



ILLINOIS EARLY CHILDHOOD LANDSCAPE

CIVIC FEDERATION

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EXECUTIVE SUMMARY

Illinois' early childhood system plays a central role in supporting children's learning, development, well-being, and family stability from birth to age five. Each year, the State administers nearly \$3 billion in federal, state, and local resources across preschool, child care assistance, early intervention services, home visiting, behavioral health, and other early childhood services. Despite significant investment and recent policy momentum, the system continues to face persistent gaps in access, workforce instability, rising costs, and longstanding inequities. As Illinois transitions to the new Department of Early Childhood (IDEC), understanding these underlying conditions is essential to shaping a more coordinated, responsive, and equitable statewide system.

This report provides a data-driven overview of the early childhood landscape in Illinois. It examines demographic and socioeconomic conditions, governance and organizational structures, funding trends, program access, workforce capacity, quality indicators, family experiences, and outcomes. The goal is not to make policy recommendations, but rather to provide a comprehensive baseline of information to inform future discussions about Illinois' early childhood system.

Illinois' **demographic and socioeconomic trends** reveal both declining populations and rising needs. The number of children under age five in Illinois has declined by more than 107,000 since 2013, with the sharpest decline occurring in rural counties. Yet poverty levels remain high; more than one-third of young children live below 200% of the federal poverty level, and English Learner populations remain concentrated in Cook County, university communities, and growing suburban areas. Disability identification also varies significantly across regions and racial groups. These patterns mean that even as the number of young children shrinks, the intensity of need is rising, increasing demand for developmental supports, bilingual services, and accessible, affordable child care.

At the same time, many **families experience instability** that disrupts access to early childhood programs. Frequent residential moves force families to navigate new providers, new eligibility rules, and new documentation requirements. For programs like the Child Care Assistance Program (CCAP), Early Intervention, and preschool special education, these transitions often result in delays or temporary disruption of services. Because Illinois' early childhood system has long been spread across multiple agencies with separate processes, mobility magnifies fragmentation and reduces continuity for the children who most need stable support.

Illinois' **early childhood funding structure** reflects rising investment in recent years but persistent structural challenges. State-administered funding for early childhood has grown from \$1.75 billion in FY2021 to \$2.44 billion in FY2025, driven by the Early Childhood Block Grant, Smart Start Illinois, and increased state match requirements. When federal Direct Head

Start dollars are included, the total system approaches \$3 billion annually. Yet funding remains insufficient to match the true cost of quality care. Reimbursement rates in the Child Care Assistance Program fall far below market tuition, and the Early Intervention program continues to face workforce shortages and timeliness challenges. The expiration of pandemic-era federal relief further heightens sustainability concerns, especially for providers who relied on one-time funding to offset operating losses, supplement staff wages, and keep classrooms open during periods of reduced enrollment and staffing shortages. These pressures could be compounded by potential federal policy changes, including the recently announced plan by the Trump administration to freeze child care subsidy funding, which would further constrain Illinois' fiscal flexibility and increase reliance on state resources. Complex, overlapping funding streams also impose substantial administrative burden on providers who must braid and reconcile multiple grants, timelines, and reporting requirements.

Access and capacity remain among the system's greatest challenges. In 2023, licensed providers could serve only 31.7% of Illinois children ages 0–5, and just 21% of infants and toddlers. Nearly three-quarters of Illinois counties meet the federal definition of a child care desert, with particularly acute shortages in rural areas. Over the past decade, Illinois has lost more than 4,300 providers and 38,000 licensed slots, reflecting financial strain, low compensation, and persistent staffing shortages. These supply constraints limit participation across programs.

Underlying many of these challenges is a workforce crisis. Illinois' **early childhood workforce** of more than 80,000 is essential to program quality and access but remains chronically underpaid. Average wages in licensed settings remain well below a living wage and far below salaries for comparable K–12 roles. Low compensation drives high turnover, vacant classrooms, reduced capacity, and service delays. Providers operate on thin margins and face significant financial instability, making it difficult to raise wages or expand services without sustained investment.

Quality and standards are also shaped by system fragmentation. Illinois maintains strong licensing and system frameworks to measure quality, but these systems operate in silos with no unified data structure. As a result, statewide visibility into quality, equity, and workforce qualifications remains limited. Families, meanwhile, navigate multiple portals, separate eligibility determinations, duplicative paperwork, and inconsistent communication across programs. Families experiencing poverty, limited English proficiency, disability needs, or housing instability face the steepest barriers and the greatest risk of losing services during transitions, even when their children remain eligible.

Child outcomes reflect both progress and persistent inequities. Kindergarten readiness has continued a gradual upward trend over time, including following pandemic-related disruptions, yet fewer than one-third of children meet readiness benchmarks across all domains, and

disparities remain wide by race, income, disability status, and language status. Early differences at kindergarten entry often widen by third grade. Health burdens add further strain, particularly in high-poverty and historically disinvested communities.

Equity remains a central challenge in Illinois' early childhood system. Disparities in access, quality, and outcomes persist across race, income, geography, language, and disability status, driven by structural factors including chronic underfunding, workforce instability, fragmented governance, and uneven provider capacity. As Illinois transitions to the new Department of Early Childhood, this equity baseline provides a critical lens for assessing whether system reforms meaningfully improve access and outcomes for children and families facing the greatest barriers.

Illinois is at a pivotal moment. The creation of the Department of Early Childhood represents a historic step toward a more unified and equitable system, but the challenges identified in this report underscore the complexity of the work ahead. This baseline landscape report offers a clear, data-driven foundation for evaluating progress and guiding decisions as the State works to build a more coherent, equitable, and high-quality early childhood system for all Illinois children and families.

INTRODUCTION

Early childhood programs in the State of Illinois (Illinois or the 'State') provide a range of educational, developmental, and supportive services to children from birth to five and their families. These programs include state-funded preschool, child care assistance, early intervention services for infants and toddlers with developmental delays, home visiting programs, and federally funded initiatives such as Head Start and Early Head Start. In addition, preschool special education services three- to five-year-olds with identified disabilities through local school districts. Together, these services represent a significant investment by state, federal, and local governments aimed at supporting children's readiness for school and long-term well-being.

Illinois' early childhood system is undergoing significant change. State leaders have undertaken efforts to consolidate and better coordinate programs across agencies, improve equity in access, and modernize technology systems under the new Department of Early Childhood. At the same time, demographic trends, along with persistent socioeconomic challenges such as poverty, language barriers, and housing instability, continue to shape the demand for services. These factors create both opportunities and challenges for policymakers as they seek to allocate resources efficiently and equitably.

DEMOGRAPHIC & SOCIOECONOMIC CONTEXT

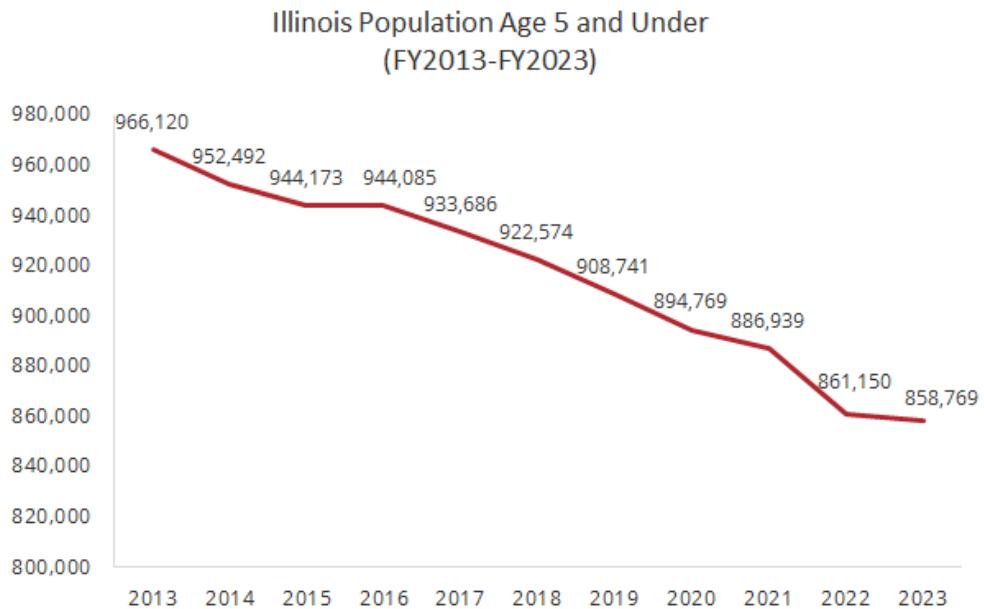
The population of children under five in Illinois has shifted in recent years, reflecting broader demographic and economic changes across the state. While some areas of the state are experiencing declines in the number of young children, others are seeing growth, creating uneven demand for early childhood services and mismatched supply. At the same time, poverty rates, English Learner prevalence, and disability identification vary widely by county. Taken together, these demographic and socioeconomic indicators show that Illinois' early childhood system is operating in a context of declining child population but intensifying need.

Population Trends

While Illinois' overall population has experienced modest growth in recent years, largely due to international migration, the number of young children has steadily declined.¹ Between 2013 and 2023, the state lost more than 107,000 children under age five, an 11.1% decrease, contributing to an aging population and shifting the balance of demand for public service.²

¹ Robert McCoppin, "Immigration Drives 68,000 Increase in Illinois Population, Census Report, Though Residents Keep Moving Out," *Chicago Tribune*, December 20, 2024.

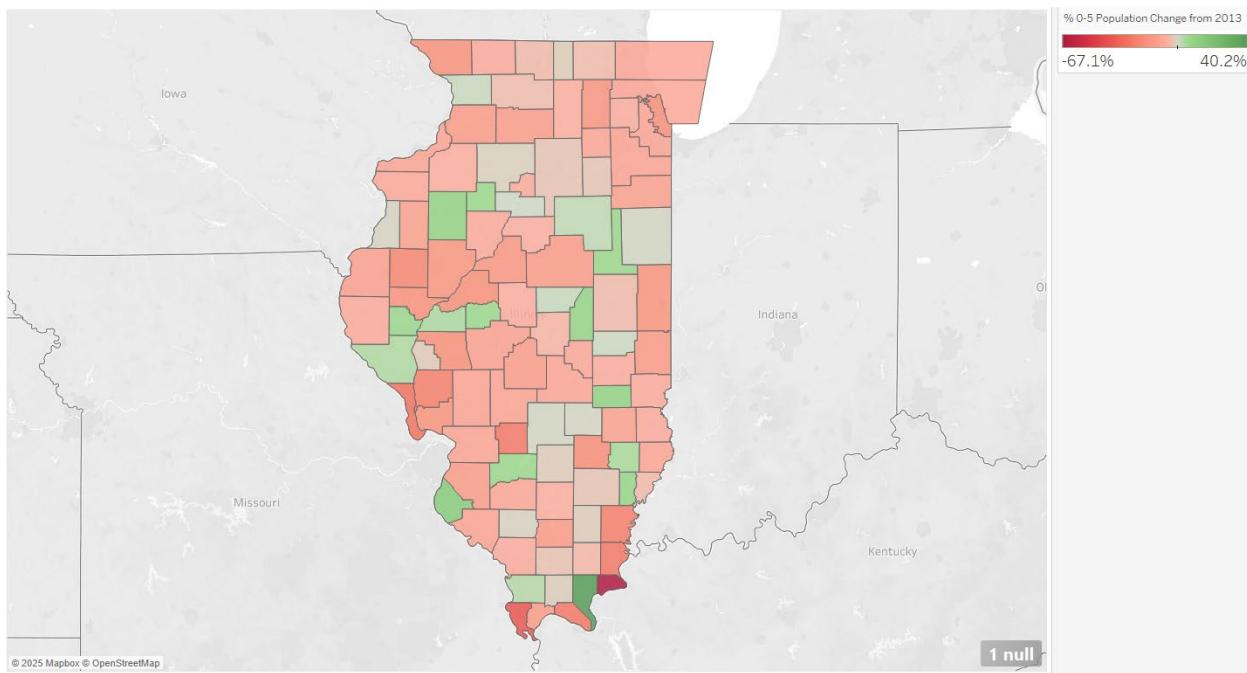
² [Illinois Early Childhood Asset Map Database](#).



