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You can access our full 2020 State Policy Update Report, which includes an Appendix that showcases all individual state responses, <u>here</u>.



Start Early was founded in 1982 as the Ounce of Prevention Fund, a nonprofit public-private partnership. Since the beginning, we have delivered best-in-class doula, home visiting and Early Head Start and Head Start programs and advocated for thoughtful policies and adequate funding at the local, state and federal levels. From our roots directly serving families and children on Chicago's South Side and rural Illinois, we have expanded nationwide, impacting early childhood programs and policies with partnerships in 25 states. Our role as on-the-ground practitioners continues to be the bedrock of our expertise and source of innovation and leadership in the field.

Start Early has a long history of policy and advocacy work that is rooted in our deep experiences in Illinois. Through legislative, administrative and grassroots advocacy, our Illinois policy team seeks to shape the foundational elements of the state's early childhood system, including major funding

streams, legislation and federal and state initiatives. Our national policy team focuses on the intersection of policy, research and practice, providing consultation, peer learning opportunities and resources on policy content and advocacy. The team supports early childhood advocates, Educare Learning Network leaders and other state and local systems leaders in 21 states and Washington, D.C. to improve, implement and expand the policies, investments, programs and services that create high-functioning, high-quality early care and education systems. Start Early also partners with the First Five Years Fund to increase federal investment in high-quality early childhood education programs and to ensure that the interests of children from birth to age 5 in low-income families are included in policy and funding decisions across the country.



### INTRODUCTION

The State Policy Update Report provides a snapshot of early childhood care and education budget and policy changes during the 2019-2020 legislative sessions as of November 2020, many of which resulted in greater access to higher quality early learning programs and more effective early childhood systems.

This year, the report also includes insights from the lessons learned during the COVID-19 pandemic and its disproportionate effect on historically marginalized communities. All 50 states and Washington, D.C. were invited to complete our 2020 State Policy Update survey. Representatives from a total of 28 states and Washington, D.C. responded. This year, survey respondents were asked to categorize legislative, administrative and budgetary changes that occurred in the 2019-2020 sessions, and to provide reflections on the impact of the pandemic and subsequent economic decline. As a result, we are able to offer a more robust report that illuminates trends and connects early childhood policy and funding advances across the country.

The body of the report is organized based on subject area. However, you can access individual state reports in the Appendix of our full State Policy Update Report <a href="here">here</a>. The 2019 edition of the State Policy Update Report is available <a href="here">here</a>.





When the coronavirus emerged, significantly changing everyone's way of life, early childhood advocates across the country got to work securing state and federal funding to support collapsing child care systems. The field supported services, such as Individuals with Disabilities Education Act (IDEA), Part C, early intervention and home visiting, switch to telehealth and stepped in to help families with basic needs like food, shelter and diapers. Prior to the onset of this pandemic, these same advocates achieved significant early childhood policy wins, some of which are highlighted below.

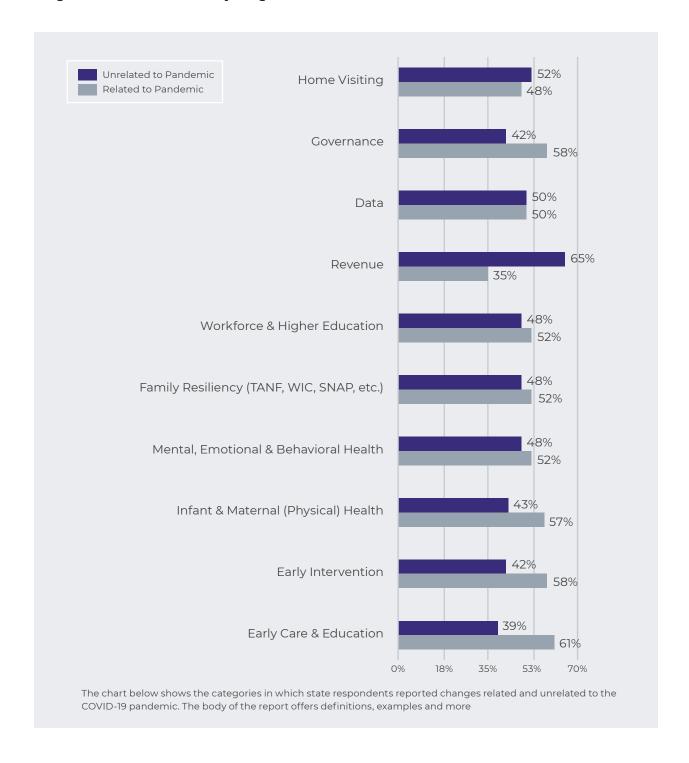
- **California's** budget included \$34.3 million to implement the extension of pregnancy-only Medi-Cal coverage for up to 12 months after delivery for patients diagnosed with a maternal mental health condition.
- Georgia extended Medicaid coverage for parents from 60 days to six months postpartum.
- **Hawaii** adopted a goal for the state to ensure access to preschool for all 3- and 4-year-old children by 2032.
- **Kansas** passed legislation qualifying the time of a new, single parent receiving cash assistance (via TANF) to meet the work requirement through participation in a home visiting program up to 12 months after the birth of a child.
- **Maine's** budget included \$4 million to support the expansion of public preschool and another \$1.2 million to strengthen the state's early intervention system serving young children with developmental delays or disabilities.
- Massachusetts passed the Student Opportunity Act, a historic education funding bill that provides \$1.5 billion in new funding to underfunded school districts. Funding for high-quality pre-K and early literacy programs are on a list of priority items chosen by the state commissioner.
- **Nebraska** passed a bill that requires the Legislature to establish the Nebraska Statewide Workforce & Educational Reporting System, a lifelong learning and workforce longitudinal data system that will help identify the long-term return on investment from early education programs, among other things.

- New Jersey expanded paid family leave from six weeks to 12 weeks beginning in July 2020.
- **New York's** final budget included \$4 million to reduce maternal mortality by creating the maternal mortality review board, developing implicit racial bias training, expanding community health workers and building a data warehouse to support quality improvement activities for maternal health outcomes.
- Oregon successfully secured \$170 million of new early childhood investment in the state budget.
- **Utah** passed legislation that expands access to alternative breakfast in schools, with a particular focus on students at highest-risk schools.
- **Wisconsin** is expanding its Leading Men Fellows program in an effort to further diversify the early childhood workforce.

The table below offers a breakdown of states that reported policy priorities across various categories. categories.

CATEGORIZED AGENDA ITEMS	PERCENTAGE OF STATES	STATES THAT REPORTED AGENDA ITEMS
Early Care & Education	<b>93</b> % (n=27)	AZ, CA, DE, DC, GA, HI, IL, KS, KY, LA, ME, MA, MI, MO, NE, NH, NJ, NM, NY, OK, OR, PA, TX, UT, VA, WA, WI
Early Intervention	<b>62</b> % (n=18)	AZ, CA, DE, GA, HI, IL, KS, KY, MA, MI, NE, NM, NY, OK, OR, TX, UT, WI
Infant and Maternal (Physical) Health	<b>59</b> % (n=17)	AZ, CA, DC, GA, IL, KS, KY, MA, MI, NE, NJ, NM, NY, OR TX, VA, WI
Mental, Emotional & Behavioral Health	<b>52</b> % (n=15)	AZ, CA, DC, GA, IL, KS, KY, LA, MA, MI, OK, OR, UT, VA, WI
Family Resiliency (TANF, WIC, SNAP, etc.)	<b>52</b> % (n=15)	AZ, DC, HI, IL, KS, MA, MI, MO, NE, NH, NJ, NY, UT, VA, WI
Home Visiting	<b>41</b> % (n=12)	CA, DE, GA, KS, LA, MA, MI, NH, OK, OR, VA, WI
Workforce & Higher Education	<b>45</b> % (n=13)	AZ, CO, DC, GA, KS, MA, MI, NE, NM, OK, OR, UT, WI
Revenue	<b>38</b> % (n=11)	AZ, GA, IL, KS, LA, MA, NE, NM, NY, OR, WI
Governance	<b>48</b> % (n=14)	AZ, CA, CO, DC, IL, KS, MA, NJ, NM, NY, OK, OR, VA, WI
Data	<b>38</b> % (n=11)	DE, GA, HI, LA, MA, MI, NE, NY, OK, VA, WI

While these successes are impressive, they only scratch the surface of the accomplishments state advocates and their many partners have achieved over the past year. We are excited to share highlights from each state that illustrate the persistent work of early childhood advocates, program providers, public officials and many other stakeholders who continue to move the field forward in creating environments in which young children and families can thrive.



