

# What is a Prenatal to 3 System?

NCIT Capacity-building Hub

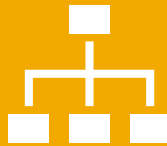
4/29/19

# Today's Webinar

4/29/19



What can help focus your efforts?



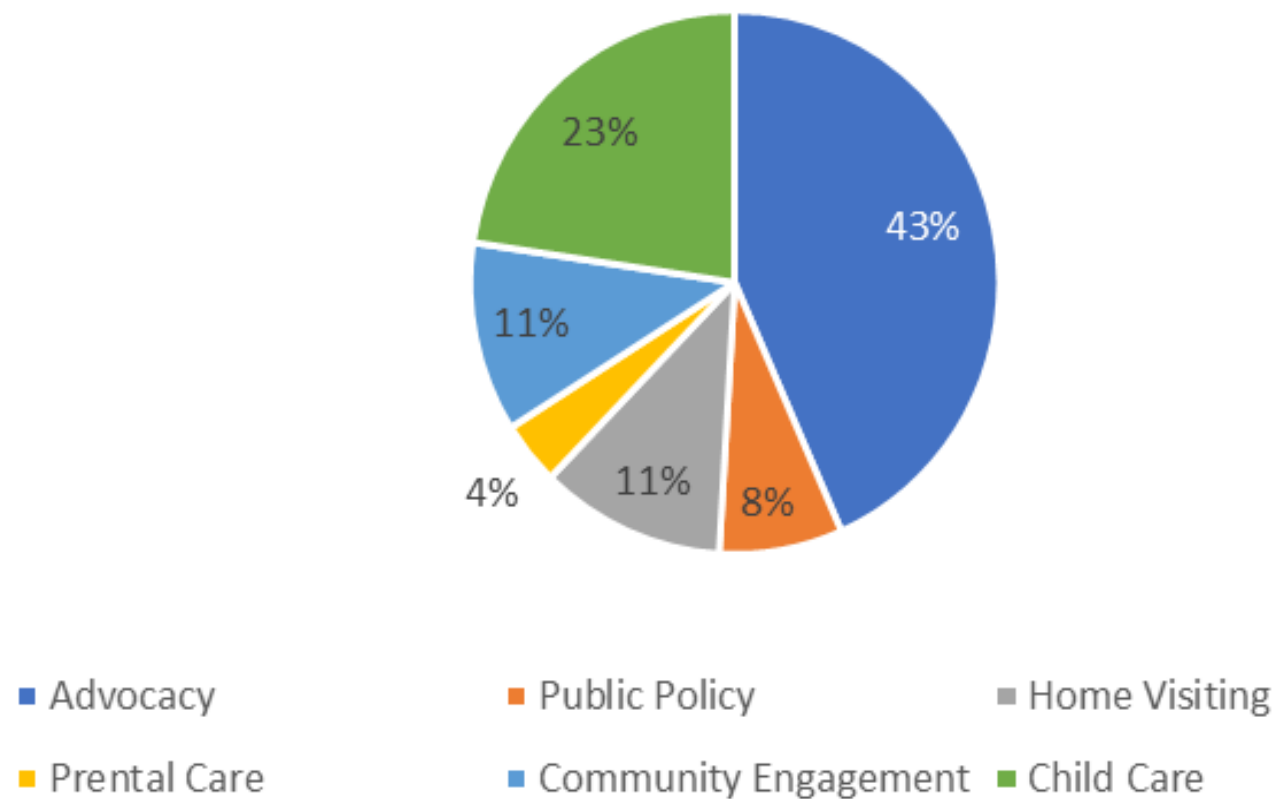
Frameworks



Data

# Who are You?

## Your Primary Areas of Focus



# Trends in State Action to Support Infants and Toddlers

## Quality Improvement

- Workforce Development Initiatives
- TA, coaching, mentoring
- QRIS
- Classroom materials, facilities improvement
- Dissemination of resources

## Increase Supply

- Policy change
- Facilities/ infrastructure improvement
- TA and resources
- Shared services

## Comprehensive Services

- Early Intervention
- Screenings & Referrals
- Family Engagement
- Home Visitation
- Mental Health Consultation

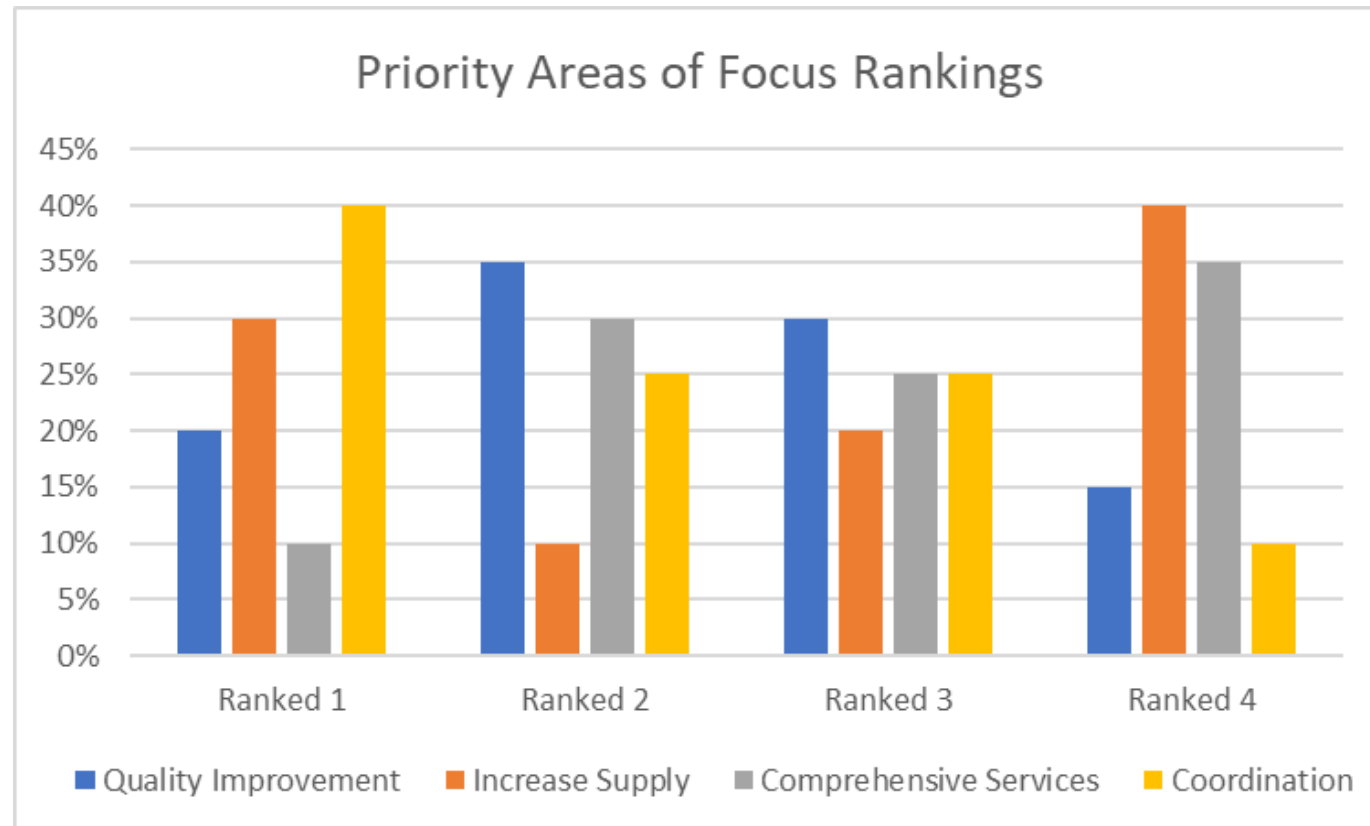
## Coordination

- Service Coordination (Local level)
- System Coordination (State level)
- 2 Gen Focus
- Research and Data Systems