Source: Illinois Early Childhood Asset Map Database

The decline has been most pronounced in rural counties such as Hardin (-67.1%), Alexander (-39.2%), and Calhoun (-28.9%), where the population of children under five has fallen sharply, while a smaller number of counties have recorded growth, including Pope (+40.2%), Monroe (+14.3%), and Cumberland (+10.2%). These diverging trends highlight the contrast between shrinking rural areas and more stable or growing urban and suburban communities, underscoring the need to consider both regional decline and localized growth when planning early childhood services.

Illinois Rate of Population Change: FY2013 v. FY2023



Source: University of Illinois Urbana-Champaign, Illinois Early Childhood Asset Map Database.

Population change among children from birth to five provides the foundational denominator for assessing efficiency and reach in early childhood investments. Declining child populations in many Illinois counties suggest that service capacity, facility planning, and workforce allocation should be periodically realigned to demographic realities. At the same time, population loss can mask underlying needs. As total numbers decline, the proportion of children in poverty or requiring specialized services may rise.

Poverty and English Learner Distribution

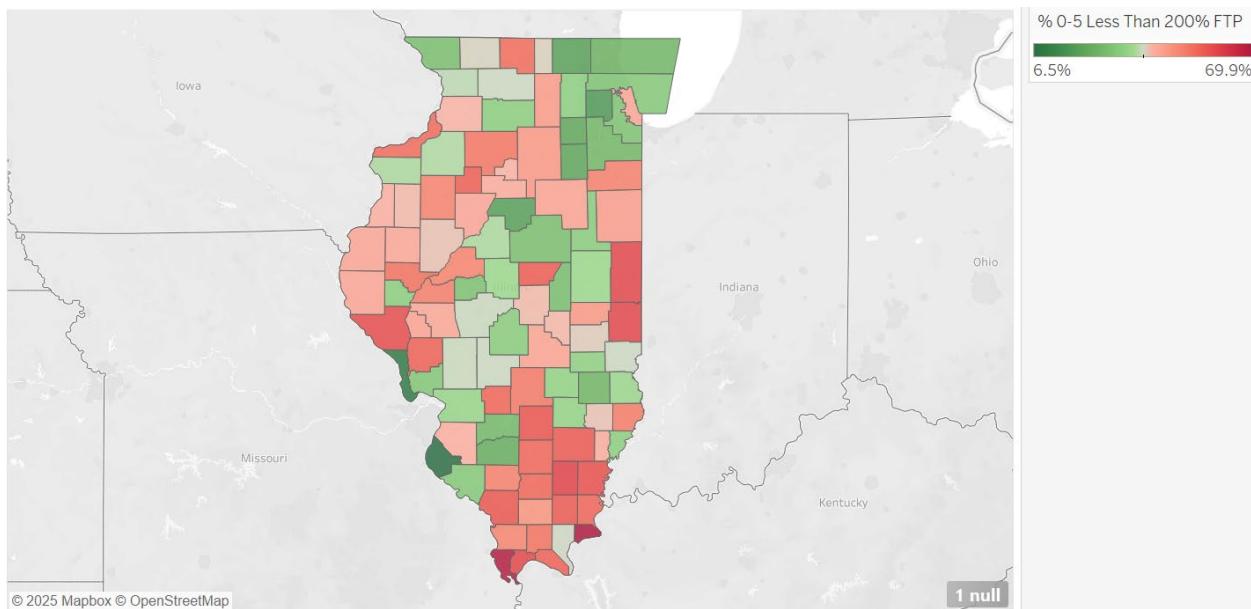
Poverty and English learner (EL) status are unevenly distributed across Illinois, with important implications for early childhood services. While 16.6% of children under age five in Illinois live in households below the federal poverty level (0–100% FPL), more than one-third (34.7%) live in households below 200% of the poverty level.³ The broader 0–200% threshold more closely reflects the income eligibility criteria used in early childhood programs such as CCAP and Head Start, and therefore provides a more accurate picture of children at risk of needing subsidized care and supports.

Counties with the highest low-income concentrations, or the highest percentage of children from birth to five living below 200% of the poverty level, tend to be concentrated in rural areas, including Hardin (69.9%), Alexander (68.9%), and Hamilton (60.1%). Other counties with

³ [Illinois Early Childhood Asset Map Database](#).

elevated child poverty levels are concentrated in southern Illinois, such as Pulaski (59.3%), White (57.9%), and Marion (57.2%), as well as in parts of northern Illinois, including Stark (55.4%), Winnebago (53.2%), and Rock Island (53.1%). Cook County (42.5% in Chicago and 29.5% in the Cook County Suburbs) also has a large number of families in poverty due to its population size, particularly in certain Chicago neighborhoods.

Percent Children Birth to Five Living 0-200% FPL

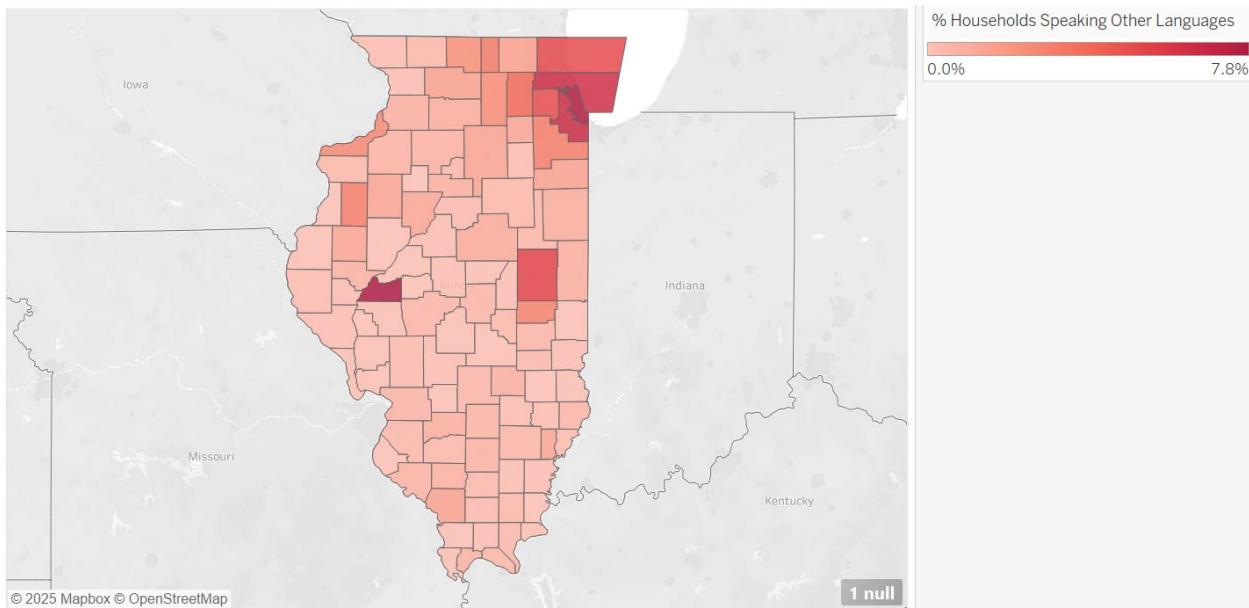


Source: University of Illinois Urbana-Champaign, Illinois Early Childhood Asset Map Database.

In contrast, English learner populations, or households that speak a language other than English, are concentrated in urban counties with larger immigrant communities, especially in Cook (7.7% and 6.5% in Chicago and Suburbs respectively), Champaign (5.3%), and Lake (5.1%).⁴ While statewide initiatives such as Smart Start Illinois seek to expand access to early childhood services for families in poverty and children requiring language support, resource alignment remains uneven. Urban centers often receive more program attention, while rural high-poverty counties face persistent challenges in meeting need. These disparities highlight the importance of targeting resources not only to areas with large populations of children, but also to smaller, high-need counties where poverty and English learner concentrations create barriers to access.

⁴ [Illinois Early Childhood Asset Map Database](#).

Percent of Households with Children Birth to Five that Speak a Language Other than English



Source: University of Illinois Urbana-Champaign, Illinois Early Childhood Asset Map Database.

Poverty concentration and English learner prevalence function as indicators of where state resources should yield the highest marginal impact. Counties with higher child poverty rates or larger English learner populations typically require greater service intensity and multilingual supports, increasing the cost per child served. Outputs should not be weighted by only the number of children reached but also by the socioeconomic and linguistic barriers those children face.

Disability Prevalence

Illinois continues to face significant challenges in identifying and serving young children with developmental delays and disabilities. In 2023, 88.5% of children eligible for Early Intervention (EI)⁵ or Preschool Special Education were being served,⁶ leaving a fairly significant share of children without the supports they need at critical stages of development. Despite improvements in service reach, identification remains incomplete: many children with developmental delays are not evaluated or connected to services, leaving substantial gaps in access.

These challenges are unevenly distributed across regions and demographic groups. Downstate Illinois, which serves roughly 29% of EI participants, accounts for 37% of reported delays, while suburban Cook County experiences fewer delays relative to its share of the caseload.⁷ Racial

⁵ [Illinois Early Childhood Asset Map Database](#).

⁶ Illinois State Board of Education, *Special Education – IDEA Non-Public Proportionate Share*, November 4, 2024.

⁷ Afton Partners, *Modeling the Cost of Early Intervention in Illinois: Analysis and Recommendations*, 2024.

and ethnic disparities are also pronounced. Black and Latino children with developmental delays are 78% less likely than White children to have their needs identified and addressed.⁸ Families of color face additional barriers, including limited access to information, cultural and language obstacles, and systemic inequities in referral and evaluation.⁹

Disability prevalence among young children serves as both an indicator of service demand and a measure of system performance. Higher rates of identified developmental delays or disability signal areas where greater investment is needed in early intervention capacity, specialized staff, and inclusive classroom supports. At the same time, identification rates reflect system responsiveness: counties reporting low prevalence may not have lower underlying need, but rather weaker screening, referral, or access to services. As a result, disability prevalence should be interpreted cautiously and used to guide both resource allocation and performance assessment.

Housing Mobility

Family mobility presents a critical but often underexamined challenge in early childhood systems. In Illinois, families with young children are among the most mobile populations, moving residences more frequently than other household types.¹⁰ Although precise rates for households with children under age five are limited, broader indicators of housing instability, economic mobility, and cost burden suggest that families with young children experience high levels of residential turnover due to factors such as housing affordability, employment changes, and family transitions.¹¹ This dynamic has direct implications for program continuity, eligibility, and service coordination across Illinois' diverse regional landscape.

High rates of family mobility create challenges for maintaining consistent access to early childhood programs.¹² Moves between counties or program service areas can interrupt participation in child care assistance, early intervention, or preschool special education, particularly when eligibility criteria or program availability differ by location. For families, these transitions often involve re-enrollment requirements, documentation burdens, and waiting periods, which may delay children's access to care and developmental supports. The administrative complexity of multiple funding streams amplifies the impact of mobility. Each move may trigger a re-evaluation of eligibility, changes in service coordination, or gaps in data sharing between agencies.¹³ Regional variation shapes how mobility affects families.¹⁴ In urban and suburban Cook County, high housing costs and labor market shifts drive frequent

⁸ Afton Partners, *Modeling the Cost of Early Intervention in Illinois: Analysis and Recommendations*, 2024.