# **Survey Methodology**

This year's survey was similar to last year's survey in four key ways: 1) distribution of survey through Qualtrics, 2) invitation of advocates in all 50 states and Washington, D.C. to participate, 3) inclusion of additional questions to provide greater context to the work, and 4) request of respondents to categorize policy items. However, this year's survey also asked participants to categorize their items based on whether they were adopted in response to the pandemic and what, if any, advocacy priorities were put on hold because of the pandemic. The table below

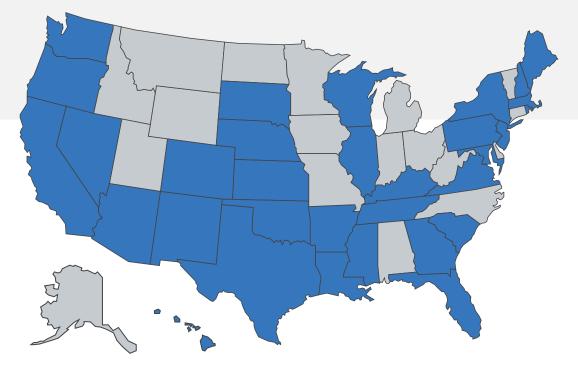


shows the categories we asked states to use to tag their legislative, administrative and budgetary changes from the year. Advocates completing the survey were able to tag single items under multiple categories to ensure accurate and thorough reporting.

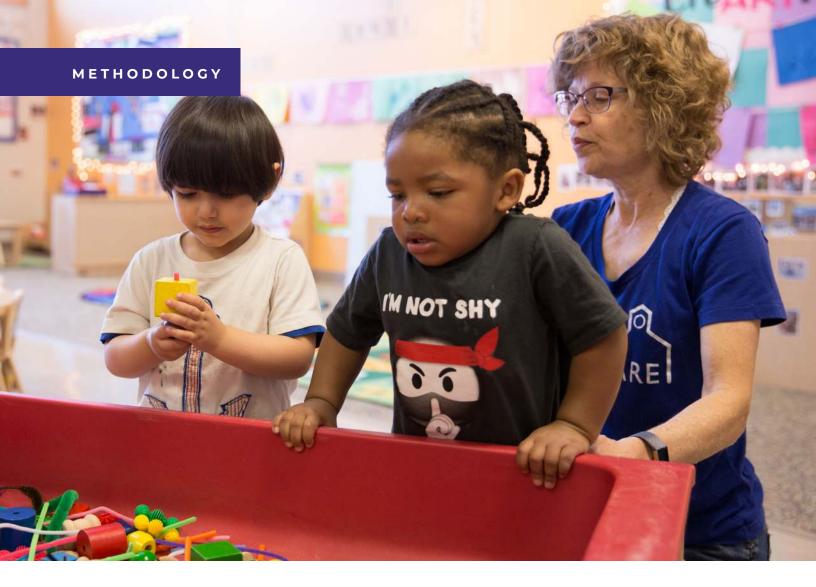
Fig 1: Categories and Definitions

CATEGORIES	DEFINITIONS
Early Care & Education	Child care, pre-K, Head Start, Early Head Start, school readiness, investments in facilities
Early Intervention	Legislation and funding for children with disabilities, i.e. IDEA Part C
Infant & Maternal Health	Programs and funding related to physical health, including reducing the rates of infant and maternal mortality and morbidity, and changes related to Medicaid and CHIP
Mental, Emotional & Behavioral Health	School discipline policies (i.e. expulsion), mental health consultation, maternal depression
Family Resiliency	Supports for families with young children, including paid family leave, TANF, WIC and SNAP
Home Visiting	Any legislative, administrative and/or budgetary changes related to home visiting
Workforce & Higher Education	Professional development, training, wages, higher education, core competencies
Revenue	Tax credits, funding streams, new and/or increased allocations for early childhood
Governance	Special districts, governing boards, legislative councils
Data	Needs assessments, systems integration, state and district-level reporting, state-funded studies

The survey requested information on policy priorities and budgetary, legislative and administrative policy changes related to early childhood. The survey was distributed through Qualtrics on August 3, 2020, to 51 state advocacy organizations (one entry per state and one entry for Washington, D.C). State advocates were asked to write in updates for each category: policy, budgetary, legislative and administrative. States could enter up to 30 items for each category. There was no character limit for updates and states could include as much or as little information as they desired. State advocates were sent three follow-up reminders before the survey closed on September 11, 2020. A total of 28 states and Washington, D.C. participated in the State Policy Update Report survey as shown on the map



Arizona	Maine	Oklahoma
California	Massachusetts	Oregon
Colorado	Michigan	Pennsylvania
Delaware	Missouri	Texas
Georgia	Nebraska	Utah
Hawaii	New Hampshire	Virginia
Illinois	New Jersey	Washington, D.C.
Kansas	New Mexico	Washington state
Kentucky	New York	Wisconsin
Louisiana	North Carolina	



# **Analysis Methodology**

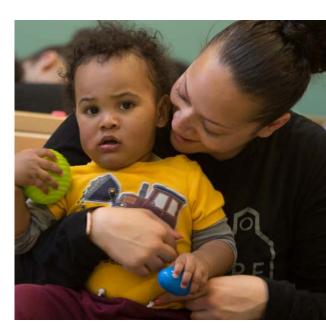
After the survey was closed on September 11, 2020, open-ended responses from state advocates were qualitatively coded. Qualitative coding is conducted by reading through open-ended responses to identify common words or phrases used and identifying themes across many responses. A total of 382 items were entered across all categories. Items were qualitatively coded independently to identify overarching themes across states within the policy, budgetary, legislative and administrative categories. These qualitative codes were then cross-referenced with the state advocate's self-selected tags.

# Early Learning & Care Part 1: Child Care

Any legislative, administrative and/or budgetary changes related to child care.

### **Items Unrelated to Pandemic**

- **Wisconsin** increased subsidy rates to meet or exceed 25% of the market rate to ensure compliance with the Child Care and Development Fund (CCDF), and dedicated funding to support child care programs in the lowest income ZIP codes throughout the state.
- Arizona approved legislative spending authority to allocate the additional \$22 million they received from CCDF to ensure there is no waitlist for child care subsidies through Fiscal Year 2021.



- Oklahoma passed a budget that increased child care subsidy rates.
- In **Illinois**, the Child Care Assistance Program (CCAP) targeted rate increases and parent copay reduction.
- New Jersey enacted an administrative rule that reduced parent copays by 50%.
- Washington state increased the child care subsidy rate to the 65th percentile, resulting in an increase of funding by \$32 million.
- **Nebraska** passed LB1185, which requires license-exempt child care providers seeking to serve children with child care subsidies to meet federal background check standards.
- **Kentucky** strengthened nutrition and activity standards for children in licensed child care centers.



- Louisiana responded to the pandemic by establishing contracts with child care centers near hospitals or other hubs for critical infrastructure workers to offer "respite" child care free of cost to frontline workers and leveraged existing child care resource and referral agency contracts to provide support and management of these contracts.
- New York created Family Enrichment Centers (FEC) which provided free, safe child care to the children of essential workers during the height of the pandemic, while Kentucky provided start-up grants for new in-home child care providers.
- Texas created a Frontline Child Care portal that allowed child care providers to share available seats and enrollment to families in need of child care and provided short-term child care to essential workers. Approximately 29,000 children enrolled.



