READY CHILDREN IMPACT COUNCIL

WHITE PAPER
Version 1
READY CHILDREN WHITE PAPER

Preamble

United Way of San Antonio and Bexar County (United Way) is a strategic, mission-driven organization with a clear goal: help all community members achieve and maintain self-sufficiency to the greatest extent possible. United Way brings value to our community by working every day to increase the organized capacity of people to care for one another.

We do this by investing in expert research and performing regular community assessments to identify the areas of greatest need and advance the best strategies to address these needs. We work with strategic partners including other funding entities, businesses, human services agencies, schools, faith-based organizations and governmental institutions to ensure the investment of community dollars is maximized to support individuals and families toward self-sufficiency.

Based on our history of investing in key issues and knowledge gained from current national level research and local community assessments, United Way has selected ready children, successful students, strong individuals and families and safety net services as areas of significant need in our community. Our investments in each of these areas will be guided by Impact Councils composed of community leaders, content experts, residents, funders and public sector representatives committed to United Way’s goal.

This paper outlines the results of our research and assessment process for the Ready Children Impact Council, supported by the work of the ReadyKidSA Coalition. ReadyKidSA (RKSA) is a cross-sector collaboration of organizations across Bexar County with a vision of growing happy, healthy and ready children. RKSA focuses on supporting families with children ages 0-8 by connecting them to resources in Bexar County and implementing strategies and solutions to ensure children are developmentally on track to reach their full potential.

To maximize the collective impact of ReadyKidSA strategies, the RKSA Coalition adopted the framework of Results-Based Accountability in 2016 to develop the Bexar County Children’s Agenda, a roadmap for implementing a shared agenda that shapes and promotes the well-being of children. This agenda strategically guides the efforts of the Ready Children Impact Council as well as the RKSA Coalition.

United Way and stakeholders conducted national and local research to determine three key results and indicators impacting the well-being of young children. The results are delineated below with a frame of national data, local data and context, key influencing factors, key impact strategies and progress indicators. We are aware that all populations are not represented in this paper. Other populations may be addressed in future iterations as the Impact Council further explores the conditions of ready children in Bexar County.
HAPPY CHILDREN

Happy: All children grow up in safe, stable and nurturing environments.

Early childhood is the most critical period of development in a human life. Safe, stable and nurturing environments have long-term profound effects on a child’s well-being and development. Stable and nurturing environments are directly associated with stronger physical and mental health, higher educational achievement, more productive employment and less involvement with social services and the criminal justice system in adulthood. 3

Investment in early childhood initiatives reduces the need for public welfare expenditures later in life by decreasing the achievement gap, improving health outcomes, strengthening our workforce and boosting future earnings. 1 For every $1 invested in the physical and cognitive development of babies and toddlers, there is a $7 return on investment. 2 Investing in young children is critical to their future success and the return on investment over time is crucial to local economies.

National Research on Happy Children

National neuroscience studies show that environmental instability at an early stage of development such as poverty, verbal or physical abuse, divorce or insecurity of basic needs results in an overproduction of the stress hormone cortisol, altering the brain architecture and development of the nervous and immune system of a child. 4,5 This alteration in the brain’s stress system increases a child’s vulnerability to chronic diseases later in life and interferes with healthy development, which can result in a number of concerns including: 6,7,8

- impaired cognitive development at age three
- deficits in school readiness
- aggression, anxiety and depression
- decrease in high school graduation
- increase in teen parenthood
- decrease in adult employment and earnings

Local Research on Happy Children: The Situation in San Antonio and Bexar County

The safety and stability of all children remains a priority concern in our community. While confirmed child abuse rates have been declining, we are also aware that this rate has two key limitations: it is dependent on people reporting abuse and on the availability of resources to investigate reports. Even with this limitation, Bexar County has a higher percentage of alleged victims per 1,000 children than any other major city in Texas (see Table 1). 9 In addition, the homicide death rate for children birth to 14 years old in Bexar County continues to be higher than the Texas average and only Harris County has higher reported rates. 9

Bexar County Children: Key Facts

* 4,550 children were confirmed victims of abuse/neglect in 2016
* 1 in 4 children are food insecure
* In some areas of Bexar County, up to 60 percent of children are economically disadvantaged (See Table 1 below)
According to Bexar County Child Protective Services’ (CPS) 2016 Annual Report, 4,550 children in Bexar County were found to be victims of maltreatment; 1,903 of these children were removed and 11 children died. San Antonio is rich in resources and yet still maintains the second highest rate of removal of children in the state. With all of these climbing statistics, the recidivism rate, or rate of caregivers who repeat the abusive behavior, remains at 9 percent in Bexar County and 8 percent in the state of Texas.