⁹ Afton Partners, *Modeling the Cost of Early Intervention in Illinois: Analysis and Recommendations*, 2024.

¹⁰ Children's Advocates for Change, *The Well-Being of Illinois Children*, 2025.

¹¹ Children's Advocates for Change, *The Well-Being of Illinois Children*, 2025.

¹² Chapin Hall, *Understanding CCAP Participation*, 2023.

¹³ Illinois Department of Human Services, *CCAP Policy Manual*.

¹⁴ [Illinois Early Childhood Asset Map Database](#).

relocations, but a dense network of early childhood providers helps absorb transitions. In contrast, southern and central Illinois counties often experience outmigration and limited program supply, meaning that each move can represent a loss of available slots or access to specialists. Rural families may face longer travel times or fewer options for early intervention and preschool services, exacerbating inequities in continuity of care. These inconsistencies in access reflect structural fragmentation within Illinois' early childhood governance landscape.

Labor Force Participation

Labor force participation among mothers of young children in Illinois remains below the national levels, reflecting both the lingering effects of the COVID-19 pandemic and structural challenges in accessing affordable, reliable child care. During the early stages of the pandemic, widespread school and daycare closures led to sharp declines in employment among women. By early 2021, approximately 40% of working mothers in Illinois had either lost jobs or reduced their hours due to increased caregiving responsibilities.¹⁵ Although labor market conditions have gradually improved, female labor force participation in Illinois remains depressed. In 2023, only 58.4% of women participated in the labor force, trailing the national average and falling below pre-pandemic levels.¹⁶

The gender employment gap is particularly pronounced among parents. Before the pandemic, 93% of fathers were employed compared to 72% of mothers,¹⁷ and during the pandemic, roughly 40% of mothers reported losing jobs or working hours.¹⁸ Together, these patterns underscore long-standing disparities in workforce participation driven by child care responsibilities and occupational patterns.

Maternal labor force participation serves as a key indicator of both economic productivity and service system effectiveness. Child care access functions as a cost driver and outcome variable: insufficient supply and affordability reduce participation, while targeted investments can yield measurable improvements in employment earnings as well as tax revenue collected by governments.

GOVERNANCE & ORGANIZATION

Illinois' early childhood system is undergoing a major structural transition as programs historically administered across multiple agencies are being consolidated into the new Illinois

¹⁵ University of Illinois at Urbana-Champaign, "Sharp Decline in Women's Labor Force Participation in Illinois Due to COVID-19," *PHYS.Org*, May, 14, 2021.

¹⁶ State of Illinois, Department of Employment Security, *Women and Minorities in the Illinois Labor Force*, 2024.

¹⁷ Grace Barbic, "Study Shows Working Mothers Hard Hit By Pandemic-Related Child Care Burdens, *Capital News Illinois*, May 4, 2021.

¹⁸ ReadyNation, "Report: Inadequate child care prevents women's full participation in the workforce and slows economic recovery", *StrongNation.org*, 2021.

Department of Early Childhood (IDEC). For decades, governance was split across the Illinois State Board of Education (ISBE), the Department of Human Services (IDHS), and the Department of Children and Family Services (DCFS), each responsible for distinct programs, funding streams, eligibility rules, and data systems. This multi-agency structure created fragmentation, inconsistent processes for families and providers, and challenges in tracking statewide investments.

Programs Moving to the New Department

	Department of Human Services	Illinois State Board of Education	Department of Child and Family Services	Governor's Office of Early Childhood Development
Programs Moving	<ul style="list-style-type: none"> Child Care Assistance Program Early Intervention Home Visiting (State Home Visiting, MIECHV, Maternal Child Home Visiting) Head Start Collaboration Office Migrant & Seasonal Head Start 	<ul style="list-style-type: none"> Early Childhood Block Grant Preschool for All (PFA) Preschool for All Expansion (Prevention Initiative) 	<ul style="list-style-type: none"> Child Care Licensing 	<ul style="list-style-type: none"> Infant and Early Childhood Mental Health (IECMH)
Programs Staying	<ul style="list-style-type: none"> Better Birth Outcomes Family Case Management High Risk Infant Follow Up Refugee & Immigrant services SNAP WIC TANF 	<ul style="list-style-type: none"> K-12 Evidence Based Funding Special Education Student Assessments Nutrition Title I CACFP/School Lunch KIDS Assessment Early Childhood Special Education 	<ul style="list-style-type: none"> Child Protective Services Adoption & Guardianship Institution and Group Home Services Investigative Services 	

Source: Illinois Department of Early Childhood, August 22 Listening Session Slide Deck, Slide 9.

Senate Bill 1, signed in June 2024, initiates a multi-year transition to unify early learning, child care, Early Intervention, home visiting, and child care licensing under IDEC. The transition includes establishing advisory bodies, modernizing data systems, restructuring funding and grant processes, and ensuring continuity of services through the centralization of staffing and contracts shifting to the new agency.¹⁹

FISCAL LANDSCAPE & COST ADEQUACY

Early childhood funding in Illinois is a complex blend of federal, state, and local dollars that has shifted significantly over the last decade. This section examines how resources flow through programs, what they purchase, and whether spending aligns with population need and performance.

¹⁹ For a full overview of Illinois' early childhood governance structure and the IDEC transition, see the Civic Federation's detailed explainer [here](#).

Overview of the Early Childhood Fiscal Architecture

At the federal level, Illinois draws on the following funding sources:

- Child Care and Development Fund (CCDF): Illinois' largest early childhood funding source, supporting child care subsidies for low-income working families.
- Individuals with Disabilities Education Act (IDEA) Parts B and C: serving infants, toddlers, and school-aged children with developmental delays for special education and early intervention.
- Head Start and Early Head Start: locally administered early learning programs outside of state fiscal control.
- Maternal, Infant, and Early Childhood Home Visiting (MIECHV) and Temporary Assistance for Needy Families (TANF): evidence-based home visiting and related supports.

At the state level, funding sources include:

- State General Funds: supplement these dollars through the Early Childhood Block Grant (ECBG), which funds Preschool for All, Expansion, and Prevention Initiative; Early Intervention; and the state match required for the Child Care Assistance Program (CCAP).²⁰
- Smart Start Illinois: increased state investment in preschool access, workforce stabilization, and quality improvement.²¹
- Local school districts and philanthropic partners: provide limited but important contributions.²²

The funding system remains administratively burdensome. Providers often juggle multiple grants, reimbursement models, and eligibility definitions, each with different timelines and documentation requirements. The lack of unified fiscal reporting across ISBE, IDHS, and DCFS makes statewide accountability difficult and obscures the true size of Illinois' early childhood investment.

²⁰ Illinois Department of Early Childhood, *Illinois Early Childhood Programs and Funding Streams Guide*, 2025.

²¹ Illinois Department of Early Childhood, *Illinois Early Childhood Programs and Funding Streams Guide*, 2025.

²² Illinois Department of Early Childhood, *Illinois Early Childhood Programs and Funding Streams Guide*, 2025.

Early Childhood Programs by Funding Source										
Program**	Federal							Federal and State	State	
	Maternal, Infant, and Early Childhood							Medicaid	Evidence-Based Funding	General Fund Revenue
	Individuals with Disabilities Education Act (IDEA)	Child and Adult Care Food Program (CACFP)	Early Childhood Visiting Program (MIECHV)	Temporary Assistance for Needy Families (TANF)	Child Care Development Fund (CCDF)	Title I, II, III, IV				
	Head Start	Act (IDEA)	(CACFP)	(MIECHV)	(TANF)	(CCDF)	Medicaid			
Child Care Assistance Program (CCAP)					X	X				X
Illinois Network of Child Care Resources and Referrals (INCCRRA)						X				
Smart Start Workforce Grants										X
Smart Start Quality Supports Child and Adult Care Food Program (CACFP)*				X						X
State PreK										
Head Start/Early Head Start	X						X		X	X
Early Intervention (EI)		X						X		X
Early Childhood Special Education (ECSE)*			X							
Home Visiting	X			X						X

*Child and Adult Care Food Program and Early Childhood Special Education are not moving to the Department of Early Childhood

**Some programs receive or accept private funds through various means.

Source: Illinois Early Childhood Programs and Funding Streams Guide, p. 8.

Funding Flow and Allocation Mechanisms

Federal agencies allocate funds to Illinois through categorical and block grants, which then flow to state agencies and local providers.²³ ISBE distributes ECBG through competitive grants; IDHS administers CCAP, EI, and home visiting using reimbursement and voucher mechanisms; and DCFS directs specialized early learning supports through child welfare-related funding. Head Start programs bypass the state entirely, receiving funds directly from the U.S. Department of Health and Human Services. Smart Start Illinois introduced new statewide workforce and quality grants that simplify the flow of resources and link funding more directly to provider wages and quality improvements.

Illinois uses a mix of competitive grants, formula allocations, reimbursements, and vouchers, each with advantages but collectively contributing to administrative complexity. Providers must blend these streams to cover full program costs, particularly for infants, toddlers, and children with disabilities.

A small share of early childhood funding in Illinois flows directly to families, primarily through CCAP subsidies that allow parents to choose their own child care providers. In contrast, most state and federal early learning dollars are directed to school districts, child care centers, and

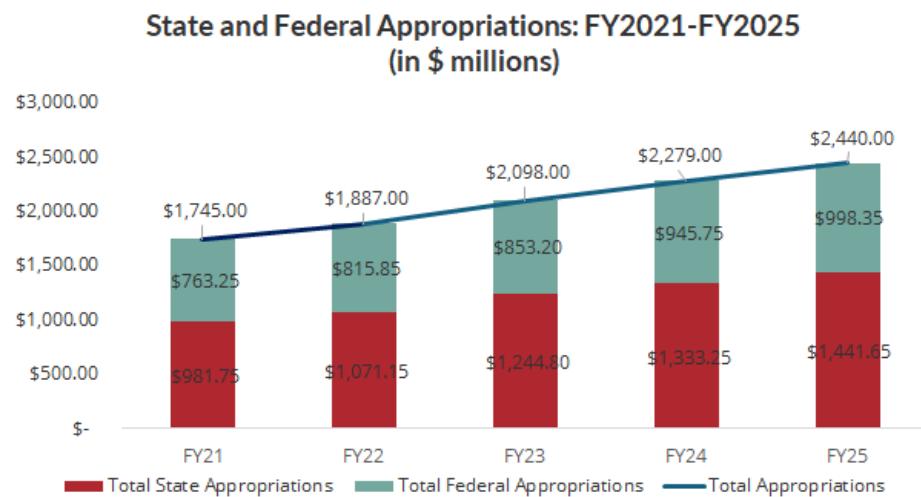
²³ Illinois Department of Early Childhood, *Illinois Early Childhood Programs and Funding Streams Guide*, 2025.

service agencies. Early intervention and home visiting sit between the two models: funding flows through provider agencies, but services are child-specific, and enrollment is driven by family eligibility rather than center capacity.

Expenditure Trends & Fiscal Pressures

Over the past several years, Illinois' early childhood appropriations have grown steadily, due to increases in state funding, even as federal funding has largely remained flat. However, despite modest but steady increases in state investment, spending growth has not kept pace with total system costs driven by inflation, population need, or provider cost escalation.

The chart below shows total state-administered appropriations for early childhood programs in Illinois, including both state and federal funds allocated through the budgets of ISBE, IDHS, and DCFS.²⁴ Appropriations have increased by about 40% over the past five years, from \$1.75 billion in FY2021 to \$2.44 billion in FY2025, driven by state-level initiatives such as Smart Start Illinois and incremental increases to the Early Childhood Block Grant. However, this chart does not include federal funds that flow directly to local grantees, such as Head Start and Early Head Start (approximately \$350-400 million annually), nor does it reflect federal nutrition programs (CACFP) or philanthropic/local contributions, which have modestly increased over the last five years. Including these additional sources would raise Illinois' total early childhood investment to an estimated \$2.8-3.0 billion in FY2025.