- Wisconsin allocated \$30 million in the Coronavirus Aid, Relief and Economic Security Act (CARES Act) funding to child care, while Maine allocated \$8.4 million in CARES Act funds for child care providers serving children under age 5.
- Nebraska targeted its CARES Act funding to provide \$8.7 million in child care provider stabilization grants and \$1 million for incentive grants to reopen child care programs that had suspended operations during the pandemic.
- Louisiana used CARES Act funding to provide numerous supports to child care providers, including community grants to aid in communitywide recovery.
- Kentucky created subsidies for emergency child care centers, while Georgia used CARES Act funds to add essential workers as a priority group for Georgia Child Care and Parent Services (CAPS), Georgia's child care subsidy program.
- **Illinois** allocated \$270 million in CARES Act funds to child care restoration grants to help child care providers cover revenue losses due to decreased enrollment.
- Utah utilized CARES Act funding to sustain child care programs during the pandemic through operational grants.
- **Washington state** provided \$29 million in onetime sustainability grants for child care providers that remained open.
- Texas offered temporary stabilization grants of up to \$10,000 per month to temporarily closed child care providers to help defray expenses incurred.
   Providers who participated in the state's Quality Rating and Improvement System (QRIS) received an extra 5% allocation.
- Several states allowed for child care providers participating in the child care assistance program to bill based on enrollment instead of attendance, including **Kentucky**, **Nebraska** and **New Jersey**. The Nebraska Department of Health and Human Services also amended their guidance to allow for child care subsidy payments to providers serving eligible children and families remotely.





- **Wisconsin** extended subsidy payments to closed programs through June 30, 2020, regardless of child attendance, and also suspended licensing and child care administrative rules.
- In **Michigan**, the governor signed an Executive Order allocating \$100 million to the Child Care Relief Fund for child care providers operating during the pandemic to help cover unexpected expenses, in exchange for reducing rates for families. The Legislature allocated an additional \$125 million to further reduce rates for families.
- In **Texas**, subsidy reimbursement rates (currently set as 25%) were increased to help address higher operating costs during the pandemic.
- **New Jersey** similarly increased subsidy reimbursement rates for all ages in center-based care, and provided tuition assistance for families who are not eligible for a child care subsidy but are struggling to pay for full- or part-time care while their school-age children, including age 5, are learning remotely.
- Many states also waived parent co-payments for subsidized child care, including Kentucky, Louisiana, New York, Oklahoma, Oregon, Texas and Washington state. Some states provided child care subsidies to children of essential service employees regardless of eligibility, such as New Jersey and Illinois.
- **Oregon** also increased income eligibility from 185% federal poverty level (FPL) to 85% state median income (SMI). **New York** also raised child care eligibility to 85% SMI.
- Arizona allocated \$7 million for the Increase Paid Absences program to allow for five absences a
  month per child instead of two. The program recognizes the need for parents to keep their child
  home if they show signs of illness and aims to prevent the spread of coronavirus. Arizona also
  changed reporting requirements—child care programs must communicate outbreaks of two or
  more COVID-19 positive cases to the local health department.
- Arizona's budget included \$24 million from CCDF for the Arizona Enrichment Centers Program
  which provides priority child care services and scholarships for first responders, health care workers
  and other essential personnel during the COVID-19 pandemic. The \$24 million investment will
  support more than 546 providers across the state that offer services through the program.
- In the wake of the pandemic, **Oregon** developed an emergency child care system and health and safety regulations.

### **Priorities on Hold**

- Prior to the pandemic, several states, including **Delaware**, **Georgia**, **Hawaii**, **Michigan** and **North Carolina**, had planned to advocate for increasing child care subsidies—with North Carolina planning to focus on the infant and toddler population—but had to place this priority on hold.
- **Kentucky** was also planning to expand eligibility for child care assistance, while Kansas was planning to match state dollars for child care assistance to draw down all available federal dollars.
- **Maine** was considering legislation to expand Early Head Start.
- **New York** planned to increase state investment in child care.
- **California** was planning to expand the supply of child care facilities for families eligible for subsidized child care.
- Washington state had to shift its focus from developing its quality rating, information and improvement system, Early Achievers, to its child care supply to support economic recovery.

### Stories from the Field

Brightside Up distributed supplies to child care providers via a drive through supply pantry. The supplies included scrubs, laundry detergent, bleach, hand soap, hand sanitizer, changing paper, baby wipes, diapers, water, gloves, paper towels, toilet paper, masks and thermometers. Chemung County Child Care Council, in partnership with Jubilee Foods, implemented the Feed the Day Care Children program, which provided 122 registered, licensed and legally exempt child care programs with essential food items to help feed the children in their care. The program operates for four weeks. The program is funded through the Unity Fund (Community Foundation, Corning Foundation, Triangle Fund and the United Way). Every Monday and Wednesday Jubilee Foods delivers the product (milk, eggs, butter, bread, canned fruits and vegetables and crackers) to the Council and Council staff sort, bag items, load coolers and cars with the product and deliver to participating programs.

- Dede Hill, Schuyler Center for Analysis and Advocacy, New York

At the beginning of the pandemic, we convened a small group of government officials and community groups to triage problems and develop strategic plans related to child care and early learning. The group helped secure \$15 million for child care providers and engaged in a media campaign to inform families of child care subsidies. In the course of one month, the applications for subsidies increased by 100%.

- Kathleen Algire, Hawai'i Children's Action Network, Hawaii

# **Early Learning & Care**

# Part 2: Early Care & Education

Legislation, administrative action or budget changes related to pre-K, Head Start, Early Head Start, school readiness, investments in facilities and other similar topics.

Across all 29 responses, 22 states (73%) reported an item in this category. Of all submitted items, more than half (67%, n=185) were self-identified as **Early Care and Education**. From that, more than half 61% (n=112) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other 39% (n=73) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.

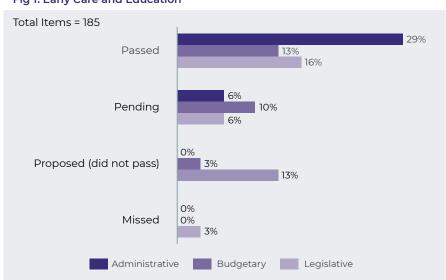


Fig 1: Early Care and Education

# **Items Unrelated to Pandemic**

- The **Maine** Legislature allocated \$4 million dollars to support the expansion of public preschool in the supplemental budget.
- Washington state established the Early Learning Facilities Fund, a \$7.3 million capital budget.
- The New York Legislature successfully protected the state's pre-K investment and secured \$750,000 in new funding for the state's first Regional Technical Assistance Center.
- Hawaii adopted a goal for the state to ensure access to preschool for all 3- and 4-year-olds by 2032.
- Utah expanded full-day kindergarten by securing \$5 million in new funding.

- **Illinois** allocated \$10 million in Governor's Emergency Education Relief (GEER) funds for early childhood.
- Virginia expanded mixed-delivery funding streams for preschool.

- The Washington, D.C. Legislature passed emergency grant funding to stabilize early childhood education and legislation to base payment for early childhood programs on enrollment and not attendance (through September 30, 2020).
- New Mexico secured additional funding to expand the state's pre-K and early pre-K programs.



### **Priorities on Hold**

- Advocates in several states, including Washington state, New York, Virginia, Kentucky, Utah,
   Delaware, New Jersey, Maine and North Carolina, have had to hold off on expanding the capacity of and increasing access to pre-K programs.
- Advocates in Oklahoma and Washington, D.C. reported that work towards improving the quality
  of early childhood programs has been delayed.
- In **Hawaii**, legislation to prohibit expulsion and suspension in public preschool programs and legislation to adopt a statewide trauma-responsive framework resolution have been put on hold.
- In **Delaware**, a bill to require a common statewide kindergarten registration did not pass.
- In **California**, advocacy for a 3% cost-of-living adjustment to stabilize early childhood services has been delayed.
- Advocates in Missouri reported delays in their efforts to secure funding to expand early childhood and home visiting programs, wrap-around services for school-age students, and health priorities around 12-months continuous eligibility.

### Stories from the Field

New Futures immediately partnered with Momsrising to bring together a group of advocates to both learn from and advocate for resources to support the early childhood system. The initial efforts were directed at childcare. We worked tirelessly within the Emergency Childcare Collaborative to get supplies, resources, and a system in place to ensure safe care for kids. Additionally, our states family resource centers pivoted immediately to being to support children and families remotely to deal with the crisis and impact of a sudden shift to e-learning. The strong advocacy foundation built over that past 4 years enabled our state advocates to come together in action swiftly and successfully.

