

**ARKANSAS DHS STATISTICAL REPORT  
DIVISION OF CHILD CARE AND EARLY CHILDHOOD EDUCATION  
INTRODUCTION  
SFY 2008**

**Highlights and Accomplishments During the Past Year Include:**

- The USDA program expenditures grew from \$35.6 million to \$39.7 million to meet the increasing demand to serve nutritious meals to children in Arkansas. The program expenditures increase was due to growth in the Child and Adult Care Food Program (CACFP). CACFP had 481 contracts in 2007 and 510 contracts in 2008. The Special Nutrition Programs are continuing to identify and target counties with low participation or no participation. Over 30.3 million nutritious meals were served to eligible children.
- The licensed capacity for all centers and homes in Arkansas has been expanded from 117,507 in 2001 to 171,618 in 2008. This represents a growth of 46% over the past seven years. The number of Quality Approved facilities in Arkansas has increased from 425 in 2004 to 577 in 2008, an increase of 36% during this four-year period. Currently, approximately 26% of all licensed child care centers are Quality Approved.
- The Arkansas Better Chance program expanded to serve 24,532 preschool children in high quality early childhood settings in 2008.
- The State Pre-K program, Arkansas Better Chance for School Success, received a score of 9/10 by the National Institute of Early Education Research Annual State of Preschool Yearbook. The yearbook evaluation addressed three areas of program quality: access, quality standards and resources.
- The 86<sup>th</sup> General Assembly appropriated an additional \$40 million to Arkansas Better Chance for School Success State Pre-K program to serve additional children. The total funding for ABC and ABCSS is now \$111 million.
- State Maternal and Child Health Early Childhood Comprehensive Systems Grant – The Arkansas Department of Health applied for the above-mentioned grant, with DCC&ECE named as the sub-grantee and lead convener. This is a two-year planning grant that will develop with a 10-year plan to fundamentally integrate child development, educational, and medical efforts to support at-risk young children and their families so that children can enter school in optimum social-emotional health and ready to learn.