Household stressors such as persistent poverty, lack of childcare, domestic violence and substance abuse impair a family’s ability to nurture and protect their children. In Bexar County, nearly one out of four children (23.4 percent) is food insecure and an estimated 11 percent of families with children 0 to 17 experience employment instability. This figure doubles for female-headed family households. Families with unstable and/or insufficient incomes are often ashamed or reluctant to seek assistance, and the complexities of the eligibility requirements for the various subsidy programs create barriers for families trying to meet their children’s needs.

**Key Influencing Factors for Happy Children**
A well-bonded child is a secure child. In fact, the care received by an infant, regardless of the caregiver, directly lays the foundation for the child to develop basic biological processes supporting emotion regulation, sleep-wake patterns, attention and ultimately all psychosocial functioning. Studies suggest that the key influencing factors to long-lasting effects on physical and mental well-being are the formation of strong, positive bonds between young children and important adults in their lives, establishing consistent and healthy daily routines and responsive caregiving. Therefore, investment in early childhood development is critical.
United Way currently invests $8.5 million annually in early childhood programs and another $3.8 million in grant funds directly related to early childhood initiatives. Each year, these programs provide services to more than 60,000 individuals in Bexar County, through school-readiness and parent education programs (both in-home and agency-based), fatherhood groups, mental health services, access to quality childcare, rape crisis and prevention services. In 2009, UWSA was selected by United Way Worldwide to serve as an original Strengthening Families site in Texas, funded by the Doris Duke Foundation, in order to implement the, formerly five, now six protective factors into the work of the UWSA Children’s Impact Council.

Six Protective Factors

1: Nurturing & Attachment
2. Knowledge of Parenting & Child Development
3. Parental Resilience
4. Social Connections
5. Concrete Supports for Parents
6. Social and Emotional Competence of Children

Key Impact Strategies that support children growing up in safe, stable and nurturing environments include:

1. Facilitate nurturing child-parent relationships and secure attachment through home visitation programs and other support programs focused on strengthening parenting skills of young mothers, fathers, families and caregivers to promote responsive caregiving, early learning and interaction within the home.
2. Increase father/male caregiver engagement.
3. Coach adult caregivers concerning serve-and-return interaction with children in a wide range of settings, including pediatrics, early care and education programs, home visiting and even employment training programs.
4. Increase dual generation support initiatives.
5. Promote the Six Protective Factors outlined by the Strengthening Families network and recommended as a key frame of reference for promoting child well-being.

How will we know the impact of our efforts?
The ReadyKidSA Coalition has determined the following are leading indicators to evaluate whether children grow up in safe, stable and nurturing environments.

1. Number of confirmed victims of child abuse and neglect.
2. Percentage of caregivers who repeat the abusive behavior.
3. Percentage of children 0-17 experiencing food insecurity.
4. Percentage of families with children 0-17 experiencing employment instability.

HEALTHY CHILDREN

Healthy: All children are healthy in mind, body and spirit.

A child’s health directly affects his or her ability to learn; therefore, children who are healthy in mind, body and spirit have higher-quality learning experiences that better equip them to be prepared for kindergarten, successful in school and ultimately economically secure and able to contribute to their communities as adults. 11, 12
National Research on Healthy Children

The rate of uninsured children in the United States is 5 percent, the lowest it has been in decades. Although this rate is low and continues to move in a positive direction, we will continue to monitor the erratic patterns of access and use of preventive health care by so many at-risk populations. Prenatal care is a critical prevention tool supporting the health of both the infant and the mother. Prenatal care serves as the main support to inform and partner with expectant mothers on critical health issues such as diet, nutrition, exercise, immunizations and abstaining from drugs and alcohol, while educating on the importance of breastfeeding and preparing emotionally for caring for an infant. When mothers are healthy and informed, their children will have healthier outcomes later in life.

