

Alaska Early Intervention • Infant Learning Program

# 2022 Family Outcomes Survey

*families enrolled in calendar year 2021*

**August 2022**

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2022 Family Outcomes Survey

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## Executive Summary

The Alaska Early Intervention • Infant Learning Program (Alaska ILP) oversees an array of flexible early intervention services for children birth to three years of age who have or are at risk for disabilities or developmental delays. During the 2021 calendar year, 15 Alaska ILP grantees delivered services through local agencies.

The U.S. Department of Education Office of Special Education Programs (OSEP) requires State agencies to develop and implement outcome measures to evaluate infant and toddler programs operated under Part C of the Individuals with Disabilities Education Act. Family Outcomes Survey items are based on five core OSEP family outcome areas and general level of satisfaction with services received from an ILP:

1. Families understand their children's strengths, abilities, and special needs.
2. Families know their rights and advocate effectively for their children.
3. Families help their children develop and learn.
4. Families have support systems.
5. Families access desired services, programs, and activities in their communities.
6. Families are satisfied with the services they receive.

The 2022 survey instrument had 22 items and a space for comments. Families rated experiences with their children and their ILP by choosing how often each statement was true for their family: none of the time, some of the time, most of the time, or all of the time.

Family eligibility criteria included a child enrolled during the 2021 calendar year eligible for Part C and enrolled for at least 6 months duration, as well as a potentially valid mailing address. The eligible population for the 2022 survey consisted of 715 children in 697 families. The survey utilized a randomly selected 20% target group of families, stratified by Alaska ILP grantee, and by race of children. A target group comprised of 139 families was randomly selected from eligible families to receive the survey by mail. Target families were contacted in April-May 2022. Survey packets sent by mail invited them to complete the survey by mail, online, or over the phone. Follow-up was conducted with phone calls, emails, an additional mail out and postcard reminders. There were 56 completed surveys resulting in a 47% response rate. Characteristics of children were fairly similar across responding families, the selected target group, and the total eligible population.

## Survey Findings

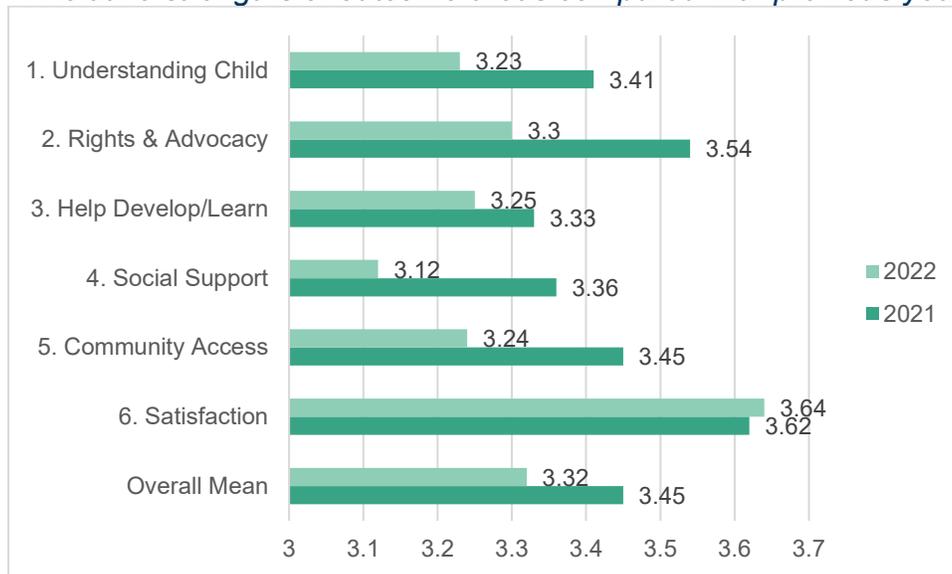
### Pattern of Outcome-Level Results

Note: Figures often depict ratings between 3 and 4 on a 1-4 scale. This is a magnified view to more easily see patterns. Differences are not as large as they may appear and readers should look to the statistical analyses for significant or meaningful differences.

It can be concluded from the results of the 2022 Family Outcomes Survey that the vast majority of families (approximately 90%) were satisfied all or most of the time with ILP

services they received during calendar year 2021. The overall survey mean was 3.32 on a 1-4 scale. Most responding caregivers were confident in their knowledge and abilities, and available resources usually met their needs. Figure 1 illustrates an outcome level pattern of results in 2022, compared to the 2021 survey.

*Figure 1: Relative strengths of outcome areas compared with previous year results*



The strongest outcome area was Outcome 6 ( $M = 3.64$ ) regarding satisfaction with ILP services, followed by Outcome 2 (rights and advocacy,  $M = 3.30$ ). Outcome 1 (understanding child,  $M = 3.23$ ), Outcome 3 (help develop/learn,  $M = 3.25$ ), Outcome 5 (community access,  $M = 3.24$ ) were a little below the overall mean. Outcome 4 (social support,  $M = 3.12$ ) was the weakest outcome.

Outcome 2 (rights and advocacy) was significantly lower this year in comparison to 2021. Additionally, Outcome 4 was close to significantly lower than the previous year at  $p = 0.051$  (note, a statistically significant difference is at  $p = 0.05$ ). There were no significant differences within 2022 results by region or by race.

#### *Outcome 1: Understanding of Children*

The mean response for Outcome 1 ( $M = 3.23$ ) was just under the overall survey mean ( $M = 3.32$ ). The greatest strength was in caregivers' *ability to perceive children's progress* ( $M = 3.39$ ). The relative weakness was in *knowing about children's special needs* ( $M = 3.05$ ). This is a typical pattern within Outcome 1.

#### *Outcome 2: Rights and Advocacy*

That was the case this year ( $M = 3.30$ ,  $n = 56$ ). It was statistically significantly lower than the previous year ( $3.54$ ,  $n = 79$ ). The greatest strength was in whether or not caregivers were *comfortable in meetings with professionals* ( $M = 3.71$ ). The relative weakness was in tied between *knowing what to do if we are not satisfied with any part of our child's program and services* ( $M = 3.07$ ) and being *fully informed about the programs and services that are available for our child and family* ( $M = 3.07$ ).

Two items in Outcome 2 about being *fully informed about the programs and services that are available for our child and family* and *knowing what to do if we are not satisfied with any part of our child's program and services* had a significantly lower result than the previous year.

### *Outcome 3: Helping Children Develop and Learn*

The mean response for Outcome 3 ( $M = 3.25$ ,  $n = 55$ ) was below the overall survey mean ( $M = 3.31$ ). It was higher than the previous year ( $3.33$ ,  $n = 80$ ), but not significantly. The strongest item was *working with professionals to develop a plan* ( $M = 3.47$ ). The greatest weakness was in knowing how to *help children learn to behave* ( $M = 3.05$ ). This is a consistent pattern within Outcome 3.

### *Outcome 4: Social Support*

The mean response for Outcome 4 ( $M = 3.12$ ) was below the overall survey mean ( $M = 3.31$ ). Outcome 4 typically is one of the weaker outcomes. It was higher than the previous year ( $3.27$ ,  $n = 80$ ), and although close to significant ( $p=0.051$ ), the difference was not significant. The greatest strength within Outcome 4 was in having *people to talk with* to deal with problems or celebrate when good things happened ( $M = 3.63$ ). The greatest weakness was in having resources for *occasional childcare* ( $M = 2.75$ ); this was the greatest weakness of all items this year. This represents a typical pattern within Outcome 4.

### *Outcome 5: Community Access*

One item within Outcome 5 is not applicable to a large portion of families and not included in aggregate analyses. To represent all results, the outcome mean is estimated. The mean estimated Outcome 5  $M \cong 3.24$  can be considered an estimated mean for the whole outcome area. Access to *excellent medical care* ( $M = 3.56$ ) was the greatest strength. The greatest weakness was access to *participate fully in the community* ( $M = 3.15$ ). This represents a typical pattern within Outcome 5.

ILP providers can make a meaningful difference in the quality of local childcare by working with childcare providers to help them understand and address the special needs of young children they both serve. Twenty (87%) of the 25 families who indicated this would be appropriate for their circumstances noted these interactions occurred all or most of the time. Typically, 50% is considered a positive result as this collaboration is not always necessary, appropriate, or possible. Considering the challenges of the ongoing pandemic, the level of collaboration achieved is impressive.

### *Outcome 6: Satisfaction with ILP Services*

Outcome 6 was the strongest outcome area. The mean response ( $M = 3.64$ ) was above the overall survey mean ( $M = 3.31$ ), a typical pattern for Outcome 6. Each item within Outcome 6 had very strong results. At the regional level, satisfaction ranged from 3.43 to 3.89, highest in the Northern Region.

### **Pattern of Item-Level Results**

Following are the aspects of family knowledge, resources, and abilities from the strongest to the weakest, as measured in the 2022 survey. Two of these item results surpassed a benchmark for stronger outcomes (greater than or equal to 3.50),

compared to five in the previous year. Two items that slipped just below the 3.50 benchmark were significantly weaker than the previous year. The lowest items are typically among the weakest results on the survey.