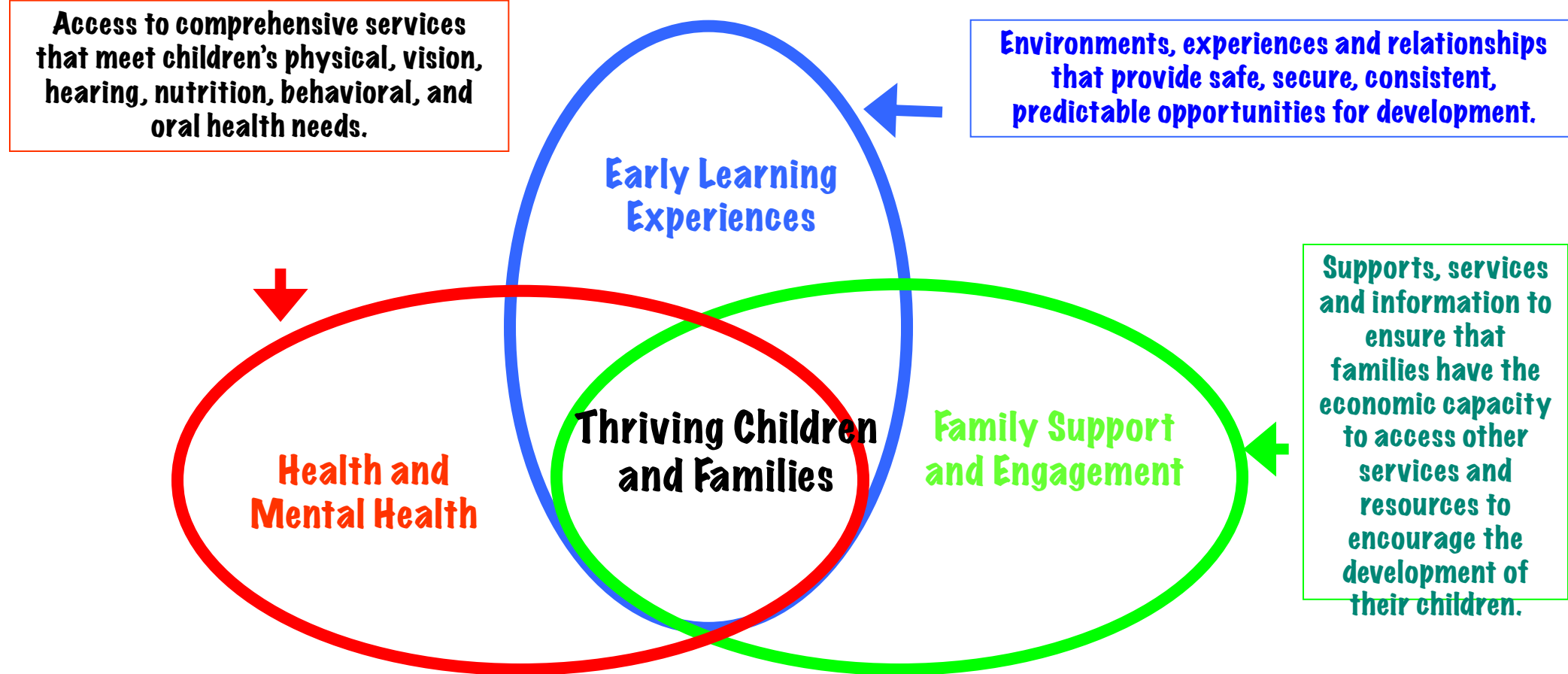


# Poll 1

How would you rank these priority areas of focus?



# What Should a Fully Coordinated State Early Childhood Development and Learning System Deliver?



## Principles:

- Reach all children and families as early as possible with needed services and supports
- Establish universal goals but target investments to those furthest from opportunity
- Reflect and respect the strengths, needs, values, languages, cultures and communities of children and families
- Genuinely include and effectively accommodate children with special needs
- Ensure stability and continuity of services along a continuum from prenatal to school entry
- Ease access for families and transitions for children
- Catalyze investment and foster innovation

# A Prenatal to Age 3 System: A System of Systems

The alignment and integration of all the child- and family-serving systems to ensure:

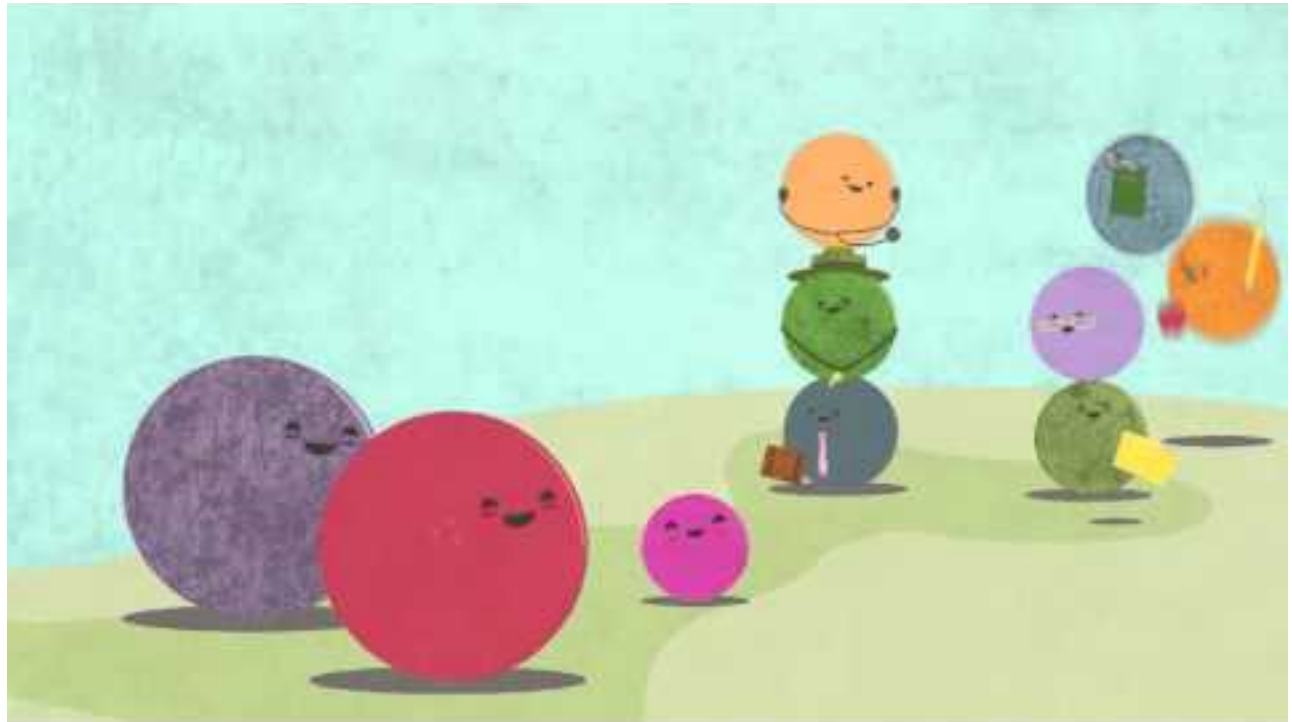
- Supported families
- Healthy beginnings
- High-quality, accessible programs and services