- Rebecca Woitkowski, New Futures, New Hampshire

# **Early Intervention**

Legislation and funding for children with disabilities, i.e. IDEA Part C.

Across all 29 responses, 10 states (33%) reported an item in this category. Out of all submitted items, only 16% (n=45) were self-identified as **Early Intervention**. From that, more than half (58%, n=26) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other 42% (n=19) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.

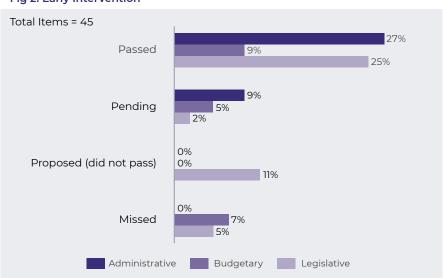


Fig 2: Early Intervention

- Nebraska passed LR387, which created an interim study to examine the processes by which children who are the victims of a substantiated case of abuse or neglect can access services through Nebraska's Early Development Network under IDEA, Part C.
- In **Texas**, speech and occupational therapy provided by Early Childhood Intervention (ECI) providers was approved for telehealth services and Medicaid coverage.
- In **Delaware**, Child Development Watch consolidated into Division of Public Health with Early Intervention 0-3.
- **Maine** passed legislation to support the investment of \$1.2 million in supplemental budget funding to strengthen the state's early intervention system.





- Michigan was able to increase funding for Early On Michigan's Part C service quality through the GEER Fund.
- New Mexico was also able to secure additional funding to support early intervention rate increases.
- **Illinois** passed legislation that implemented virtual visits as a part of early intervention.
- In Texas, the Early Childhood Intervention (ECI) program reallocated travel and training budgets to obtain 25,000 virtual signatures (rather than in-person) from parents. Texas also passed legislation that approved physical therapy coverage for ECI for the duration of the pandemic.
- Delaware adopted a statewide online screening tool available to parents of children ages 0-5 statewide.
- Kansas established the Technology for Families Fund, which provides connectivity, equipment and devices to support virtual access for families receiving home visiting and early intervention services.

### **Priorities on Hold**

- Advocates in **Maine** have paused advocacy for systems to improve early intervention services.
- Advocates in **Illinois** are holding off on implementing virtual video visits as a part of early intervention.

# Stories from the Field

Work collecting survey responses from home-based early intervention service providers through the Early On Michigan Foundation (EOMF) network, combined with strategic work with EOMF leadership to craft and share an updated ask to improve remote service quality and access, resulted in funding inclusion in the Governor's Emergency Education Relief Fund. EOMF, in partnership with our organization, identified a clear advocacy opportunity and paired it with a clearly defined need and leveraged relationships already built to achieve success.

- Matthew Gillard, Michigan's Children, Michigan

# Infant & Maternal (Physical) Health

Programs and funding related to physical health, including reducing the rates of infant and maternal mortality and morbidity, and legislation impacting Medicaid, CHIP and similar programs.

Across all 29 responses, 17 states (57%) reported an item in this category. Out of all submitted items, only 14% (n=40) were self-identified as **Infant & Maternal (Physical) Health**. From that, more than half (58%, n=23) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other 42% (n=17) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.

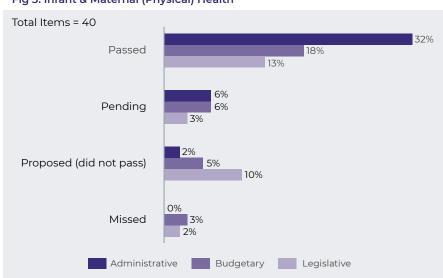


Fig 3: Infant & Maternal (Physical) Health

- **New York** successfully secured \$4 million to reduce maternal mortality and launched a maternal mortality review board (signed into law in August 2019) to develop implicit racial bias training, expand community health workers and build a data warehouse to support quality improvement activities for maternal health outcomes.
- **Georgia** passed an extension of Postpartum Medicaid from 60 days to six-months postpartum (awaiting Centers for Medicare & Medicaid Services [CMS] approval).
- **Arizona** expanded the newborn screening program at the Arizona Department of Health Services to offer two additional tests.
- California successfully passed two budget items in this area. The first is a \$34.3 million General Fund to implement the extension of pregnancy-only Medi-Cal coverage for up to 12 months after delivery for patients diagnosed with a maternal mental health condition, as approved through the 2019 budget. The second creates two California Department of Public Health positions and General Fund expenditure authority of \$348,000 annually to track and publish data on pregnancy-related deaths and severe maternal morbidity.

- In Texas, the governor extended telehealth flexibilities through October 2020 (rather than month-to-month). This includes Medicaid coverage for telehealth well-child visits for children over age 2 and waived CHIP copays for office and telehealth visits.
- In **Washington, D.C.**, advocates helped pass legislation that protects funding for health, mental health and child development programs that provide comprehensive support services to infants/toddlers and pregnant women.
- New Jersey passed a state directive permitting doulas in delivery rooms.
- New Mexico secured funding to expand public availability of long-acting reversible contraception.



• Kansas established the Early Childhood Consultant Network. Through this program, child care health consultants will be available to all Kansas Department of Health and Environment-licensed facilities to provide technical assistance/consultation and assess environments (through virtual or on-site visits). Consultants will advise on actions or modifications needed to meet the Center for Disease Control & Prevention's (CSC) health and safety recommendations to prevent the spread of COVID-19 and other illnesses.



- In **Maine**, the governor provided \$1 million in existing general funds to increase preventive health care for children enrolled in MaineCare through temporary incentive payments for health providers that offer well child visits, vaccinations and dental care during the COVID-19 pandemic. Together with federal matching payments, Maine will increase support for children's health by an estimated \$3.6 million this fall.
- In California, there are two pending telehealthrelated bills, AB 2360 and AB 2164, that would require health care service plan and insurers to provide access to a telehealth psychiatry consultation program for children, pregnant and postpartum individuals. Bills would allow federally qualified health centers and rural health clinics to establish patients and deliver care by using telehealth services, during the pandemic period, respectively.



#### **Priorities on Hold**

- New Hampshire advocates delayed pushing for Medicaid rule changes to support maternal and child health.
- Missouri advocates deferred advocacy efforts to secure 12 months of continuous Medicaid eligibility.
- **North Carolina** delayed advocacy for expanded health care coverage.
- After many years of trying to pass legislation to expand comprehensive oral health care for pregnant women, **Arizona** had to place this priority on hold.
- Advocates in **Pennsylvania** reported that advocacy around enrollment and retention efforts for children in Medicaid and CHIP have stalled, due to in part, their fiscal cost. This includes 12-month continuous eligibility for children in Medicaid, which currently is only extended to children from birth to age 3.

# Stories from the Field

Georgia Early Education Alliance for Ready Students (GEEARS) worked with new and existing partners to address the low vaccination and well-child visit rates that have been observed during the pandemic. We partnered with Children's Healthcare of Atlanta (CHOA) and Westside on the Rise to bring school-required immunizations via the Ronald McDonald Care Mobile to neighborhoods in Southwest Atlanta. A needs assessment conducted in 2015 indicated that a high rate of children in these neighborhoods do not have a medical home. This was a new initiative for all involved. Through a separate initiative, GEEARS adopted our local AAP Chapter's guidance on well-child visits and immunizations into shareable, easy-to-understand graphics, which have since been shared extensively online and with other partners

- Callan Wells, Georgia Early Education Alliance for Ready Students, Georgia

# Mental, Emotional & Behavioral Health

Budget actions and legislative changes related to mental health consultation, maternal depression and other similar topics.

Across all 29 responses, half of the states reported an item in this category. Out of all submitted items, only 11% (n=31) were self-identified as **Mental, Emotional & Behavioral Health**. From that, more than half (52%, n=16) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other 48% (n=15) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.