Source: Governor's Office of Management and Budget Budget Books, FY2021-FY2025.

Despite these increases in spending, the system faces persistent fiscal pressures. The expiration of one-time federal relief funding poses significant sustainability risks, particularly for workforce grants and quality initiatives introduced under Smart Start. These pressures

²⁴ Governor's Office of Management and Budget FY2021-FY2025 Budget Books.

could be compounded by proposed federal actions, including plans recently announced by the Trump administration to freeze child care subsidy funding to Illinois, which would limit the State's ability to respond to rising costs and demand without additional state resources.²⁵ Programs such as CCAP and Early Intervention are experiencing demand growth that exceeds current capacity, with service delays, waiting lists, and underserved eligible families in some regions.²⁶ These dynamics underscore the need for ongoing state oversight and more robust forecasting to ensure continuity of service.

Efforts to blend and braid funding across programs continue to encounter administrative and fiscal barriers. Overlapping eligibility criteria, inconsistent reimbursement timelines, and duplicative reporting increase transaction costs and complicate financial management for grantees.²⁷ Without a unified fiscal picture, the state cannot easily determine whether spending levels are too low, misaligned geographically, or insufficient relative to need, which complicates budget planning and undermines long-term cost modeling for the new department.

Cost of Care & Program Economics

Illinois' early childhood system faces a persistent gap between the true cost, defined as the full per-child expense of delivering high-quality care, and the public resources available to support it. Center-based infant care averages \$14,000–\$16,000 per year statewide, consuming 20%–35% of income for many families, well above federal affordability benchmarks.²⁸ Although recent state investments, including a \$75 million increase to the Early Childhood Block Grant and substantial Smart Start Illinois funding, have improved provider stability and expanded access, reimbursements to providers still fall short of actual costs.²⁹ The Child Care Assistance Program (CCAP), the state's primary subsidy, typically covers only 40%–50% of market tuition, far below the federal 75% "equal access" benchmark and insufficient to sustain competitive wages or high-quality programming.³⁰

The underlying cost drivers push the "true cost of quality" above existing reimbursement and grant levels, especially for infants and toddlers.³¹ Providers in high-cost regions face even sharper mismatches between state rates and market realities. Early Intervention (EI) and Early Childhood Special Education (ECSE) programs face similar pressures: caseloads have grown due to an increase in referrals, while the workforce has shrunk, reducing service timeliness and

²⁵ Minho Kim, "Heath Dept. to Freeze \$10 Billion in Funding the 5 Democratic States," *New York Times*, January 6, 2026.

²⁶ Samantha Smylie, "Illinois' Children and Toddlers are Experiencing More Delays in Getting Early Intervention Services," *Chalkbeat*, April 25, 2024.

²⁷ The Early Childhood Technical Assistance Center, *Illinois Early Childhood Programs Comparison Worksheet*, 2021.

²⁸ Child Care Aware of America, *Price of Care: 2022 Child Care Affordability Analysis*.

²⁹ Governor's Office of Management and Budget FY2021-FY2025 Budget Books.

³⁰ Ted Burke, "Early Intervention Recommendations: Cross-State Research to Inform Early Intervention Service Coordination and Provider Services in Illinois," *Provider Connections*, 2024.

³¹ Samantha Smylie, "Illinois' Children and Toddlers are Experiencing More Delays in Getting Early Intervention Services," *Chalkbeat*, April 25, 2024.

contributing to repeated federal findings that Illinois “Needs Assistance.”³² Increasingly, the core challenge is that program requirements and quality standards have outpaced the resources needed to maintain stable staffing, quality improvement, and equitable access. As Illinois transitions to the new Department of Early Childhood (IDEC), aligning funding with cost modeling and performance expectations will be central to long-term system stability.

Provider Market Economics & Financial Viability

Financial viability remains a systemic challenge. Even with Smart Start and ECBG increases, reimbursement rates and grant awards often fall short of the true cost of care. CCAP reimbursement remains below cost-market benchmarks³³ and pandemic-era stabilization funding has expired,³⁴ while wage supports are insufficient to close the compensation gap³⁵ and providers rely on complex braiding of funds to stay afloat.³⁶ Providers operating on thin margins, especially small centers and family child care homes, remain at risk of contraction without sustained increases in cost-based reimbursement.

WORKFORCE & PROVIDER MARKET

Overview of the Early Childhood Workforce

Illinois’ early childhood education and care (ECEC) workforce includes more than 80,000 professionals who support children from birth through age five.³⁷ This workforce supports the state’s economic stability by enabling parents to work and ensuring young children receive essential developmental supports.

The workforce is predominantly female (approximately 96% in licensed settings) and racially diverse, with BIPOC educators concentrated in assistant teacher and family child care roles.³⁸ Bilingual educators represent 10-13% of licensed staff, reflecting Illinois’ linguistic and cultural diversity. Workforce age varies by role. Classroom staff skew younger, while administrators and family child care providers are typically older.³⁹

³² Ted Burke, “Early Intervention Recommendations: Cross-State Research to Inform Early Intervention Service Coordination and Provider Services in Illinois,” *Provider Connections*, 2024.

³³ Illinois Department of Early Childhood, *Illinois Early Childhood Programs and Funding Streams Guide*, 2025.

³⁴ Illinois Department of Early Childhood, *Illinois Early Childhood Programs and Funding Streams Guide*, 2025.

³⁵ Start Early, *Where Funding for Early Childhood Education Stands in Chicago in 2025*, 2025.

³⁶ Illinois Department of Early Childhood, *Illinois Early Childhood Programs and Funding Streams Guide*, 2025.

³⁷ Illinois Network of Child Care Resources and Referral Agencies, *Illinois’ Early Childhood Education Workforce 2020 Report*, 2021.

³⁸ Illinois Network of Child Care Resources and Referral Agencies, *Illinois’ Early Childhood Education Workforce 2020 Report*, 2021.

³⁹ Illinois Network of Child Care Resources and Referral Agencies, *Illinois’ Early Childhood Education Workforce 2020 Report*, 2021.

Across settings, roles include center directors, lead teachers, assistant teachers, family child care providers, home visitors, Early Intervention specialists, and Head Start staff. Career pathways differ substantially depending on setting, credentials, and funding sources.

Illinois' early childhood workforce and provider market face a combination of low wages, persistent shortages, fragile financial conditions, and uneven distribution of providers across the state. These challenges directly impact access to care, staff stability, and program quality. Without sustained investment in compensation, cost-based reimbursement, and pipeline development, Illinois will continue to struggle to meet demand for child care, preschool, home visiting, and Early Intervention services, limiting progress toward statewide goals for early childhood equity and access.

Wages

Low wages remain a defining challenge across the early childhood sector. Compensation falls significantly below the cost of living and far behind K-12 educator salaries, driving high attrition and constraining provider capacity.

Typical wages include:⁴⁰

- **Assistant teachers:** \$15.40/hour
- **Infant/toddler teachers:** \$16.50/hour
- **Preschool teachers (community-based):** \$12-13/hour
- **Preschool teachers (school-based):** \$19/hour
- **Directors:** \$21.50/hour

The statewide early childhood educator average wage is estimated at \$16.48/hour,⁴¹ reaching about \$19/hour in Chicago, but still well below the \$26.22/hour “living wage” for an adult with one child in Illinois.⁴² Family child care providers often earn even less.⁴³

These compensation disparities are a primary driver of turnover, vacancy rates, and limited workforce pipelines, particularly in infant/toddler classrooms and specialized roles such as Early Interventionists and mental health consultants.

Workforce Supply

Illinois faces persistent staffing shortages across nearly all early childhood program types, driven by low wages, credentialing requirements, and competition from higher-paid sectors.

⁴⁰ Illinois Department of Human Services, *Illinois Salary and Staffing Survey of Licensed Child Care Facilities Fiscal Year 2023*.

⁴¹ ZipRecruiter, [Early Childhood Educator Salary in Illinois](#).

⁴² PayScale, [Early Childhood Educator \(ECE\) Salary](#).

⁴³ Illinois Department of Human Services, *Illinois Salary and Staffing Survey of Licensed Child Care Facilities Fiscal Year 2023*.

Shortages are most acute in:

- Urban neighborhoods with high poverty;⁴⁴
- Rural counties with limited recruitment pools;⁴⁵
- Infant/toddler classrooms;⁴⁶ and
- Early Intervention and specialized supports.⁴⁷

The 2024-2025 school year reported nearly 3,900 (2.8%) vacant birth-grade 12 educator positions, not including classrooms operating with substitutes or reduced enrollment due to staffing shortages.⁴⁸ The consequences of this shortage include reduced capacity and waitlists,⁴⁹ delayed EI services,⁵⁰ combined classrooms and higher ratios,⁵¹ lower quality and staff burnout,⁵² and uneven access across regions and demographics.⁵³ Shortages disproportionately affect low-income families, families of color, and English learners, deepening existing inequities.

Provider Market Landscape

Illinois' early childhood provider market spans licensed centers, licensed family child care homes, license-exempt centers and homes, public school-based preschool, Head Start/Early Head Start, and home visiting programs. Licensed centers tend to have more stable staffing, but face severe staffing and cost pressures⁵⁴, while family child care homes experience high turnover and are sensitive to individual provider circumstances.⁵⁵ License-exempt centers/homes are more volatile and vary in quality.⁵⁶ PFA/PFAE and public school programs are more stable due to predictable funding.⁵⁷ Head Start/Early Head Start are stable but vulnerable to federal budget disruptions.⁵⁸ Overall, the provider market is uneven, with strong pockets of stability in certain areas (e.g. urban) and significant staffing fragility in smaller, community-based, and rural settings.

⁴⁴ Illinois Workforce and Education Research Collaborative, *Educator Shortage Report Academic Year 2024-2025*.

⁴⁵ Illinois Workforce and Education Research Collaborative, *Educator Shortage Report Academic Year 2024-2025*.

⁴⁶ Illinois Governor's Office of Early Childhood Development, University of Illinois at Chicago College of Education, *Transforming the Early Childhood Workforce*, 2018.

⁴⁷ Illinois Workforce and Education Research Collaborative, *Educator Shortage Report Academic Year 2024-2025*.

⁴⁸ Illinois Workforce and Education Research Collaborative, *Educator Shortage Report Academic Year 2024-2025*.

⁴⁹ Illinois Governor's Office of Early Childhood Development, University of Illinois at Chicago College of Education, *Transforming the Early Childhood Workforce*, 2018.

⁵⁰ Illinois Action for Children, *Illinois Action for Children Responds to Fiscal Year 2025 State Budget and Legislative Recap*, 2024.

⁵¹ Illinois Action for Children, *Illinois Action for Children Responds to Fiscal Year 2025 State Budget and Legislative Recap*, 2024.

⁵² Illinois Workforce and Education Research Collaborative, *Educator Shortage Report Academic Year 2024-2025*.

⁵³ Illinois Workforce and Education Research Collaborative, *Educator Shortage Report Academic Year 2024-2025*.

⁵⁴ Illinois Early Learning Project, [Childcare Options in Illinois](#).

⁵⁵ Illinois Early Childhood Asset Map, [Child Care Data Descriptions](#).

⁵⁶ Four-C, [Types of Child Care](#).

⁵⁷ SAL Community Services, [Types of Child Care](#).

⁵⁸ SAL Community Services, [Types of Child Care](#).