# What is Missing?

# What is Systems Building

- Mute your phone (\*6)
- Turn your speakers on



# Prenatal to Three Systems Foundations

- Data Systems
- Coordinated Planning & Financing
- Workforce Development

- Political Will & Engagement
- Continuous Quality Improvement
- Access & Continuous Intake & Referral to Programs & Services

Access: accessibility, accommodations, awareness, affordability, availability, acceptability



# Making Inequity in Early Childhood Systems Visible



## A groundbreaking study offers undeniable proof that the inequality starts with moms



Anderson, Jenny. A groundbreaking study offers undeniable proof that the fight against inequality starts with moms. QZ, 21 Feb. 2018, <https://www.nytimes.com/newsletters/2018/02/24/race-related?nlid=66759093>

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## Report: No progress for African Americans on homeownership, unemployment and incarceration in 50 years

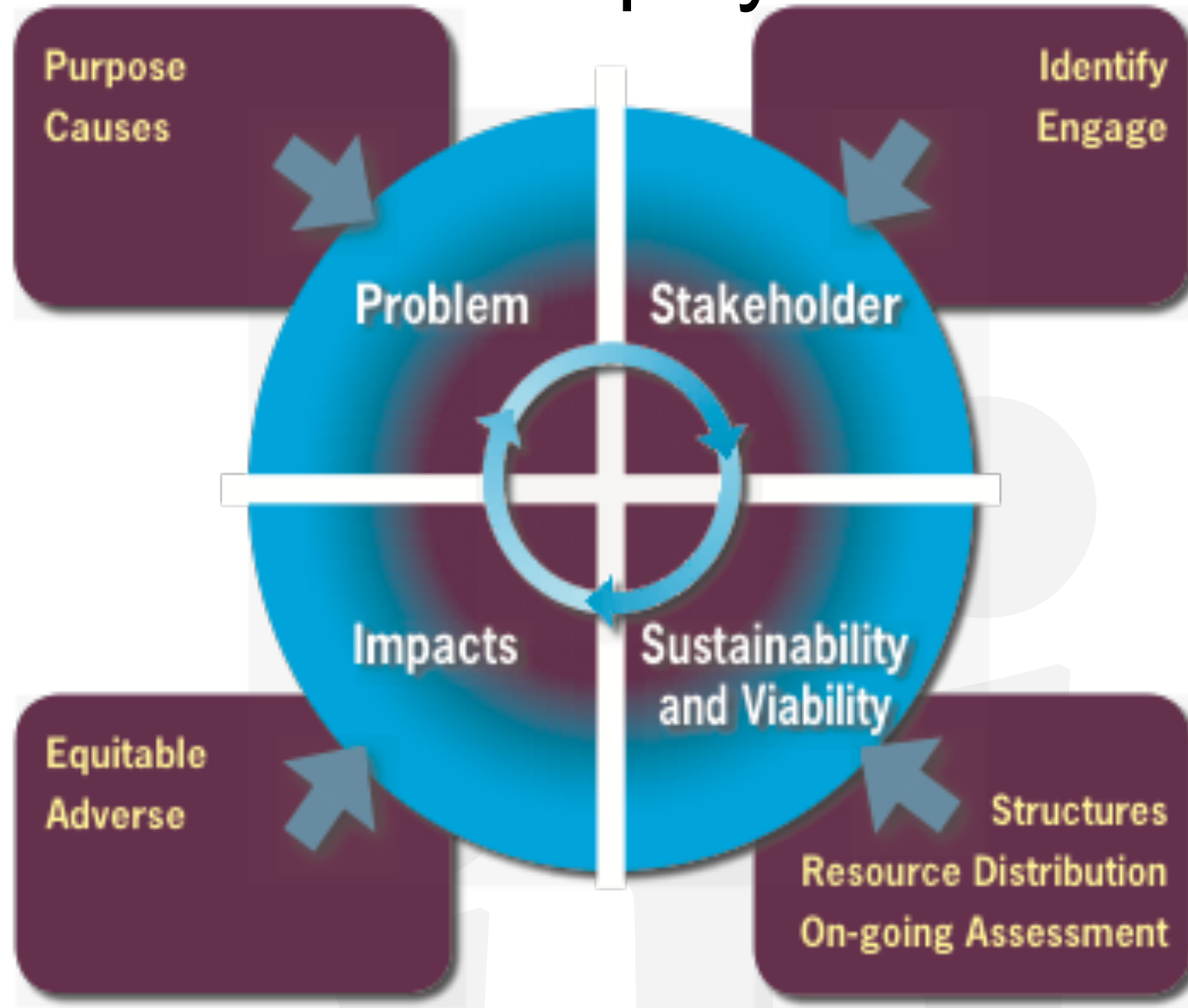


Jan, Tracy. Report: No progress for African Americans on homeownership, unemployment and incarceration in 50 years. *Washington Post*, 26 Feb. 2018, [https://www.washingtonpost.com/news/wonk/wp/2018/02/26/report-no-progress-for-african-americans-on-homeownership-unemployment-and-incarceration-in-50-years/?utm\\_term=.6e28088809ce](https://www.washingtonpost.com/news/wonk/wp/2018/02/26/report-no-progress-for-african-americans-on-homeownership-unemployment-and-incarceration-in-50-years/?utm_term=.6e28088809ce)