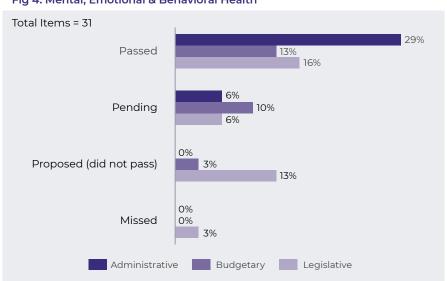


Fig 4: Mental, Emotional & Behavioral Health

- **Georgia** passed an expansion of the System of Care State Plan, which dictates the state's behavioral health safety net for children, to include ages 0-4 for the first time. They also passed a budget item that created an Infant and Early Childhood Mental Health (IECMH) coordinator position.
- In Wisconsin, there is pending legislation that would support social emotional development by piloting and expanding IECMH consultation and support pyramid model training and coaching, both of which are included in their Preschool Development Grant B-5 planning grant.





- **Oklahoma** secured funding for Community HOPE Center to care for children by providing mental health and social services supports.
- **Virginia** passed legislation that would launch a feasibility study for the statewide implementation of early childhood mental health consultation.
- Washington, D.C. passed a budget item that protects funding for health, mental health and child development programs that provide comprehensive support services to infants/toddlers and pregnant women.
- **Missouri** passed legislation that provides access for homeless youth mental health services and expands health options for this population.
- **Louisiana** expanded infant mental health work to provide all centers with access to TYKES infant mental health consultation.

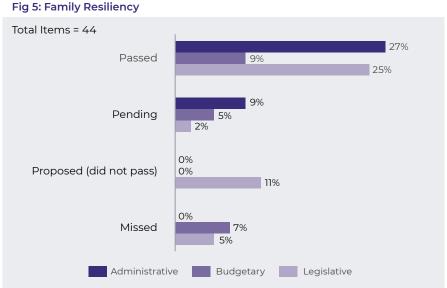
#### **Priorities on Hold**

- **Michigan** has put a hold on advocating for investments in infant and early childhood mental health consultation.
- **Hawaii** has delayed advocacy for the adoption of a statewide trauma-responsive framework resolution.
- **Washington, D.C.** advocates have delayed their efforts to advance access to high-quality health, mental health and child development supports.
- In **California**, budget requests for the California Advancing and Innovating Medi-Cal initiatives, including a behavioral health quality improvement program and the provider training for trauma screening program, have been withdrawn.

# **Family Resiliency**

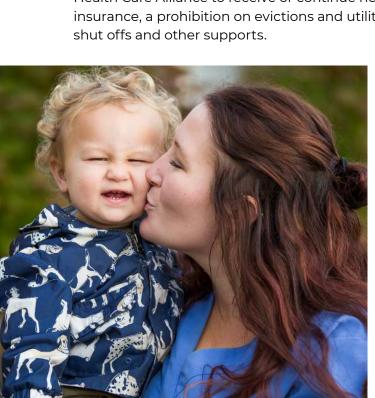
Supports for families with young children, including paid family leave, TANF, WIC, SNAP, the child welfare system and similar programs.

Across all 29 responses, half of the states reported an item in this category. Out of all submitted items, only 16% (n=44) were self-identified as **Family Resiliency**. From that, more than half (52%, n=23) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other 48% (n=21) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.



- Utah passed legislation that expands access to alternative breakfast in schools, with a particular focus on students at highest-risk schools.
- New Jersey passed legislation for the implementation of expanded paid family leave from six weeks to 12 weeks, which began in July 2020.
- Nebraska passed LB1061, which provides guidance for the types of child welfare cases that can utilize alternative responses, gives the department certain responsibilities for developing procedures, rules and regulations for these cases and how they must be reported.
- New York's final budget included reforms to the Statewide Central Register (SCR), which will raise the standard of proof for a finding against a parent, bringing New York in line with most jurisdictions across the country. The budget also included reforms to reduce racial disparities in the child welfare system keeping more families safely together.

- New Hampshire passed a state waiver to provide free meals to all school-aged children.
- Virginia increased TANF payments by 18%.
- Utah extended the use of pandemic Electronic Benefits Transfer (EBT) through the 2021 school year.
- Kansas also passed a pandemic EBT program that gives families with school children a Kansas Benefits Card to purchase food.
- New Jersey passed legislation that provides special food assistance benefits to anyone eligible for free or reduced-price meals. Any benefits up for renewal were extended for six months.
- Washington, D.C. passed the COVID-19
  Emergency Relief/Assistance bill, which includes extended eligibility for public benefit programs such as TANF and Supplemental Nutrition Assistance Program (SNAP), an extension for D.C. Health Care Alliance to receive or continue health insurance, a prohibition on evictions and utility shut offs and other supports.





- California has pending legislation that would strengthen the job protections provision of the Paid Family Leave program by ensuring jobprotected leave for employees who work for an employer with five or more employees.
- Michigan passed legislation supporting a
   Pandemic EBT nutrition program, including
   eligibility for students in Great Start Readiness
   programs, GSRP/Head Start Blends, Early Head
   Start and Head Start. Michigan also passed
   \$60 million for a Rent Assistance and Eviction
   Diversion program, appropriated by the state
   Legislature.

#### **Priorities on Hold**

- In New Hampshire, advocacy for increased SNAP incentives are on hold.
- In New York, advocacy has been delayed for strengthening and expanding the state's child tax credit.
- In Hawaii, advocates have had to delay efforts on passing a state social insurance Paid Family Leave program, making the state's earned income tax credit refundable, increasing the minimum wage and creating family visitation centers at the Waiawa Correctional Center.
- **Georgia** advocates have delayed work on securing three weeks of paid parental leave for state employees.
- California paused advocacy for their CA Reads Together Proposal, which would get books in the hands of 90% of children served at WIC sites within two years, and in the hands of all low-income children in the state within three years.



- North Carolina has delayed advocacy for expanded health care coverage and paid family leave.
- **Kansas** has delayed work on establishing a paid family leave policy and a refundable food sales tax credit.
- **Pennsylvania** also reported that legislative efforts to pass a permanent package for transition-age youth in the child welfare system were quickly put on the backburner once the pandemic hit.

# Stories from the Field

We have been so inspired by our direct-service partners, who have clearly been seen as a trusted community resource by the families they work with. For example, Consejo Hispano has been a resource for families for a long time, but until the pandemic, they weren't at the table with the school districts. When local school districts saw how connected they are to their community, they started reaching out to Consejo Hispano staff for help communicate with hard-to-reach families. Meanwhile, Consejo Hispano staff was already translating public health announcements into Spanish, doing resource navigation, picking up and delivering school lunches, watching webinars in both English and Spanish so that they could clearly point to the disparity in content, and participating in advocacy grounded in what they are hearing directly from the families they work with.

- Dana Hepper, Children's Institute, Oregon

# **Home Visiting**

Any legislative, administrative and/or budgetary changes related to home visiting.

Across all 29 responses, nearly half of the states (47%, n=14) reported an item in this category. Out of all submitted items, only 9% (n=25) were self-identified as **Home Visiting**. From that, 48% (n=12) of the substantive changes affected families with young children during the COVID-19 pandemic, while more than half (52%, n=13) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.

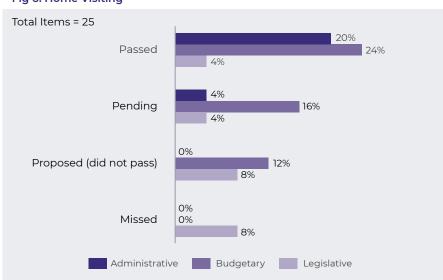


Fig 6: Home Visiting

- The final budget in **New York** included \$3.8 million for Nurse-Family Partnership, an \$800,000 increase over the Executive Budget and a \$300,000 increase as compared to last year's budget.
- **Kentucky** was able to maintain funding for the Kentucky Health Access Nurturing Development Services, a home visiting program.
- In California, voluntary evidence-based home visiting was added to the intensive case management models that counties may utilize to serve pregnant and parenting teens through the Cal-Learn Program.
- In New Jersey, a bill was introduced to provide statewide, universal home visiting to all newborn mothers (still pending).
- Kansas passed legislation that allows the participation of a single parent with a newborn in a home visiting program during the child's first year to be considered as acceptable work activity for TANF eligibility.

