



## Using *Improving the Odds* to Promote Early Childhood Policy

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Early Childhood Comprehensive Systems Webinar • October 11, 2007

**NCCCP** National Center for Children in Poverty  
Columbia University  
BAYLOR SCHOOL OF PUBLIC HEALTH

## Goals of the Presentation

- To make the research case for focusing on early childhood policy, especially for low-income children
- To highlight findings from *Improving the Odds for Young Children (ITO)*
- To show how you can use the ITO database and state profiles
- To seek feedback on how we can make these resources more useful

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## Defining Key Terms

- **Young Children:** All children before their 6th birthday.
- **Poverty:** Household income at or below 100 percent of the federal poverty level (FPL), or \$17,170 for a family of three in 2007.
- **Low-Income:** Household income at or below twice the federal poverty level, or \$34,340 for a family of three in 2007.

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## The Research

***Poverty is associated with adverse outcomes***

- Poverty can:
  - impede children's cognitive development and their ability to learn
  - contribute to behavioral, social, and emotional problems
  - cause and exacerbate poor health among children
- Effects of poverty on children's health & development depend on the timing, duration, and intensity of poverty in childhood.
- The risks posed by poverty appear to be greatest among children who experience poverty when they are young and among children who experience persistent and deep poverty.

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## The Research

***Early experiences determine whether a child's brain architecture will provide a strong or weak foundation for all future learning, behavior, and health***

- The interaction of genes and experience shape the architecture of the developing brain.
- Once the architecture is built, it cannot be changed, and behavior becomes more difficult to change.
- Stable and stimulating environments help create a sturdy foundation for later school achievement, economic productivity, and responsible citizenship.

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## The Research

***The gaps show up early in life***

- At age 4, children below the poverty line are 18 months below the developmental norm for their age, and by age 10, the gap is still present.
- By third grade, children with well-educated parents know 12,000 words—3 times as many as children with less-educated parents.
- Early school failure is highly correlated with later school failure and poor employment outcomes in adulthood.

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## The Research

### Exposure to multiple risks compounds the chances of poor child outcomes

Young children's exposure to multiple risk factors, 2006



These risks include: lives in poverty, with a single parent, in households where both parents have less than a high school education, in families with parents who do not speak English well or at all; and/or has parents with no paid employment.

Because of rounding, figures may not add up to 100%.  
Source: American Community Survey, 2006.

## ImprOving the Odds for Young Children

- Is intended to
  - Sharpen the debate on effective state policies to promote early childhood development
  - Create a national dialogue
- Is based on
  - existing 50 state data bases, and is not definitive list of what states should be or are doing
- Provides
  - State-specific profiles
  - A national overview of the state of the states, including recent trends
  - 50-state data tables for comparisons across the states
  - A baseline to monitor trends

## Underlying Principles

The three-legged stool of early childhood development:

1. quality health care
  2. quality child care and early learning opportunities
  3. nurturing and economically secure parents
- Families earning less than 200 percent of the poverty level may struggle to meet the basic needs of their children.
  - State policy choices matter, and can help level the playing field.
  - Research should inform state policies

## I. Highlights: Health and Nutrition

- 41 states provide access to public health insurance for young children in low-income families.
- But many children who are eligible for Medicaid are not receiving the dental and health screenings that are consistent with pediatric practice and can prevent or reduce future problems.
- Only six states allow children who are at-risk for developmental delays to receive early intervention services.

## I. Medicaid/SCHIP Income Eligibility, 2006

State	Children (0-5) 2006	Working parents 2006	Children (1-5) 2001
Colorado	200%	67%	185%
Illinois	200%	192%	185%
Kansas	200%	36%	200%
Nebraska	185%	58%	185%
Oklahoma	185%	43%	185%
Washington	250%	79%	250%
Wisconsin	185%	192%	185%

Data presented as a percentage of the federal poverty level (FPL).

Income eligibility in Colorado, Kansas, and Washington represent a separate SCHIP program.

Sources:

2006 data: Donna Cohen Ross, Laura Cox and Caryn Marks, "Resuming the Path to Health Coverage for Children and Parents: A 50-State Update on Eligibility Rules, Enrollment and Renewal Procedures, and Cost-Sharing Practices in Medicaid and SCHIP in 2006", Kaiser Commission on Medicaid and the Uninsured, January 2007

2001 data: Rosenbach, M., Ellwood, M., Irvin, C., Young, C., Conroy, C., Quinn, B., and Kell, M., "Implementation of the State Children's Health Insurance Program: Synthesis of State Evaluations. Background for the Report to Congress", Mathematica Policy Research, Inc., March 2003

## II. Highlights: Early Care and Education

- 16 states provide access to child care subsidies for young children in low-income families.
- State child care licensing requirements are not promoting nurturing, high quality care.
  - Although 23 states have child care licensing standards that require infants and toddlers to be assigned a consistent primary care provider.
  - 8 states meet recommended standards for staff/child ratios and maximum class sizes for eighteen-month-old children in child care.
  - 14 states meet the recommended licensing standards for four-year-old children in child care.