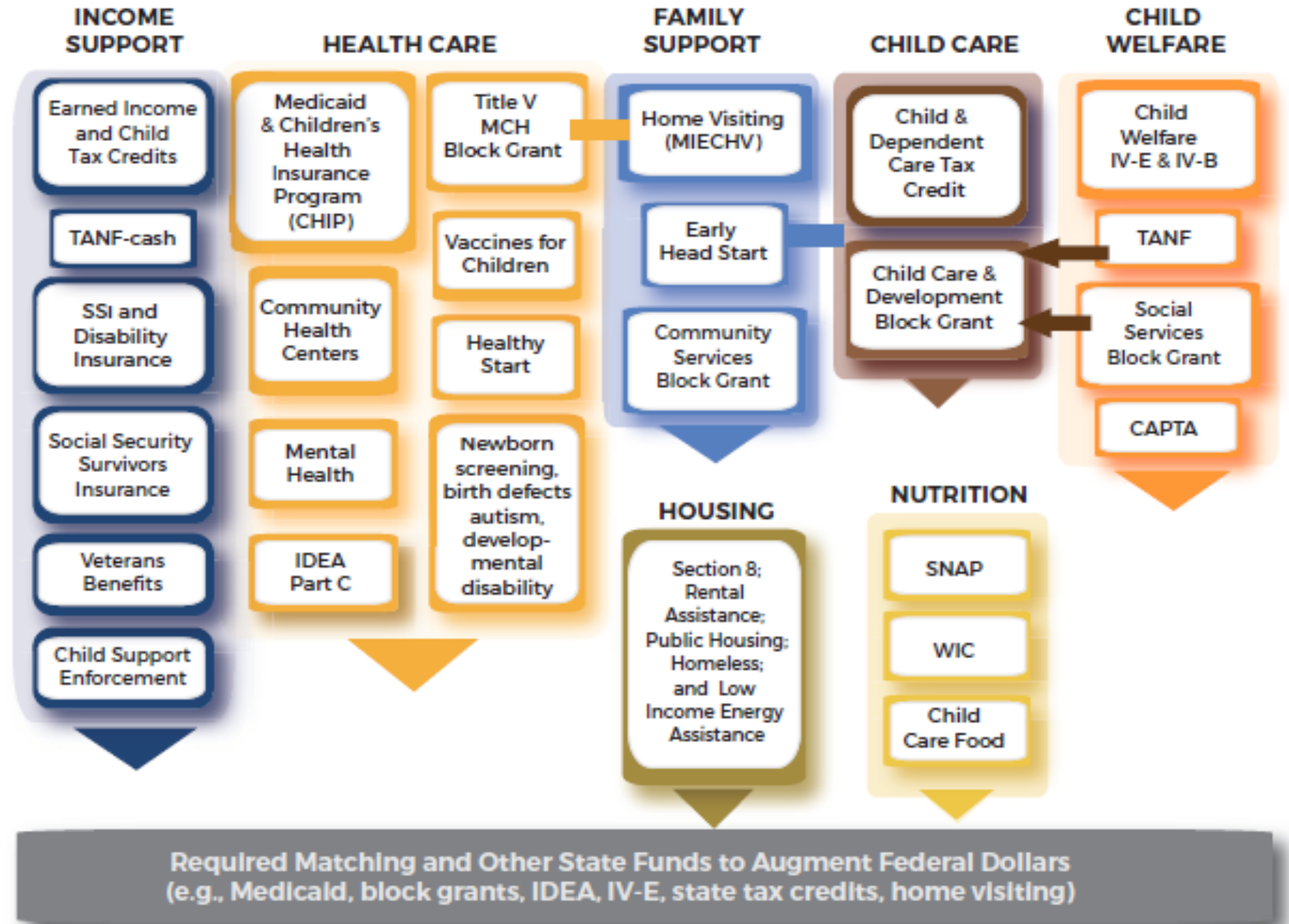
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# An Intentional Process to Advance Equity

- **Identify a problem or disparity and the root causes of that disparity.**
- **Identify and Engage stakeholders**
- **Develop strategies to address the disparities while identifying impacts (positive and adverse)**
- **Sustainability and viability**



# Prenatal to 3 Federal Funding Streams



# If all these funds are available...

- What is the root cause of the lack of well-being of infants and toddlers?
- You said:
  - Siloed systems
  - Racism
  - Housing instability
  - Lack of coordination of services
  - Costs
  - Inadequate funding
  - Data systems don't connect
  - Economic disadvantages from birth are causing lack of preparedness for school
  - A vision to move past the tipping point
  - Services aren't connected to what families really want
  - Wait lists for many programs
  - Disparities

# What We Hear From Parents

We have to drive so far. There is no childcare, nothing near us.

You think home visiting is a good thing, but every time a state worker knocks on our door it is to take our children.

*"I applied for Medicaid for my children. . . . I have waited on hold three to four hours. . . . They never answer. . . . I [went] to the office and showed them how long I was on hold and they [didn't] care."*

- Georgia Parent

It would help if teachers and providers spoke Spanish so we could communicate and feel comfortable.





**WHO**

Infants, toddlers,  
their families and  
communities

# Data in the News

**MINNPOST**

**Childhood asthma rates are declining, but disparities persist**

**Daily Herald**

Suburban Chicago's Information Source

**How the Y Encourages Children to Respect and Embrace Differences**

**GoUpstate.com**

**Early childhood education critical for students in poverty**

**The Washington Post**

**D.C. has a high maternal mortality rate. Lawmakers want to know why.**

**The Oregonian**

**The Seattle Times**

Opinion

**Pre-K education lifts all children**

**Reading, Writing, Evicted**

IN PORTLAND, SKYROCKETING RENTS AND NO-CAUSE EVICTIONS ARE FORCING CHILDREN BY THE HUNDREDS TO SWITCH SCHOOLS MID-YEAR, INFLECTING ACADEMIC AND EMOTIONAL SETBACKS

## **To use data as a tool for equity and early childhood you must access data representing:**

- Multiple systems (early care and education, health and mental health, family support, early intervention, housing, poverty etc.)
- Access to programs and systems as well as outcomes of those systems
- Multiple levels (State, County, Community, family etc.)
- Disaggregated by race and ethnicity
- Family and community voice