Financial fragility, staffing shortages, and funding disruptions contribute to continued instability in 2025. Head Start/Early Head Start programs experienced heightened risk of closure due to federal shutdowns and grant delays.⁵⁹ Community-based centers serving subsidized families reported temporary closures and under-enrollment due to staffing constraints.⁶⁰ Rural providers remain especially vulnerable because of limited reserves and smaller labor pools.⁶¹ Families experience service disruptions, reduced choices, and in some counties, especially rural ones, the near-complete loss of early learning infrastructure when even a single provider closes.

Equity challenges persist across both workforce representation and provider availability. The entry-level workforce is racially diverse, but leadership roles remain predominantly White.⁶² Bilingual and specialized staff are unevenly distributed, with shortages in rural and suburban regions.⁶³ Provider deserts remain concentrated in low-income communities and rural counties.⁶⁴ Workforce distribution directly shapes children's access to high-quality early learning opportunities, reinforcing the need for targeted wage supports, incentives, and region-specific recruitment strategies.

Licensing, Quality Standards & Professional Requirements

Qualifications for Educators and Staff

Child care staff must meet various requirements for licensure depending on the role they serve.

Lead Teachers in Licensed Centers: Lead teachers must have a high school diploma or obtained their GED, as well as 60 college semester hours, some of which must be in child development/early childhood. They also need one year of child development experience in a licensed setting. Alternatively, lead teachers may have a Child Development Associate (CDA) credential or equivalent.⁶⁵

Assistant Teachers/Aides: Assistant teachers and aides must have at least a high school diploma or have obtained their GED.⁶⁶

⁵⁹ First Five Years Fund, *State of Play: Federal Shutdown and Child Care/Early Learning Programs*, 2025.

⁶⁰ Smantha Smylie, "Illinois Head Start Providers Worry About the Future as Trump Eyes Potential Cuts," *Chalkbeat*, 2025.

⁶¹ Smantha Smylie, "Illinois Head Start Providers Worry About the Future as Trump Eyes Potential Cuts," *Chalkbeat*, 2025.

⁶² Illinois Network of Child Care Resources and Referral Agencies, *Illinois' Early Childhood Education Workforce 2020 Report*, 2021.

⁶³ Illinois Network of Child Care Resources and Referral Agencies, *Illinois' Early Childhood Education Workforce 2020 Report*, 2021.

⁶⁴ Illinois Network of Child Care Resources and Referral Agencies, *Illinois' Early Childhood Education Workforce 2020 Report*, 2021.

⁶⁵ Illinois State Board of Education, *Early Childhood Development Department Licensure Requirements*.

⁶⁶ Illinois State Board of Education, *Early Childhood Development Department Licensure Requirements*.

Directors: Child care directors are required to meet a higher standard with 64 semester hours (21 of which must be related to child development) as well as managerial experience or a relevant college degree.⁶⁷

Ongoing Professional Development: Annual in-service training and credentials are encouraged and sometimes required.⁶⁸

Public Preschool and Preschool for All

Preschool staff require stricter education requirements.⁶⁹ Teachers must hold a Professional Educator License (PEL) with an Early Childhood Education endorsement. This licensure requires the completion of a state-approved preparation program, holding a bachelor's degree, passing the state content exams in early childhood education, completing supervised student teaching, and registering for the license with ISBE. Special education teachers require additional endorsements for early childhood special education.

Workforce Pipeline & Professional Development

Illinois has made significant investments in the educator pipeline through the Early Childhood Access Consortium for Equity (ECACE) scholarships, Smart Start workforce grants, and credentialing supports. However, pipeline output is insufficient to meet the state's expansion goals. High vacancy rates persist despite ECACE scholarships, as fewer than half of ECACE scholars are on track to complete their degrees soon.⁷⁰ Credential requirements, especially for PEL-credentialed preschool teachers, slow workforce entry⁷¹ and rural regions face acute recruitment difficulties.⁷² These constraints limit the ability to open new preschool classrooms or expand infant/toddler slots.

QUALITY & STANDARDS

The first five years of a child's life is a period of rapid brain development that shapes school readiness and long-term outcomes. High-quality early child care is essential during this time because it is the mechanism through which early childhood programs deliver on promised developmental and equity gains. Illinois utilizes several frameworks to ensure quality in early childhood education, including the Illinois Early Learning and Development Standards (IELDS), ExceleRate Illinois, and birth-to-five program standards.

⁶⁷ Illinois State Board of Education, *Early Childhood Development Department Licensure Requirements*.

⁶⁸ Illinois State Board of Education, *Early Childhood Development Department Licensure Requirements*.

⁶⁹ Illinois State Board of Education, *Early Childhood Development Department Licensure Requirements*.

⁷⁰ Illinois Action for Children, *Illinois Action for Children Responds to Fiscal Year 2025 State Budget and Legislative Recap*, 2024.

⁷¹ Illinois Workforce and Education Research Collaborative, Discovery Partners Institute, *Shaping the Youngest Minds: Educator Shortages in Early Childhood Education*, 2025.

⁷² Illinois Governor's Office of Early Childhood Development, University of Illinois at Chicago College of Education, *Transforming the Early Childhood Workforce*, 2018.

Illinois' Licensing Standards

Early childhood centers must maintain strict standards to qualify for licensure in Illinois. Licensing standards and qualifications are established by the Department of Children and Family Services for child care centers and homes, and by the Illinois State Board of Education for public school and state-funded programs.

Child care centers and homes must obtain a license if they are caring for more than three unrelated children under the age of 12. The following standards must be met to obtain a child care license:

- Child care facilities need to provide a safe and healthy environment for the children in their care, complete background checks on staff, and comply with building, health, and safety codes.⁷³
- Center directors and lead teachers with verified educational backgrounds and experience in early childhood are required, and staff must complete ongoing training.⁷⁴
- Child care providers need to be at least 18 years old, complete an accredited training program, have CPR/first aid certification, and complete courses on caring for children with disabilities.⁷⁵
- Child care sites must plan for financial sustainability, hazard mitigation, and regularly pass licensing inspections.⁷⁶

Similar safety, health, and background requirements are necessary for child care homes that are caring for more than three unrelated children.

ExceleRate Illinois and the State of Quality Measurement

ExceleRate Illinois is the state's primary Quality Rating and Improvement System (QRIS), offering a unified framework for defining and advancing program quality across early childhood settings.⁷⁷ Its tiered Circles of Quality (Licensed, Bronze, Silver, and Gold) signal progressively higher standards to families, providers, and policymakers. All licensed programs begin at the Licensed Circle level, indicating compliance with DCFS basic health and safety requirements. Advancement to Bronze, Silver, and Gold requires meeting increasingly rigorous expectations in educator qualifications, curriculum implementation, learning environments, assessment practices, and family engagement.

⁷³ Illinois Department of Children and Family Services, *Licensing Standards For Day Care Centers*.

⁷⁴ Illinois Department of Early Childhood, [Illinois' Early Childhood Education and Care \(ECEC\) Workforce](#).

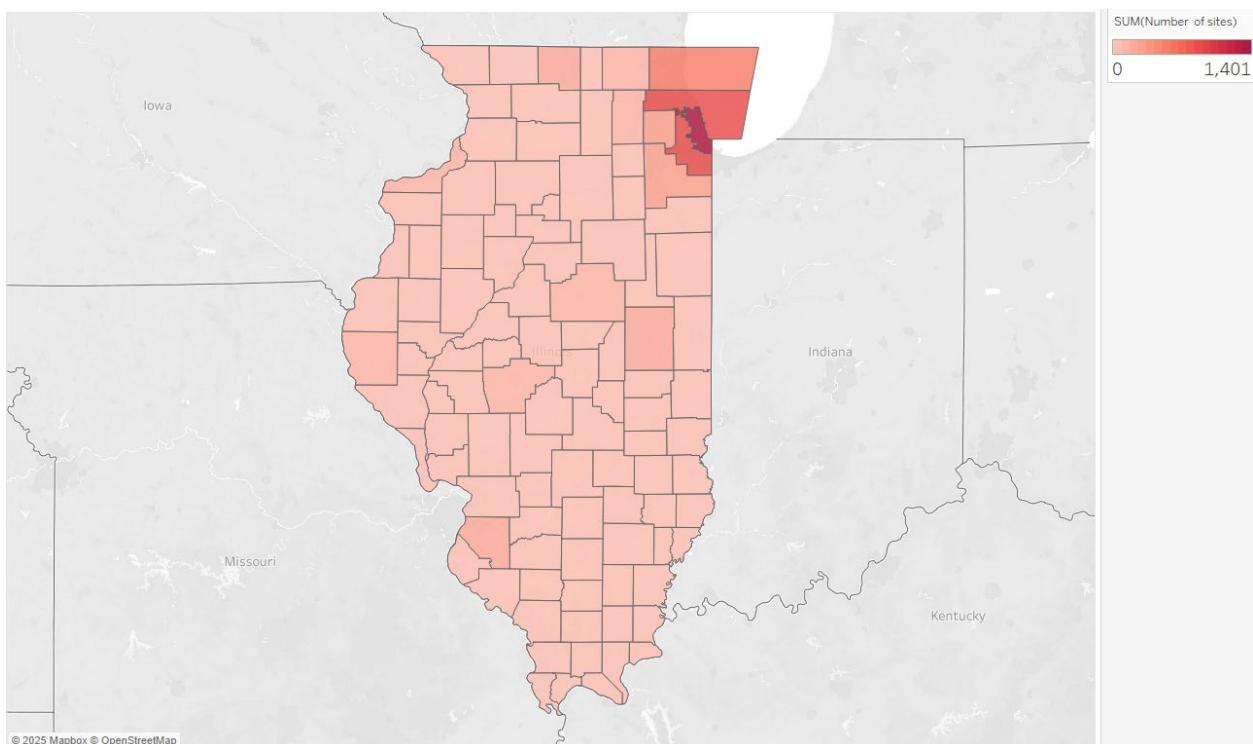
⁷⁵ Illinois Network of Child Care Resources and Referral Agencies, *Illinois' Early Childhood Education Workforce 2020 Report*, 2021.

⁷⁶ Illinois Department of Children and Family Services, *Licensing Standards For Day Care Centers*.

⁷⁷ Illinois Early Childhood Asset Map, [ExceleRate: Licensed Child Care Centers and Licensed Family Child Care Homes in the ExceleRate Program](#).

The system applies across a wide range of early childhood program types, including center-based child care, family child care homes, Preschool for All classrooms, and federally funded Early Head Start and Head Start programs. Providers pursuing higher quality tiers receive access to training, technical assistance, and improvement supports that align with Illinois' professional development system and the Illinois Early Learning and Development Standards (IELDS). Verification varies by tier and may include documentation review, on-site assessments, and classroom observations. In this way, ExceleRate serves as both a quality improvement mechanism and a consumer tool, helping families make informed choices while incentivizing providers to invest in staff qualifications, curriculum implementation fidelity (use of approved curricula as designed), and continuous improvement.⁷⁸ As Illinois expands preschool access and continues the transition to the new Department of Early Childhood, ExceleRate serves as the state's primary tool for defining quality, setting consistent expectations across program types, and targeting quality-related investments.

Number of ExceleRate Sites Per County



Source: University of Illinois Urbana-Champaign, Illinois Early Childhood Asset Map Database.