### III. Highlights: Parenting and Economic Security

- More than half the states are using minimum wage and tax policies to support family economic security.
  - 31 states have increased the minimum wage.
  - In 15 of the 42 states that taxed family income in 2006, a family of three was not exempt from paying state income tax when family income was below the poverty level.
- Few parents, and even fewer low-income parents, can afford to stay home with their newborn and establish a strong relationship.
  - 6 states provide paid medical/maternity leave.
  - 28 exempt single parents receiving TANF with a child under age 1 from the work requirement.
  - 18 reduce the work requirements for single parents with children under age six.



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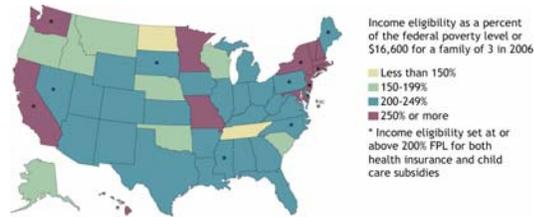
### National Findings: The Big Picture

- Income eligibility for health insurance and child care subsidies is uneven across states...
  - Only 15 states provide access to *both* health insurance and child care subsidies for families earning at 200% of the poverty level.
- ...and within states
  - 47 states have a higher income eligibility threshold for young children's health insurance than for child care subsidies.
  - In Missouri, the threshold is almost three times higher for health insurance (300 percent of poverty for young children) than for child care subsidies (110 percent of poverty for a family of three).



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### Medicaid/SCHIP Income Eligibility, Ages 1-5

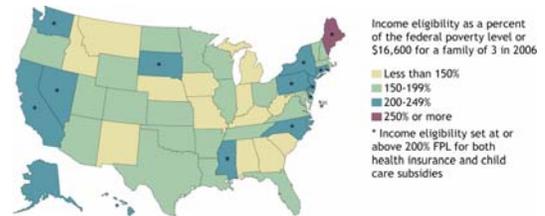


Note: Illinois, Massachusetts, and Pennsylvania provide state-funded coverage to children that exceed this income level.  
 Source: Donna Cohen Ross, Laura Cox and Caryn Marks, "Resuming the Path to Health Coverage for Children and Parents: A 50-State Update on Eligibility Rules, Enrollment and Renewal Procedures, and Cost-Sharing Practices in Medicaid and SCHIP in 2006," Kaiser Commission on Medicaid and the Uninsured, January 2007.



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### Child Care Subsidy Income Eligibility for a Family of Three, 2006



Note: These percentages represent the income eligibility levels to qualify for a subsidy. Income eligibility does not guarantee a subsidy as funding may not be adequate to meet the demand for subsidies. In Colorado, Texas, and Virginia, income eligibility varies by county but the average rate is in this range.  
 Source: Karen Schuman and Helen Blank, "Child Care Assistance Policies 2006: Gaps Remain, with New Challenges Ahead," National Women's Law Center, September 2006.



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### National Findings: The Big Picture

- Access to health insurance is stable or growing, while access to child care subsidies is declining.
  - Between 2001-2006 health insurance eligibility levels were either stable or growing in most states, while 25 states reduced child care eligibility.
  - Of the 26 states that increased funds for pre-k (adjusted for inflation) between 2002 and 2006, 11 decreased funds for child care.



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### National Findings: The Big Picture

While most low-income children have access to health insurance, their parents do not.

State	Children (0-5) 2006	Working parents 2006	Children (1-5) 2001
Delaware	200%	107%	200%
Georgia	235%	55%	235%
Tennessee	185% / 133%	80%	400%
Wyoming	200%	57%	133%

Data presented as a percentage of the federal poverty level (FPL).

Sources:  
 2006 data: Donna Cohen Ross, Laura Cox and Caryn Marks, "Resuming the Path to Health Coverage for Children and Parents: A 50-State Update on Eligibility Rules, Enrollment and Renewal Procedures, and Cost-Sharing Practices in Medicaid and SCHIP in 2006", Kaiser Commission on Medicaid and the Uninsured, January 2007

2001 data: Rosenbath, M., Ellwood, M., Irvin, C., Young, C., Carroy, C., Quinn, B. and Kell, M. "Implementation of the State Children's Health Insurance Program: Synthesis of State Evaluations. Background for the Report to Congress", Mathematica Policy Research, Inc., March 2003

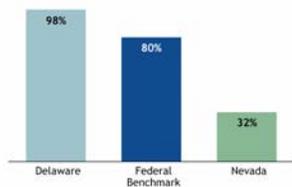


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## National Findings: The Big Picture

Medicaid-insured children are not receiving their Well-checks

Young children, ages 3-5 years, on Medicaid receiving at least one EPSDT screen in a 12-month period, 2005



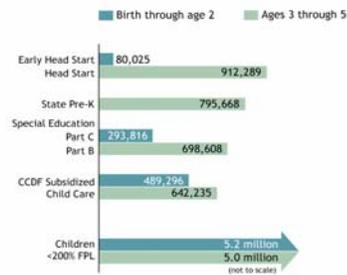
Source:



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## National Findings: The Big Picture

Access to Early Childhood Programs is Limited (2005)



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## Improving the Odds for Young Children

Web Tour



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For More Information  
OR  
Suggestions on How to Improve the Database:

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<http://nccp.org/projects/improvingtheodds.html>

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