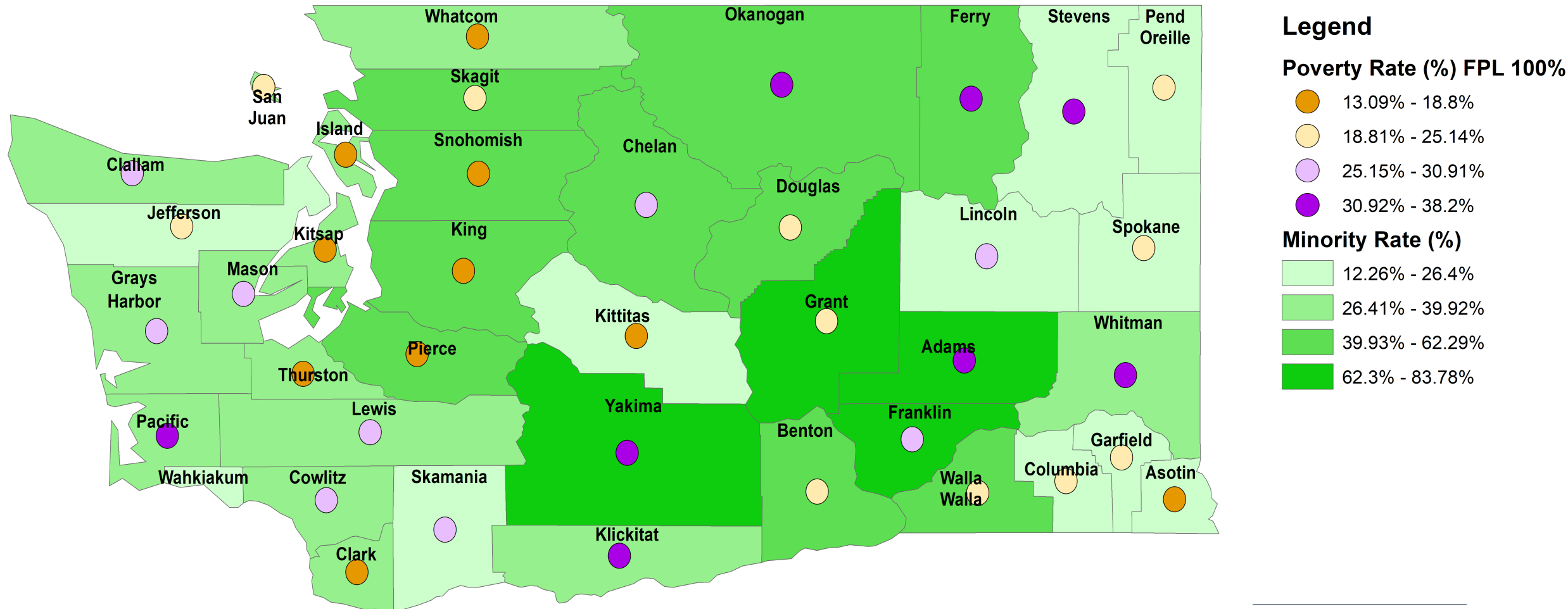




CHILD AND FAMILY OUTCOMES and ACCESS	INDICATOR
Young child healthy development	Parent perception of health
	Children are born at a healthy weight
	Immunization rates
	Developmental screening rates
	Indicators of emotional health in young children
	Maternal mental health
School readiness and success	Access to child care and preschool
	Kindergarten Readiness
	Fourth graders who scored at or above proficient in reading
	Eighth graders who scored at or above proficient in math
	High school students graduating on time
Children have access to healthy food	Food insecurity
	Neighborhoods with access to healthy food
Young children are safe	Neighborhood safety
	Child abuse and neglect rate
	Exposure to lead
Healthy, economically secure families	Females ages 15 to 19 who delay childbearing until adulthood
	Children birth to 17 who live in two-parent families
	% of children whose parents lack secure employment (no full-time, year-round work)
	% of children in households with a high housing cost burden
	% of children living in families where the household head lacks a high school diploma

# County Child Poverty & Minority Rates

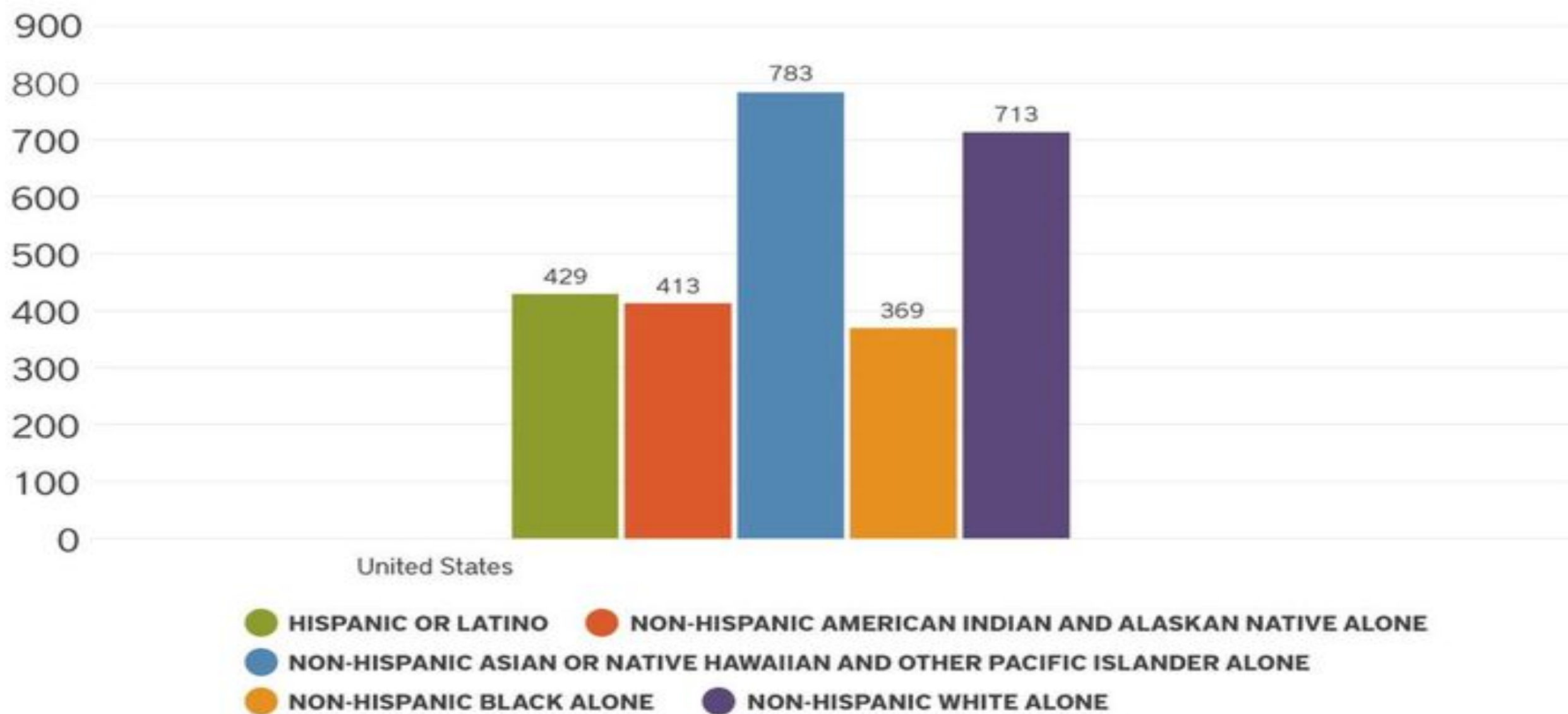
## Washington Young Child Minority and Poverty Rates (FPL 100%)



# Race for Results Index: 2017

- Babies born at normal birthweight
- Children ages 3 to 5 enrolled in nursery school, preschool or kindergarten
- 4<sup>th</sup> graders who scores at or above proficient in reading
- 8<sup>th</sup> graders who scored at or about proficient in math
- Females ages 15 to 19 who delay childbearing until adulthood
- High school students graduating on time
- Young adults ages 19 to 26 who are in school or working
- Children birth to 17 who live with a householder who has at least a high school diploma
- Children birth to 17 who live in two-parent families
- Children birth to 17 who live in families with incomes at or above 200 % of poverty
- Children birth to 17 who live in low-poverty areas (poverty <20 percent)