Texas has made significant progress reducing infant death and preterm births. However, the rates of premature and low-birth weight babies are still high. Nationally, 9.63 percent of babies are born premature, while in Texas that rate was 10.4 percent in 2016. According to a study conducted by the March of Dimes, the average medical cost for a healthy, full-term baby was $5,085, but the average cost of care for pre-term or low birth weight babies was $55,393. Unfortunately, medical costs are just the beginning. Preterm and low birth weight babies may result in significant long-term consequences including asthma, hearing loss, intellectual and developmental disabilities, as well as lower academic achievement and behavioral issues. Babies with low birth weights are more likely than typical weight babies to have health conditions later in life, such as disabilities, high blood pressure and heart disease.

In addition to prenatal care and physical development, a healthy child is also defined by his or her social and emotional development - a critical factor in reaching a child’s full potential. Starting from birth, nurturing relationships teach children about comfort, safety and confidence. Young children with healthy social-emotional development perform well academically because they have the self-regulation and decision-making skills to adapt, empathize, recognize their abilities and interact appropriately with peers. Low social-emotional development in young children results in a lack of interpersonal skills and self-regulation and may lead to emotional or behavior mental health disorders that could have otherwise been prevented. Social determinants of health have a significant impact on health outcomes and are defined as the structural determinants and conditions in which people are born, grow, live, work and age and include factors such as socioeconomic status, education, physical environment, social support network and access to healthcare. (See table 2).

National research indicates almost one in five young people in the United States have one or more mental, emotional or behavioral disorders. However, only 20 percent of the children who need treatment for mental, emotional or behavioral disorders receive it. Approximately 9 percent of
children who receive specialty mental health services in the United States are younger than 6 years old. Fear and stigma toward receiving mental health support is an immense barrier along with limited appropriate and/or affordable therapeutic services.

Local Research on Healthy Children: The Situation in San Antonio and Bexar County

In Bexar County, 11 percent of babies are born premature. This rate is slightly higher than the state average of 10.2 percent. Only 61.4 percent of Bexar County women began prenatal care within the first three months of their pregnancy. Currently, Bexar County does not meet the target of Healthy People 2020, a federal initiative to promote health, which aims for 77.9 percent of women to begin prenatal care in the first three months of pregnancy. Babies of women who do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die, according to the U.S. Department of Health and Human Services.

On a positive note, the percentage of Bexar County children who are uninsured is at a record low rate of 6.6 percent while the state of Texas reports that 10 percent of children are uninsured. Bexar County children are less likely to be uninsured than children in comparison counties and Texas. The Bexar County rate also had the steepest decline since 2011 – 39 percent decrease vs. 28 percent drop in Texas.

Used throughout the United States, Australia and Canada, the Early Development Instrument (EDI) is a validated population-based measure of how prepared, or ready, young children are to enter Kindergarten. Through the Maternal Infant and Early Childhood Home Visitation (MIECHV) grant, UWSA partners with the University of California at Los Angeles (UCLA) to aggregate and map school readiness data on an annual basis. The EDI measures five domains of early childhood development including: physical health and well-being, social competence, emotional maturity, language and cognitive development and communication skills and general knowledge. Emotional maturing includes the ability to think before acting, a balance between too fearful and too impulsive, an ability to deal with feelings at the age-appropriate level, and empathetic response to other people’s feelings. A child is considered “Vulnerable” when their domain score is at, below or equal to the 10th percentile of the national EDI dataset. (for more details see https://edi.offordcentre.com/researchers/domains-and-subdomains/).