### **Stronger Outcomes**

- Worked with professionals to develop a plan ( $M = 3.71$ )
- Access to resources for excellent medical care ( $M = 3.56$ )\*

### **Moderate to Weaker Outcomes**

- Comfortable in meetings with professionals ( $M = 3.47$ )\*
- Access to social resources, people to talk with ( $M = 3.45$ )\*
- Able to perceive the child's progress ( $M = 3.39$ )\*
- Informed of the right to choose EI services ( $M = 3.38$ )\*
- Understands the child's development ( $M = 3.25$ )
- Knows how to help the child develop and learn ( $M = 3.24$ )
- Able to do the activities the family enjoys ( $M = 3.15$ )
- Access to opportunities for community inclusion ( $M = 3.15$ )
- Access to resources for excellent childcare ( $M = 3.12$ )

### **Weakest Outcomes**

- Informed of available programs and services ( $M = 3.07$ )
- Knows what to do if not satisfied with services ( $M = 3.07$ )
- Knows about the child's special needs ( $M = 3.05$ )
- Knows how to help the child learn to behave ( $M = 3.05$ )
- Access to resources for occasional childcare ( $M = 2.75$ )

\*Items that were among the stronger items in the previous year.

## **Social-Emotional Development**

One item is intended to measure success of ILP efforts to help improve the social-emotional development of children, or how well the ILP helped families enjoy relationships with their children. A mean rating of 3.64 was a strong result, similar to the previous year. At the regional level, means ranged from 3.50 to 3.78, highest in the Northern Region.

## **Statewide Satisfaction**

Overall satisfaction in 2022 was a mean of **3.60** on a 1-4 scale. The vast majority of families (approximately 90%) were satisfied all ( $\cong 74\%$ ) or most ( $\cong 16\%$ ) of the time with the ILP services they received.

## **Services During the Pandemic**

One item added in 2021 was intended to measure the effectiveness of distance ILP services delivered during restrictions imposed by the pandemic. The item was used again in the 2022 survey. Of 54 families who considered this item applicable to them, over half (56%) indicated distance services were helpful, but in-person services work better. For about a third (30%) of respondents, distance services worked very well and they hoped it would continue to be an option after the pandemic. Unlike the previous

year, respondents did not use the comment space as an opportunity to say more about the pandemic and distance services.

### **Comments Added to Surveys**

Twenty-one (63%) responding caregivers added comments to surveys. Fourteen of these (67%) were positive, expressing gratitude and satisfaction.

## Introduction

The Alaska Early Intervention • Infant Learning Program (Alaska ILP) is administratively under the Division of Senior and Disabilities Services (SDS) within the Department of Health and Social Services. The mission of the Alaska ILP is “to build upon natural supports and provide resources that assist family members and caregivers to enhance children's learning and development through everyday learning opportunities.”

To assist children who are at risk for disabilities or developmental delays to have a healthier start in life (birth to age 3), the Alaska ILP oversees an array of flexible early intervention services. During the previous calendar year, 15 ILP grantees delivered community-level services across the state through local agencies. Grantees typically include school districts, mental health associations, regional tribal health organizations, parent associations, and other nonprofit organizations. ILP services include developmental screening and evaluation; individualized family service plans; home visits; physical, occupational, and speech therapies; and children’s mental health services. ILP providers share assessment, development, and intervention information and strategies with families, deal with specialized equipment, and make appropriate referrals to meet child and family needs that are beyond the scope of ILP providers.

Alaska ILP funding comes from multiple sources including State general funds, federal Part C funds, Medicaid, and billing receipts from insurance and other third-party payers. Alaska ILP activity and progress are reported to the U.S. Department of Education Office of Special Education Programs (OSEP). OSEP requires State agencies to develop and implement outcome measures to evaluate infant and toddler programs operated under Part C of the Individuals with Disabilities Education Act (IDEA). Through a developmental process of working with experts and stakeholders, OSEP identified five family outcome areas. Guided by this framework, an annual Family Outcomes Survey gathers this type of information from the perspective of families in Alaska who received ILP services, along with their general level of satisfaction with services:

1. Families understand their children’s strengths, abilities, and special needs.
2. Families know their rights and advocate effectively for their children.
3. Families help their children develop and learn.
4. Families have support systems.
5. Families access desired services, programs, and activities in their communities.
6. Families are satisfied with the services they receive.

# Methodology

## Historical Development

Prior to 2008, the instrument used to measure family outcomes was adopted from the Early Childhood Outcomes Center (ECO). The method was a census approach with one survey per child who received any Part C services in the previous calendar year. Evaluators recommended greatly simplifying the 8-page instrument, but matching the focus of ECO items. Methodological recommendations included making the family the unit of measurement, randomly selecting a segment of the population stratified by ILP grantee to receive the survey, and investing effort in a meaningful response rate. Proposed changes were approved by OSEP and first implemented in 2008.

Since then, core outcome items and methodology were fairly consistent with some improvements over time. From 2012 through 2019 there were additional items about access to childcare, but only the one most relevant to ILP services was retained since 2019. One item added in 2020 is an indicator of how well the ILP helped families to promote social-emotional development. In 2021 an item was added to ask about family experiences with distance services during the COVID-19 pandemic. The 2022 survey consisted of 22 items and a space for comments (see the instrument in Appendix A). This year, additional instructions were provided prior to the satisfaction questions to communicate the detail in the construct per the OSEP Family Outcomes Survey ©2010.

Caregivers were asked to rate their experiences by choosing how often each outcome statement was true for their family: none of the time, some of the time, most of the time, or all of the time. This 4-point Likert scale was recommended to the Alaska ILP by a group of Indigenous providers who consulted about making survey instruments more culturally appropriate for the state's numerous Indigenous cultures.

All aspects of the project were reviewed and approved by the UAA Institutional Review Board.

## Participants & Selection Procedures

To be eligible for the survey, families needed to have at least one child eligible for Part C services enrolled during 1/1/2021-12/31/2021 for at least 6 months duration. Data about potentially eligible children and families is queried from the Alaska ILP statewide database. Families are removed from the population if there is insufficient information to send them a survey packet by mail. This includes families with no address, families without enough of an address to be recognized by the USPS, and families whose only address is a child protection office. Deliverable mail serves as informed consent, as well as providing an opportunity to respond by mail or online. The eligible population for the 2021 survey consisted of 715 children in 697 families.

A target group comprised of 139 families was randomly selected from eligible families to receive the survey by mail. Random numbers are assigned to all families in the eligible population. In order to stratify by geography and by race of children, families are sorted

by ILP grantees and again by up to 5 race categories. Within each resulting ILP/race category, the 20% of families with the highest random numbers are selected.

Children with any Alaska Native heritage are defined as “Alaska Native” for stratification and analyses by race. Children with multiple races are defined as the race that is noted in addition to Caucasian/White (e.g. for a child with race= Bi-racial with multirace= Black/African American + White/Caucasian the child would be recoded as “Black/African” for the purpose of stratification). Race data was missing for only 1 family.

Small differences in demographic proportions between the eligible population and the selected target group are most likely an artifact of selection procedures that avoided systematically excluding families in low incidence race categories or with missing race data. Specifically, in the 2022 eligible population, there were eight ILP areas where race/ethnic categories had only one or two families, failing to meet a minimum threshold to include one family of that race/ethnicity in the target group. As much as possible, these families were grouped together within each respective ILP service area, and the 20% with the highest random numbers were selected into the target group.

## Survey Procedures

A third-party evaluator, the University of Alaska Anchorage (UAA) Center for Human Development (CHD), is contracted to implement the Family Outcomes Survey. Survey packets containing an invitational letter, the survey instrument, and a postage-paid return envelope were mailed to the selected target group families on March 28, 2022.

The invitational letter (Appendix A) introduces the survey and invites families to complete it by mail, online, or by using a toll-free phone number, and informs them a CHD evaluator will call if a survey is not yet completed.

When an evaluator reaches families by phone, caregivers are invited to complete the survey over the phone. Requests to call at another time, opt out, or send information in the mail or via email are honored with courtesy. Having a working phone number is not required for inclusion in the target group.

As the survey deadline approached, a reminder email with the online survey link and unique participant identifier was sent to any remaining non-responders in the target group. Emails were sent on April 27, 2022, May 6, 2022, and May 13, 2022.

The survey was closed on May 23, 2022.

## Data Analysis

Note: For statistical tests, equal variances are assumed unless indicated otherwise.

**Summaries of responses.** Typical analyses to summarize responses to survey items include descriptive statistics such as frequencies, distributions, and measures of central tendency. Summaries often include the proportion of combined all/most responses (positive half of the scale) and some/none responses (negative half of the scale).