## 2017 RACE FOR RESULTS INDEX: UNITED STATES



# Disaggregating Data by Race and Ethnicity: Iowa example

**Overall Iowa ranked 5<sup>th</sup> on overall child well-being. (economic, education, health, family and community)**

**For white children, Iowa ranks 15<sup>th</sup> among the 50 states.**

**For Latino children, Iowa ranks 18<sup>th</sup> of 49 states for which there was sufficient data.**

**For African-American children, Iowa ranks 19<sup>th</sup> of 44 states.**

**For Asian and Pacific Islander children, Iowa ranks 37<sup>th</sup> of 43 states.**

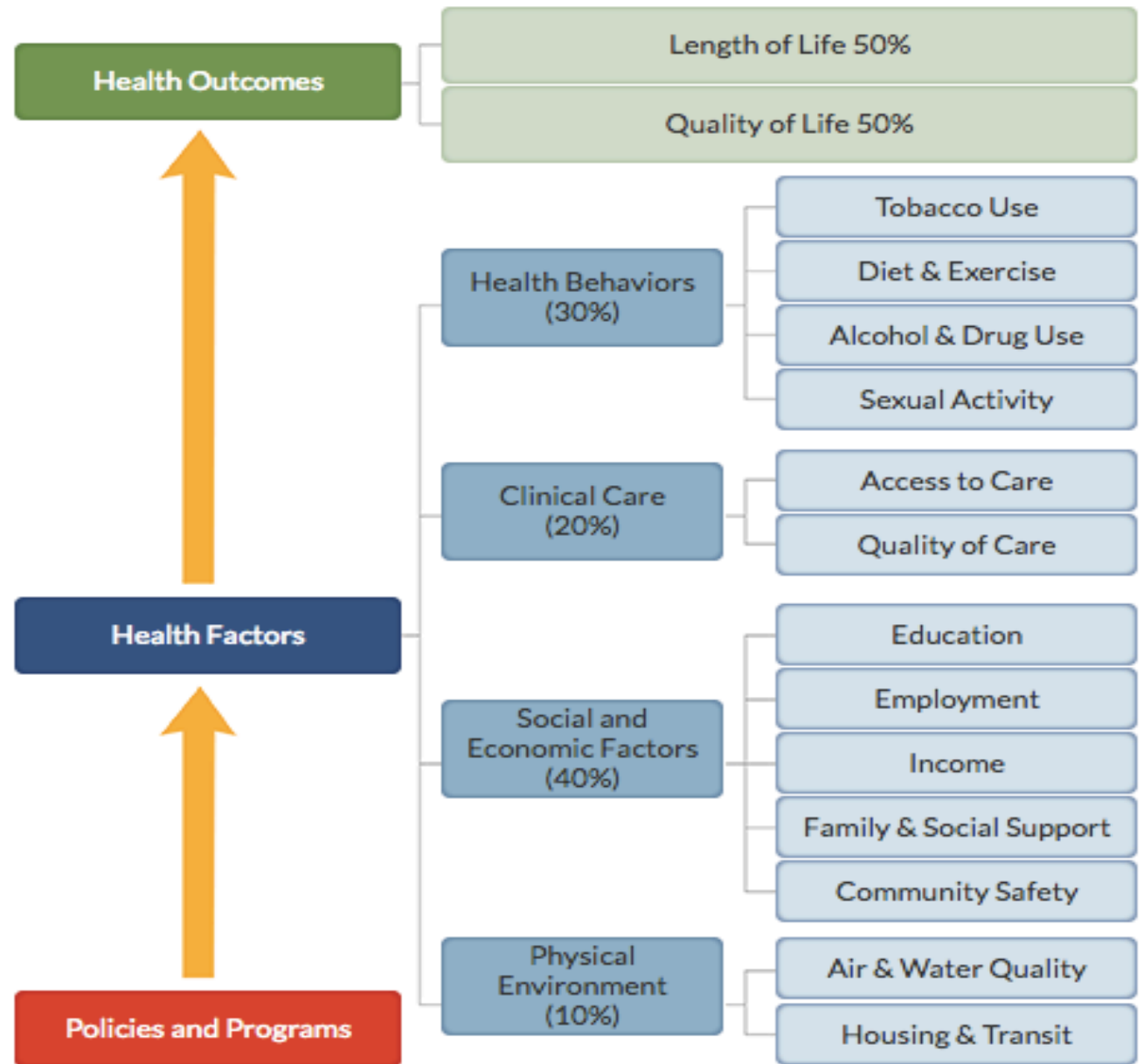
***(Race for Results 2017)***

# County Health Factors rankings

- Standardizing each measure
- Calculating the ranks based on weights
- The county with the lowest score (best health factors) gets a rank of #1 for that state.

Source: <http://www.countyhealthrankings.org/explore-health-rankings/what-and-why-we-rank>

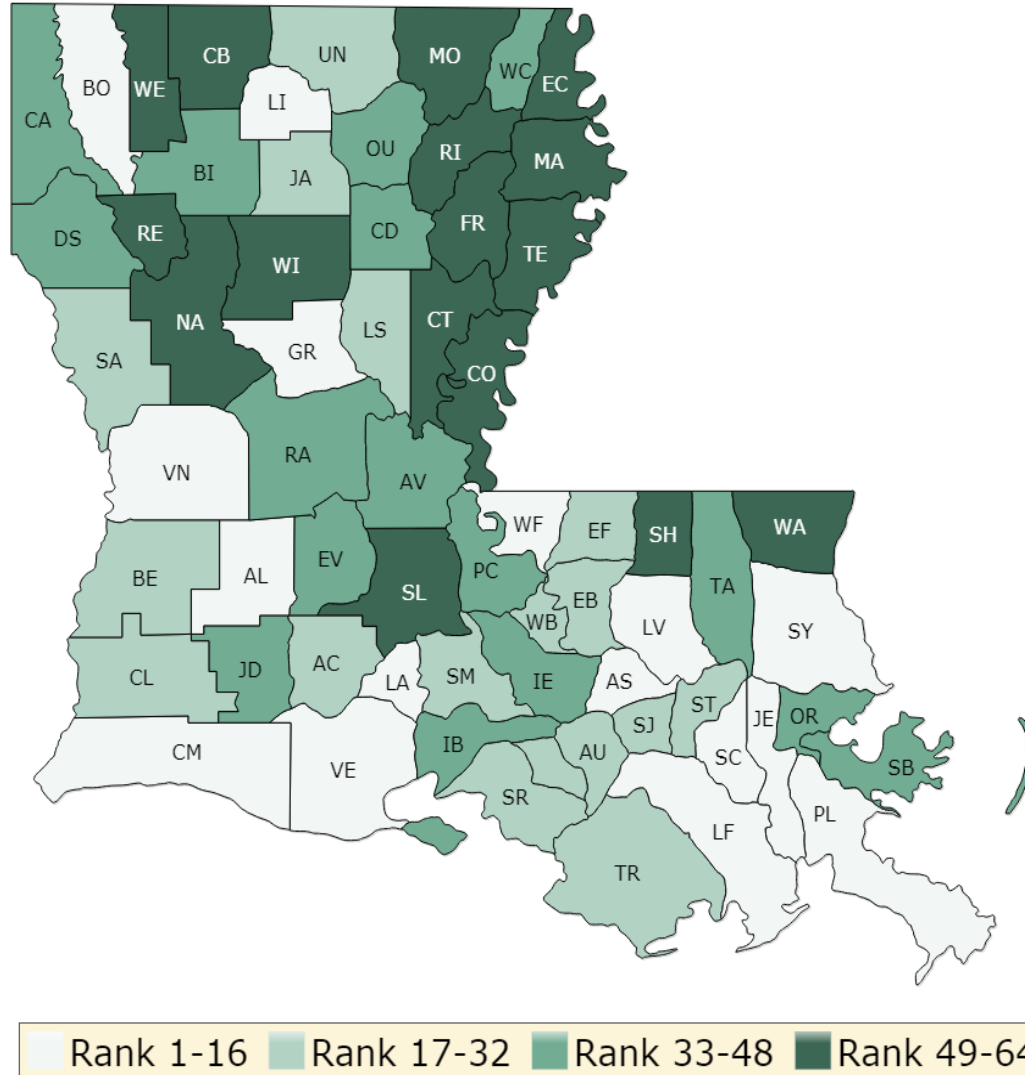
Based on slides developed by Vital Village/Boston Medical Center