Over the past five years, United Way has worked with multiple Bexar County school districts to adopt this assessment tool. To date, 7 out of 17 school districts representing 65 percent of kindergarten children in Bexar County now conduct the EDI assessment. However, due to the fact that each year additional school districts continue to be added to the dataset (school districts with significantly diverse socio-economic profiles), it is important to consider the limitations of year-by-year comparisons. To accurately trend this indicator and preserve the time series, a baseline geography was set consisting of the 245 census tracts assessed starting in 2013. In addition, the 70 percent representation per census tract criteria prescribed by UCLA for the EDI initiative was applied to the geography. The data below (see table 3) are adjusted for the above stated limitations and are an accurate representation of the developmental readiness, with regard to emotional maturity, one of five developmental domains, for children in Bexar County.
When applying the prevalence of national emotional or behavior mental health disorders to Bexar County census data, for children ages 0-17, we find there are an estimated 80,000 children suffering from mental, emotional or behavior disorders in this county alone. According to The State of Children Mental Health in Bexar County, August 2013, there is an evident lack of psychiatric care for children in our community, consequently increasing emergency room (ER) visits by children and teens with a mental, emotional, or behavioral diagnosis. This is the most expensive and ineffective option for the children of our community. However, it continues to happen every day. 22

Key Influencing Factors for Healthy Children
Local data indicates that an estimated 36.6 percent (10,175) of mothers receive late or no prenatal care.

Prior to the baby being born, mothers often need help with Medicaid enrollment, transportation assistance, mental health and substance abuse treatment and support for basic needs. Once the baby is born, families continue to need a variety of community support services but are also facing the stress of having a newborn. Postpartum supports that mothers often need are mental health assistance especially with postpartum depression, basic needs assistance such as food, utilities and housing support, transportation assistance, and Early Childhood Intervention (ECI) support for any suspected delays or issues with the baby. Three NFP programs are operating in Bexar County and are currently serving 692 mothers, which represents 6.5 percent of the estimated need.

Key impact strategies that support children being healthy in mind, body and spirit include:
1. Provide pregnant women adequate prenatal care;
2. Reduce sources of stress in the lives of children and families;
3. Strengthen core life skills and resiliency in adults and children;
4. Create awareness through home visiting programs and media campaigns on the importance of establishing a medical home and portraying mental health support positively.

Home visiting programs are filling a critical gap by helping families who are not accessing prenatal care or receiving support for various reasons such as lack of transportation, lack of access to clinics
and doctor’s offices, delay in Medicaid and stigma associated with seeking help. However, barriers still remain.

**How will we know the impact of our efforts?**
The ReadyKidSA Coalition has determined the following are key leading indicators to evaluate whether all children are healthy in mind, body and spirit:

1. Percentage of children 0-17 without health insurance;
2. Percentage of pregnancies receiving late or no prenatal care;
3. Percentage of premature births;
4. Percentage of kindergarten students assessed as “vulnerable” in emotional development on the Early Development Instrument (EDI).

**READY CHILDREN**

*Ready: All children are curious learners progressing towards their full potential.*

The learning and language that occurs within the first three years of a child’s life can define the child’s future. Early childhood experiences are key to emotional, physical and educational outcomes for children.

**National Research on Ready Children**
Research shows formalized childcare centers usually offer more academic and developmental advantages, specific to reading, vocabulary and math skills, for children compared to informal childcare. However, it is hard to measure informal childcare in the same way due to the less regulated nature of the care. Therefore, it is appropriate to look at children who attended formal childcare centers and compare their school readiness levels to those who did not.

While early education is a key component to a child’s development, it is imperative that early education childcare programs maintain a quality standard. Childcare in the United States is regulated by policy, licensing and multiple requirements that keep the system structured and functioning. For many childcare centers, the quality is dependent upon the staff and the center itself and is also reflective of how children who are given an opportunity to have a quality early childhood education can increase their own human capital.

**Children’s academic success is directly linked to high quality preschool programs:**

- They are more likely to:
  - Score higher in school-readiness tests
  - Have better language skills
  - Be better prepared academically, especially in the areas of verbal and arithmetic skills.