**Comparisons across four regions.** A univariate analysis of variance is used to test for differences by region at the outcome-level and sometimes at the item-level. Post hoc testing uses Tukey for pairwise comparisons when differences among variances are small, Levene's test is  $> .05$ , and equal variances are assumed. Post hoc testing uses Dunnett C when differences among variances are larger, Levene's test is  $< .05$ , and equal variances are not assumed.

**Comparisons between years.** When an outcome or item mean appears different from a previous year, the two results are compared using an independent 2-tailed t-test.

**Comparisons by race.** There are only enough children of Alaska Native and white heritage to test for differences by race. Independent 2-tailed *t*-tests determine differences at the outcome-level. When outcome-level results indicate potential item-level differences, those items are tested. If a difference by race is significant, there is a follow-up test for difference by rural versus urban residence, which can be a confounding variable.

**Qualitative data.** Comments tend to fall into general satisfaction categories of positive, negative, or mixed positive/negative.

## Respondents

### Response Rates

Fifty-six surveys were completed by families from the target group for an overall response rate of 47%. The following shows how it is calculated. "No contact" is mail returned as undeliverable too late for replacement.

- 139 Target Families (with 2 replaced families)
  - 56 eligible completed surveys (S)
  - 62 opted out or did not respond (O)
  - 0 no contact (N)
- Response Rate:  $S / (S+O+N) = 0.4655$  or 47%

About 70% ( $n = 39$ ) of the 56 respondents completed surveys by mail or online, while 30% ( $n = 17$ ) responded over the phone when called by the evaluator.

### Response Characteristics

The largest proportion of responses came from the Anchorage region and the smallest from the Southcentral region.

- Northern,  $n = 18$ ; 31.6% of responses
- Anchorage,  $n = 20$ ; 35.1% of responses
- Southcentral,  $n = 8$ ; 14.0% of responses
- Southeast,  $n = 10$ ; 17.9% of responses

Table 1 shows the number and proportion of response rates sorted by Alaska ILP regions which is further broken-down by ILP grantee in Table 2. The highest response

rate was in the Northern region (46%), followed closely by the Anchorage region (45%). The Southcentral region a 35% response rate and the Southeast region had the lowest a response rate of 31%.

*Table 1: Response sorted by ILP regions*

Region	Alaska ILP Grantees (ILP Code)	Sent	Rec'd	%
1. Northern	Alaska Center for Children & Adults (ACC) Northwest Arctic Borough School District (NWA) Norton Sound Health Corporation (NSH) Tanana Chiefs Conference (TTC)	37	18	46%
2. Anchorage	Programs for Infants & Children (PIC) FOCUS – Family Outreach Center for Understanding Special Needs (FOC)	44	20	45%
3. Southcentral	Bristol Bay Area Health Corporation (BBA) Kodiak Area Native Association (KAN) Mat-Su Services for Children & Adults (MSU) Yukon Kuskokwim Health Corporation (YKH)	26	8	35%
4. Southeast	Center for Community (CFC) Community Connections (CCK) Frontier Community Services (FCS) REACH, Inc. (REA) (HCS)	32	10	31%

*Table 2: Response sorted by ILP regions and grantees*

Region	Alaska ILP Grantees (ILP Code)	Service Area	Sent	Rec'd	%
1. Northern	Alaska Center for Children & Adults (ACC)	Fairbanks, Copper River, Delta-Greeley, North Slope	32	16	50%
	Northwest Arctic Borough School District (NWA)	Northwest Arctic	2	0	0%
	Norton Sound Health Corporation (NSH)	Norton Sound Region	1	0	0%
	Tanana Chiefs Conference (TCC)	Interior, TCC area	2	1	50%
2. Anchorage	Programs for Infants & Children (PIC)	Anchorage, Girdwood, Whittier	34	14	41%
	FOCUS – Family Outreach Center for Understanding Special Needs (FOC)	Chugiak, Eagle River, JBER, Cordova, Valdez area	10	6	60%
3. Southcentral	Bristol Bay Area Health Corporation (BBA)	Bristol Bay area	3	1	33%
	Kodiak Area Native Association (KAN)	Kodiak Island	4	1	25%
	Mat-Su Services for Children & Adults (MSU)	Mat-Su Borough	17	5	29%
	Yukon Kuskokwim Health Corporation (YKH)	Yukon Kuskokwim area	2	2	100%

Region	Alaska ILP Grantees (ILP Code)	Service Area	Sent	Rec'd	%
4. Southeast	Center for Community (CFC)	Sitka, Kake, Angoon area	2	1	50%
	Community Connections (CCK)	Ketchikan, Prince of Wales Island, Metlakatla area	9	3	33%
	Frontier Community Services (FCS)	Kenai, Soldotna area	5	1	20%
	(HCS)	Homer, Seward	3	1	33%
	REACH, Inc. (REA)	Juneau, Haines, Petersburg	13	4	31%

Within ILP regions and sometimes within grantee service areas, both urban and rural populations are served. If children in families with mailing addresses in Anchorage, Eagle River, Fairbanks, and Juneau are defined as more urban, 51.1% in the responding sample were more urban and the remaining 48.9% more rural. This was very close to the urban/rural proportions in the target group, and compares to 52.9% urban, 47.1% rural in the eligible population. There was very little difference in response rates based on urban/rural residence.

Seventeen (30.4%) of this year’s responses were completed over the phone. Calls to target group families who had not yet responded began on April 20. Calls were conducted weekdays, evenings, and on weekends in attempts to reach people when they were available. However, having a working phone number was not a requirement for being in the target group.

Of the 19 families who could not be reached by phone or declined to participate, 7 or 36.8% were rural families, which is smaller than the proportion of rural families in the target group (47.1%). Of the 19 children in these families about 35% ( $n = 9$ ) had American Indian/Alaska Native heritage, which was slightly larger than the proportion of American Indian/Alaska Native children in the target group 30.1% ( $n = 43$ ). The pattern in these non-response factors by urban/rural residence or by race indicates a possible concern with the representativeness of the small sample.

The remaining 25.3% non-responding families are typically those who were reached by phone who requested an email link with the intent to complete the survey online, but ultimately failed to do so. Attempts to reach them again before the survey deadline were unsuccessful.

**Demographics of Responding Families**

A proportion of caregivers in this population are not the biological parents of the children in the family. Caregivers can be grandparents, foster parents, and legal guardians. Thus, the race/ethnicity of families cannot be entirely assumed from the race/ethnicity of children in data collected by the Alaska ILP.

Among the 56 families who responded to the survey, there were 56 children who met the criteria for their families to be included in this sample. Children with American Indian/Alaska Native heritage (as a single race or one of two or more races) accounted for 17 children (30.4%). White as a single race accounted for 30 children (53.6%). Together this was most of the children in the responding sample of families: 47 of 56 children, or 83.9%.

The proportion of children with American Indian/Alaska Native heritage in responding families (34.6%) compared to 30.8% of target and 29.6% of eligible families. The proportion of children with white as a single race in responding families (53.6%) compared to 53.6% of target and 53.2% of eligible families. It was clear that families with American Indian/Alaska Native children were not under-represented in the responding sample.

Table 3 shows the data on race/ethnicity of children across the families who responded to the survey, those in the randomly selected target group, and the total population of children eligible for the survey. More than one race could be indicated for one child, and Hispanic/Latino is an ethnicity across multiple races.

Table 3: Race/ethnicity of children in responding families compared to the target group and the eligible population

Race/Ethnicity of Children	Responders	Target Group	Eligible
Alaska Native/American Indian	17 (34.6%)	43 (30.9%)	211 (29.6%)
Asian or Pacific Islander	2 (3.6%)	13 (9.4%)	39 (5.5%)
Black/African American	4 (7.1%)	10 (7.2%)	34 (4.8%)
White	30 (53.6%)	60 (43.2%)	380 (53.2%)
No race indicated	0	0	0
Hispanic/Latino	3 (5.3%)	13 (9.4%)	50 (7.0%)

Table Note: Single race or mixed race.

The average age of children at the time of the 2022 survey was 31.2 months for the eligible population, 32.3 months for target population and 32.1 months for the responding population. All families included in the 2022 survey had one or more children enrolled in an ILP and qualified for Part C services.

Table 4 shows the qualifying categories of children across the responders, target group, and eligible population. For all three, the reason the largest proportion of children qualified (63% to 67%) was a documented delay of over 50%. Predominance on this factor is typical.

Table 4: How children in responding families qualified for services compared to the target group and the eligible population

Qualifying Category	Responders	Target Group	Eligible
Part C Diagnosis	12 (21.4%)	29 (20.9%)	102 (14.3%)
Delays > 50%	35 (62.5%)	89 (64.0%)	481 (67.3%)
Clinical Opinion	9 (16.1%)	21 (15.1%)	132 (18.5%)

## Summary of Respondent Characteristics

Based on the data collected by the Alaska ILP, characteristics of children were fairly similar across responding families, the selected target group, and the total eligible population. The only difference that may indicate a potential issue regarding representativeness of the responding sample was among the race of nonresponding families. Of the 19 nonresponding families, about 35% ( $n = 9$ ) had American Indian/Alaska Native heritage, which was slightly larger than the proportion of American Indian/Alaska Native children in the target group 30.1% ( $n = 43$ ).