County Health Rankings model © 2014 UWPHI

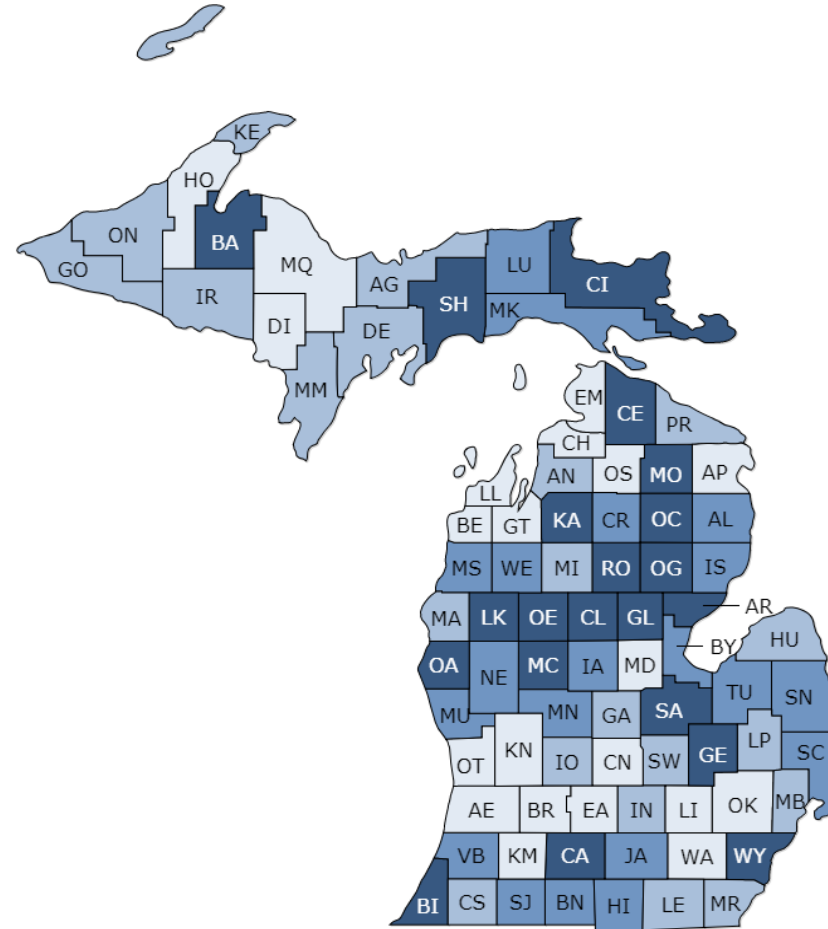
# County Health Rankings in Health Outcomes 2019 Example

## Louisiana



# County Health Rankings in Health Factors 2019 Example

## Michigan



Rank 1-21 Rank 22-42 Rank 43-62 Rank 63-83

Source: <http://www.countyhealthrankings.org/explore-health-rankings>



# County Health Rankings: Digging Deeper

## RANKED MEASURES – COUNTY HEALTH RANKINGS

	AGE	GENDER	RACE	EDUCATION	INCOME	SUBCOUNTY AREA
Premature Death*	✓	✓	✓	✓		
Poor or Fair Health	✓	✓	✓	✓	✓	✓
Poor Physical Health Days	✓	✓	✓	✓	✓	✓
Poor Mental Health Days	✓	✓	✓	✓	✓	✓
Low Birthweight*	✓	N/A	✓	✓		
Adult Smoking	✓	✓	✓	✓	✓	✓
Adult Obesity	✓	✓	✓	✓	✓	✓
Food Environment Index	✓					✓
Physical Inactivity	✓	✓	✓	✓	✓	✓
Access to Exercise Opportunities						✓
Excessive Drinking	✓	✓	✓	✓	✓	✓
Alcohol-Impaired Driving Deaths	✓	✓	✓			✓
Sexually Transmitted Infections	✓	✓	✓			
Teen Births*	✓	N/A	✓			
Uninsured	✓	✓	✓		✓	✓
Primary Care Physicians	N/A	N/A	N/A	N/A	N/A	✓
Dentists	N/A	N/A	N/A	N/A	N/A	
Mental Health Providers	N/A	N/A	N/A	N/A	N/A	
Preventable Hospital Stays*	✓	✓	✓			
Mammography Screening*	✓	✓	✓			
Flu Vaccinations*	✓	✓	✓			
High School Graduation	N/A		✓	N/A	✓	✓
Some College	✓	✓	✓	N/A		✓
Unemployment		✓	✓	✓		✓
Children in Poverty*	✓		✓		N/A	✓
Income Inequality					N/A	
Children in Single-Parent Households	N/A					✓
Social Associations	N/A	N/A	N/A	N/A	N/A	✓
Violent Crime						✓
Injury Deaths	✓	✓	✓	✓		
Air Pollution - Particulate Matter	N/A	N/A	N/A	N/A	N/A	
Drinking Water Violations	N/A	N/A	N/A	N/A	N/A	✓
Severe Housing Problems*			✓		✓	✓
Driving Alone to Work*	✓		✓			✓
Long Commute – Driving Alone						✓

\*Data for these measures by race and ethnicity can be found in county snapshots where available.

# Opportunity Index

- Rescaling indicators
- Calculating dimension scores
- Calculating Opportunity Scores and Grades

## Economy

- Jobs, wages, poverty, income inequality, access to banking services, affordable housing, broadband internet subscription

## Education

- Preschool enrollment, high school graduation, postsecondary education

## Health

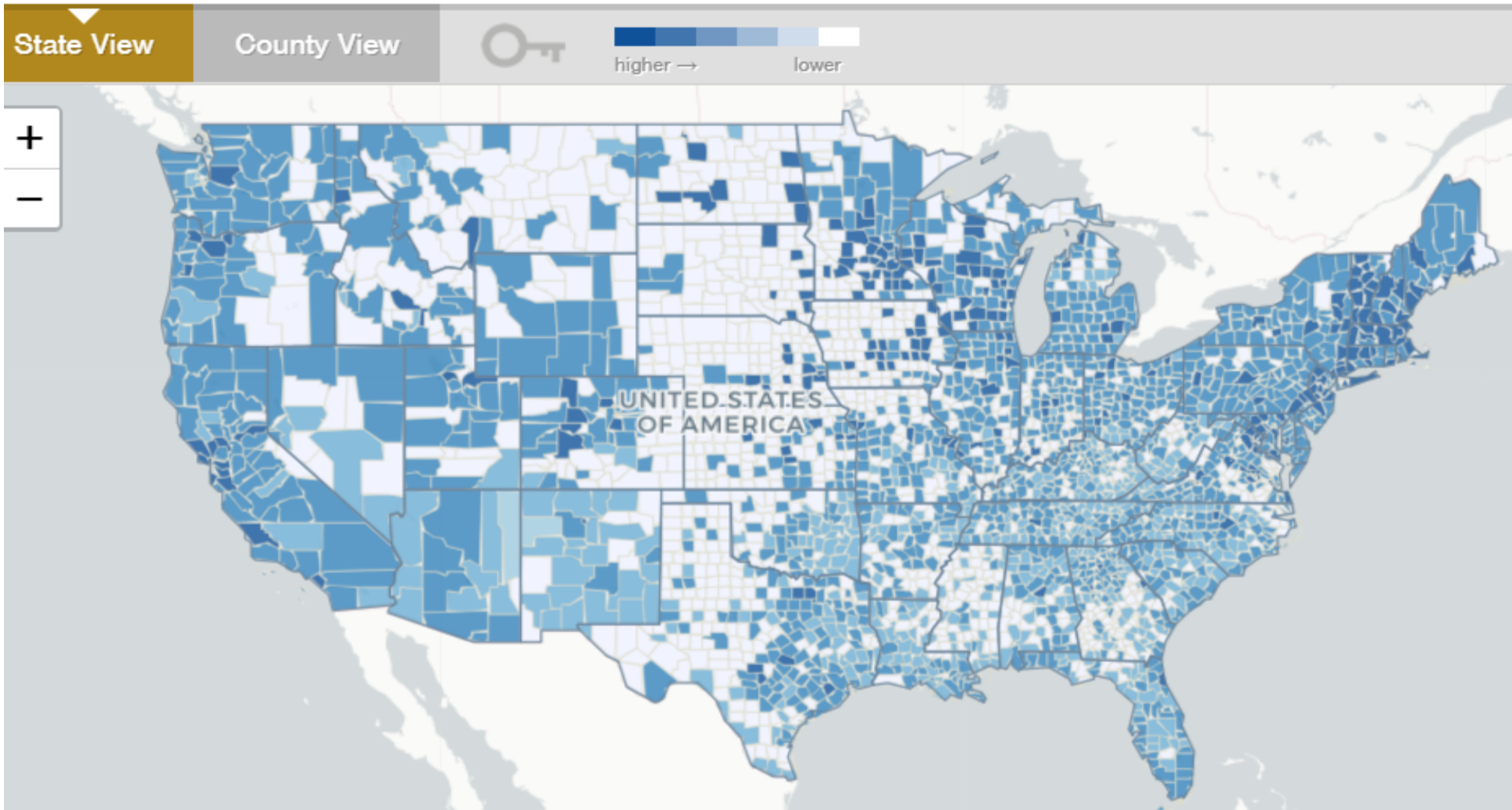
- Low birth weight, health insurance coverage, deaths related to alcohol/drug use and suicide