**Long-term academic success**
Children from quality preschool and early childcare learning settings have been shown to realize sizable and academic achievements in the long term, including:

- Consistently score higher in academic achievement tests in later grades
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- Higher high school graduation rates
- More than twice as likely to attend a four-year college
- Less likely to require remedial education or be held back a grade

Although many families look at childcare centers as the more formalized method for early education and with higher academic standards, there is often a limited supply of affordable childcare center slots. This supply and demand issue, in combination with the preferences of some parents, leads to a need for informal childcare options such as family, friend and neighbor care.

Research also indicates some parents choose informal care over formal care because they feel their children receive a higher level of care from a provider that has an established relationship with the child. Others also believe children with delays or disabilities will have more success in a less formalized center with someone they know taking care of them. Other issues that contribute to high levels of informal care are affordability of care, transportation limitations and flexibility of hours due to the fact that many parents work outside the 7 a.m. to 6 p.m. time period, the most common operating hours for childcare centers. Although some families prefer informal childcare networks, formalized care has been linked to higher levels of school readiness for children whether they are low-income or not. A notable common theme found throughout this quantitative research is formalized care can help close social and academic gaps between families with different levels of income.

Local Research on Ready Children: The Situation in San Antonio and Bexar County

The Early Development Instrument (EDI) population-level, kinder-readiness data has been collected for six consecutive years and now includes approximately 65 percent of the Bexar County kindergarten population. To launch children onto a path that will allow them to achieve their full potential, it is critical to have easy access to enriching early childhood experiences. Only 24 percent of children in San Antonio are considered “very ready” for kindergarten, in all five domains, according to 2016 EDI results (it is important to note here that San Antonio’s EDI only covers 7 school districts which account for 65 percent of kindergarten students in our community). Only 29.5 percent of licensed childcare centers in San Antonio hold one or more accreditations, signaling serious questions about the quality of the majority of centers in this community. Participation in high-quality early childhood care and education programs can have positive effects on children’s cognitive, language and social development, particularly among children at risk for poor outcomes. High quality programs do not just meet the basic needs of children, but also provide opportunities for meaningful learning activities and language development, and work to foster close, caring relationships between children and their caregivers – parents and teachers alike.
In Bexar County, only 45.4 percent of 3 and 4 year olds are enrolled in a formal public or private school (see table 4). This data means the majority of Bexar County 3 and 4 year olds are receiving an informal early childhood education, including childcare or pre-kindergarten services, which may not be meeting the rigor of formal early childhood programming. Additionally, only 20.6 percent of the licensed childcare centers in Bexar County, registered with Workforce Solutions Alamo’s Childcare Service (CCS) program, have a quality accreditation, leading parents receiving CCS to enroll children in non-accredited centers with lower quality regulations (see table 5).

### OVERALL TREND: Bexar County, Workforce Solutions Alamo Licensed Childcare Facilities

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<th>BCY 2015</th>
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<th>BCY 2017</th>
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<tbody>
<tr>
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<td>524</td>
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<tr>
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<td>20.6%</td>
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Source: Workforce Solutions Alamo Childcare Services Program 2017, childcare centers registered with CCS.

### Key Influencing Factors for Ready Children

Bexar County has a much higher demand for childcare subsidies than are currently available. According to Workforce Solutions Alamo, their Childcare Subsidy program averages a yearlong wait list for families in Bexar County, and as of December 15, 2017, this waitlist included approximately 4,774 children. This is the reality for families seeking support for childcare services as parents attempt to return to work, seek a post-secondary degree or secure a training certificate. United Way’s Women United Childcare Scholarship program helps to provide childcare scholarship awards to families. However, limited funding means only 40 families, on average, receive support annually (see table 6). Yearlong wait lists and limited funding means families seeking to break the cycle of poverty must pay for childcare without support from subsidy programs, creating a significant barrier to obtaining a higher education and even working.
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Key impact strategies that support children in becoming curious learners and progressing towards their full potential include:
1. Expand access to affordable, quality early childhood programs;
2. Ensure parents understand the importance of quality care;
3. Ensure that workers in service programs have adequate compensation, professional development, and supervision in order to reduce the high level of turnover in these positions that disrupts relationships between staff and clients;
4. Continue to educate parents that they are their child’s first teacher.

