

NOTICE TO ALL APPLICANTS: EQUITY FOR STUDENTS, EDUCATORS, AND OTHER PROGRAM BENEFICIARIES

Section 427 of the General Education Provisions Act (GEPA) ([20 U.S.C. 1228a](#)) applies to applicants for grant awards under this program.

ALL APPLICANTS FOR NEW GRANT AWARDS MUST INCLUDE THE FOLLOWING INFORMATION IN THEIR APPLICATIONS TO ADDRESS THIS PROVISION IN ORDER TO RECEIVE FUNDING UNDER THIS PROGRAM.

Please respond to the following requests for information:

- 1. Describe how your entity's existing mission, policies, or commitments ensure equitable access to, and equitable participation in, the proposed project or activity.**

The Wisconsin Department of Health Services, Office of Health Equity is committed to promoting a culture of inclusion where Wisconsinites from all racial and ethnic identities; ages; nationalities; social and economic status; sexual orientation; gender identity or expression; geographical location; religious; political, or ideological perspective; and physical and mental abilities are able to live their best life. DHS protects and promotes the health and safety of all Wisconsinites by identifying, dismantling, and improving institutional structures that inflict and ignore racism, discrimination, and trauma among marginalized communities and centering our work around our core values.

The Wisconsin Birth to 3 Program is dedicated to upholding the Department's mission of racial health equity to ensure equitable access to, and equitable participation in our Part C early intervention services. DHS facilitated local child find efforts through its statewide First 1,000 Days Wisconsin Child Find Campaign in FFY2021 to increase knowledge on the Birth to 3 Program, understand how early intervention can help, and opportunities to access the program for eligible infants and toddlers. Statewide dissemination of the First 1,000 Days materials amongst families and health and child care professionals was expected to result in more infants and toddlers with developmental delays and disabilities accessing resources and services at an earlier age. The First 1,000 Days Wisconsin Child Find Campaign media toolkit and materials are translated into English, Spanish, and Hmong to accommodate for the diverse populations participating Wisconsin's Birth to 3 Program.

DHS undertook initiatives to address the disparities in our indicator 3, child outcomes data, to promote health equity in the Birth to 3 Program. In FFY2021, the Wisconsin Birth to 3 Program allocated a portion of their American Rescue Plan Act (ARPA) funding to implement the Infant Early Childhood Mental Health Consultation Pilot. The goal of the pilot is to improve outcomes related to the social-emotional development of infants and young children enrolled in the Wisconsin Birth to 3 Program in the context of their primary caregiving relationships with a focus on racial health equity. Additionally, DHS awarded roughly \$1.6 million of their ARPA funding to 28 county Birth to 3 Programs through the "Child and Family-Focused Pandemic Recovery Supports Local Grant Initiative" with a focus of enhancing equity and accessibility of resources for children and families disproportionately affected by the pandemic. (Additional information about the ARPA funded projects are available in our Annual Performance Report, Section B of the Phase III, Year 7 SSIP).

Lastly, the Bureau of Children's Services (BCS) that oversees IDEA Part C early intervention services statewide piloted their Racial Health Equity Initiative in 2022 with a bureau-wide implementation in early 2023. The Racial Health Equity Initiative builds upon the broader DHS equity framework (explained above) to address health inequities and disparities and implementing sustainability strategies to promote systemic inclusivity for all children and families enrolled in BCS-administered programs. Every new internal project within BCS must embed a racial health equity lens when changing the policies, programs, and practices that perpetuate inequities, and when developing new policies and programs.

2. Based on your proposed project or activity, what barriers may impede equitable access and participation of students, educators, or other beneficiaries?

BCS has identified the following barriers as ones that may impede equitable access and participation in Wisconsin's Birth to 3 Program: geographical location, language, and diverse workforce.

In FFY2021, DHS held "Children's Disability Programs Diversity and Equity Conversations Family Input Sessions" to continue improving equity in Wisconsin health care systems for diverse populations and for individuals of all physical and mental abilities. DHS received valuable feedback during the family input sessions regarding program improvement opportunities. Families shared that programs need to continue to improve communication with families who preferred language is not English and create video-based resources reflecting diverse families and cultures. Although DHS translates many of their materials in English, Spanish, and Hmong, we recognize an opportunity to expand beyond those to promote inclusivity within our children's disability programs. Similarly, families shared the importance of a diverse early intervention workforce and requested more multicultural staff in addition to providing cultural responsiveness and competency trainings to providers.

3. Based on the barriers identified, what steps will you take to address such barriers to equitable access and participation in the proposed project or activity?

In May of each year, the Circles of Life Annual Conference is held for families with children with disabilities and providers and other professionals who support them. The conference is an opportunity for state staff to hear from diverse families and listen to their experiences in Wisconsin's children's disability programs. BCS plans to solicit feedback from families on how to promote equitable access and participation in all children's disability programs, including Wisconsin's Birth to 3 Program.

After receiving feedback from diverse families last year, DHS plans to address the concerns within our FFY2023 Part C Grant application. Families requested a more diverse workforce. BCS allocated a portion of their Part C Grant to training support and personnel development, which can include cultural competency trainings and stipends for educational programs to continue promoting diversity and mitigating financial limitations.

DHS plans to request information from county Birth to 3 Program on existing family engagement practices and identify opportunities for support. DHS will plan to conduct an Operational Impact Discussion (OID) focusing on family engagement practices and polling counties in a Birth to 3 Program teleconference. In doing so, DHS will have a better understanding of the current landscape for how programs engage families and disseminate child find materials. DHS will analyze the results to determine effective strategies to improve upon diverse family engagement.

4. What is your timeline, including targeted milestones, for addressing these identified barriers?

The BCS Racial Health Equity Initiative is now embedded into all projects as of January 2023. BCS plans to organize an Operational Impact Discussion (OID) with county Birth to 3 Programs in mid-2023 to address family engagement practices. BCS will analyze the State's race and ethnicity breakdown to determine the languages of participating families in our Birth to 3 Program. BCS will work with their communications department on publishing materials in those additional languages for equitable access to information on Part C early intervention services.

Notes:

1. Applicants are not required to have mission statements or policies that align with equity in order to submit an application.
2. Applicants may identify any barriers that may impede equitable access and participation in the proposed project or activity, including, but not limited to, barriers based on economic disadvantage, gender, race, ethnicity, color, national origin, disability, age, language, migrant status, rural status, homeless status or housing insecurity, pregnancy, parenting, or caregiving status, and sexual orientation.
3. Applicants may have already included some or all of this required information in the narrative sections of their applications or their State Plans. In responding to this requirement, for each question, applicants may provide a cross-reference to the section(s) and page number(s) in their applications or State Plans that includes the information responsive to that question on this form or may restate that information on this form.

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1894-0005. Public reporting burden for this collection of information is estimated to average 3 hours per response, including time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain a benefit. If you have any comments concerning the accuracy of the time estimate or suggestions for improving this individual collection, send your comments to ICDocketMgr@ed.gov and reference OMB Control Number 1894-0005. All other comments or concerns regarding the status of your individual form may be addressed to either (a) the person listed in the FOR FURTHER INFORMATION CONTACT section in the competition Notice Inviting Applications, or (b) your assigned program officer.