## Community

- Voter registration, youth disconnection, violent crime, access to primary health care, access to healthy food, incarceration



HOW OPPORTUNITY MEASURES UP IN YOUR COMMUNITY



# Child Opportunity Index

Developed by the Kirwan Institute, focuses on a set of indicators measuring relative opportunity in the largest 100 metro areas across the country. The Index is based on indicators of Educational Opportunity, Health and Environmental Opportunity, and Social and Economic Opportunity.

*<http://www.diversitydatakids.org/data/childopportunitymap/>*

# Child Opportunity Index Example

Little Rock-North Little Rock-Conway, AR (Metro Area)

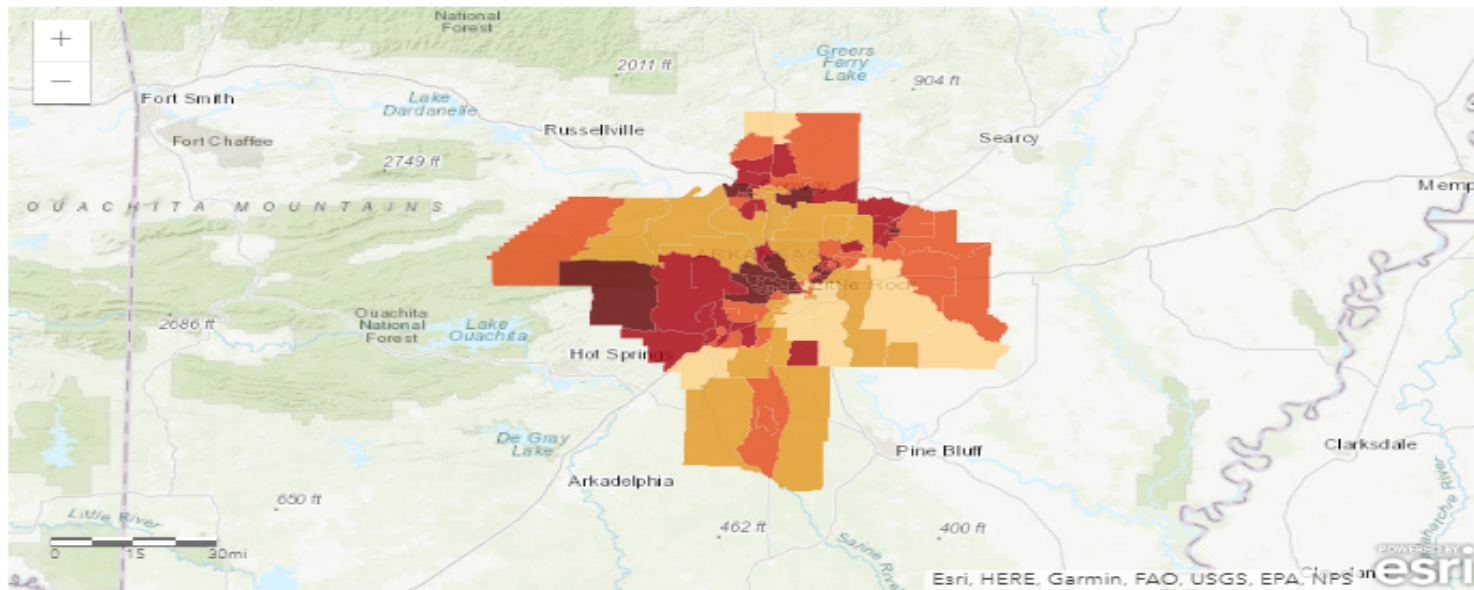
Child Opportunity Index

< CHANGE YOUR LOCATION

## OPPORTUNITY CATEGORIES

Very High High Moderate Low Very Low

Customize Map



Learn more about how to use the Child Opportunity Map tools and how to add child population (overall or by race/ethnicity) to the map: [Video tutorial](#) / [PDF tutorial](#)

diversitydatakids.org  
data for a diverse and equitable future



Kirwan Institute  
Many Differences One Destiny

# Data Challenges

- **Availability of “perfect data”**
- **Capacity to collect and analyze data. Who has access? Time? Expertise?**
- **Driver behind what data is available, what outcomes are being measured and how data is being used.**
- **Siloed data**
- **Quality of data**
- **Disaggregated data**
- **Narrow view of data**



# Birth-to-Three Framework

Health and Nutrition

Parenting and Family Supports

Early Childhood Care and Development

Foundational  
Family Support /  
Economic Security

This Birth to Three Policy Alliance Framework is a visual representation of a comprehensive early childhood policy system in the District of Columbia.

Universal/Prevention	Access to Health Insurance/Medicaid, and Quality Health and Mental Health Care <ul style="list-style-type: none"><li>• Pre-natal care</li><li>• Medical Home</li><li>• Screenings, vaccinations (EPSDT)</li><li>• Integrated mental health &amp; substance abuse prevention/screening with primary health care</li></ul>			Help Me Grow	Paid Family Leave	Parenting Education and Supports	Primary Child Abuse and Neglect Prevention	Child Care Supply <ul style="list-style-type: none"><li>• Licensing</li></ul>	Child Care Quality	Enrollment and Transition to Quality Preschool
Targeted/Intervention	Health and Mental Health Consultation	WIC	SNAP and CACFP	Healthy Steps	Home Visiting & Family Support Services	Foster or Kinship Care	Family Strengthening Services for At-risk Families (e.g., Title IV-E Waiver)	Child Care Subsidies and Affordability <ul style="list-style-type: none"><li>• Reimbursement Rates</li></ul>	Early Head Start / Quality Improvement Networks	Strong Start & Early Intervention

Living Wage
Safe Neighborhoods
Healthy Food Environments & Access
Housing
Public Education
Libraries
Transportation
TANF
Adult Education
Workforce Development and Employment
Supports for Homeless Families
Affordable Housing

# What topics and focus areas would most help you and your state coalition?

- Building a Unified Message

Thursday, May 9, 2pm ET

- If I Knew Then, What I Know Now: Lessons from the “Wave 1” States

Thursday June 6, 2pm ET

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# Questions? Comments?



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