United Way has a long-standing history of investing in childcare programs, allowing centers to maintain quality standards while ensuring families utilizing the childcare subsidy programs have access to quality childcare. Additionally, United Way leads Dual Generation, a collective impact collaborative funded by the Annie E. Casey Foundation, that supports local childcare centers in achieving Texas Rising Star accreditation in order to raise the quality of available care, impacting generations to come.

How will we know the impact of our efforts?
The ReadyKidSA Coalition has determined the following are key leading indicators to evaluate whether all children are curious learners, living up to their full potential:
1. Percentage of Kindergartners assessed as “Very Ready” on four or more EDI domains;
2. Percentage of licensed childcare capacity with an accreditation;
3. Percentage of 3 and 4 year olds enrolled in early childhood development programs.

Next Steps
According to U.S. demographers, ‘as San Antonio goes, so goes the nation.” San Antonio’s current demographics are reflective of what the nation will be in the next few decades. This awareness underscores the need for local, state and national partners to create systems and policies to prepare for a growing, younger population in need of affordable, accessible, time-flexible early childhood education options.

To ensure that all children in San Antonio are happy, healthy and ready, the research is clear the educational system, justice system and medical system must join forces to provide comprehensive solutions to the challenges facing our children. In light of the need for a broad coalition to address early childhood issues, the ReadyKidSA Coalition was formed.

UWSA’s ReadyKidSA Coalition began in 2015 in response to the Texas Department of Protective and Regulatory Services’ awareness that the many different organizations leading early childhood coalitions were missing the opportunity to communicate and leverage each other’s knowledge and resources. Through this broad-reaching coalition of more than 60 organizations serving children primarily prenatal to eight years old, the RKSA Coalition was given the opportunity through the MIECHV grant to co-create and coalesce around The Blueprint: Eight Building Blocks for Early Childhood in Bexar County. This Blueprint constitutes a comprehensive continuum that addresses early childhood needs of children birth to eight years old, and those of their families in Bexar.
County (http://readykidsa.com/about-readykidsa/). It is intended that the following elements of this Blueprint will serve as the foundation for early childhood work in Bexar County:

1. Elements of an Aligned System for Young Children
2. Partnerships and Collaboration.
3. Data Collection – Measures of Success
4. Health Plan Strategies for Early Childhood and Families
6. Access to High-Quality Early Education Experiences in a Variety of Settings
7. Neighborhood-Based Parent Engagement and Family Supports
8. Transition from 0 to 8 Years Old and Beyond

Acknowledgement

In conclusion, United Way of San Antonio and Bexar County wishes to sincerely thank our local stakeholders and nonprofit agency partners for their contributions in helping inform the Community Impact priority areas: ready children, successful students, strong individuals and families and safety net services.

United Way teams analyzed local and national data, conducted interviews with subject-matter experts, reviewed annotated bibliographies and research submitted by nonprofit agencies and community partners and studied community resources and evidence-based programs. It is important to note that in only a handful of places was disaggregated data by race and/or ethnicity provided. As we move further into this work, having these conversations will be critical to ensuring we are addressing needs that may only present themselves once data is disaggregated. As changes in the social, demographic, economic and environmental landscape influence changes in the well-being of a community, United Way’s business model and funding priorities will strategically shift to effectively drive change with limited resources. By investing in a streamlined set of priorities that focus on those groups with the greatest needs, United Way will continue to bring the community together to achieve meaningful and measurable results that helps others achieve and maintain self-sufficiency.

United Way’s work is and remains, by design, iterative and is intended to be informed by and responsive to community conditions to inspire the most good and create the most change.
References

1 Four Big Benefits of Investing in Early Childhood Development. (n.d.). Retrieved December 18, 2017, from https://www.bing.com/cr?IG=03F3D8AFFBA54AA0ABF28AAD1F2BDF20&CID=0AB4B19325AE61ED2CCBACF2401600D&rd=1&h=61d3zoxuixN3TSzbWmeW2De_do00lnQxq_x2_5jcXi&v=1&r=https%3a%2f%2fheckmanequation.org%2fassets%2fF_Heckman_FourBenefitsInvestingECDvelopment_022615.pdf&f=DevEx.5035.1