- Kentucky passed legislation for the allowance and reimbursement for online visits in home visitation programs.
- Georgia also passed legislation allowing for the reimbursement of early intervention, home visiting and other medical, behavioral and mental health supports when conducted virtually.
- Kansas established the Technology for Families Fund, which provides connectivity, equipment and devices to support virtual access for families receiving home visiting services.
- New Mexico's budget included additional funding to expand the state's Medicaid home visiting pilot project.
- In Virginia, there is pending legislation that would authorize Medicaid funding for home visiting services.



### **Priorities on Hold**

- Many states reported that they have had to delay advocacy for increasing funding for home visiting, including Maine, Kentucky, Washington state, Michigan, Oklahoma, New York, North Carolina, Missouri and Pennsylvania.
- New Hampshire and New Mexico reported that they have delayed advocacy for the expansion of Medicaid-funded home visiting as well.

### Stories from the Field

The New Mexico Early Childhood Funders Group, made up of seven private foundations, collaborated with the Early Childhood Care and Education Department to establish an emergency response fund. Through a simple Google form, applicants were able to request funds for basic needs, including personal protective equipment, technology to support distance learning and cleaning supplies. While needs greatly exceeded the available supply, 63 grants were made to child care, home visiting and early intervention providers across the state, with a particular focus on home-based child care providers and those serving populations most in crisis. These grants were helpful filling gaps before the state was able to make CARES stimulus funds available to many of the same providers.

- Michael Weinberg, Thornburg Foundation, New Mexico

# **Workforce & Higher Education**

Budget actions or legislation related to professional development, training, wages, higher education, core competencies and similar topics.

Across all 29 responses, fewer than half of the states (43%, n=13) reported an item in this category. Out of all submitted items, nearly a quarter (22%, n=62) were self-identified as **Workforce & Higher Education**. From that, more than half (52%, n=32) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other 48% (n=30) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.

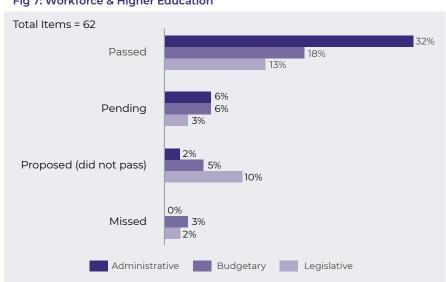


Fig 7: Workforce & Higher Education

- **Nebraska** passed legislation that requires the Legislature to develop a plan to establish the Nebraska Statewide Workforce & Educational Reporting System, a lifelong learning and workforce longitudinal data system. As part of this system, the Nebraska Department of Labor will identify the long-term return on investment from early education programs.
- **Wisconsin** passed a bill that expands the Leading Men Fellows program to further diversify the workforce. They also successfully increased funding for the T.E.A.C.H. Scholarship program.
- In **Michigan**, the governor signed an Executive Order directing the Licensing and Regulatory Affairs Agency to develop implicit bias training for licensed health professionals.
- **Utah** passed legislation to align and strengthen instruction and learning from preschool through third grade, improve teacher training and licensing, require local early literacy and mathematics plans, provide targeted professional development and job-embedded coaching, and increase collaboration among higher education to classroom teachers (note: the bill passed, but the program has been de-funded due to the COVID-19 pandemic).

- Georgia passed an expansion of the child care subsidy program requirements to include coursework toward a bachelor's degree.
- Arizona revised fingerprint clearance requirements for child care providers. The previous law allowed for a seven-day grace period for fingerprint clearance. This new law, mirroring the federal requirement, requires fingerprint clearance before beginning employment.
- New York passed legislation to protect the incumbent pre-K workforce by extending the deadline for lead teachers to become fully certified.



- **Kentucky** passed legislation to provide bonuses for emergency child care center teachers (from CARES Act funding) and to offer online training for new staff in home visiting programs.
- **Utah** expanded professional development, aligned preschool to third grade instruction and learning, required local early literacy and mathematics plans and increased collaboration between higher education, school districts, schools and teachers (passed, but funding to implement was rescinded due to COVID-19).
- New Mexico's budget included additional funding to expand early learning scholarships and wage supplements.
- **Nebraska** passed LR390, creating an interim study to assess the fiscal and economic effects of the COVID-19 pandemic on the state's early childhood workforce and the early childhood care and education system.
- Kansas established the Health Care Expenses for Essential Workers Fund (including early childhood care and education professionals) for essential workers who have tested positive for COVID-19. The state also passed the Emergency Worker Support Bonus, a one-time bonus to provide recognition to the child care provider and elevate the importance of ensuring that child care options are available to the health care and emergency workforce in the state. Two pieces of legislation were passed related to professional development. The first is the Early Childhood Consultant Network, through which child care health consultants will be available to all licensed facilities to provide technical assistance/consultation and assess environments (through virtual or on-site visits). Consultants will advise on actions or modifications needed to meet the CDC's health and safety recommendations to prevent the spread of COVID-19 and other illnesses. The second allowed new Child Care and Development Block Grant (CCDBG)-enrolled providers to receive free health and safety training through the Department for Children and Families and the Kansas Child Care Training Opportunities, Inc.

### **Priorities on Hold**

- Advocates in **Utah** intended to convene private child care providers and school districts to better coordinate kindergarten transitions and align professional development opportunities between the sectors.
- California has had to delay advocacy for early childhood education workforce grants and initiatives.
- **Colorado** put a hold on new legislation that would require funding for scholarships and apprenticeships for early childhood educators.
- **North Carolina** intended to increase education standards and compensation for early childhood teachers prior to the pandemic.
- In **Oregon**, as the state agency overseeing early childhood focused their limited resources on establishing the emergency child care system, there has been less administrative capacity to do the complex implementation work on the professional development funds allocated by the Legislature.
- **New Mexico** has delayed pre-K compensation parity.
- For the past several years, **Massachusetts** has advocated for rate increases to educator compensation. Advocacy on this work will hopefully pick back up in the spring as state budget proposals are released by the Legislature.

### Stories from the Field

We created sample policy and budget templates to consider alternative enrollment capacities during the pandemic. Individually, we worked tirelessly with child care administrators and parent boards to make difficult financial, staffing and operating decisions based on their specific contextual needs. Here are a few examples: One program had staff that lived in the same home and many student siblings. This meant that even though they were keeping their individual classrooms contained, a positive COVID-19 case could shut down multiple classrooms. We worked with them to rearrange their staffing and classroom make-up to reduce the risk of spread. Although this was met with skepticism from staff, in the end, everyone realized how better protected they were. One program struggled with enrollment and meeting payroll after their PPP loan had ended. They were seriously considering closing their doors. Our staff suggested they apply for Unemployment WorkShare so that they could keep their employees connected to the program but not shoulder the burden of a full payroll. We assisted them with the application and it was accepted. They stayed open, didn't lose any staff members and are able to meet their financial obligations each month.

- Ruth Schmidt, Wisconsin Early Childhood Association, Wisconsin

### Revenue

Tax credits, funding streams new and/or increased allocations for early childhood.

Across all 29 responses, fewer than half of the states (37%, n=11) reported an item in this category. Out of all submitted items, only 9% (n=26) were self-identified as **Revenue**. From that, more than a third (35%, n=9) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other 65% (n=17) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary, or legislative items.

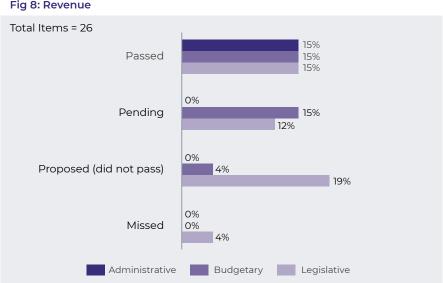
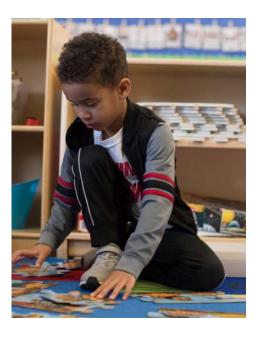


Fig 8: Revenue

# **Items Unrelated to Pandemic**

- Nebraska passed LB 266, which included language to fix the Nebraska School Readiness Tax Credit Act so that family child care home providers can access the employee tax credit and providers classified as S-corps are able to access the provider tax credit.
- Massachusetts passed the Student Opportunity Act, an historic education funding bill, providing \$1.5 billion in new funding to underfunded school districts.