However, while ExceleRate establishes a shared quality framework, Illinois' ability to measure quality comprehensively is limited by fragmented data systems. Program-level quality ratings are managed by the Illinois Network of Child Care Resources and Referrals (INCCRRA) and

⁷⁸ Illinois Early Childhood Asset Map, [ExceleRate: Licensed Child Care Centers and Licensed Family Child Care Homes in the ExceleRate Program](#).

publicly displayed through ExceleRate and the Illinois Early Childhood Asset Map (IECAM). The Gateways Registry tracks individual educator credentials, degrees, and training, but aggregated workforce-level reporting is limited.⁷⁹ ISBE maintains separate systems focused on Preschool for All monitoring, enrollment, and IDEA-required child outcomes for preschoolers with disabilities.⁸⁰ Head Start programs collect Classroom Assessment Scoring System (CLASS) observations and comprehensive service data through federal reporting structures, but this data is not aligned with state-level dashboards.⁸¹

Because each system measures different aspects of quality, such as program ratings, educator qualifications, classroom interactions, or compliance indicators, they produce a fragmented picture. A single provider may appear differently across ExceleRate, Gateways, ISBE, and Head Start systems, with no shared identifier to link records. Licensing violation data, ExceleRate ratings, and preschool monitoring results are also maintained separately, limiting the ability to view quality holistically or identify cross-system trends. Inconsistent definitions and reporting conventions further complicate efforts to compare quality across funding streams.

Even with these limitations, available data reveal clear geographic disparities: higher-rated programs (Silver/Gold) are concentrated in Chicago and large metro areas, while many rural regions and under-resourced neighborhoods have few or no high-quality options. Because Illinois lacks an integrated statewide quality dataset, the state cannot fully assess equity in quality access or track how quality improvement efforts align with need. Strengthening data integration will be essential to understanding where high-quality care exists, where gaps persist, and how system reforms influence outcomes.

ACCESS, CAPACITY & PARTICIPATION

Supply & Capacity

Across much of Illinois, licensed early childhood capacity falls far below the number of young children, particularly for infants and toddlers. In 2023, Illinois' 6,902 licensed centers, license-exempt centers, and family child care homes provided 272,603 slots for children birth to five, enough to serve 31.7% of the state's young children, including just 21% of infants/toddlers and 32% of preschoolers.⁸² This shortfall defines much of the state as a child care desert: 74.8% of counties meet the federal definition of having at least three times as many children as licensed slots, and 16.5% are "severe deserts," or having more than ten times as many children as

⁷⁹ Gateways to Opportunity Registry, [Frequently Asked Questions \(FAQ\)](#).

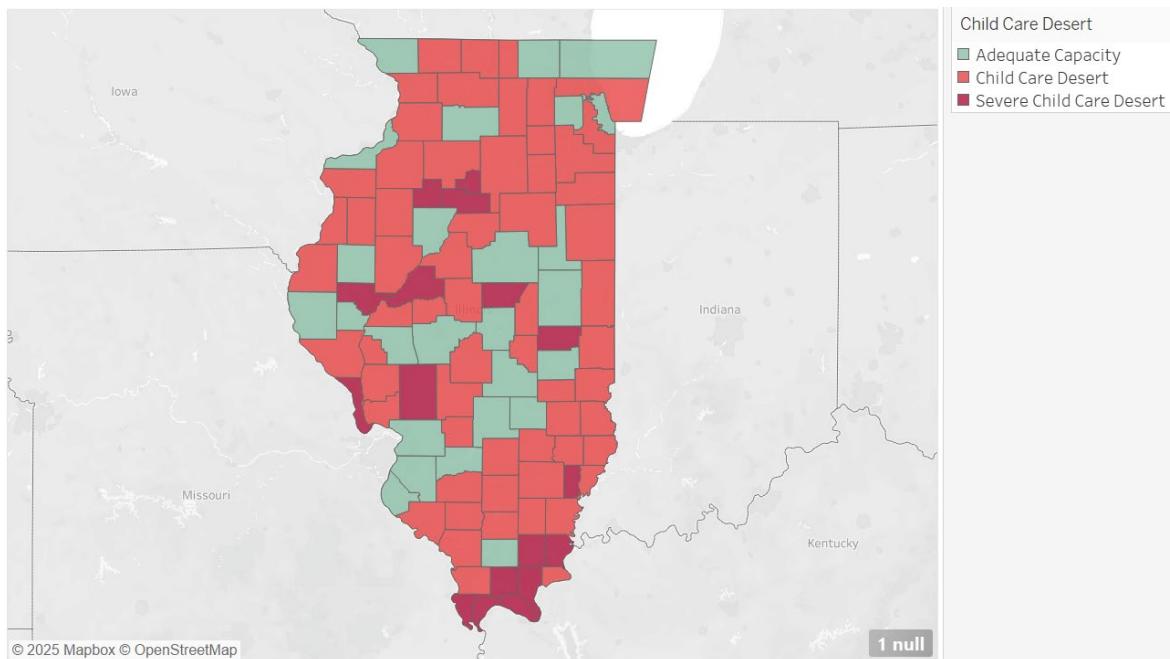
⁸⁰ Illinois State Board of Education, [Indicator 7: Early Childhood Outcomes](#).

⁸¹ Illinois Early Childhood Asset Map, [Head Start](#).

⁸² [Illinois Early Childhood Asset Map Database](#).

licensed slots.⁸³⁸⁴ Rural areas experience the deepest gaps, with nearly 70% classified as child care deserts.

Child Care Deserts in Illinois: Birth to Five



Source: University of Illinois Urbana-Champaign, Illinois Early Childhood Asset Map Database.

Capacity has also contracted over time. Illinois has seen a 33% decline in licensed providers over the past decade, about 4,300 fewer programs and 38,000 fewer slots, driven by low reimbursement, rising operating costs, and provider turnover.⁸⁵ These pressures mirror shortages in related services: Early Intervention caseloads have grown while its workforce has declined, contributing to service delays and regional gaps in specialized supports for children with disabilities or developmental delays.⁸⁶ Taken together, these trends indicate a supply system unable to meet demand, particularly in rural, downstate, and lower-income communities.

⁸³ [Illinois Early Childhood Asset Map Database](#).

⁸⁴ Civic Federation considered a county to be a child care desert if it has at least three times as many children as licensed slots within the boundaries of the county and a severe child care desert if it has more than 10 times as many children as licensed slots within the boundaries of the county.

⁸⁵ [Illinois Early Childhood Asset Map Database](#).

⁸⁶ Afton Partners, *Modeling the Cost of Early Intervention in Illinois: Analysis and Recommendations*, 2024.

Participation & Access

Illinois' early childhood participation patterns vary widely across geography, income, race/ethnicity, and program type. Access is shaped as much by provider availability and administrative complexity as by eligibility.

Child Care Assistance Program (CCAP)

Approximately 143,000 children per month participate in CCAP, representing fewer than half of eligible young children.⁸⁷ Estimated take-up rates include 42% for ages 0–2, 48% for ages 3–5, and 22% for ages 6–12.⁸⁸ Participation is highest in urban and racially diverse counties and lowest in rural and majority-White areas, reflecting both supply constraints and administrative hurdles such as documentation, redetermination, and provider payment delays.⁸⁹ In low-supply regions, CCAP under-reaches eligible families because few providers accept subsidies.

Non-CCAP Child Care (Private-Pay, Employer-Based, and Faith-Based Providers)

Families not using subsidies, often because income is above CCAP thresholds or program requirements do not fit their work hours, rely on private-pay centers, family child care homes, and faith- or employer-based programs. Licensed non-CCAP providers serve roughly 55,700 children, or 22–25% of children birth to five.⁹⁰ Middle-income families face substantial affordability pressures: many earn too much for CCAP but cannot afford tuition exceeding \$14,000 per child annually.⁹¹

Head Start, Early Head Start, and Migrant & Seasonal Head Start

Head Start programs serve roughly 33–38% of eligible three- to five-year-olds, but Early Head Start reaches fewer than 10% of eligible infants and toddlers due to high costs and limited federal slots.⁹² Migrant and Seasonal Head Start served 273 children in FY2024, just 23–34% of the estimated eligible population.⁹³ Participation is strongest in high-poverty urban areas and weakest in rural and suburban counties where fewer grantees operate.⁹⁴ Enrollment capacity is determined federally, not by state demand, leaving many eligible families unserved.

Early Intervention (EI) & Early Childhood Special Education (ECSE)

EI serves an estimated 30–40% of eligible infants and toddlers, constrained by referral rates, family awareness, and workforce shortages, especially in rural regions and for bilingual

⁸⁷ Chapin Hall, *Understanding Child Care Assistance in Illinois: Who is Enrolled and Where?*, 2025.

⁸⁸ Chapin Hall, *Understanding Child Care Assistance in Illinois: Who is Enrolled and Where?*, 2025.

⁸⁹ Chapin Hall, *Understanding Child Care Assistance in Illinois: Who is Enrolled and Where?*, 2025.

⁹⁰ State of Illinois, Department of Human Services, *FY23 Illinois Child Care Program Report*.

⁹¹ State of Illinois, Department of Human Services, *FY23 Illinois Child Care Program Report*.

⁹² U.S. Department of Health & Human Services, *Head Start Program Facts: Fiscal Year 2024*.

⁹³ U.S. Department of Health & Human Services, *Head Start Program Facts: Fiscal Year 2024*.

⁹⁴ Illinois Department of Human Services, *Migrant and Seasonal Head Start Annual Report for Fiscal Year 2024*.

specialists.⁹⁵ ECSE served 32,200 preschoolers in FY2024, approximately 60–67% of the likely eligible population, putting Illinois above national averages but still short of full coverage.⁹⁶ Both programs face challenges related to timeliness, consistent identification, and staffing.

Home Visiting

Illinois' home visiting system, spanning more than 300 programs, reaches 17,000 families annually, most of whom have multiple risk factors such as poverty, young parenthood, or child welfare involvement.⁹⁷ Despite strong outcomes and deep community relationships, the system reaches only a fraction of eligible families due to funding and staffing constraints, particularly outside the Chicago region.⁹⁸

Infant and Early Childhood Mental Health (IECMH)

Behavioral health is a top need statewide, yet IECMH supports reach only 12,000–15,000 children annually, roughly 10–12% of the estimated 120,000 young children who could benefit.⁹⁹ Services are concentrated in high-poverty regions and often fragmented across funding streams, limiting reach in rural and suburban counties.¹⁰⁰

Cross-Program Summary

Across Illinois' early childhood landscape, participation is constrained by supply, affordability, workforce shortages, and administrative barriers. Urban counties show higher CCAP and Head Start participation, while rural and suburban regions experience persistent gaps. Infant/toddler care remains the system's weakest point due to high costs and inadequate reimbursement. EI and ECSE face ongoing timeliness and staffing challenges that limit full access for children with developmental concerns. Home visiting and mental health programs reach only a modest share of eligible families. Middle-income families remain a structurally underserved group. Strengthening participation and access will require aligning funding with true costs, expanding provider capacity, reducing administrative burden, and better integrating early childhood programs within the new Department of Early Childhood.

⁹⁵ Illinois Department of Human Services, *Migrant and Seasonal Head Start Annual Report for Fiscal Year 2024*.

⁹⁶ U.S. Department of Education, Office of Special Education Programs, *Annual State Application Under Part B of the Individuals With Disabilities Education Act as Amended in 2004 For Federal Fiscal Year 2025*.

⁹⁷ Illinois Department of Early Childhood, *Illinois Home Visiting*.

⁹⁸ Raising Illinois, *An Overview: Home Visiting*, 2023.

⁹⁹ Chapin Hall, *Evaluation of the Illinois Model of Infant and Early Childhood Mental Health Consultation Pilot*, 2021.

¹⁰⁰ Chapin Hall, *Evaluation of the Illinois Model of Infant and Early Childhood Mental Health Consultation Pilot*, 2021.

FAMILY EXPERIENCE & OUTCOMES

Understanding Family Experience Across the System

Illinois' early childhood system requires families to navigate a complex landscape of programs, agencies, eligibility rules, and application processes. Because oversight for early childhood services remains divided across ISBE, IDHS, DCFS, and Federal Head Start, families frequently encounter inconsistent entry points, duplicative paperwork, and fragmented communication as they seek child care, preschool, early intervention, home visiting, and disability services. Until the transition to the new Department of Early Childhood is complete, this multi-agency structure continues to create practical and administrative challenges that shape families' day-to-day experiences.