## Results

Notes: All reported percentages in results are rounded, thus percentages broken down by subcategories do not necessarily add up to exactly 100%.

The total number of responses can vary by survey item largely because respondents could choose to skip any item. In rare cases, a respondent might circle multiple responses to one item on a paper survey, which is also treated as missing data.

Cases with missing data may be automatically excluded from aggregate statistical tests. If so, this will be indicated in the number of cases ( $n$ ) reported with results.

*Table 5: Overall Outcome means 2018-2022 surveys*

Survey Year	Overall mean (1-4 scale)
2022	3.32
2021	3.45
2020	3.41
2019	3.33
2018	3.48

Most responding caregivers were confident in their knowledge and abilities, and available resources usually met their needs.

Within 2022 results, there were no meaningful differences in responses across the four regions. There were also no meaningful differences in responses by race. See more detail in the following examination of findings organized by outcome area with an expanded look at satisfaction, including satisfaction results by region.

## Outcome 1: Understanding Children

Items 1-3 on the survey asked respondents to indicate how often they understood their children's development, special needs, and progress. The mean response for Outcome

1 ( $M = 3.23$ ,  $n = 56$ ) was just under the overall survey mean ( $M = 3.32$ ), and lower than the previous year (3.45,  $n = 78$ ), but not significantly.

The greatest strength was in caregivers' *ability to perceive children's progress* ( $M = 3.39$ ). The relative weakness was in *knowing about children's special needs* ( $M = 3.05$ ). This is a typical pattern within Outcome 1.

**Item 1: Our child is growing and learning, and we understand our child's development very well**

The mean response on Item 1 was **3.25**,  $n = 56$ ,  $SD = .72$ . About 84% of responding families indicated they understood their children's development very well most (43%) or all (41%) of the time. The item mean often hovers around the overall survey mean (3.32). The mean was lower than the previous year 3.45 ( $n = 78$ ), but not significantly.

*Item 1 Response Frequency*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	9	16.1
3-Most of the time	24	42.9
4-All of the time	23	41.1
Missing:	0	---

**Item 2: We know most of what we need to know about our child's special needs**

The mean response on Item 2 was **3.05**,  $n = 56$ ,  $SD = .796$ . About 71% of responding families indicated they knew what they needed to know about their children's special needs most (38%) or all (34%) of the time. About 29% indicated they knew less often. The item mean was below the overall survey mean (3.32). It was lower than the previous year (3.23,  $n = 78$ ), but not significantly. It is typical for response on this item to be among relatively weaker results on the survey.

*Item 2 Response Frequency*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	16	28.6
3-Most of the time	21	37.5
4-All of the time	19	33.9
Missing:	0	---

**Item 3: We can tell if our child is making progress**

The mean response on Item 3 was **3.39**,  $n = 56$ ,  $SD = .705$ . About 88% of respondents indicated they could tell if their children were making progress most (36%) or all (52%) of the time. This item usually has a strong result. It was lower than the previous year (3.52,  $n = 79$ ), but not significantly.

*Item 3 Response Frequency*

Rating	Frequency	Percent
1-None of the time	0	---

Rating	Frequency	Percent
2-Some of the time	7	12.5
3-Most of the time	20	35.7
4-All of the time	29	51.8
Missing:	0	---

## Outcome 2: Rights & Advocacy

Items 4-7 asked respondents to indicate how much they knew about their rights and their capacity to advocate effectively on behalf of their children. Most often, Outcome 2 is one of the stronger outcome-level mean results. That was the case this year ( $M = 3.30$ ,  $n = 56$ ). It was statistically significantly lower than the previous year ( $3.54$ ,  $n = 79$ ).

The greatest strength was in whether or not caregivers were *comfortable in meetings with professionals* ( $M = 3.71$ ). The relative weakness was in tied between *knowing what to do if we are not satisfied with any part of our child's program and services* ( $M = 3.07$ ) and being *fully informed about the programs and services that are available for our child and family* ( $M = 3.07$ ).

### Item 4: We are fully informed about the programs and services that are available for our child and family

The mean response on Item 4 was  $3.07$ ,  $n = 56$ ,  $SD = .850$ . About 75% of responding families indicated they were informed about programs/services most (39%) or all (36%) of the time. The item mean was below the overall survey mean (3.32). It was statistically significantly lower than the previous year ( $3.37$ ,  $n = 79$ ). It is not unusual for response on this item to be among relatively weaker items on the survey.

#### Item 4 Response Frequency

Rating	Frequency	Percent
1-None of the time	2	3.6
2-Some of the time	12	21.4
3-Most of the time	22	39.3
4-All of the time	20	35.7
Missing:	0	---

### Item 5: We have been informed of our right to choose which Early Intervention services we receive

The mean response on Item 5 was  $3.38$ ,  $n = 56$ ,  $SD = .945$ . About 79% of respondents indicated they were informed of their right to choose services most (14%) or all (64%) of the time. This item usually has a strong result and this year was typical. The item mean was above the overall survey mean (3.32). It was lower than the previous year ( $3.53$ ,  $n = 79$ ), but not significantly.

#### Item 5 Response Frequency

Rating	Frequency	Percent
1-None of the time	3	5.4
2-Some of the time	9	16.1
3-Most of the time	8	14.3

Rating	Frequency	Percent
4-All of the time	36	64.3
Missing:	0	---

**Item 6: We are comfortable participating in meetings with professionals to plan services or activities for our child**

The mean response on Item 6 was **3.71**,  $n = 55$ ,  $SD = .567$ . A very high 95% of respondents indicated they were comfortable participating in meetings most (18%) or all (74%) of the time. This item is typically strong and this year it was tied as the strongest item on the survey. It was lower than the previous year (3.80,  $n = 78$ ), but not significantly.

*Item 6 Response Frequency*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	3	5.4
3-Most of the time	10	17.9
4-All of the time	42	75.0
Missing:	1	1.8

**Item 7: We know what to do if we are not satisfied with any part of our child’s program and services**

The mean response on Item 7 was **3.07**,  $n = 55$ ,  $SD = .979$ . About 75% of responding families indicated they knew what to do if not satisfied with programs/services most (32%) or all (40%) of the time. This year it was statistically significantly lower than the previous year (3.47,  $n = 79$ ).

*Item 7 Response Frequency*

Rating	Frequency	Percent
1-None of the time	5	8.8
2-Some of the time	9	15.8
3-Most of the time	18	31.6
4-All of the time	23	40.4
Missing:	2	3.5

**Outcome 3: Helping Children Develop & Learn**

Items 8-10 on the survey asked respondents to indicate how well they knew how to help their children develop, behave, and learn new skills. The mean response for Outcome 3 ( $M = 3.25$ ,  $n = 55$ ) was below the overall survey mean ( $M = 3.31$ ). It was higher than the previous year (3.33,  $n = 80$ ), but not significantly.

The strongest item was *working with professionals to develop a plan* ( $M = 3.47$ ). The greatest weakness was in knowing how to *help children learn to behave* ( $M = 3.05$ ). This is a consistent pattern within Outcome 3.

### Item 8: We know how to help our child develop and learn

The mean response on Item 8 was **3.24**,  $n = 55$ ,  $SD = .744$ . About 82% of responding families indicated they knew how to help children develop and learn most (39%) or all (41%) of the time. This item is historically among stronger results on the survey, but it started to be significantly weaker in 2019 (3.27,  $n = 73$ ) and continued to be weak in 2020 (3.24,  $n = 80$ ). It was lower than the previous year (3.37,  $n = 79$ ) but not significantly.

#### Item 8 Response Frequency

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	10	17.9
3-Most of the time	22	39.3
4-All of the time	23	41.1
Missing:	1	1.8

### Item 9: We know how to help our child learn to behave

The mean response on Item 9 was **3.05**,  $n = 55$ ,  $SD = .780$ . About 76% of responding families indicated they knew how to help their children behave most (44%) or all (30%) of the time. A notable 24% indicated they knew less often. Response on this item tends to be among relatively weaker results. It was lower than the previous year (3.12,  $n = 77$ ), but not significantly.

#### Item 9 Response Frequency

Rating	Frequency	Percent
1-None of the time	1	1.8
2-Some of the time	12	21.4
3-Most of the time	25	44.6
4-All of the time	17	30.4
Missing:	1	1.8

### Item 10: Our family has worked with professionals to develop a plan to help our child learn new skills

The mean response on Item 10 was **3.47**,  $n = 55$ ,  $SD = .742$ . About 89% of respondents indicated they had worked with professionals to develop plans for their children most (29%) or all (59%) of the time. Typically, this item has fairly strong results. It was slightly lower than the previous year (3.48,  $n = 79$ ), but not significantly.

