I want to thank Lana for sharing that. And that's a hugely important part.

**Meryl Barofsky: [00:50:26]** Unfortunately, we don't have too much time left. So I do want to this- leads right from those questions, provide everybody with a little bit more information. So to learn more about the study and reports you can see the AIAN FACES study web page on on the ACF webpage. As Liza mentioned earlier, you know, really the easiest way to find it is to Google AIAN FACES OPRE. That's just generally the fastest way. This webinar and all the slides, the recording, the transcript eventually will be up there. But I really encourage you to look, as Michelle mentioned, we have a variety of types of products. We have long data reports if you're really into looking at the nitty gritty data. And we will have data from this data collection as well as our Fall data collection, but we already have data from 2015 in Fall and Spring 2016 up there. We have research briefs, we have slide decks, we have one pagers. We are trying to really be, you know, create a lot of diverse different materials for different individuals. You also can access the data research, qualified researchers can access the data for secondary analysis. And so if you're interested in that, you can see the study page on the Child and Family Data Archive and the AIAN FACES 2019 data will be available probably this
summer on that data archive. Something we didn't talk about in this webinar, but we did start data collection before the pandemic and we did collect data from a sample of children and do classroom observations before we shut down data collection. And so there also will be a small data file with some child outcome in cost and quality information on that data file as well. And here we have just some of our study contacts, email addresses. So myself and Laura, as well as Sara and Liza at Mathematica. And please, please feel free to email us if you have any questions. We can also forward any questions to the other folks on this on this webinar today, I did get the email address for the person interested in Lana's reopening plans. And we can answer any questions about this webinar, about the study in general, or anything that you have questions for. And then I think I'm at this point handing it back over to Todd to close our webinar.

**Todd Lertjuntharangool:** [00:53:22] In closing, I do want to thank everyone who participated in this past Spring's data collection. With COVID, unfortunately, dominating so much of what's happened this year, we understand that that participation required a real high level of commitment to the work that we do. We also understand that the impact of the pandemic has evolved, as has the reaction or rather what programs have done to react to it, as has evolved since that time. I want to also make note that I appreciate the incredibly rapid work of the folks involved to get this data to the Office of Head Start as soon as possible. Knowing and understanding the timeliness was a really big and important factor. I also want to thank all the programs who participated and all the programs across Indian country who have really dug in this year and done whatever was necessary to ensure that our families did receive these very vital services. To the folks who joined today, I want to wish you all a warm, joyous and safe holiday with your family. Thank you all.