Fragmented Systems and Multiple Points of Entry

Families often interact with several programs at once, yet each program maintains its own eligibility rules, documentation requirements, and application portals. CCAP requires income and employment verification through IDHS and Child Care Resource and Referral Agencies (CCR&Rs), while Preschool for All enrollment is managed locally by school districts with their own screenings and paperwork.¹⁰¹ Early Intervention uses a separate referral and evaluation process through regional Child & Family Connections (CFC) offices, and Head Start operates under federal forms and standards not shared by the state.¹⁰² Home visiting programs add another layer, with distinct intake systems across local agencies.¹⁰³ This lack of alignment forces families to repeatedly submit the same documents to multiple entities.

Difficulties Juggling Multiple Services

When children participate in more than one program, the administrative burden increases substantially. For example, families may have a child in part-day Preschool for All, rely on CCAP for after-school wraparound care at a different site, and receive Early Intervention services at home.¹⁰⁴ Each component works on its own calendar, documentation cycle, and scheduling requirements. Funding rules often restrict braiding or layering of services, meaning families cannot easily combine programs to create full-day, year-round continuity.¹⁰⁵ As a result, even eligible families, often those with the greatest needs, may lose coverage or experience gaps

¹⁰¹ Judith Reidt-Parker, Mary Jane Chainski, "The Importance of Continuity of Care: Policies and Practices in Early Childhood Systems and Programs," *The Ounce*.

¹⁰² Judith Reidt-Parker, Mary Jane Chainski, "The Importance of Continuity of Care: Policies and Practices in Early Childhood Systems and Programs," *The Ounce*.

¹⁰³ Judith Reidt-Parker, Mary Jane Chainski, "The Importance of Continuity of Care: Policies and Practices in Early Childhood Systems and Programs," *The Ounce*.

¹⁰⁴ CHIBYDESIGN, *Transforming Early Childhood Education and Care in Illinois*, 2024.

¹⁰⁵ Illinois Department of Early Childhood, Early Childhood Education and Care (ECEC) Funding Alignment Subcommittee, [June 23 Meeting Minutes](#).

simply because paperwork is duplicated, deadlines differ, or programs do not communicate with one another. This complexity disproportionately affects families with low incomes, limited English proficiency, disabilities, or unstable housing.

Family Stability & System Interaction

Impact of High Family Mobility

Frequent mobility among families with young children further disrupts access and continuity. Families with children birth to five move at higher rates than those with older children, especially those facing housing instability and poverty.¹⁰⁶ A 2025 Illinois social mobility report¹⁰⁷ highlights that economic volatility, housing cost burden, and weak institutional supports are key drivers for family relocation. For families with young children, these factors translate into instability in daily routines and access to early learning opportunities. Each move can trigger a new set of enrollment steps: a new school district for preschool, a different CFC region for Early Intervention, or new CCAP paperwork tied to a provider change. As mobility increases, the likelihood of gaps in early education, developmental services, and child care rises. The intersection of housing instability and early childhood access underscores the need for integrated approaches that link housing, workforce, and early care policies.

Experiences of Families Facing Systemic Barriers

Certain groups of families face especially steep hurdles within Illinois' fragmented systems. Families experiencing homelessness often qualify for temporary CCAP eligibility or streamlined documentation, yet still must complete multiple applications and renewals once stabilized, sometimes leading to lapses in care.¹⁰⁸ Families with limited English proficiency may receive program communications, renewal notices, or eligibility requirements only in English, making it difficult to maintain enrollment or understand rights and timelines.¹⁰⁹ Immigrant and mixed-status families may fear sharing detailed demographic or income information, even for programs that do not consider immigration status such as Head Start or public preschool.¹¹⁰ Families of children with disabilities face some of the heaviest administrative loads, as they must manage Early Intervention or school-based special education in addition to child care or preschool; each system requires separate evaluations, plans, and documentation. These overlapping barriers increase the likelihood that children miss services for which they qualify or experience delays in evaluation, placement, or continuity of supports.

¹⁰⁶ Illinois Policy Institute Center for Poverty Solutions, Archbridge Institute, *Illinois' Low Social Mobility: Causes and Cures*, 2025.

¹⁰⁷ Illinois Policy Institute Center for Poverty Solutions, Archbridge Institute, *Illinois' Low Social Mobility: Causes and Cures*, 2025.

¹⁰⁸ Illinois Department of Human Services, [Child Care Assistance Program \(CCAP\) Protective Services Child Care for Children Experiencing Homelessness](#).

¹⁰⁹ Illinois Early Learning Project, [Education and Parent Support for Families Experiencing Homelessness and Housing Insecurity](#).

¹¹⁰ Administration for Children & Families, [A look at Early Childhood Homelessness: Illinois](#).

Geographic Variation in Family Experience

Families' experiences also differ sharply depending on where they live. Rural families contend with limited provider availability, long distances for screenings, therapies, and preschool, and fewer CCAP-accepting providers, meaning a single closure can leave entire counties without options.¹¹¹ Suburban families navigate a fragmented mix of school districts, park districts, private preschools, and center-based care, none of which align calendars or eligibility rules, and many of which do not accept CCAP.¹¹² Urban families may have more total options but face long waitlists for high-quality or no-cost programs, especially for infants and toddlers.¹¹³ Housing instability in cities increases the risk of losing a hard-won preschool seat or CCAP subsidy due to frequent moves.¹¹⁴ Across all regions, families must piece together multiple arrangements to manage work schedules and care needs, often resulting in unstable or interrupted early learning experiences.

Child Outcomes: What the Data Shows

Kindergarten Readiness

The transition into kindergarten provides one of the clearest statewide indicators of how well Illinois' early childhood system prepares children for school. Illinois' 2022-23 Kindergarten Individual Development Survey (KIDS)¹¹⁵ results show gradual improvement in school readiness but continued disparities across populations and regions. Statewide, readiness has increased across the three assessed domains—Social-Emotional Development, Language & Literacy, and Mathematics—continuing a gradual upward trend observed prior to the pandemic. After pandemic-related disruptions in 2020 and 2021, readiness levels in 2022 rebounded to slightly exceed pre-pandemic benchmarks, while participation in the assessment has nearly returned to pre-pandemic levels. Despite this progress, fewer than one-third of students demonstrate readiness across all three domains, signaling substantial unmet developmental needs prior to kindergarten entry.

¹¹¹ Madison Hopkins, Meredith Newman, "We're at the Mercy of Child Care: Child Care Costs are Crushing Families - Illinois' Largest Subsidy Excludes Thousands," *Illinois Answers Project*, 2025.

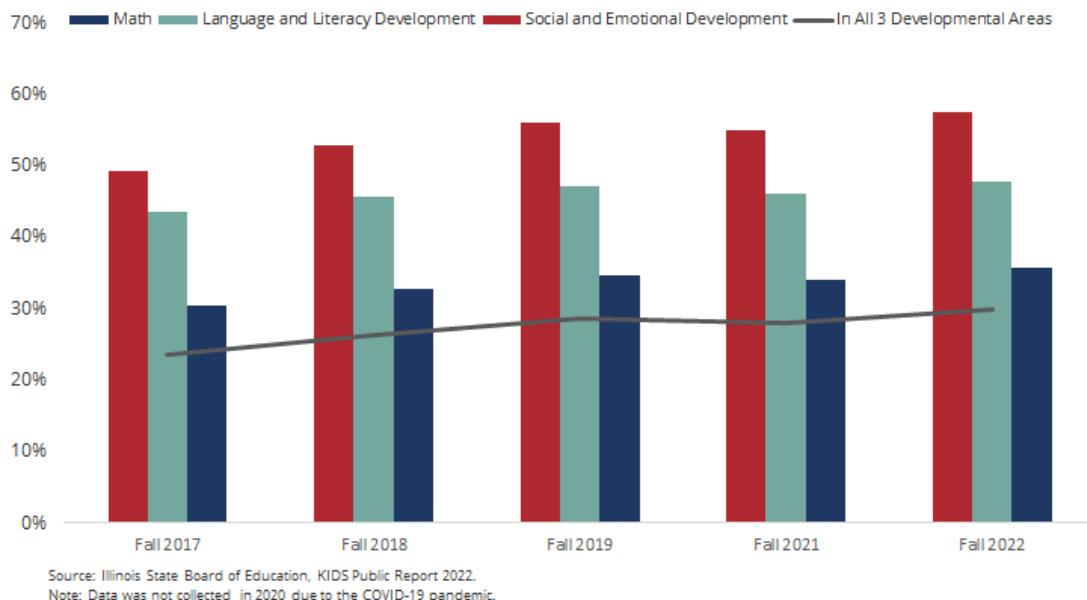
¹¹² Madison Hopkins, Meredith Newman, "We're at the Mercy of Child Care: Child Care Costs are Crushing Families - Illinois' Largest Subsidy Excludes Thousands," *Illinois Answers Project*, 2025.

¹¹³ Madison Hopkins, Meredith Newman, "We're at the Mercy of Child Care: Child Care Costs are Crushing Families - Illinois' Largest Subsidy Excludes Thousands," *Illinois Answers Project*, 2025.

¹¹⁴ Madison Hopkins, Meredith Newman, "We're at the Mercy of Child Care: Child Care Costs are Crushing Families - Illinois' Largest Subsidy Excludes Thousands," *Illinois Answers Project*, 2025.

¹¹⁵ Illinois State Board of Education, 2022-23 School Year Illinois Kindergarten Individual Development Survey Report.

Kindergartners Demonstrating Readiness by Developmental Area: Fall 2017-Fall 2022



Source: Illinois State Board of Education, KIDS Public Report 2022.
Note: Data was not collected in 2020 due to the COVID-19 pandemic.

Readiness outcomes vary widely across demographic groups. Children from low-income households, English Learners, and children with disabilities have consistently lower readiness rates, and gaps remain unchanged despite gains across groups over time (see [Appendix 1](#)). Early math readiness is notably the lowest-performing domain, suggesting the need for more targeted supports in early numeracy.

Similar variability is seen across racial and ethnic groups. Asian and White children have the highest overall readiness rates; Latino children demonstrate moderate readiness levels while Black children face the lowest readiness rates across all three developmental domains (see [Appendix 2](#)). Although all groups have shown some improvement since the pandemic, racial and ethnic disparities in school readiness remain substantial.

Longer-Term Developmental Outcomes

Kindergarten readiness is a powerful predictor of later academic achievement. A study done by the Illinois Workforce and Education Research Collaborative (IWERC)¹¹⁶ shows that kindergarten-ready children are more than twice as likely to achieve proficiency in the third-grade Illinois Assessment of Readiness (IAR) compared to peers who were not ready in any domain. These findings show that early learning experiences and developmental supports prior to kindergarten have measurable and lasting academic impacts. The growing share of Illinois

¹¹⁶ Illinois Workforce and Education Research Collaborative, *Inequity in the Early Years: Student Development Trajectories from Kindergarten to Grade 3*, 2024.

children entering kindergarten ready in all three domains over the past five years also suggests that early childhood investments may be improving initial school readiness statewide.

However, the same research shows that readiness gaps present at kindergarten entry do not fade, they widen by third grade. These widening disparities appear for different races and ethnicities, low-income children, English Learners, and students with disabilities. These patterns indicate that early childhood inequities compound over time and that K-3 supports play a critical role in either mitigating or reinforcing early developmental differences. Taken together, the findings underscore the importance of both high-quality early childhood services and equitable early elementary instruction to sustain and build children's readiness gains.