#### Item 10 Response Frequency

Rating	Frequency	Percent
1-None of the time	1	1.8
2-Some of the time	5	8.9
3-Most of the time	16	28.6
4-All of the time	33	58.9
Missing:	1	1.8

## Outcome 4: Social Support

Items 11-13 on the survey asked respondents to indicate access to resources for emotional support, assistance from others, and to do activities their families enjoyed. The mean response for Outcome 4 ( $M = 3.12$ ) was below the overall survey mean ( $M = 3.31$ ). Outcome 4 typically is one of the weaker outcomes. It was higher than the previous year (3.27,  $n = 80$ ), and although close to significant ( $p=0.051$ ), the difference was not significant.

The greatest strength within Outcome 4 was in having *people to talk with* to deal with problems or celebrate when good things happened ( $M = 3.63$ ). The greatest weakness was in having resources for *occasional childcare* ( $M = 2.75$ ); this was the greatest weakness of all items this year. This represents a typical pattern within Outcome 4.

### Item 11: There are people we can talk with any time we want to help us deal with problems or celebrate when good things happen

The mean response on Item 11 was **3.45**,  $n = 55$ ,  $SD = .765$ . About 91% of responding families indicated they had people they could talk with to deal with problems or celebrate good things most (33%) or all (58%) of the time. As is typical, response on this item was among stronger results on the survey. It was lower than the previous year (3.63,  $n = 79$ ), but not significantly.

*Item 11 Response Frequency*

Rating	Frequency	Percent
1-None of the time	2	3.6
2-Some of the time	3	5.4
3-Most of the time	18	32.7
4-All of the time	32	58.2
Missing:	1	1.8

### Item 12: We have people we can call on for help when we need someone to watch our child for a short time

The mean response on Item 12 was **2.75**,  $n = 55$ ,  $SD = 1.109$ . The higher standard deviation indicates a larger variance among responses. About 44% of responding families indicated they had people to watch their children for a short time most (21%) or all (34%) of the time. A substantial 56% had this resource less often. Typically, this item is among the weakest on the survey; it was the weakest item on the 2021 survey and was the weakest on the 2022 survey. It was lower than the previous year (3.05,  $n = 79$ ), but not significantly.

*Item 12 Response Frequency*

Rating	Frequency	Percent
1-None of the time	9	16.4
2-Some of the time	15	26.8
3-Most of the time	12	21.4
4-All of the time	19	33.9
Missing:	1	1.8

### Item 13: We are able to do the activities our family enjoys

The mean response on Item 13 was **3.15**,  $n = 55$ ,  $SD = .891$ . About 75% of responding families indicated they were able to do the activities they enjoyed most (30%) or all (43%) of the time. Typically, response on this item is among relatively weaker results. This year it was lower than the previous year (3.39,  $n = 70$ ), but not significantly.

#### Item 13 Response Frequency

Rating	Frequency	Percent
1-None of the time	2	3.6
2-Some of the time	12	21.4
3-Most of the time	17	30.4
4-All of the time	24	42.9
Missing:	1	1.8

### Outcome 5: Community Access

Items 14, 15, and 17 asked respondents to indicate levels of access to desired services, programs, and activities in the community. Item 17 regarding childcare is not applicable to a high proportion of respondents, which excludes it from aggregate analyses. The mean for Outcome 5 without Item 17 ( $M = 3.35$ ) was just above the overall survey mean (3.31), while the mean on Item 17 ( $M = 3.12$ ,  $n = 25$ ) was just above it. Approximately **3.24** can be considered an estimated mean for the whole outcome area.

Access to *excellent medical care* ( $M = 3.56$ ) was the greatest strength. The greatest weakness was access to *participate fully in the community* ( $M = 3.15$ ). This represents a typical pattern within Outcome 5.

### Item 14: We have excellent medical care for our child

The mean response on Item 14 was **3.56**,  $n = 55$ ,  $SD = .660$ . A high 91% of respondents indicated they had access to excellent medical care for their children most (25%) or all (64%) of the time. Response on this item was among the stronger results on the survey, which is a typical result. This year it was slightly higher than the previous year (3.55,  $n = 80$ ), but not significantly.

#### Item 14 Response Frequency

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	5	8.9
3-Most of the time	14	25.0
4-All of the time	36	64.3
Missing:	1	1.8

### Item 15: Our child has opportunities to fully participate in activities in the community (e.g., playing with others, social or religious events)

The mean response on Item 15 was **3.15**,  $n = 55$ ,  $SD = .989$ . About 76% of responding families indicated their children had access to opportunities for community inclusion most (29%) or all (47%) of the time. A notable 24% indicated less access. Most often,

response on this item leans toward relatively weaker results. This year was slightly higher than the previous year (3.14,  $n = 78$ ), but not significantly.

*Item 15 Response Frequency*

Rating	Frequency	Percent
1-None of the time	5	9.1
2-Some of the time	8	14.5
3-Most of the time	16	29.1
4-All of the time	26	47.3
Missing:	1	1.8

**Item 17: We have excellent childcare for our child**

Note: Items about childcare have a “not applicable” option because it is known that a high proportion of families in this population do not need or want childcare. Response has proven to be more accurate if there is a clear option not to rate these items.

About 45% ( $n = 25$ ) of families indicated Item 17 was applicable to them. The mean response was **3.12**,  $SD = 1.092$ . About 87% of those who rated this item indicated they had access to excellent childcare most (35%) or all (52%) of the time. This item often has a strong result. This year it was lower than the previous year (3.47,  $n = 32$ ), but not significantly.

*Item 17 Response Frequency*

Rating	Frequency	% of Total	% of Applicable
1-None of the time	4	7.1	16.0
2-Some of the time	1	1.8	4.0
3-Most of the time	8	14.3	32.0
4-All of the time	12	21.4	48.0
Not applicable:	31	55.4	

**Item 18: Our ILP provider works closely with our childcare provider**

Note: This childcare item is not considered in outcome-level results for Outcome 5. It is however relevant to ILP services and related to Item 17. The proportion of most/all responses is the targeted measure on this item. About 50% is a positive result as this collaboration is not always necessary, appropriate, or possible.

About 31% ( $n = 18$ ) of families indicated Item 18 was applicable to them. About **44%** of these responders indicated ILP providers worked closely with childcare providers most or all of the time. This is lower than the 47% response of the previous year.

*Item 18 Response Frequency*

Rating	Frequency	% of Total	% of Applicable
1-None of the time	9	16.1	50.0
2-Some of the time	1	1.8	5.5
3-Most of the time	2	3.6	11.1
4-All of the time	6	10.7	33.3
Not applicable:	38	67.9	

## Outcome 6: Satisfaction with ILP Services

Note: Detail about regional patterns of responses on satisfaction items is covered in a later section of this report.

Item 16 on the survey is about what people thought about the quality and effectiveness of the services they received. It started with the statement, “Our ILP provider has done an excellent job...” followed by statements that respondents were asked to rate. Three of these were the traditional satisfaction indicators based on OSEP standards covering how well the ILP helped families know their rights, communicate their children’s needs, and to help their children develop and learn. Only these three are included in collective analyses for Outcome 6, or overall satisfaction. This year, additional instructions were provided prior to the satisfaction questions to communicate the detail in the construct per the OSEP Family Outcomes Survey ©2010. The mean response ( $M = 3.64$ ) was above the overall survey mean ( $M = 3.31$ ), a typical pattern for Outcome 6. It was higher than the previous year (3.62,  $n = 79$ ), but not significantly.

### Item 16-1: Our ILP provider has done an excellent job helping us know our rights

The mean response on Item 16-1 was **3.58**,  $n = 55$ ,  $SD = .686$ . About 89% of responding families indicated the ILP had done an excellent job helping them know their rights most (20%) or all (68%) of the time. About 11% were less satisfied. The mean was slightly lower than the previous year (3.62,  $n = 79$ ), but not significantly.

#### Item 16-1 Response Frequency

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	6	10.7
3-Most of the time	11	19.6
4-All of the time	38	67.9
Missing:	1	1.8

### Item 16-2: Our ILP provider has done an excellent job helping us effectively communicate our child’s needs

The mean response on Item 16-2 was **3.71**,  $n = 55$ ,  $SD = .629$ . About 91% of responding families indicated the ILP had done an excellent job helping them communicate their children’s needs most (11%) or all (79%) of the time. About 9% were less satisfied. Response on this item is typically a very strong result and tied as the strongest item on the survey. The mean was higher than the previous year (3.62,  $n = 79$ ), but not significantly.

#### Item 16-2 Response Frequency

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	5	8.9
3-Most of the time	6	10.7
4-All of the time	44	78.6
Missing:	1	1.8

**Item 16-3: Our ILP provider has done an excellent job helping us help our child develop and learn**

The mean response on Item 16-3 was **3.64**,  $n = 55$ ,  $SD = .649$ . About 91% of responding families indicated the ILP had done an excellent job helping them help their children develop and learn most (18%) or all (71%) of the time. About 9% were less satisfied. Response on this item is typically a very strong result. The mean was slightly lower than the previous year (3.65,  $n = 79$ ), but not significantly.