- New Mexico passed legislation for the creation of an Early Childhood Trust Fund.
- Louisiana's budget included dedicated funding to the Early Childhood Education Fund to meet community needs.





# **Priorities on Hold**

- New York put on hold strengthening and expanding the state's child tax credit.
- **Hawaii** delayed advocacy for making the state's Earned Income Tax Credit refundable and expanding the Child and Dependent Care Tax credit.
- Kentucky delayed enacting the State Earned Income Tax Credit.
- Kansas delayed passing a refundable food sales tax credit.
- Missouri delayed advocacy for several tax policies that would support families.
- In **Louisiana**, state advocates were planning to push for \$86 million in new funding, the amount estimated to be required for the next 10 years to increase access to all of Louisiana's in-need children ages birth to 3. After COVID-19, advocates shifted their focus to \$25 million to cover the children of essential workers who were granted access to CCAP subsidies during the crisis.

# **Data**

Budget actions or legislation related to needs assessments, systems integration, state and district-level reporting, QRIS, state-funded studies and similar topics.

Across all 29 responses, fewer than half of the states (37%, n=11) reported an item in this category. Out of all submitted items, only 7% (n=20) were self-identified as Data. From that, half (50%, n=10) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other half (n=10) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.

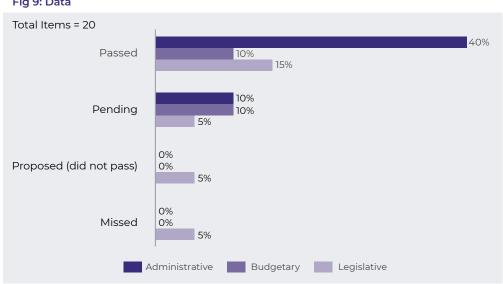


Fig 9: Data

- **Nebraska** passed legislation that requires the Legislature to develop a plan to establish the Nebraska Statewide Workforce and Educational Reporting System, a lifelong learning and workforce longitudinal data system. As part of this system, the Nebraska Department of Labor will identify the long-term return on investment from early education programs.
- New York's final budget included an additional \$10 million for census outreach. This is in addition to \$20 million of previously allocated funding that has not been spent.
- **Hawaii** adopted a policy to track data related to suspension and expulsions of students.



- Wisconsin passed legislation to conduct a needs assessment for the state's birth to age 5 system.
   Funded through the PDG B-5 planning grant, it will capture the system pre-COVID-19, while establishing a plan for where the system needs to go in the context of COVID-19 and eventual emergence from the pandemic.
- Virginia passed legislation to link its birth through age 5 data collection systems and another bill that aligns publicly funded early education with a unified quality rating system.
- Georgia proposed a rule change regarding data collection on COVID-19 cases in child care, which went into effect in October 2020.
- The Massachusetts budget directs the Department of Public Health to collect and publish COVID-19 positive cases among child care staff, children and families.



# **Priorities on Hold**

- **Nebraska** delayed advocacy for legislation that would require licensed child care providers to participate in the Nebraska Early Childhood Providers Record System.
- Oklahoma put its Early Childhood Integrated Data System on hold.
- In **Utah**, work with the Governor's Early Childhood Commission to identify next steps for alignment and coordination of the state's early childhood system has been delayed.
- In **New Jersey**, advocacy has been delayed for the collection and analysis of data on chronic absenteeism in the early years, the expansion of Grow NJ Kids (the state's QRIS), and the collection of data to identify current infant/toddler capacity concerns.
- Advocates in New Mexico have put on hold creating a centralized intake and referral system for home visiting and performing statewide home visiting database improvement.

### **Governance**

Budget actions and legislation related to special districts, governing boards, legislative councils and similar topics.

Across all 29 responses, fewer than half of the states (40%, n=12) reported an item in this category. Out of all submitted items, only 6% (n=19) were self-identified as **Governance**. From that, more than half (58%, n=11) of the substantive changes affected families with young children during the COVID-19 pandemic, while the other 42% (n=8) were substantive changes unrelated to the COVID-19 pandemic. The figure below shows how many total items successfully passed based on whether they were administrative, budgetary or legislative items.

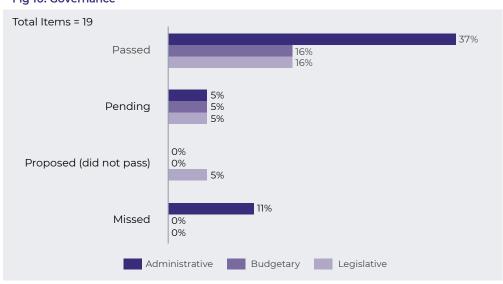


Fig 10: Governance



- New Hampshire created the Council for Thriving Children as a new early childhood governance structure.
- Wisconsin created the Leadership Council on the Early Years, comprised of cabinet-level appointees and tied to the state Preschool Development Grant B-5 planning grant.
- In **Delaware**, the Office of Child Care Licensing was consolidated into the Office of Early Learning, within the Department of Education.
- In California, all child development programs, except for the state's preschool program, will transfer to the Department of Social Services beginning July 2021, with the appointment of a Deputy Director for Child Development.

- New Hampshire created the Emergency Childcare Collaborative, a public-private partnership, in response to the pandemic.
- Virginia passed legislation aligning early care and education programs (CCDBG funding and preschool) under the Department of Education.

### **Priorities on Hold**

• Through their Community Readiness Initiative, advocates in Massachusetts serve as thought partners to early childhood leaders in over 20 communities that are looking to improve their early childhood systems (preschool expansion, Commonwealth Preschool Partnership Initiative, kindergarten readiness, early literacy). Pre-pandemic, the initiative had plans to upgrade their Community Readiness resources and convene communities.



### Stories from the Field

Oklahoma recently completed a five-year early childhood strategic plan and was poised to maintain momentum and implement quality improvement activities, with equity at the forefront of our focus. During a virtual stakeholder meeting in April to discuss plan priorities, it was evident that was not the conversation our partners wanted right now. We had two options, suspend our partnership work, or pivot to address how our state will collectively support families of young children through the pandemic. OPSR hosted weekly meetings through June and July to better understand how COVID-19 has impacted early care and education services, and crafted a coordinated approach to collect supply and demand data, provide financial relief, inform parents, layer funds, coordinate enrollment and change policies to increase access. Simultaneously, we collected stories from families and providers across the state on how COVID-19 has impacted their family and well-being. As the state early childhood advisory council, the OPSR Board will promote these recommendations to and share stories with policy makers, state and community leaders. While times are tough, the collaboration we are seeing between programs is stronger than ever!

- Debra Andersen, Oklahoma Partnership for School Readiness, Oklahoma

# **Turning Crisis into Growth**

We asked advocates what changes their states implemented in response to COVID-19 that they would like to see be made permanent. Their responses included:

- Allow child care subsidy to be paid based on enrollment, not attendance
- Increase CCDF child care subsidy funding and waive certain requirements; make the subsidy more widely available; adopt electronic forms and allow applicants to submit via email
- Collect data on open child care slots and map the information
- Offer start-up grants for in-home child care providers to address child care deserts across the state due to tremendous decreases in home-based providers
- Waive, or significantly adjust, the child care copay to provide relief for working families and address the cliff that families hit the closer they get to the income thresholds
- Increase collaborations between philanthropy, advocates, business leaders, and state leaders to problem-solve in real time to adopt policy change to help the sector
- Initiate more conversations with groups involved in issues outside of early care and education stakeholders that impact families (such as housing)
- Continue the ability for parents and children to utilize telehealth, including virtual home visiting and early intervention
- Implement less stringent work requirements, presumed eligibility, simpler determination processes, and continuous eligibility for families utilizing support programs like TANF, SNAP and child care assistance
- Improve coordination between K-12 and early learning (birth to age 5)
- Increase income supports, nutrition assistance and rental assistance for families
- Provide assistance and relief for families (preventing evictions, establishing payment plans, more flexibility with recertification for benefits, etc.)
- Remove red tape that kicks children off Medicaid coverage
- Increase professional development stipends

We asked advocates about the equity gaps that were exacerbated by the pandemic and how their states are beginning to address them. Here is a sample of their responses:

The changes to the child care subsidy in response to COVID-19 seem like a positive step in addressing equity issues. Nebraska certainly has issues reaching child care providers within the Spanish-speaking community. With this community being profoundly impacted by COVID-19, it seems likely there have also been child care issues related to school closures, illness and other issues brought on by the pandemic.