Health & Developmental Indicators

Young children's developmental and health trajectories in Illinois are shaped by a combination of exposure to adversity and persistent burdens from chronic conditions such as asthma and lead exposure. Together, these factors influence children's readiness for preschool and kindergarten, their behavioral regulation in early learning settings, and their long-term academic outcomes.

Illinois data shows that young children experience high rates of adverse childhood experiences (ACEs),¹¹⁷ which increase the likelihood of behavioral, social-emotional, and health challenges in early learning settings.¹¹⁸ An estimated 38.3% of children statewide have experienced at least one ACE, and 15.5% have experiences two or more, exposure levels that mirror or exceed national trends for some groups. ACE exposure is not evenly distributed. Illinois-specific reporting indicates that Black, Hispanic, and multiracial children experience higher rates of multiple ACEs than their White or Asian peers, contributing to disparities in early behavioral health needs. While early childhood programs conduct social-emotional and trauma-related screenings, the data is scattered across systems without a unified statewide reporting framework, limiting the state's ability to systematically track young children's behavioral health risk.

Chronic health conditions continue to affect early learning participation and child well-being in many communities. Asthma remains one of the most common chronic conditions affecting Illinois children; early statewide estimates place prevalence at 13-14%, among the highest rates nationally.¹¹⁹ For young children, asthma exacerbations often translate into inconsistent attendance at preschool or child care and higher emergency room utilization, disrupting developmental routines and learning continuity.

¹¹⁷ Adverse childhood experiences are traumatic or stressful events in childhood which can impact brain development, long-term health, and well-being.

¹¹⁸ Illinois Department of Public Health, *Special Emphasis Report: Adverse Childhood Experiences (ACEs)*, 2023.

¹¹⁹ National Center for Healthy Housing, National Safe and Healthy Housing Coalition, *Illinois Healthy Housing Fact Sheet*, 2025.

Lead exposure also remains a significant concern. Illinois has one of the highest childhood lead burdens in the country due to its older housing stock. In 2020, approximately 179,000 children tested statewide, more than 4,900 had blood levels at or above the state's intervention threshold, with additional thousands above the CDC reference value in later years.¹²⁰ Children under age three in high-poverty, high-risk communities face the greatest exposure.¹²¹ Even modest lead levels are associated with reduced cognitive performance, behavioral difficulties, and lower academic achievement, compounding inequalities already present at kindergarten entry.¹²²

Family-Level Outcomes

Stable, high-quality early childhood services play a central role in supporting Illinois families. When child care is reliable, parents are better able to maintain steady employment, avoid job disruptions, and sustain household stability. Illinois research shows that policies increasing continuity reduce churning in care arrangements and allow parents to remain consistently in the workforce.¹²³ Conversely, when programs experience closures, staffing shortages, or subsidy gaps, families often lose care unexpectedly, forcing parents to cut hours, switch jobs, or leave the labor force altogether.¹²⁴ These disruptions highlight how fragile early childhood supply directly affects family economic security.

Home visiting programs also strengthen family well-being by improving parent-child interactions and supporting parents' engagement in their children's development. Evidence-based models used in Illinois help families build parenting skills, improve early literacy behaviors, and connect more smoothly to developmental services.¹²⁵ Parents consistently report feeling more confident, more supported, and better equipped to navigate their child's needs, which contributes to stronger school readiness and healthier early development.¹²⁶

EQUITY ANALYSIS

Dimensions of Equity

Equity in Illinois' early childhood system is defined as ensuring that race, ethnicity, income, geography, language, disability, and immigration status do not predict a child's ability to access or benefit from early learning services.¹²⁷ This framing, advanced by the Early Learning Council

¹²⁰ Illinois Department of Public Health, *Illinois Lead Program 2020 Annual Surveillance Report*, 2022.

¹²¹ Illinois Department of Public Health, *Illinois Lead Program 2020 Annual Surveillance Report*, 2022.

¹²² Illinois Department of Public Health, *Illinois Lead Program 2020 Annual Surveillance Report*, 2022.

¹²³ OPRE, *Research on the Stability of Child Care Subsidies for Children and Families*, 2023.

¹²⁴ OPRE, *Research on the Stability of Child Care Subsidies for Children and Families*, 2023.

¹²⁵ Prenatal-to-3 Policy, [Evidence-Based Home Visiting Programs](#).

¹²⁶ Prenatal-to-3 Policy, [Evidence-Based Home Visiting Programs](#).

¹²⁷ Illinois Commission on Equitable Early Childhood Education and Care Funding, *Commission Report of Findings and Recommendations*, 2021.

and the Early Childhood Funding Commission, emphasizes not only removing barriers but also redesigning funding and service models so that communities facing the greatest historic and structural disadvantages receive the greatest support. In practice, equity encompasses the distribution of high-quality early learning programs, the cultural and linguistic responsiveness of services, and the fair treatment of families and providers within the system.

Across the state, racial, economic, and geographic inequities shape which children enter high-quality programs and how much benefit they receive. Analyses from the Funding Commission and groups like the Illinois Facilities Fund (IFF) show that quality early learning slots are unevenly distributed, with many low-income urban neighborhoods and rural parts of southern and central Illinois lacking Silver- or Gold-level programs altogether.¹²⁸ At the same time, subsidy take-up varies: Chapin Hall finds that some urban communities have comparatively high CCAP participation, while many rural counties and mixed-income suburbs serve fewer than 20% of eligible children.¹²⁹ These patterns reveal that statutory eligibility alone does not guarantee access; program availability, administrative burden, transportation, and historical disinvestment all shape family participation.

Equity also depends on the experiences of those delivering early childhood services. Workforce equity is a core dimension of Illinois' equity agenda. BIPOC educators are overrepresented in the lowest-paid roles and underrepresented in leadership and credentialed teaching positions.¹³⁰ Initiatives such as ECACE and Smart Start aim to rebalance opportunity by expanding degree pathways, scholarships, and supports for incumbent educators, but disparities remain. Together, these dimensions illustrate that equity in early childhood is multidimensional and requires targeting resources where needs are greatest.

System Drivers of Inequity

Illinois' early childhood inequities are not incidental; they are produced by long-standing system structures that shape funding, governance, and access. One major driver is the chronic underfunding of early childhood services across programs.¹³¹ Because funding has never matched the level of need, the system operates under "managed scarcity," creating waitlists, underfunded programs, and practical limits on enrollment and service availability that disproportionately affect low-income families and children of color.¹³² Funding formulas and contracting processes historically favored large, well-resourced organizations, making it more

¹²⁸ IFF, *Access and Quality for Illinois Children: Illinois Early Childhood Education Needs Assessment*, 2019.

¹²⁹ Chapin Hall, *Assessing Patterns & Geographies of Child Care Subsidy Take-Up for Illinois*, 2025.

¹³⁰ Illinois Network of Child Care Resources and Referral Agencies, *Illinois' Early Childhood Education Workforce 2020 Report*, 2021.

¹³¹ Illinois Commission on Equitable Early Childhood Education and Care Funding, *Commission Report of Findings and Recommendations*, 2021.

¹³² Illinois Commission on Equitable Early Childhood Education and Care Funding, *Commission Report of Findings and Recommendations*, 2021.

difficult for small, community-based, and Black- and Brown-led providers to secure stable grants, even when they serve the highest-need neighborhoods.¹³³

A second driver is fragmented governance and complex eligibility processes across agencies.¹³⁴ With ISBE, IDHS, DCFS, and multiple federal partners administering different parts of the birth-to-five system, families face duplicative documentation, conflicting rules, and inconsistent entry points.¹³⁵ Administrative burden falls hardest on families with the least time and resources, contributing to lower take-up in rural communities, disinvested suburbs, and immigrant households.¹³⁶ At the system level, mixed delivery means that public school-based programs often have more stable funding and staff supports than community-based centers, creating structural two-tiered access to quality.

Finally, siloed data systems, workforce constraints, and longstanding structural inequities continue to reinforce disparities across programs.¹³⁷ Illinois' fragmented data landscape makes it difficult to link child outcomes, workforce qualification, quality ratings, and funding sources, limiting the state's ability to identify and address inequities at scale. At the same time, the early childhood workforce, disproportionately composed of women and people of color, remains underpaid and overextended, contributing to turnover that destabilizes services in the very communities with the fewest alternatives.¹³⁸ These challenges are compounded by historical underinvestment in Black and Latino neighborhoods and by ongoing implicit bias in screening, referral, and disciplinary practices.¹³⁹ Together, these system-level factors still shape who has access to high-quality early learning opportunities and who does not.

Taken together, the evidence shows that inequity in Illinois' early childhood system is systemic rather than program-specific. Disparities in access, quality, and outcomes are produced through the interaction of underfunding, workforce instability, fragmented governance, uneven provider markets, and siloed data, conditions that compound over time and disproportionately affect families and communities facing the greatest structural barriers. As Illinois transitions to a unified Department of Early Childhood, addressing equity will require not only expanding access, but aligning funding, standards, workforce supports, and data systems in ways that reflect differing levels of need across regions and populations. This equity lens provides a critical foundation for evaluating progress as the system evolves.

¹³³ Illinois Commission on Equitable Early Childhood Education and Care Funding, *Commission Report of Findings and Recommendations*, 2021.

¹³⁴ CHIBYDESIGN, *Transforming Early Childhood Education and Care in Illinois*, 2024.

¹³⁵ CHIBYDESIGN, *Transforming Early Childhood Education and Care in Illinois*, 2024.

¹³⁶ Illinois Network of Child Care Resources and Referral Agencies, *Illinois Early Childhood Data Systems in 2024*, 2024.

¹³⁷ Illinois Network of Child Care Resources and Referral Agencies, *Illinois Early Childhood Data Systems in 2024*, 2024.

¹³⁸ Illinois Network of Child Care Resources and Referral Agencies, *Illinois Early Childhood Data Systems in 2024*, 2024.

¹³⁹ Illinois Network of Child Care Resources and Referral Agencies, *Illinois Early Childhood Data Systems in 2024*, 2024.

APPENDICES

Appendix 1

Kindergarten Readiness In All Three Areas By Student Group: Fall 2017-Fall 2022

School Year	English Learners		Individualized Education Program		Free/Reduced Price Lunch	
	English Learners	Not English Learner	Individualized Education Program	Not Individualized Education Program	Free/Reduced Price Lunch	Not Free/Reduced Price Lunch
Fall 2017	10.0%	26.6%	11.1%	24.9%	15.6%	30.4%
Fall 2018	11.0%	29.5%	11.8%	28.1%	18.0%	34.4%
Fall 2019	14.0%	31.6%	14.3%	30.2%	19.7%	36.3%
Fall 2021	13.0%	32.0%	13.0%	31.0%	19.0%	37.0%
Fall 2022	13.0%	33.5%	14.7%	31.9%	20.5%	38.7%

Source: Illinois State Board of Education, KIDS Public Report 2022

Note: Data was not collected in 2020 due to the COVID-19 pandemic.

Appendix 2

Kindergarten Readiness In All Three Areas By Race: Fall 2017-Fall 2022

School Year	White	Black	Hispanic	Asian	Pacific Islander	Native American	2 or More Races
Fall 2017	28.9%	19.3%	13.2%	32.2%	29.2%	18.7%	25.8%
Fall 2018	32.2%	22.2%	15.4%	32.6%	33.7%	17.5%	28.5%
Fall 2019	34.9%	23.4%	17.3%	35.3%	36.6%	14.5%	30.9%
Fall 2021	36.0%	21.0%	17.0%	35.0%	30.0%	18.0%	31.0%
Fall 2022	37.5%	38.0%	23.7%	21.6%	30.6%	24.1%	18.0%

Source: Illinois State Board of Education, KIDS Public Report 2022

Note: Data was not collected in 2020 due to the COVID-19 pandemic.



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