*Item 16-3 Response Frequency*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	5	8.9
3-Most of the time	10	17.9
4-All of the time	40	71.4
Missing:	1	1.8

**Social-Emotional Development**

The last statement under Item 16 was added in 2020 to measure success of ILP efforts to improve social-emotional development (SED).

**Item 16-4: Our ILP provider has done an excellent job helping us enjoy our relationship with our child**

The mean response on Item 16-4 was **3.64**,  $n = 55$ ,  $SD = .729$ . About 89% of responding families indicated the ILP had done an excellent job helping them enjoy relationships with their children most (13%) or all (76%) of the time. This result was slightly lower than the previous year ( $M = 3.70$ ,  $n = 79$ ), but not significantly.

*Item 16-4 Response Frequency*

Rating	Frequency	Percent
1-None of the time	1	1.8
2-Some of the time	5	9.1
3-Most of the time	7	12.7
4-All of the time	42	76.4
Missing:	1	1.8

Table 7 shows results at the regional-level on the SED item were all strong. The strongest result was in the Northern Region.

*Table 7: Mean SED Results by Region*

Region	<i>M</i>	<i>n</i>
<b>Northern Region:</b> ACC, NSH, NWA, TCC	3.78	18
<b>Anchorage Region:</b> PIC, FOC	3.55	20
<b>Southcentral Region:</b> BBA, KAN, MSU, YKH	3.71	7
<b>Southeast Region:</b> CFC, CCK, FCS, HCS, REA	3.50	10

## Services During the Pandemic

ILPs had to adjust during the pandemic to safely continue delivering early intervention services for families. Many adopted “distance” or “telehealth” methods. They reported using more strategies such as mailings, phone calls, and virtual home visits. The survey asked respondents to indicate how well distance strategies worked for them. They were presented with the following options and asked to choose the one that was most true for their family. There were 54 families who considered this item applicable to them. The Over half of families (56%) indicated distance services were helpful, but in-person services worked better. However, about a 30% hoped distance services would continue to be an option after the pandemic.

- 17 (30%)- It works very well for us and we hope it is still an option after the pandemic
- 32 (57%)- It has been helpful during the pandemic, but in-person works better for us
- 2 (3.6%) - It works okay, but we wish the ILP offered more to us or contacted us more often
- 0 - It was not offered to us and we had little to no contact with the ILP

There were two “not applicable” options:

- 2 - Our family made a choice to stop ILP services during the pandemic
- 1 - Our family received in-person services through the pandemic

## Expanded Look at Satisfaction with ILP Services

### Statewide Satisfaction

The three satisfaction items based on OSEP standards and included in Outcome 6 have remained exactly the same since the 2008 survey. Overall satisfaction in 2022 was a mean of **3.60** on a 1-4 scale. The vast majority of families (approximately 90%) were satisfied all ( $\cong 74\%$ ) or most ( $\cong 16\%$ ) of the time with the ILP services they received.

### Satisfaction Trend

With the exception of a 2012 downturn in satisfaction attributed to higher turnover of ILP service providers, satisfaction in 2022 continued an overall trend of very strong results. The results since 2008 are illustrated in Figure 2.

*Figure 2: Overall satisfaction pattern since 2008*



### Regional Satisfaction

Caveat: When item data is broken down by region and further broken down by grantee, results are increasingly less reliable and should be interpreted with caution.

### Overall Satisfaction by Region

Table 8 shows overall satisfaction for each Alaska ILP region. The Northern region had the highest satisfaction mean. All results were strong. There was not a statistically meaningful difference across the four regions.

*Table 8: Overall satisfaction by ILP region*

Region	<i>M</i>	<i>n</i>
<b>Northern Region:</b> ACC, NSH, NWA, TCC	3.76	18
<b>Anchorage Region:</b> PIC, FOC	3.60	20
<b>Southcentral Region:</b> BBA, KAN, MUS, YKH	3.52	7
<b>Southeast Region:</b> CFC, CCK, FCS, HCS, REA	3.60	10

Table Note: Statewide satisfaction mean was 3.60 ( $n = 55$ )

### Satisfaction Items by Region

Note: Capped and bolded text below from the satisfaction items is used to identify these items in following tables and figures: *Our ILP provider has done an excellent job...*

- helping us know our **RIGHTS**.
- helping us effectively communicate our child’s **NEEDS**.
- helping us help our child develop and **LEARN**.

Table 9 shows satisfaction results broken down by region. Most often, regional item means are relatively lower or higher than others, but not dramatically different. The highest mean on a satisfaction item this year was in the Northern region.

*Table 9: Mean response on satisfaction items by ILP region*

ILP Region (n)	ILP Grantees	RIGHTS	NEEDS	LEARN
Northern (18)	ACC, NWA, NSH, TCC	3.78	3.78	3.89
Anchorage (20)	PIC, FOC	3.55	3.60	3.65
Southcentral (7)	BBA, KAN, MSU, YKH	3.57	3.57	3.43
Southeast (7)	CFC, CCK, FCS, HCS, REA	3.57	3.57	3.43

Table Note: Statewide satisfaction mean was 3.60 (n = 55)

Figure 3 illustrates relative responses on the items across regions.

*Figure 3: Mean results on satisfaction items by region*

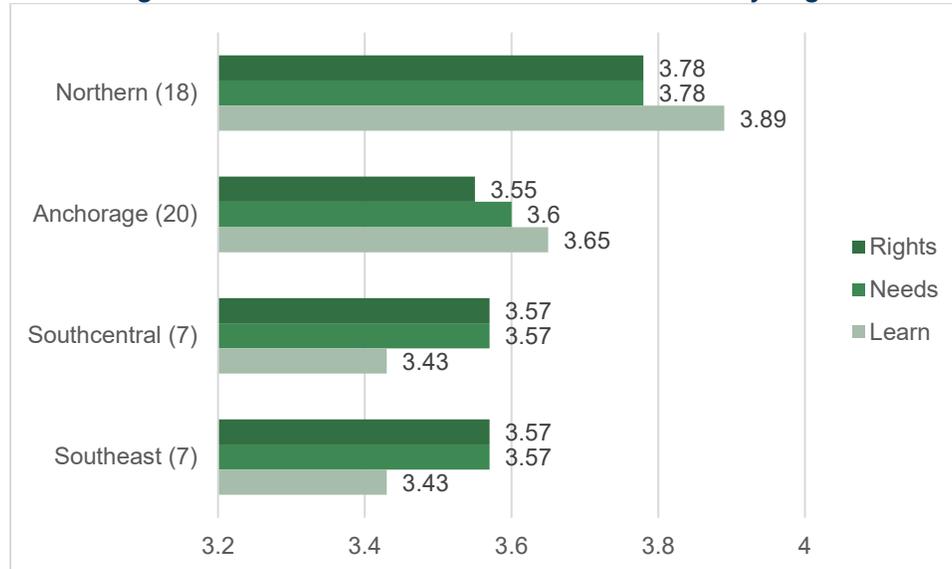


Table 10 shows mean satisfaction results further broken down by ILP grantee.

*Table 10: Mean response on satisfaction items by ILP grantee*

ILP Grantee (ILP Code – n)	RIGHTS	NEEDS	LEARN
Alaska Center for Children & Adults (ACC-17)	3.59	3.88	3.76
Bristol Bay Area Health Corporation (BBA-1)	3.00	3.00	3.00
Center for Community (CFC-0)	---	---	---
Community Connections (CCK-3)	4.00	4.00	3.67
Frontier Community Services (FCS-1)	4.00	4.00	4.00
FOCUS (FOC-6)	3.33	3.33	3.50
Kodiak Area Native Association (KAN-1)	4.00	4.00	4.00
Mat-Su Services for Children & Adults (MSU-4)	3.75	3.75	3.50
Northwest Arctic Borough SD (NWA-0)	---	---	---
Norton Sound Health Corporation (NSH-0)	---	---	---
Programs for Infants & Children (PIC-14)	3.64	3.71	3.71
REACH, Inc. (REA-4)	3.25	3.25	3.00
(HSC-0)	---	---	---
Tanana Chiefs Conference (TCC-1)	4.00	4.00	4.00
Yukon-Kuskokwim Health Corporation (YKH-1)	3.00	3.00	3.00

The following narrative takes a closer look at details of responses on the three satisfaction items within each region. It also looks more closely at regional proportions of respondents who indicated they were satisfied all or most of the time on each item. There is more confidence in regional level results if regional response rates were acceptable and the responding sample seems to be representative. There was a lower response rate in the Southeast region, but it was acceptable for a survey method.

Table 11 is a summary of the proportion of respondents in each region who indicated satisfaction on each item most or all of the time. While results are relatively higher or lower, there were no statistically significant differences among regional satisfaction results.