- Adam Feser, First Five Nebraska, Nebraska

# **ADDITIONAL INSIGHTS**

Access to quality early education and support for e-learning is a clear equity issue in New Hampshire. Efforts are beginning, but like many other states New Hampshire is resource-limited particularly around data collection. There is a move to ensure equity discussion and action take place through the work of the Council for Thriving Children and Preschool Development Grant work.

- Rebecca Woitkowski, New Futures, New Hampshire

In Washington state, communities of color were disproportionately affected by the virus. As schools transitioned to distance learning, many child care providers remained open, serving families. The increased focus on child care has also served to surface the wage inequities for the child care industry, professionals who are largely women of color. An additional highlight has been around the reality that much of the child care field does not have health care coverage at a time when they are putting themselves at risk of exposure by working on the front lines. Although the compensation and health care coverage questions are not new, the increased attention has generated policy discussions that could lead to opportunities when the economy improves or the state secures additional revenue.

- Erica Hallock, Start Early, Washington state

Governor Whitmer in April 2020 announced via Executive Order a task force on COVID-19 racial disparities, including barriers to physical and mental health care. Rental assistance and eviction diversion program and pandemic EBT programs will have a significant impact on already marginalized communities. Legislative majority priority during COVID-19 regarding addressing equity gaps has been limited primarily to supporting equity of access to remote learning or remote services. Advocates in Michigan continue to push for addressing inequitable access to child care, early intervention, physical and mental health, income, housing, nutrition, equitable workforce policies and other critical services. Equity issues that have been exposed but are not being sufficiently addressed include income, health care access and paid leave access inequity.

- Matt Gillard, Michigan's Children, Michigan

COVID-19 disproportionately affected Black and Latinx communities across the state, which is representative of a significant portion of the state's early care and learning workforce, especially in larger cities such as Chicago. The national discussion of "why is child care open when schools are not" and the painful tensions between knowing families still needed child care, but also that providing care has the potential to put both caregivers and children at risk was also ever-present in our work. And that this tension was even more heightened in Black and Latinx communities.

- Ireta Gasner, Start Early, Illinois

Oklahoma has 39 tribal governments that have made an excellent response to ensuring safety and financial supports for tribal members are in place.

- Debra Andersen, Oklahoma Partnership for School Readiness, Oklahoma

# **ADDITIONAL INSIGHTS**

COVID-19 has shined a light on existing health, educational and economic challenges. In terms of infant and maternal health, Black infants in our state are still twice as likely to die during the first year of life compared to white and Hispanic babies. Black moms in Texas are more likely to experience maternal depression and less likely to receive treatment, compared to other moms. One way to address this disparity is expanding access to health insurance, and we are helping to lead the advocacy to do just that.

- David Feigen, Texans Care for Children, Texas

New York has begun to impose steep, flat cuts to state school funding. Schools in low-income communities, many of which serve many Black and Brown students, rely more heavily on state school aid than schools in higher-income communities. As a result, the flat cuts are having a far heavier impact on schools in Black and Brown communities, causing many to shift to more, or all, virtual learning. This, in turn, will increase the need for child care and afterschool for school-aged children, which could cause providers to reduce or eliminate slots for young children, and fill them with older children who cost less to care for.

- Dede Hill, Schuyler Center for Analysis and Advocacy, New York

The pandemic has highlighted the ways the state does not support our Micronesian communities and our ESL families. We have focused on trying to ensure all materials are translated so families know their rights and benefits. The pandemic has exposed how we view child care versus early learning and the thinking that one is more deserving of support.

- Kathleen Algire, Hawai'i Children's Action Network, Hawaii

The biggest gaps COVID-19 exposes are the differences between the early education workforce, in terms of pay and protections and the K-12 workforce. It also exposes the economic divides between those who can afford child care/early education solutions for their families versus those who cannot afford and find care.

- Emily Griffey, Voices for Virginia's Children, Virgina

The COVID-19 crisis has shed light on the inequities of access to job-protected leave. Under California's Paid Family Leave program, employees pay about 1% of their salary into a fund that provides partial pay to those who take care of a new baby, a sick family member, or their own serious health condition. However, many employees, especially those who work for smaller employers, don't take the leave because they risk losing their jobs if they do. Despite working on the frontlines of the pandemic, many of our state's essential workers are not able to take time off because of this reason. Furthermore, the lack of job protected leave disproportionately impacts low-wage workers of color and women.

- Alex DeCaprio, First 5 California, California

### **ADDITIONAL INSIGHTS**

(The) COVID-19 crisis has exposed the structural inequalities in the child care system. While child care was deemed essential, it is not funded in a way that the system will be able to survive the crisis; programs are closing, teachers who are primarily black and brown women are risking their own lives and health continuing to work in child care but receiving poverty-level wages, now as schools reopening, most are going remote and the burden is again on the child care system, not the public school system, to provide the community-level support for school-age children both in terms of remote learning support and child care for working families, and the system is not funded or prepared to do this.

- Michele Rivest, North Carolina Early Education Coalition, North Carolina

Child care deserts have been an issue, and the pandemic exacerbated the issues in these communities. Parents who already had issues accessing child care had even more issues as many of their child care programs closed during the pandemic. Additionally, low-income families lack of transportation to child care lead to inequities as programs closed and parents did not have the ability to easily get their child to another program while they were working.

- Alexis Susdorf, First Things First, Arizona

In New Mexico, the high rate of transmission of COVID-19 in Native American communities, particularly the Navajo Nation, drew renewed attention to those historical, structural inequalities. Many of those inequities are even more fundamental than early childhood services, such as access to clean, running water and adequate health care.

- Michael Weinberg, Thornburg Foundation, New Mexico

The majority of early childhood educators made more money on unemployment than when they worked and as a result are hesitant to return to child care providers. Our country has a history of devaluing this work and early childhood educators, nearly all of whom are women and 40% are women of color, have always earned poverty level wages with little to no benefits. In a national health crisis, this has catastrophic results for marginalized communities. The Coronavirus exposed the deeply troubling inequity in pay that early childhood educators receive in comparison to our K-12 counterparts.

- Titus DosRemedios, Strategies for Children, Massachusetts

Louisiana is the second-most vulnerable state in the nation to the COVID-19 recession. State economists have forecast a \$1 billion gap in the budget and unemployment has risen. Access to quality child care was already expensive, the pandemic has made it even more untenable for low-income families to access.

- Libbie Sonnier, Louisiana Policy Institute for Children, Louisiana

### **ACRONYMS**

The Coronavirus Aid, Relief, and Economic Security Act (CARES Act)

Child Care and Development Fund (CCDF)

Child Care and Development Block Grant (CCDBG)

**Centers for Medicare & Medicaid Services (CMS)** 

Child Care and Parent Services (CAPS), Georgia

Child Care Assistance Program (CCAP)

Center for Disease Control & Prevention (CSC)

Children's Health Insurance Program (CHIP)

Electronic Benefits Transfer (EBT)

Early Childhood Intervention (ECI), Texas

Early On Michigan Foundation (EOMF), Michigan

Family Enrichment Centers (FEC)

Federal Poverty Level (FPL)

Georgia Early Education Alliance for Ready Students (GEEARS), Georgia

Governor's Emergency Education Relief (GEER), Michigan

Individuals with Disabilities Education Act (IDEA)

Early Childhood Mental Health (IECMH)

**Quality Rating and Improvement System (QRIS)** 

State Median Income (SMI)

Statewide Central Register (SCR), New York

Supplemental Nutrition Assistance Program (SNAP)

Temporary Assistance for Needy Families (TANF)

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