*Table 11: Summary of satisfaction percentages by region*

ILP Region (n)	ILP Grantees	RIGHTS%	NEEDS%	LEARN%
Northern (18)	ACC, NWA, NSH, TCC	94	94	94
Anchorage (20)	PIC, FOC	90	85	95
Southcentral (7)	BBA, KAN, MSU, YKH	100	100	86
Southeast (7)	CFC, CCK, FCS, HSC, REA	95	95	86

Table Note: Statewide (n = 55) Rights 89%, Needs 91%, Learn 91%

### Northern Region

Forty six percent (46%) of contacted families in the Northern region responded to the 2022 survey. Of the 18 respondents, most noted an ILP did an excellent job most or all of the time helping them to know their rights (94%), helping them to effectively communicate their children’s needs (94%), and helping them to help their children develop and learn (94%). Most often, results are 90% or better on this measure for the region.

Mean satisfaction for the Northern region ( $M = 3.76$ ,  $SD = .522$ ) was exceptionally strong, and higher than the previous year. Item means were all very high, ranging from 3.78 to 3.89.

*Northern Region: Rights (n = 18)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	1	5.6
3-Most of the time	2	11.1
4-All of the time	15	83.3

*Northern Region: Needs (n = 18)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	1	5.6
3-Most of the time	0	---
4-All of the time	17	94.4

*Northern Region: Learn (n = 18)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	1	5.6
3-Most of the time	2	11.1
4-All of the time	15	83.3

### **Anchorage Region**

Forty five percent (45%) of contacted families in the Anchorage region responded to the 2022 survey. Of the 20 respondents, most noted an ILP did an excellent job most or all of the time helping them to know their rights (90%), helping them to effectively communicate their children’s needs (85%), and helping them to help their children develop and learn (95%). This is lower than the previous year.

Mean satisfaction for the Anchorage region ( $M = 3.60$ ,  $SD = .627$ ) was very strong. Strength has been consistent for seven years. Item means were all high, ranging from 3.55 to 3.65.

*Anchorage Region: Rights (n = 20)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	2	10.0
3-Most of the time	5	25.0
4-All of the time	13	65.0

*Anchorage Region: Needs (n = 20)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	3	15.0
3-Most of the time	2	10.0
4-All of the time	15	75.0

*Anchorage Region: Learn (n = 20)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	1	5.0
3-Most of the time	5	25.0
4-All of the time	14	70.0

**Southcentral Region**

Thirty five percent (35%) of contacted families in the Southcentral region responded to the 2022 survey. Of the eight respondents, most noted an ILP did an excellent job most or all of the time helping them to know their rights (100%), helping them to effectively communicate their children’s needs (100%), and helping them to help their children develop and learn (86%). This is higher than the previous year.

Mean satisfaction for the Southcentral region ( $M = 3.52$ ,  $SD = .604$ ) was strong, a consistent result for seven years. Item means were all high, ranging from 3.43 to 3.57.

*Southcentral Region: Rights (n = 7)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	0	---
3-Most of the time	3	42.9
4-All of the time	4	57.1

*Southcentral Region: Needs (n = 7)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	0	---
3-Most of the time	3	42.9
4-All of the time	4	57.1

*Southcentral Region: Learn (n = 7)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	1	14.3
3-Most of the time	2	28.6
4-All of the time	4	57.1

**Southeast Region**

Thirty one percent (31%) of contacted families in the Southeast region responded to the 2022 survey. Of the ten respondents, most noted an ILP did an excellent job most or all of the time helping them to know their rights (95%), helping them to effectively communicate their children’s needs (95%), and helping them to help their children develop and learn (86%). High percentages are typical for the region, often hitting well over 90%.

Mean satisfaction in the Southeast region ( $M = 3.60$ ,  $SD = .681$ ) was very strong. Item means were all very high, ranging from 3.48 to 3.57. Strong satisfaction on this measure has been highly consistent for the region over time.

*Southeast Region: Rights (n = 7)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	0	---
3-Most of the time	3	42.9
4-All of the time	4	57.1

*Southeast Region: Needs (n = 7)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	0	---
3-Most of the time	3	42.9
4-All of the time	4	57.1

*Southeast Region: Learn (n = 7)*

Rating	Frequency	Percent
1-None of the time	0	---
2-Some of the time	1	14.3
3-Most of the time	2	28.6
4-All of the time	4	7.1

## Comments Added to Surveys

Notes: Because researchers at the Center for Human Development have a responsibility to take reasonable measures to protect identities of survey respondents, identifying information respondents included in comments is excluded or replaced with generic terms in brackets. This type of information includes names of respondents, children, service providers, programs, areas of residence, or any contact information. If a specific disability or the amount of information about a unique medical condition and/or personal circumstances seems to make a respondent more identifiable, all or parts of the information may be excluded. In very rare instances, completely irrelevant comments may be entirely excluded.

At the end of the survey, there is a space to add comments. Twenty-one (63%) respondents added comments to surveys. Potentially identifying information has been removed or replaced with generic terms in brackets. Unlike last year, few comments related to COVID and/or distance methods of service delivery due to COVID restrictions.

### Fourteen Positive Comments (67% of comments)

- {name} been phenomenal, done up and above for me and my kids. Me and my husband appreciate the help and services.

- Had {name} and she was amazing! She came in person to IEP meeting at my child's school and that was very helpful
- I am continually impressed with the ILP. I have a range of kids of all ages with FASD and they always help solve or help with our problems.
- I feel like got into program at a sticky time because we joined during the pandemic. We were able to find support for our child through the program but I wish it would go beyond age 3 since there are some things we haven't worked on. As a whole, our child has advanced and our coordinator did a fantastic job supporting us.
- I think ACCA did a great job in assisting us in the beginning via zoom meetings. I felt like they supported and continued to be of great assistance when we chose to start private speech therapy in person. They provided us with great information on providers and early learning Pre-K through the school district.
- Is doing great a wonderful job
- It has been a really great experience. Our son has improved a lot since he started the program.
- {provider staff name} and {provider staff name} are awesome
- Our family was accommodated through very challenging times/family crisis. We are very grateful for the kindness and accommodations made for our family.
- Really enjoyed our time with staff and we know {child's name} enjoyed it too
- Really liked how flexible they were and any questions I had they answered and then some and resources I needed or didn't know I needed they made sure I knew about them.
- The program has been extremely helpful. The resources that are available now have been very important to me and I have really appreciated the ILP.
- We have aged out of PIC but very much appreciate the support they (esp {name}) gave to our son. She was particularly helpful in the transition to ASD services for 3+
- Whatever the guidelines are seem to be amazing, was told what to work on with him, had things to practice until the next appointment. He actually ended up with no ongoing problems related to his gestational period where birth mom was doing drugs and was a 5 weeks preemie on top of that. As far as learning, no disabilities seen.

### **Three Mixed Comments (14% of comments)**

- Child care has been extremely difficult during COVID/approval with OCS. I have been attempting to get (them) enrolled with occupational therapy but awaiting return calls with two different agencies. Speech is slowly improving but some behaviors continuing.
- Our first few months in the program we had very consistent care, but over time that has changed. We really love our ILP provider but it seems her caseload is too full and she is not able to provide us the same quality care she did initially. Communication has also not been great.
- Working with {name} at Reach was excellent! Working with the school district, not so much.

### Three Negative Comments (14% of comments)

- I think the program is too short. My grandson was let go when he turned 3. Early learning helped get grandson into pre-school and very helpful to guide to call this or that agency. This woman in Fairbanks has been incredible, sent all sorts of information. BH with {name}, didn't work and I dropped the program because they immediately wanted to put grandson on medication. They called once a week and sometimes he was doing well and sometimes he wasn't but, it was doing behavioral health with me, not with grandson and he is the one who needs the support. We are his grandparents, his legal guardians, we have applied for different programs and we have gotten the message that there are so many children in Alaska and there are endless waiting lists. I don't understand how the list could be that long and it could be years. That is a little bit sad.
- The whole system can be overwhelming to a person that is new to the world of special needs and supporting programs. Feels like it's hard to get a grasp of the program and options in the beginning.
- Was waiting for home visit and didn't get home visit after they gave a call. I stayed home and they never came to see her (my child). We didn't have any contact. I waited, waited and didn't go anywhere. They were going to talk to me about items but no call was made at 10am like they said.

### One Other Comment (5% of comments)

- The link to this website was difficult to type in manually. This makes it difficult to actually complete the survey online.

### Nature of Comments by Region

Note: If requested, de-identified comments are shared with the Alaska ILP office separate from this report sorted by ILP grantees. This information is treated as confidential for their use only. From a management standpoint, this allows the Alaska ILP to pinpoint specific problems for targeted training/intervention for ILP staff.

The subset of respondents who voluntarily added comments to surveys cannot be considered representative of the population that received services, either statewide or regionally. Therefore, it is not appropriate to broadly judge regions or programs based strictly on comments. With that caveat in mind, Table 12 shows the nature of comments sorted by Alaska ILP regions.

*Table 12: Distribution of comments by region*

ILP Region	ILP Grantees	Positive	Mixed	Negative	Other
Northern	ACC, NWA, NSH, TCC	6	---	1	1
Anchorage	PIC, FOC	3	2	---	---
Southcentral	BBA, KAN, MSU, YKH	2	---	1	---
Southeast	CFC, CCK, FCS, REA, HCS	3	1	1	---

## Conclusions

It can be concluded from the results of the 2022 Family Outcomes Survey that the vast majority of families (approximately 90%) were satisfied all or most of the time with the ILP services they received. Overall, family satisfaction continued at a high level, and there was no statistically significant difference in satisfaction across regions.

In the 2022 survey, the overall pattern of results at the outcome-level was fairly similar to results in 2021. Item-level results were also fairly similar with one notable exception. An item within Outcome 2 (rights and advocacy) showed a statistically significant decline in 1) families being informed about the program and services that are available and 2) families knowing what to do if they are not satisfied with services.

The item that was added to the survey in 2020 to measure success of ILP efforts to improve social-emotional development continued to have strong statewide and regional results.

Respondents provided about distance ILP services they received during the pandemic. Over half of families (56%) indicated distance services were helpful, but in-person services worked better. However, about a 30% hoped distance services would continue to be an option after the pandemic.

Below are the aspects of family knowledge, resources, and abilities from the strongest to the weakest, as measured in the 2022 survey. This does not include the three satisfaction items or the SED item, which are more focused on respondent perceptions of the quality of the services provided by the ILP.

### ***Stronger Outcomes***

- Worked with professionals to develop a plan ( $M = 3.71$ )
- Access to resources for excellent medical care ( $M = 3.56$ )\*

### ***Moderate to Weaker Outcomes***

- Comfortable in meetings with professionals ( $M = 3.47$ )\*
- Access to social resources, people to talk with ( $M = 3.45$ )\*
- Able to perceive the child's progress ( $M = 3.39$ )\*
- Informed of the right to choose EI services ( $M = 3.38$ )\*
- Understands the child's development ( $M = 3.25$ )
- Knows how to help the child develop and learn ( $M = 3.24$ )
- Able to do the activities the family enjoys ( $M = 3.15$ )
- Access to opportunities for community inclusion ( $M = 3.15$ )
- Access to resources for excellent childcare ( $M = 3.12$ )

### ***Weakest Outcomes***

- Informed of available programs and services ( $M = 3.07$ )
- Knows what to do if not satisfied with services ( $M = 3.07$ )
- Knows about the child's special needs ( $M = 3.05$ )
- Knows how to help the child learn to behave ( $M = 3.05$ )

- Access to resources for occasional childcare ( $M = 2.75$ )

\*Items that were among the stronger items in the previous year.

## Appendix A: Invitation Letter & Survey Instrument



Dear Parent or Guardian:

Hello! The State of Alaska Early Intervention/Infant Learning Program (ILP) is looking for ways to improve early services for children. You can help by completing the enclosed brief survey, which has questions about the services your child received during the previous calendar year from one of the community Infant Learning Programs. There is a map and list of those programs on the back of this letter for your reference. Your participation in this survey is completely voluntary and we hope you will take about 5-10 minutes to give your feedback.

The UAA Center for Human Development (CHD) is an independent contractor collecting the surveys and they will be the only ones to see completed surveys. You can use the enclosed paper copy and return it to CHD in the postage-paid envelope, or you can complete it online at this address:

[https://uaa.co1.qualtrics.com/jfe/form/SV\\_9vqIvaKMp3QKltc](https://uaa.co1.qualtrics.com/jfe/form/SV_9vqIvaKMp3QKltc). You can also call CHD at (907) 264-6277 weekdays between 9am and 4pm and ask to complete the "Family Outcomes Survey" over the phone.

Your responses will be kept confidential from the Alaska ILP. The staff from the Alaska ILP will never see individual surveys at any time. No individual responses will be identified in reports or summaries of results. Your answers will be grouped together with those from other families. No identifying information will be stored by CHD after this survey ends. Information that can identify you (like your name) will be removed from all data. Data without identifiers will be saved so that future results can be compared to past results.

By returning a completed survey or completing it online or over the phone, you are agreeing to participate. If you choose the online or phone option, please have this letter handy as you will need the "Survey Verification Number" printed at the bottom to begin the survey. CHD will check these numbers off a list so they stop contacting people who have already completed the survey.

If CHD has not heard from you in a couple of weeks, they will give you a call or send a reminder. Please complete the survey no later than April 30. If you have any questions about this survey, you are welcome to contact me at 451-5041 in Fairbanks or 1-800-770-1672 toll free.

Thank you very much for your help!

Sincerely,

A handwritten signature in black ink, appearing to read "Susan E. Kessler".

Susan E. Kessler, MEd.  
Early Intervention/Infant Learning Program Unit Manager  
State of Alaska Senior and Disabilities Services

### Survey Verification Number:

If you have any questions about your rights as a participant in program evaluation, please contact the Office of Research Integrity & Compliance at UAA: (907) 786-1099

## *2022 Family Outcomes Survey*

Please circle the number that best reflects how often each statement below is true for you and your family. Circle **only one number** for each answer. It is okay if you are answering just for yourself (your own opinion or experience) or as a family with shared opinions or experiences.

The statements refer to a “child” but we know some families have more than one child who received services from an Infant Learning Program (ILP). In those cases your answers reflect your general or averaged opinions or experiences.

Survey Verification Number:

\_\_\_\_\_

	None of the Time	Some of the Time	Most of the Time	All of the Time
1. Our child is growing and learning and we understand our child's development very well.	1	2	3	4
2. We know most of what we need to know about our child's special needs.	1	2	3	4
3. We can tell if our child is making progress.	1	2	3	4
4. We are fully informed about the programs and services that are available for our child and family.	1	2	3	4
5. We have been informed of our right to choose which Early Intervention services we receive.	1	2	3	4
6. We are comfortable participating in meetings with professionals to plan services or activities for our child.	1	2	3	4
7. We know what to do if we are not satisfied with any part of our child's program and services.	1	2	3	4
8. We know how to help our child develop and learn.	1	2	3	4
9. We know how to help our child learn to behave.	1	2	3	4
10. Our family has worked with professionals to develop a plan to help our child learn new skills.	1	2	3	4
11. There are people we can talk with any time we want, to help us deal with problems or celebrate when good things happen.	1	2	3	4
12. We have people we can call on for help when we need someone to watch our child for a short time.	1	2	3	4
13. We are able to do the activities our family enjoys.	1	2	3	4
14. We have excellent medical care for our child.	1	2	3	4
15. Our child has opportunities to fully participate in activities in the community (e.g., playing with others, social or religious events).	1	2	3	4

The next item is about knowing your rights. Consider services and supports for you and your child, rights related to your child’s special needs, being given useful information about available options after your child leaves the program, and having your rights explained in ways that are easy for you to understand.

None of the Time  
Some of the Time  
Most of the Time  
All of the Time

16. Our ILP provider has done an excellent job helping us know our rights. 1 2 3 4

The next item is about communicating your child’s needs. Consider the information your ILP provider gives you about your child’s delays or needs, how they listen to what is important to you, respect your choices, connect you with other services, talks with you about your family’s strengths and needs, and develops a good relationship with you.

17. Our ILP provider has done an excellent job helping us effectively communicate our child’s needs. 1 2 3 4

The next two items are about helping your child develop and learn. Consider the information your ILP provider gives you about how to help your child get along with others, how to help your child develop new skills, how to help your child take care of his/her needs, identifying things you do that help your child learn and grow, shares ideas on how to include your child in daily activities, and works with you to know when your child is making progress.

18. Our ILP provider has done an excellent job helping us help our child develop and learn. 1 2 3 4

19. Our ILP provider has done an excellent job helping us enjoy our relationship with our child. 1 2 3 4

The next two items are about your experience with ongoing childcare, like daycare or a babysitter while you go to work. If you don’t have ongoing childcare, these two items are probably not applicable (n/a) to you.

20. We have excellent childcare for our child. 1 2 3 4 n/a

21. Our ILP provider works closely with our childcare provider. 1 2 3 4 n/a

During the pandemic, many ILPs had to adjust to “distance” methods such as mailings, phone calls, telehealth, or virtual home visits. The next question is about how well that works for your family.

22. Which statement is most true about distance ILP services for your family (choose one):

- It works very well for us and we hope it is still an option after the pandemic.
- It has been helpful during the pandemic, but in-person works better for us.
- It works okay, but we wish the ILP offered more to us or contacted us more often.
- It was not offered to us and we had little or no contact with the ILP.
- n/a – Our family made a choice to stop ILP services during the pandemic.
- n/a – Our family received in-person services through the pandemic.

**Comments** written here go directly to the evaluator. For confidentiality, no names or identifying information will be included in reports. Please contact the State of Alaska ILP directly if you have questions for them.

*Thank you very much for taking your time to complete this survey!*

Please return the completed survey in the prepaid envelope to:  
UAA CHD Attn: Tamara, Research/Evaluation  
3211 Providence Dr; Anchorage, AK 99508